

SURGICAL RESULTS ANALYSIS

Before you decide to go for laser surgery, it is very important to look at the surgical results of an individual surgeon and also for the specific type of surgery and prescription. The statistical information is critical in your choice of a surgeon as one should not be swayed by the global results of the company or clinic which will include the results of multiple surgeons, not an individual surgeon.

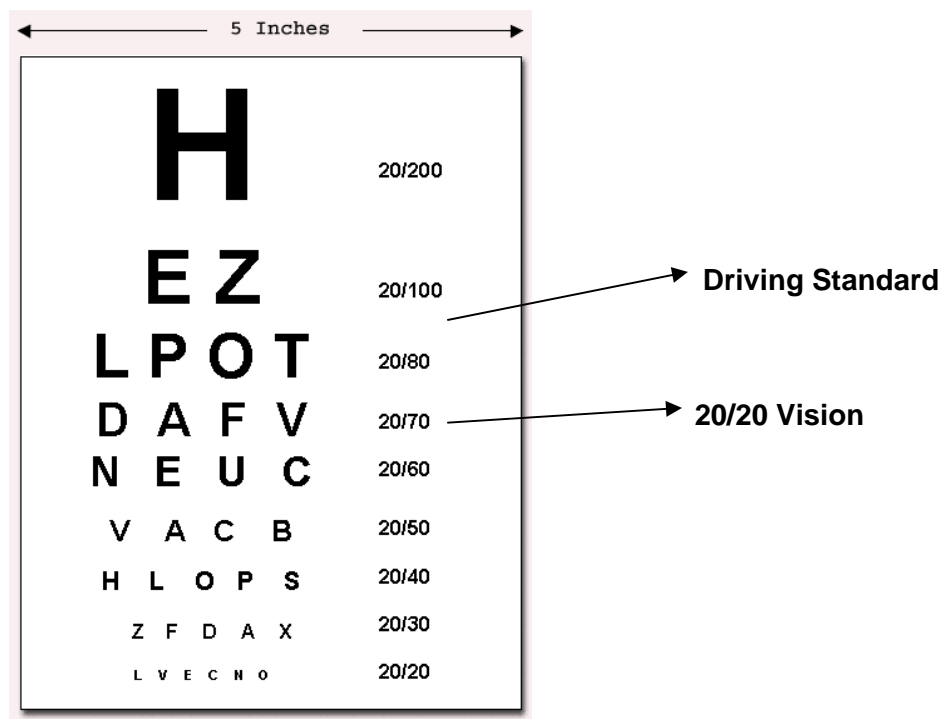
The statistical information that Advance Vision Care is publishing was last updated on August 2007. The research involves in total, 844 procedures and each type of procedure includes at least 150 procedures. **Since our sample number in each category is much higher than 100, we are proud to say that our statistics are reliable and accurate.**

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Things that you need to be careful when reading a graph or statistical analysis:

- The statistics are reliable only when the sample size is more than 100 patients or eyes.
- What do the results represent?
- Do the results show a high percentage of success rate?
- In particular for laser eye surgery, the analysis needs to show the results of patients after a year after surgery as a year will be a comprehensive period upon which analysis can be done.

In order to understand what the “driving standard” and “20/20 vision” stand for you can take a look in the following eye-test chart. **Driving standard stands for 20/40.**



WAVE FRONT LASIK for short sighted (Myopia – minus prescriptions)

Figures 1,2 and 3 show the results of our LASIK treatments for short sight.

- Figure 1 represents patients with initial prescription **up to -3.00 D**
- Figure 2 **-3.00 to -6.00 D**
- Figure 3 patients with prescription of **over -6.00 D .**

Each figure shows the percentage of patients who after the surgery have vision better than the driving standard (20/40), 20/20 or even supervision (higher than 20/20).

20/40 (6/12) means that the patient has to stand at 20 feet to see the letter a “ normal “ person could see at 40 feet(the UK driving standard)

