

HEALTH CARE

# A vision for the future

## Laser cataract removal comes with promise of better success rate

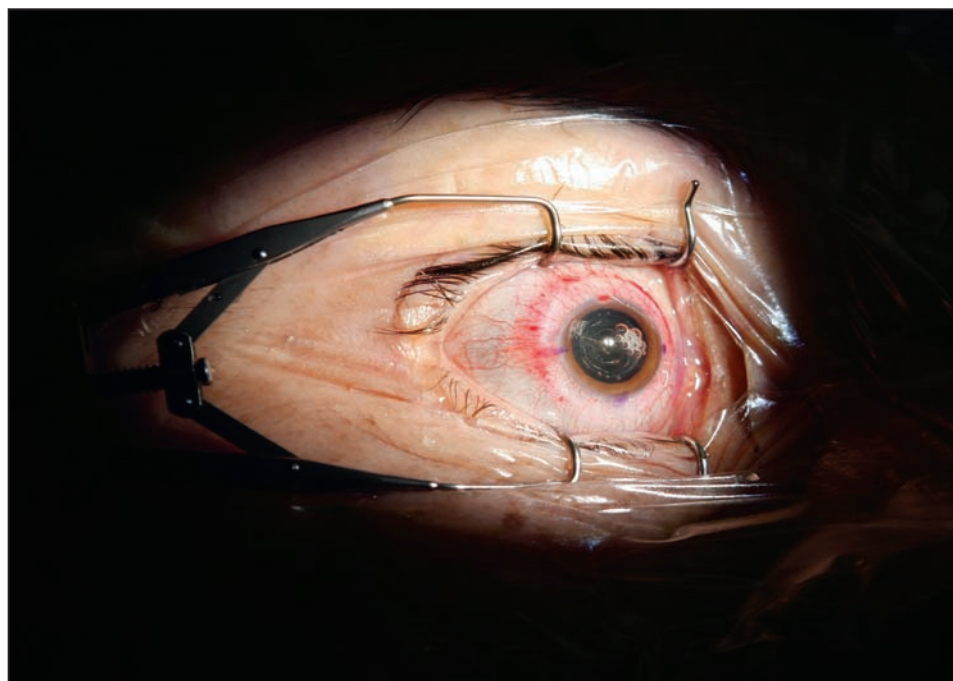
BY KRIS B. MAMULA

**Y**ou're doing great Virginia," a nurse says. "You're doing a great job."

The patient being reassured in the operating room is Virginia Sweeney, a Ligonier native who's passionate about reading and teaches preschool in Ghana, but who has "really, very bad eyes." That will soon change.

The 57-year-old Sweeney is undergoing outpatient surgery to remove cataracts, a cloudy film that develops on the lens of the eye and reduces vision. Cataract surgery is among the most common operations performed and 90 percent of people undergoing the procedure report better vision.

But the eye surgeons at West Mifflin-based Associates in Ophthalmology are trying to better that success rate by doing the proce-



PHOTOS BY JOE WOJCIK

Bubbles are created by the LenSX laser during the softening of a cataract on the eye of Darlene DiFilippo at Associates in Ophthalmology in West Mifflin.



JOE WOJCIK

Dr. Lisa Cibik looks at images and creates a treatment for patient Darlene DeFilippo according to what high-definition scans of the eye show, including placement of laser-created incisions, astigmatism and cataract softening to allow for easier removal.

dures with a laser to improve accuracy and outcomes, becoming the first practice in western Pennsylvania to offer the service.

Laser cataract removal and specialized lens replacement also is helping insulate the seven-doctor practice from the vagaries of Medicare reimbursement, which an increasing number of physicians are doing as government cutbacks loom.

"What we found is that if you're not going forward, you're going backward," says Dr. John Nairn, who operated on Sweeney's eyes. "If we do the best we can, stay on the forefront, then the business side will take care of itself."

Facing stagnant or declining Medicare reimbursement, physicians have been adding supplementary service lines and products that consumers pay for out of pocket. Examples include vitamins, skin care products, and even information technology consulting services for other physician practic-

es installing electronic medical systems.

AIO's business model is similar in that the upgraded laser cataract service takes the blade out of the procedure, promising patients a better result, but also the bonus of being less reliant on glasses or contact lenses. Medicare reimburses eye surgeons \$900 for standard cataract surgery and replacement with a monofocal lens.

But for an additional \$3,000 per eye, patients can receive a multifocal lens, which improves both nearsightedness and farsightedness, reducing — and in some cases eliminating — the need for glasses after the operation. AIO is betting that an increasingly active generation of middle-aged and elderly people will pay extra for the possibility of much better results.

### 'GOOD BUSINESS'

"Forty-seven seconds," the nurse says, "thirty-six seconds" as tiny bubbles form

# VISION: Practice views laser surgery as good for patients, growth prospects

under Sweeney's cornea. Using individualized measurements and calculations that have been programmed into the unit before the surgery, the laser cuts the cloudy tissue.

