



# Eye Care Insight

Spring/Summer

BAPTIST  
EYE  
SURGEONS



... A Commitment to Lifestyle

**Our Physicians are Board Certified by the American Board of Ophthalmology**

*Marc A. Bodenheimer, M.D.*

*L. Nichols Cook, M.D.*

*Robert E. Hall, M.D.*

*Albert K. Holmes, M.D.*

*Mark Y. Ivens, M.D.*

*James R. Kimble, M.D.*

*J. Franklin Murchison, Jr., M.D.*

*Darin S. Smith, M.D.*

*William R. Sullivan, M.D.*

#### Two Convenient Locations

##### **Baptist Eye Institute**

2020 Kay Street  
Knoxville, TN 37920  
865-579-3920

##### **Tennessee Valley Eye Center**

140 Capital Drive  
Knoxville, TN 37922  
865-579-3920

## New Lens Treatment Available to Cataract Patients

*Delivering a High Level of Glasses-Free Vision.*

**By Albert K. Holmes, M.D.**

Exciting technological advancements are taking place within the world of eye care; advancements which might affect you! As one of the leading innovators of cataract technology in the area for the past 20 years, Baptist Eye Surgeons is pleased to announce that it is implanting the new generation of intraocular lenses (IOLs) for treatment of cataracts.

Presbyopia causes the eye's lens to become less flexible, reducing the eye's ability to change its focus from one focal plane to another (i.e., from near to far and back again). This typically becomes most apparent as people find it increasingly difficult to see or read things that are close. Bifocals have been a common solution to this problem.

Considered a significant medical breakthrough, the new intraocular lenses are the first multi-focal lenses available to cataract patients. The lenses, which are implanted using a "no needle, no stitch" technique, are more like the eye's natural lens, providing patients with a near-to-far range of vision. **This lens treatment has the potential to dramatically**



**Dr. Holmes**

*Presbyopia causes the eye's lens to become less flexible, reducing the eye's ability to change its focus from one focal plane to another, as in from near to far and back again. This typically becomes most apparent as people find it increasingly difficult to see or read things that are close. Bifocals have been a common solution to this problem.*

**enhance patient quality of life by eliminating or reducing the dependency on eyeglasses.** Many patients who have undergone this treatment have been thrilled with the results.

We are pleased to be implanting this new state-of-the-art intraocular lens. If you feel you are a candidate for this treatment, or would like additional information, please call us at (865) 579-3920

Visit our Website: [www.baptisteye.com](http://www.baptisteye.com)