FIGURE 1

**WaveformLasik Results for patients with initial prescription between -1D and -3D
(mild myopia)**

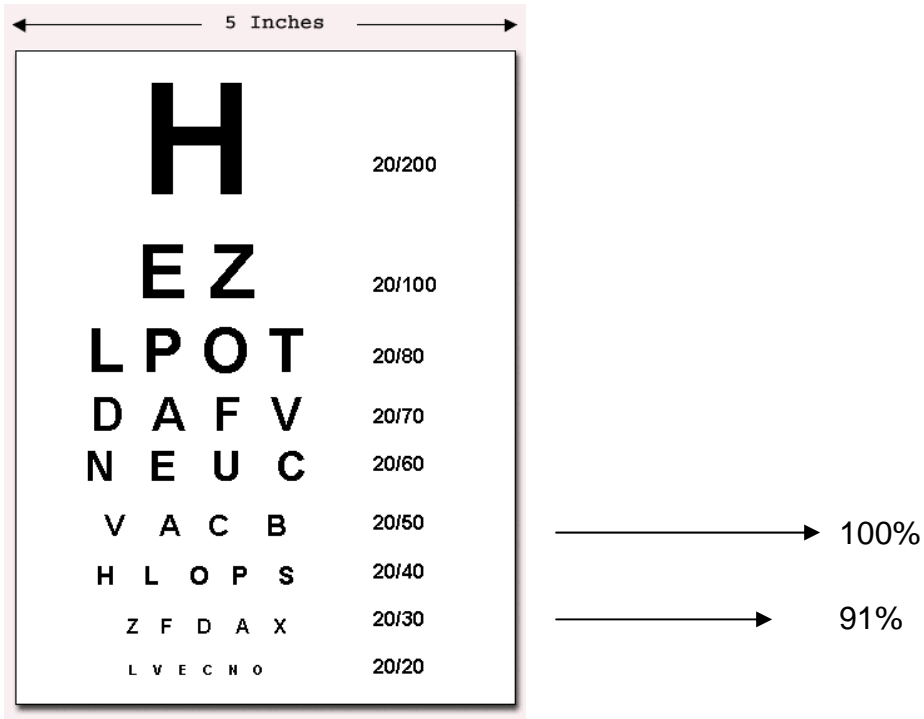
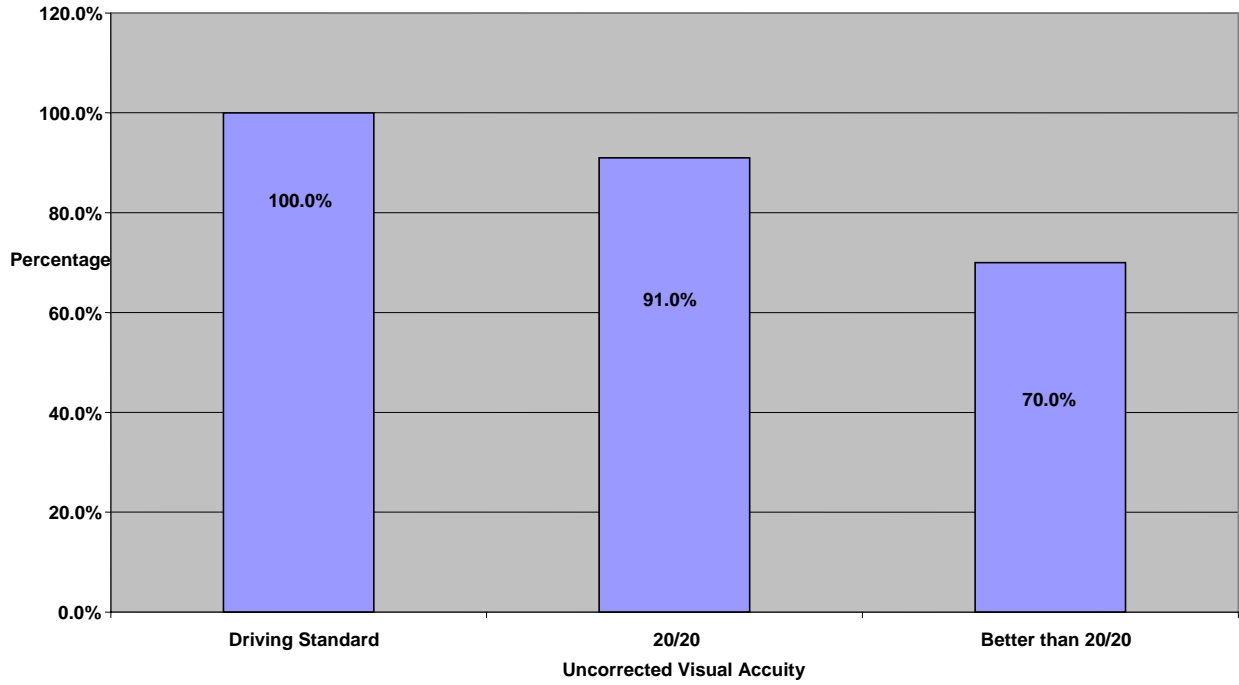