The lens, which the laser has softened, will be broken up with sound waves and removed with a tiny vacuum.

The replacement lens is the Restor brand, which is made by

Fort Worth, Texas-based Alcon Technologies Inc., a division of drugmaker Novartis Co. But fancy equipment can't make an average surgeon great, Nairn says. Use of the laser still requires an experienced hand.

AIO does more eye surgeries in the region than any other center and Nairn and Dr. Lisa Cibik, director of cataract services, between them have per-

formed between 40,000 and 50,000 surgeries, Nairn says.

"It's good business to do the best we can, says Nairn, 50. "And if this is something that can improve their outcomes, that's what we want to do."

## GROWTH PROSPECTS

The practice couldn't be better positioned for growth. Western Pennsylvania is among the grayest regions in the country and some studies have said there won't be enough ophthalmologists to meet the eye surgery needs of aging baby boomers, Nairn says.

Early indications are that Nairn is right: More patients were scheduled for the procedure the first week of June than were projected for the whole month — with virtually no advertising, he says.

As pressure builds to cut health care costs, Medicare and most commercial carriers are paying for basic services, while boutique medicine is growing to provide extras for patients who have the means to pay for them, says Mark DeRubeis, executive director of Monroeville-based physicians' practice Premier Medical Associates, which has not considered adding such services.

Outcomes data — showing better results — will drive growth in these services.

"What drives it is word of mouth," DeRubeis says. "And if that's really going to take off, becoming more of a retail experience, people are going to have to prove their outcomes are better.

"And that's data driven."

Although laser cataract removal is still too new to demonstrate long-term benefits, early results are promising, Nairn says.

"The laser refines our surgical technique that surpasses our ability to do it manually," he says.

## WEIGHING THE COSTS

The out-of-pocket expense was little concern to Darlene DeFilippo, a 58-year-old administrator at the Baldwin-Whitehall School District.

The cost of glasses and contact lenses was part of her calculations in deciding whether to get the upgraded service.

"Yes, it's a little bit high," she says, "But not when you factor in everything, all that you're spending on contact lenses, frames."

DeFilippo began having problems reading and doing computer work, and thought at first she needed new glasses. She'd had to use reading glasses for years and an exam discovered cataracts.

"I started having a lot of blurred vision," she says.

After surgery May 31, DeFilippo says she doesn't need reading glasses anymore.

"I can read — that's a huge change," she says. "I was very reliant on reading glasses. I can see the fine print now."

Blurred vision was among the problems Sweeney began experiencing five or six months ago when her vision began to deteriorate quickly. Identifying students on the playground, for example, became difficult and reading to children is a big part of her job.

Her surgery went smoothly. After being wheeled into the recovery room, Sweeney sat up in bed and declared, "I see everything!"

She scheduled the operations to coincide with spring break at school, where she teaches in Ghana. Several days after the first operation, Sweeney had the second eye done.

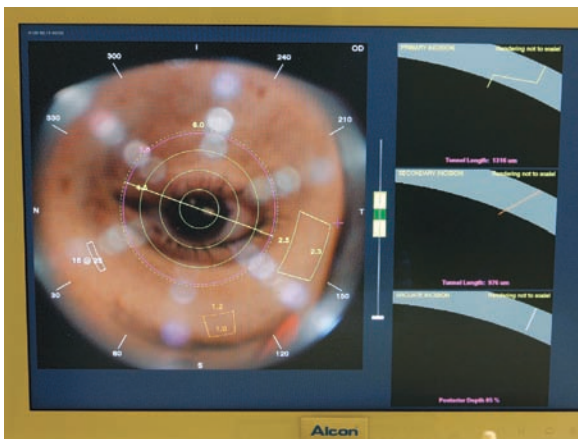
"The vibrance of the colors, the leaves," she says a few weeks after the second operation. "I still reach for my glasses, but less and less.

"It's really, really incredible."

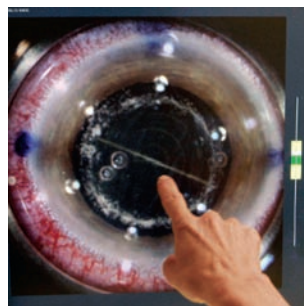


A cataract in the eye of 58-year-old Darlene DiFilippo is removed with ultrasound during a recent procedure at Associates in Ophthalmology in West Mifflin.

A monitor view of the LenSX laser being aligned with DeFilippo's eye. Light is used to create high-definition scans of the anatomy of the eye that is affected by the procedure.



The LenSX laser is docked onto DeFilippo's eye.



Dr. Lisa Cibik points out on a monitor where the cataract is being softened by a laser.

PHOTOS BY JOE WOJCIK