See What You’ve Been Missing!

Peter Andrews, M.D.

Peter Andrews, M.D. is a board certified, fellowship trained cornea, external disease and refractive surgery specialist. Dr. Andrews received his bachelor’s degree in computer science from the University of Florida, Gainesville. After several years as a professional software engineer, he graduated from medical school at the Wake Forest University School of Medicine. Dr. Andrews completed his ophthalmology residency and fellowship training at the University of Florida. He is a trained cornea specialist performing procedures such as: PTK, INTACS for keratoconus, cornea transplants, including the less invasive DSEK and anterior lamellar transplants, of which he was an early adopter; refractive surgery, including Custom and Traditional LASIK, PRK and ICLs; and cataract surgery utilizing the latest refractive lens technology (ReSTOR®, Crystalens® and toric IOLs). He is also certified in the FDA approved AlphaCor™ artificial cornea for advanced corneal disease.

Dr. Andrews enjoys performing refractive surgery, cataract surgery and has a strong interest in corneal infectious diseases. He is a member of the American Medical Association, the American Academy of Ophthalmology, and the American Association of Cataract and Refractive Surgeons.

Refractive surgery is a group of surgical procedures designed to help you reduce or even eliminate your need for glasses or contact lenses. Various procedures are available to help correct the various types of refractive errors: myopia, hyperopia, and astigmatism.

Myopia is also called nearsightedness—you can see well up close without glasses but need glasses to see well at a distance. Myopia arises when the front surface of your eye—called the cornea—is steeper than usual. Hyperopia is farsightedness—you cannot see well up close and usually cannot see well at a distance either. People with hyperopia often have flatter than usual corneas. Astigmatism is a mixture of myopia and hyperopia—your cornea is warped like the shape of a saddle.

Refractive surgery improves your vision by changing the focus power of your eye. This is accomplished by altering either of the two focusing structures of the eye—the cornea and the lens. The cornea or lens can be altered by various surgical techniques.

The most common refractive surgery procedure of the cornea is LASIK (laser-assisted in situ keratomileusis). In LASIK, laser energy is used to reshape your cornea, essentially sculpting your prescription into your eye. If the laser energy were applied directly to the surface of your eye, the treated area would be sore for several days during the healing process. To avoid this discomfort, a thin flap is cut on the surface of your cornea, then folded out of the way. Laser energy is then used to sculpt your exposed cornea to correct your refractive error, then the flap is put back into its normal position, covering the treated area. LASIK is nearly painless, highly successful, and you can see the improvement in your vision immediately after surgery.

Another type of corneal refractive surgery is called PRK (photorefractive keratectomy), which differs from LASIK in that no flap is made—the laser directly sculpts the front surface of your cornea to reshape it. PRK is typically performed on people whose corneas are too thin or for other reasons may not be a good candidate for LASIK, or prefer the idea of no flap.

There are two common refractive surgery procedures of the lens. One is implantation of an ICL (intraocular contact lens). An ICL is essentially a contact lens, but instead of being placed on the surface of your eye, it is permanently placed inside your eye. The implant rests on the surface of your natural lens, behind your iris (the colored part of your eye). The strength of the implant is specifically selected to work with your cornea and lens to correct your refractive error. The second procedure is called RLE (refractive lens exchange). Refractive lens exchange involves removing your lens and replacing it with a lens implant that works with your cornea to correct your refractive error.

Each of these procedures has different risks and benefits, and each is designed for a different group of people based on the type and severity of their refractive error. If you are considering having refractive surgery, talk with us about which procedure is best for your eyes.

LASIK technology

Laser assisted in-situ keratomileusis (LASIK) is a brief outpatient microsurgical procedure to correct nearsightedness, farsightedness and astigmatism. The procedure typically takes 5 - 10 minutes to perform per eye. Downtime is limited, with most patients returning to normal activities the following day.

The procedure is done by creating a flap on the surface of the cornea with a device called a microkeratome. The flap is then gently laid to the side during the laser treatment, which on average takes 30 - 60 seconds. Once the lasing process is complete, the flap is returned, positioned and smoothed to ensure there are no wrinkles. Dr. Andrews will allow approximately 1 1/2 minutes for the flap to start readhering before proceeding to the other eye.

Once your procedure is over, we will place protective goggles over your eyes and ask that you go home and rest for the remainder of the day, keeping your eyes closed as much as possible during this time. Please read “What Should I Expect When I Have LASIK?” for more in depth information regarding the procedure.
Monovision is an option for people who have developed presbyopia, a natural aging process of the eyes that usually begins after the age of 40. Monovision serves two purposes: one eye is focused for near vision and the other for distance vision. Many patients with basic refractive errors such as nearsightedness, farsightedness and/or astigmatism. With traditional LASIK, most patients achieve correction comparable to what they are able to achieve with glasses or contacts before surgery. With custom technology, there is the potential to have better vision after surgery.

**FAQ’s about LASIK**

1. **DOES LASIK LEAD TO UNRELATED PROBLEMS IN THE FUTURE?**
   - No, LASIK is considered permanent, in some cases the procedure may need to be repeated to enhance the final outcome.

2. **WHAT ARE THE RISKS INVOLVED WITH LASIK SURGERY?**
   - **Discomfort:** Very few people experience discomfort, which is normally described as a slight stinging feeling or the feeling that there is something in the eye. If necessary, over-the-counter pain relievers may be taken.
   - **Sensitivity to light:** Recovery can take time in which you may have to avoid any activity that requires you to drive until the healing is complete. It is important that you carefully follow all post-operative instructions and see us or your primary eye doctor for all post-operative visits.