FIGURE 2

**WavefrontLasik Results for patients with initial prescription between -3D and -6D
(Moderate Myopia)**

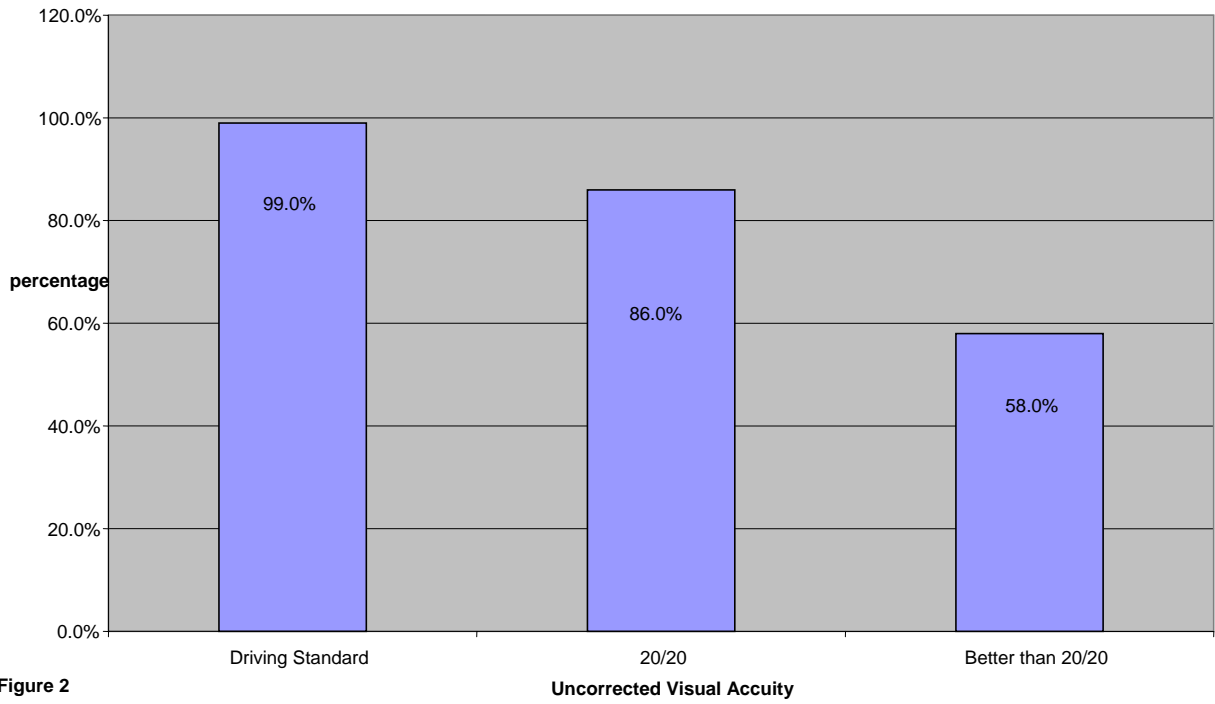


Figure 2

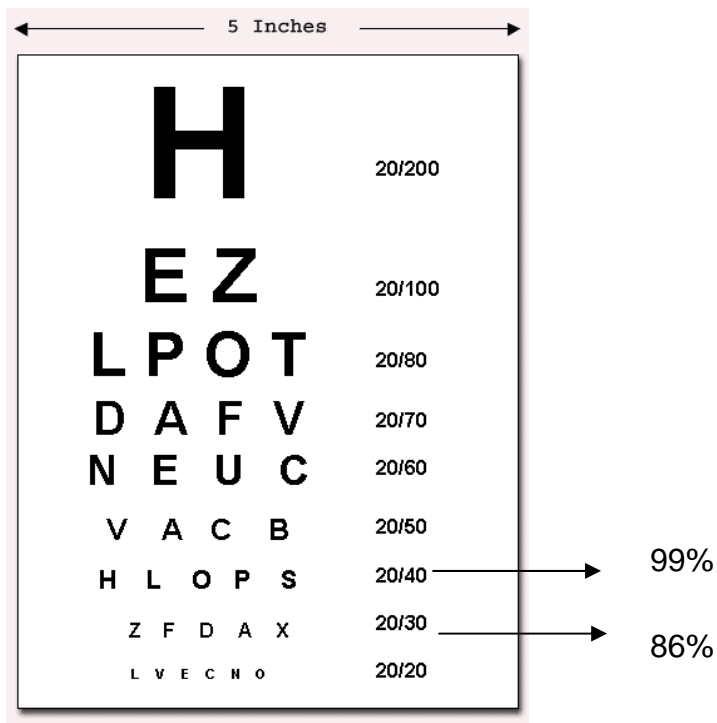
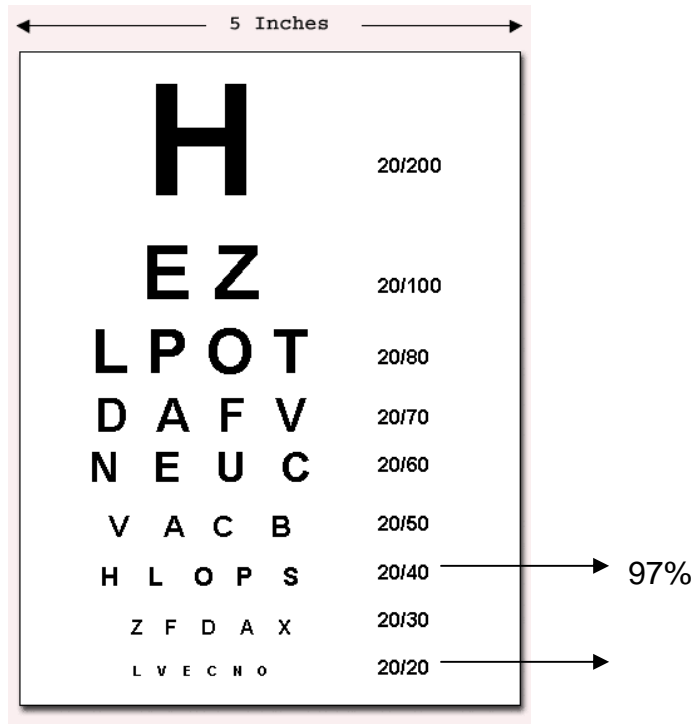