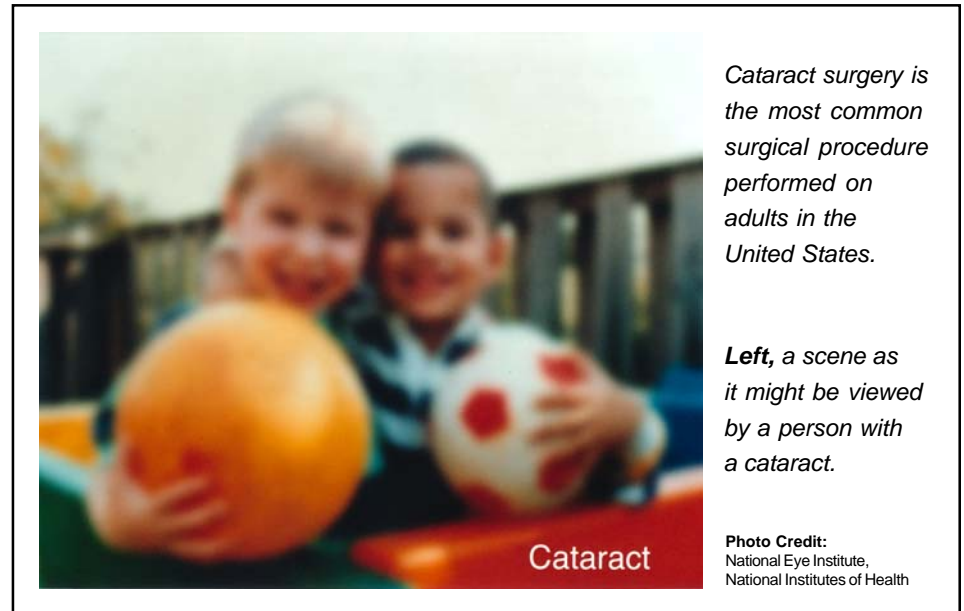
# All About Cataracts

**Inside everyone's eye is a lens. Just like with a camera, the lens of your eye helps you to focus on things whether they are nearby or far away.** To work well, the lens must be clear. As you age, the lens of your eye gradually becomes cloudy. We call a cloudy lens a cataract. The word cataract comes from an old Latin word for waterfall. Waterfalls produce heavy mist that can blur your vision. Cataracts have the same effect—blurry vision. Looking through a cloudy lens is like looking through a dirty window—everything is blurred.

Everyone who lives into their 60s develops at least mild cataracts. Early on, the cataract process not only makes your lens cloudy, it also makes your lens swell a little bit. When your lens gets bigger, you become a little more near-sighted. So in the early stages of cataract, simply changing your glasses prescription will usually restore your sight.

But as you continue to get older, the cataract gets more and more cloudy, and eventually not even a change in your glasses prescription will improve your sight. At that point, the only way to restore your vision is to remove the cataract. Cataract surgery is the most common surgical procedure performed on adults in the United States. The procedure is performed on an outpatient basis, generally takes a half-hour or less, and recovery time is usually only a few days.

Cataract surgery is a two-step procedure—first the surgeon removes your cloudy lens, and second, a new lens



*Cataract surgery is the most common surgical procedure performed on adults in the United States.*

*Left, a scene as it might be viewed by a person with a cataract.*

**Photo Credit:**  
National Eye Institute,  
National Institutes of Health

implant is inserted into your eye. The cloudy lens is removed with a tiny instrument that enters your eye through a small incision—usually one-eighth of an inch or smaller—and gently breaks the cataract into tiny pieces that are then removed from the eye with a miniature vacuum cleaner.

Once the cataract is out, you will need a new lens in order to focus after surgery. Artificial lens implants—made of plastic-like materials—are used to restore your ability to focus after surgery. These implants come in many different strengths, like glasses, and before your cataract operation, your doctor will perform several measure-

**Artificial lens implants are used to restore your ability to focus after surgery.**

---

ments to determine the appropriate lens implant strength for your eye.

Once your cataract is out and your implant is in, the operation is over. Most people see better within a day or two after cataract surgery, but it is not abnormal or worrisome if your vision seems blurry for a few weeks after surgery as your eye heals. Your doctor will prescribe some eye drops for the healing period after surgery, and if you need new glasses after surgery, these will be prescribed for you once your eye is completely healed, usually about a month after surgery.

Cataracts cannot grow back, but sometimes a thin cloudy membrane grows behind the lens implant, making your vision blurry like the cataract did. This is not uncommon—it happens to roughly 40 percent of patients having cataract surgery. If it happens to you, a quick and simple laser treatment can be performed in the office to make a hole in the membrane for you to see through.

**Your doctor can help you learn more about cataracts.**

# Glaucoma: The Silent Thief of Sight

**Glaucoma is an eye disease that slowly and painlessly steals away your sight.** Glaucoma is called the silent thief of sight because it has no symptoms—it does not make your eyes red or cause pain. But it is the second leading cause of blindness in the United States, and half of the people who have glaucoma don't know that they have the disease and are not aware that they are going blind.

The cause of glaucoma is unknown, but there are several risk factors that increase your risk of developing glaucoma. These include high eye pressure (called intraocular pressure, or IOP), older age, being African-American or Hispanic, and having a family history of glaucoma. Anyone with any of these risk factors should get regular eye examinations to look for glaucoma.