3. **WHAT ARE THE BENEFITS AND RISKS OF LASIK?**
   - Benefits: LASIK surgery decreases or removes the need for glasses or contact lenses. It can also reduce glare and halos at night.
   - Risks: There is an increased risk of dry eyes, which can make contact lenses uncomfortable to wear.

4. **HOW DOES LASER VISION CORRECTION SAFELY IMPROVE EYES IN THE LONG TERM?**
   - LASIK surgery permanently corrects the eye for the patient’s specific vision needs. It is not a quick fix or a cure, but it can provide significant improvements in vision.

5. **WHAT MIGHT BE REQUIRED IF I HAVE MONOVISION?**
   - Monovision is an option for people who have developed presbyopia, a natural aging process of the eyes that usually begins after the age of 40. Monovision serves two purposes: one eye is focused for near vision and the other for distance vision. Many patients with basic refractive errors such as nearsightedness, farsightedness and/or astigmatism. With traditional LASIK, most patients achieve correction comparable to what they are able to achieve with glasses or contacts before surgery. With custom technology, there is the potential to have better vision after surgery.

6. **WHAT SHOULD I EXPECT WHEN I HAVE LASIK?**
   - **1.** You’ll be given a pair of sunglasses to wear when you leave the center to help with any sensitivity to light that might affect you for the first few weeks after the procedure.
   - **2.** Dr. Andrews will then ask you to sit up. At this point, we’ll add drops to your eyes and place on some protective goggles.
   - **3.** You’ll be asked to fixate your vision on the blinking light. Dr. Andrews will then align the laser with your eye and continue to explain what will happen during the procedure. He will ask you to maintain contact lens for a recommended period of time based on the type of lenses worn, prior to the pre-operative evaluation. After the procedure, you’ll need to have someone drive you home. It is also very important to see us or your primary eye doctor for all scheduled follow-up visits.
   - **4.** When it is time for the procedure to begin, you will enter the laser room and lie down on a comfortable reclining chair. You’ll be asked to remain still during the procedure. We will use a small device to keep your eyelids open, which helps you to avoid blinking during the procedure.

7. **FEES**
   - **Custom Technology:**
     - $1850 per eye
     - Flat fee includes:
       - LASIK/PRK with Advanced Excimer Laser Technology
       - LASIK/PRK follow-up visits for one year
       - LASIK/PRK enhancement procedures during first year
   - **Traditional Technology:**
     - $1450 per eye
     - Flat fee includes:
       - LASIK/PRK with Standard Excimer Laser Technology
       - LASIK/PRK follow-up visits for one year
       - LASIK/PRK enhancement procedures during first year

8. **Options up to 18 months**
   - Monthly Payment Options
   - To apply online, visit: www.carecredit.com
   - www.capitalonehealthcarefinance.com
   - We also accept checks, cash and Visa/MasterCard.

9. **WHAT is Custom Technology?**
   - Custom LASIK is a detailed mapping process. You can now sit up. At this point, we’ll add drops to your eyes and place on some protective goggles. Dr. Andrews will then align the laser with your eye and continue to explain what will happen during the procedure. He will ask you to maintain contact lens for a recommended period of time based on the type of lenses worn, prior to the pre-operative evaluation. After the procedure, you’ll need to have someone drive you home. It is also very important to see us or your primary eye doctor for all scheduled follow-up visits.

10. **WHAT is Traditional Technology?**
    - Traditional LASIK is an excellent option for many patients with basic refractive errors such as nearsightedness, farsightedness and/or astigmatism. With Traditional LASIK, you will address those common errors, much like taking your glasses or contact lens prescription, and sculpting it directly onto your eye. The process of creating the flap and preparing the cornea is exactly the same for both Traditional and Custom LASIK. The only difference is the treatment itself.

11. **WHAT is Monovision?**
    - Monovision is an option for people who have developed presbyopia, a natural aging process of the eyes that usually begins after the age of 40. Monovision serves two purposes: one eye is focused for near vision and the other for distance vision. Both eyes can adjust to remain focused on the same point without constantly putting glasses on and taking them off. This option is particularly helpful for people who wish to shift their vision often from near to far, such as teachers and public speakers. Some patients choose to wear a contact lens for prolonged distance vision (i.e., golfing) or near vision (i.e., reading).

12. **HOW DOES LASIK SURGERY REQUIRE STITCHES OR SHOTS?**
    - The procedure is not as invasive as you might imagine. After we have treated your eye, the flap will be gently replaced and it will reattach quickly without stitches. There are also no shots required for the procedure.

13. **HOW WELL WILL I SEE AFTER THE SURGERY?**
    - The results of LASIK surgery are usually excellent. Your vision will start to improve within hours after the procedure. It is normal to feel a slight discomfort (like having something in your eye), during the initial healing period of two to three days.

14. **WHAT if I have presbyopia?**
    - Monovision is an option for people who have developed presbyopia, a natural aging process of the eyes that usually begins after the age of 40. Monovision serves two purposes: one eye is focused for near vision and the other for distance vision. Both eyes can adjust to remain focused on the same point without constantly putting glasses on and taking them off. This option is particularly helpful for people who wish to shift their vision often from near to far, such as teachers and public speakers. Some patients choose to wear a contact lens for prolonged distance vision (i.e., golfing) or near vision (i.e., reading).

15. **WHAT are the benefits of LASIK...is it your turn?**
    - Dr. Andrews will discuss both of these important technologies with you during your pre-op evaluation. Together, you will determine a treatment plan specific to your individual needs.