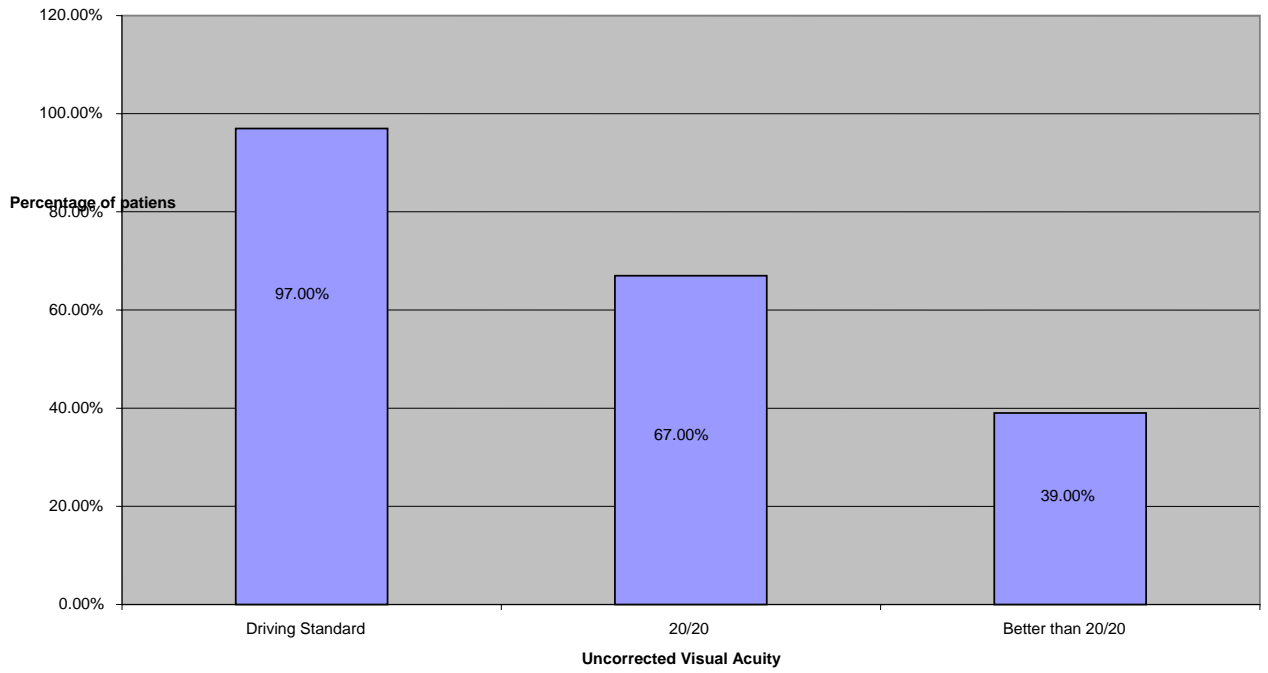


FIGURE 3

**Wavefront Lasik results for over -6D
(High Myopia)**



LASIK FOR MYOPIA

The results of 247 patients who had LASIK surgery been analysed. All patients had a 1 day, 1 week, 6 weeks, 3 months, 6 months and a one year follow up.