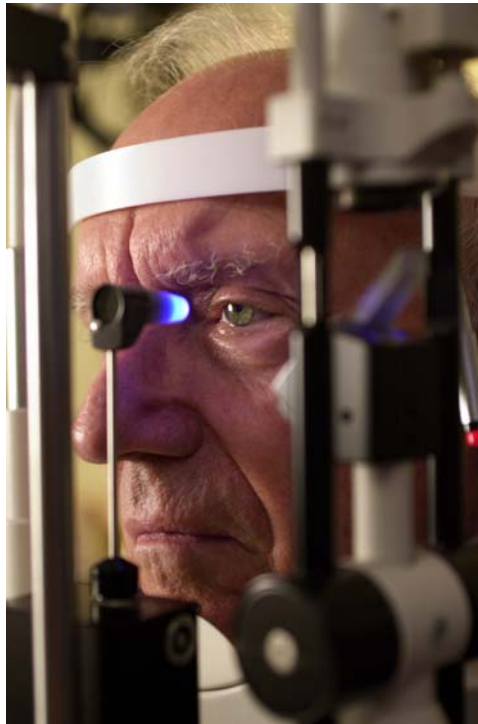
Glaucoma damages vision by destroying the optic nerve, which connects your eye to your brain, and carries visual information to your brain for processing. When the optic nerve is damaged from glaucoma, you lose your vision. Your peripheral vision—or side vision—is lost first. If the glaucoma remains untreated, the vision loss creeps in toward the center, first causing tunnel vision, and then, eventually, blindness.

The cause of optic nerve damage in glaucoma is not known, but since most eyes with glaucoma have high IOP, it is likely that high IOP plays a role in damaging the nerve. IOP is a measure of the fluid pressure inside the eye. The eye is filled with clear fluid that flows in through a spigot and flows out through a drain. In glaucoma, the drain of the eye gets plugged, and fluid

coming into the eye cannot get out, raising the IOP.

A thorough examination for glaucoma should include the measurement of IOP. But since some eyes can have glaucoma without high IOP, a careful examination of the optic nerve looking for glaucoma damage is also very important. If the IOP is high or the optic nerve looks damaged (or both), a special test called a visual field test should be performed. The visual field test shows whether or not you've lost any side vision to glaucoma.

If you are diagnosed with glaucoma, treatment is available to save your vision. The goal of glaucoma treatment is to lower IOP and stop the optic nerve damage. Several kinds of treatment are available to lower IOP. These include eye drops, laser therapy, and surgery.



*Glaucoma is the second leading cause of blindness in the United States, and half of the people who have glaucoma don't know that they have the disease and are not aware that they are going blind.*

**Left, a patient undergoes an IOP measurement.**

Eye drop medications lower IOP by either reducing the amount of fluid entering the eye or increasing the amount of fluid exiting the eye. There are several different kinds of glaucoma medications, and each differs in terms of both its ability to lower IOP and its potential side effects. Laser therapy is often used when medications fail to successfully lower IOP, and is also used for patients who cannot tolerate medications due to side effects. Recent advances in laser therapy have produced lasers so safe and effective that for some patients, laser therapy is used instead of medications. If medications and/or laser therapy fail to bring the IOP down to a safe range, surgery is available to lower IOP.

**Your doctor will work with you to develop a treatment plan that will safely lower your IOP.**

# Meet the Baptist Eye Surgeons Team of Physicians

## EXCELLENCE IN EYE CARE

All members of the Baptist Eye Surgeons physician team are board certified by the American Board of Ophthalmology.



**Marc A. Bodenheimer, MD**  
*Cataract & refractive surgery,  
corneal & external disease,  
general ophthalmology*



**L. Nichols Cook, MD**  
*Cataract & refractive surgery,  
general ophthalmology*



**Robert E. Hall, MD**  
*Cataract & refractive surgery,  
general ophthalmology*



**Albert K. Holmes, MD**  
*Cataract & refractive surgery,  
cosmetic & general ophthalmology*



**Mark Y. Ivens, MD**  
*Cataract & refractive surgery,  
general ophthalmology*



**James R. Kimble, MD**  
*Cataract, refractive & glaucoma  
surgery, general ophthalmology*



**J. Franklin Murchison, Jr., MD**  
*Cataract & refractive surgery,  
corneal & external disease,  
general ophthalmology*



**Darin S. Smith, MD**  
*Cataract & refractive surgery,  
general ophthalmology*



**William R. Sullivan, MD**  
*General ophthalmology*

## Baptist Eye Surgeons: Office Locations

**Baptist Eye Surgeons at the Baptist Eye Institute**  
2020 Kay Street • Knoxville, TN 37920  
Phone: 865-579-3920 • Fax: 865-579-3963

**Baptist Eye Surgeons at the Tennessee Valley Eye Center**  
140 Capital Drive • Knoxville, TN 37922  
Phone: 865-579-3920 • Fax: 865-579-3963