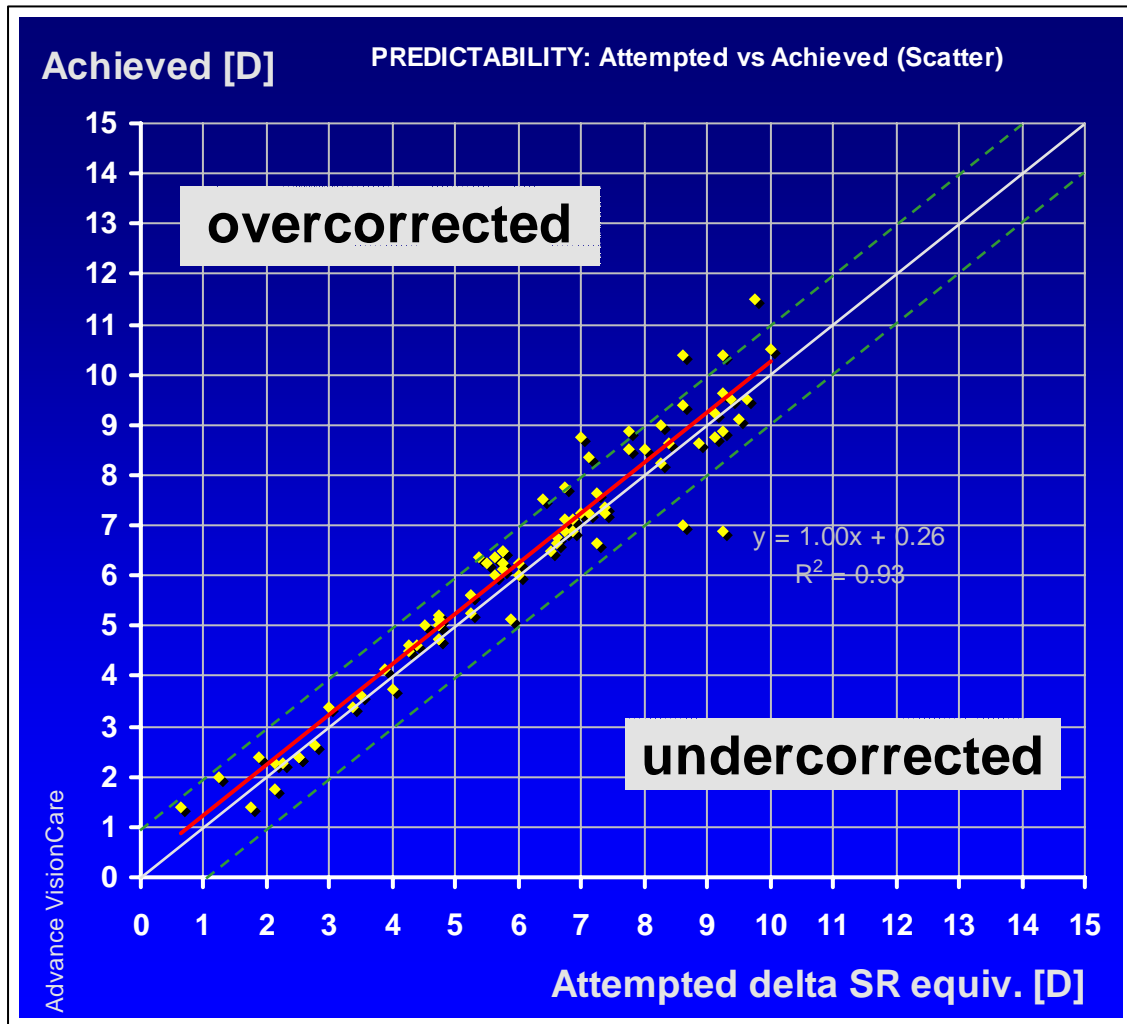


Figure 1 The scattergram represents the attempted refractive change versus the achieved refractive change for each eye for 6 months post op. Only 2 eyes has been undercorrected and 5 have been overcorrected. That means that in total 5.2% have been mildly over and undercorrected.

Figure 2 is the uncorrected visual acuity bar graph for 6 months. The bar graph has two components. The pre-operative BCVA (Best Corrected Visual Acuity) and the post op UCVA (Unaided Corrected Visual Acuity). The X axis represents the CVA (Corrected visual acuity) and Y axis represents the percentage of eyes. 91% of the patients had 6/6 vision or better. *The driving standard is 6/12 and 100% of our patients have achieved driving standard vision after one year.*

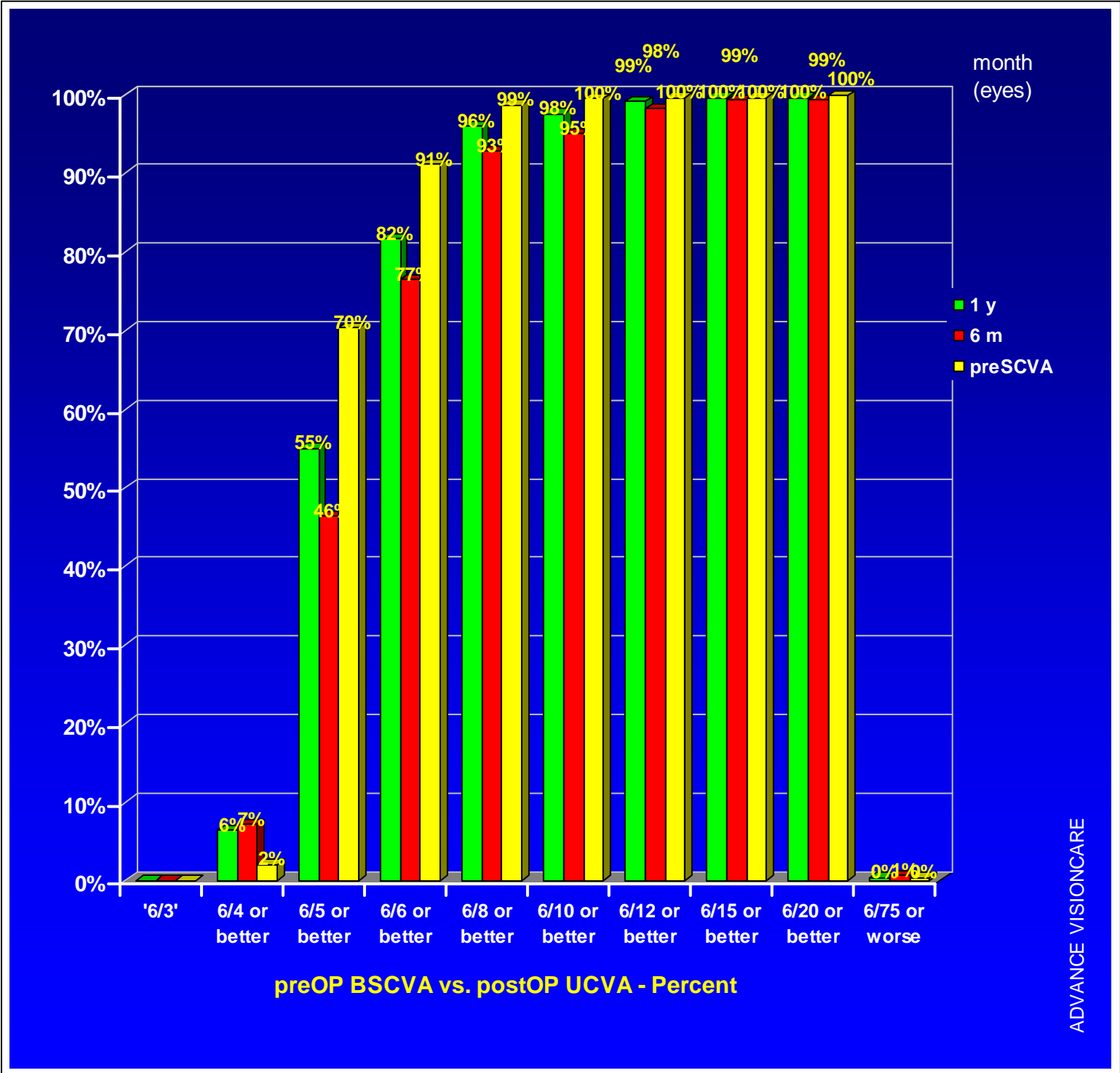


Figure 3 is a spherical equivalent refractive outcome bar graph. It represents the postoperative spherical equivalent refraction for 6 months after the refractive surgery. The gold standard for refractive outcome is to be within $\pm 1.00D$ of the desired result. The percentage of patients who fall in the category of the gold standard is 98%.

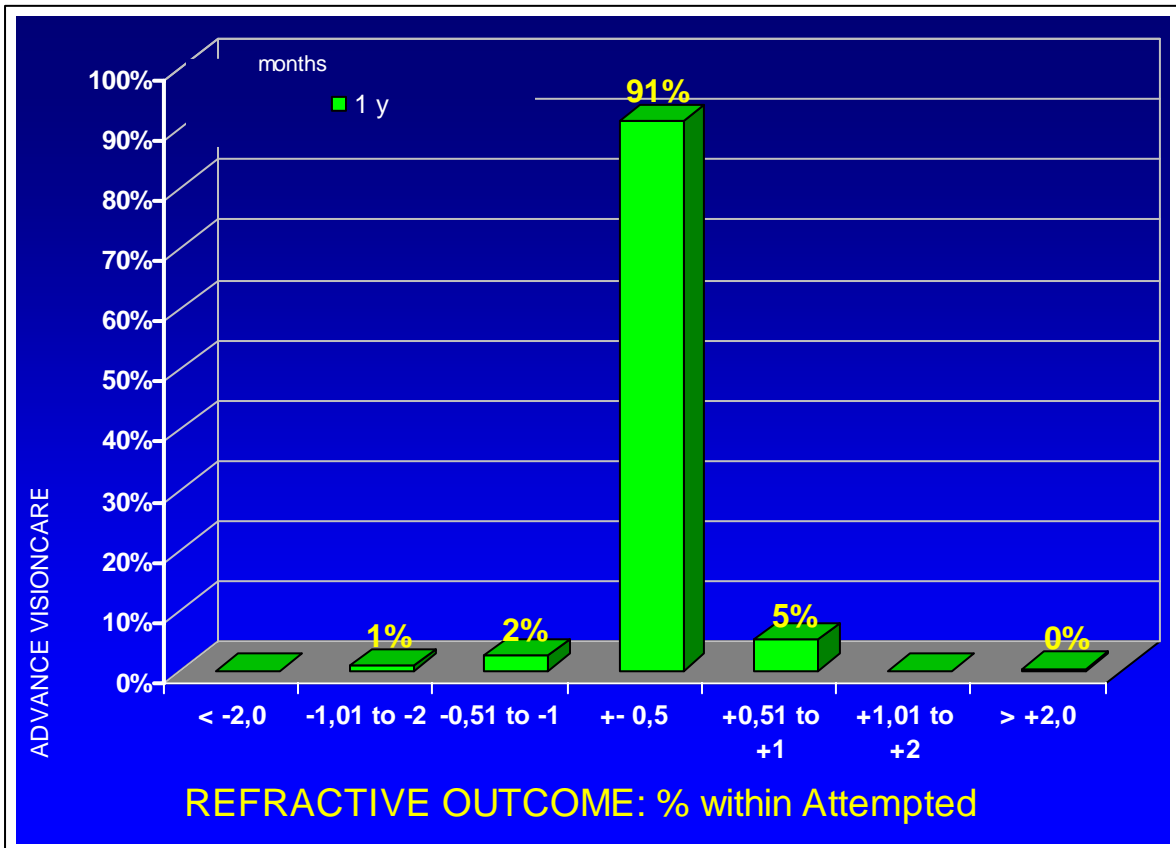


Figure 4 represents the changes in BCVA bar graph. In the graph there are three bars, each for post operative appointment, i.e 3 months, 6 months and 1 year. The X axis represents the change in lines of visual acuity and the Y axis the percentage of eyes. The gain or loss of a line of BSCVA indicates the safety of the procedure. Our results show a high degree of safety, since 91% of our patients are within 1 line change.

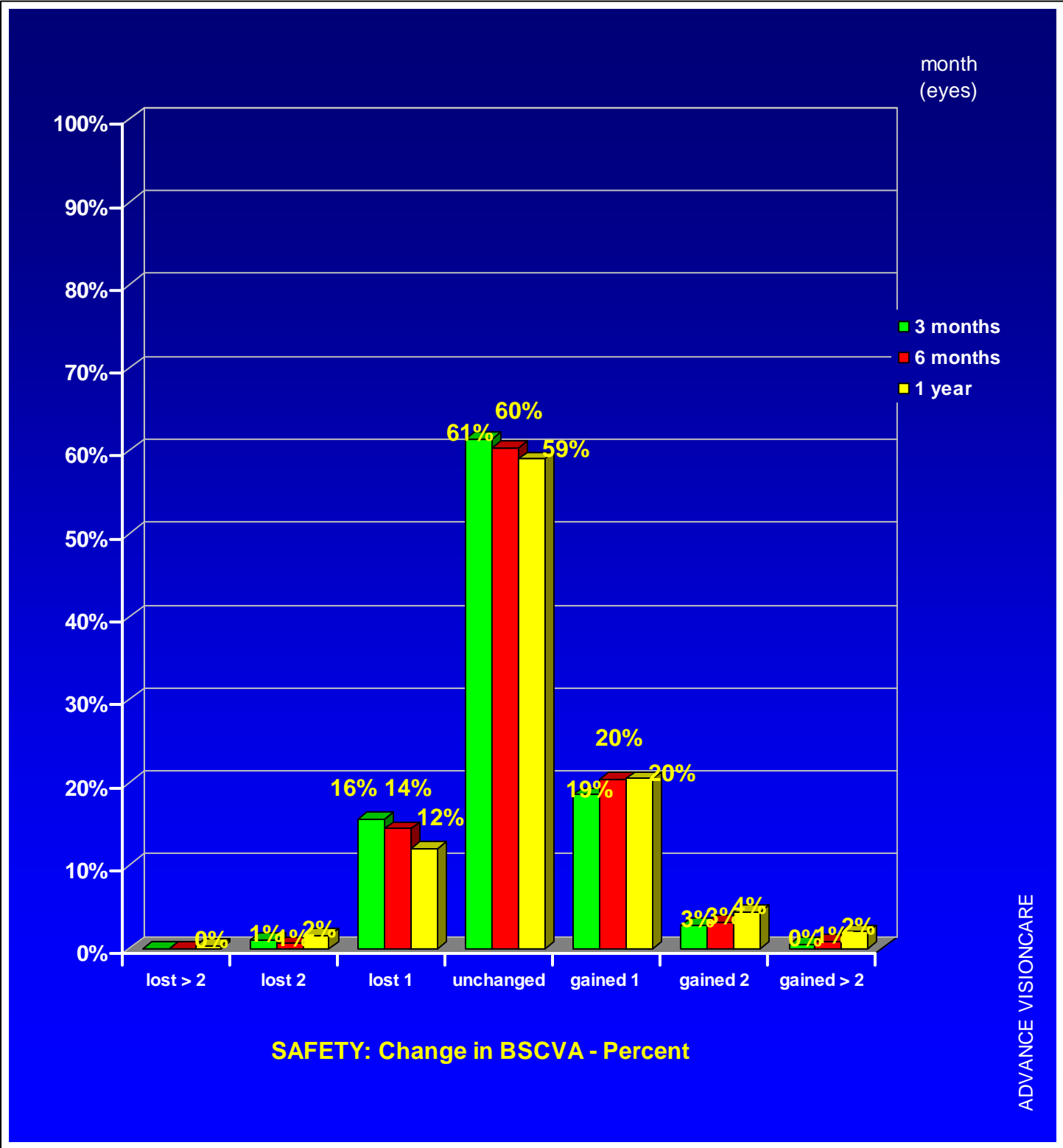


Figure 5 This graph represents the stability of refraction after 1 year. The refraction after the surgery remains stable without any major fluctuations.

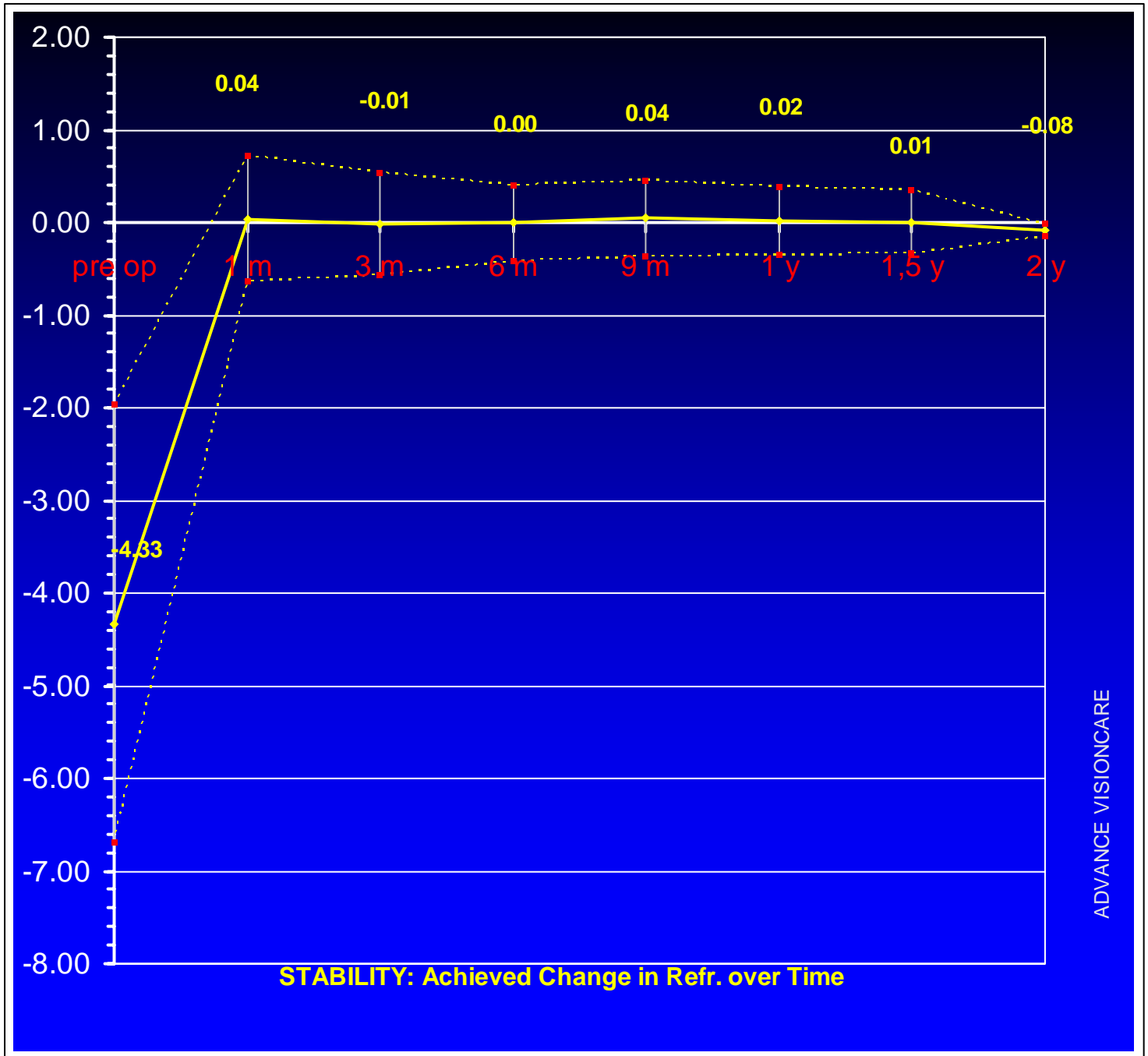


Figure 6 represent the defocus equivalent bar graph. The defocus equivalent bar graph is presented with the postoperative defocus refraction on the X axis and with the percentage of eyes on the Y axis. The defocus equivalent refraction is used according to Dr George Warring because its values represent more accurately the reality of the refractive state of the eye.

