

“LEVELLING THE EYE”

to provide a more accurate ocular shape for comparative analysis and contact lens fitting

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INTRODUCTION

Topography maps play an important, increasing role in contact lenses design and fitting, particularly for large diameter lenses.

Whenever an eye is measured using a topography machine, the fixation point is required to be in the machine head, around 2 to 10 cm in front of the eye.

This practice induces rotation of the eye which can result in tilted maps, affecting measurement accuracy. Additionally, this measurement is necessarily around the visual axis whereas the geometric axis is more important for ocular shape measurements

It is not a simple matter to compensate for this induced error, as the eye itself has few, if any, identifiable characteristics to facilitate correct orientation.

This study developed methodologies to level the eye topography data around its geometrical axis, thus providing more accurate information regarding ocular shape.

METHODS

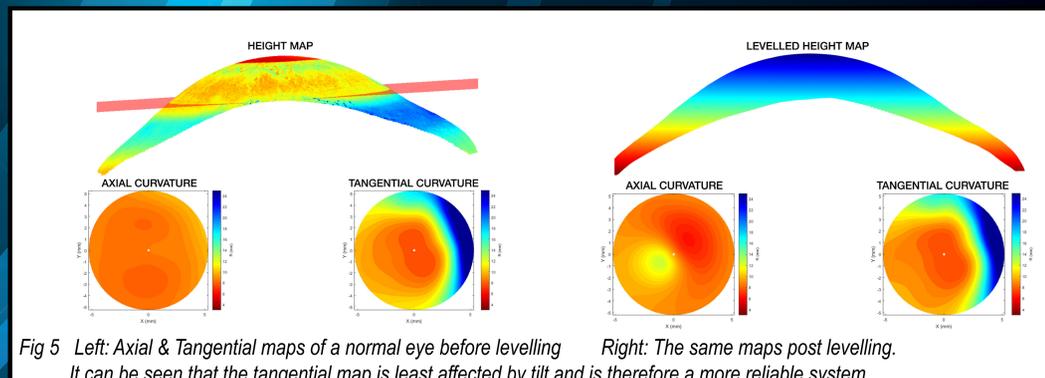
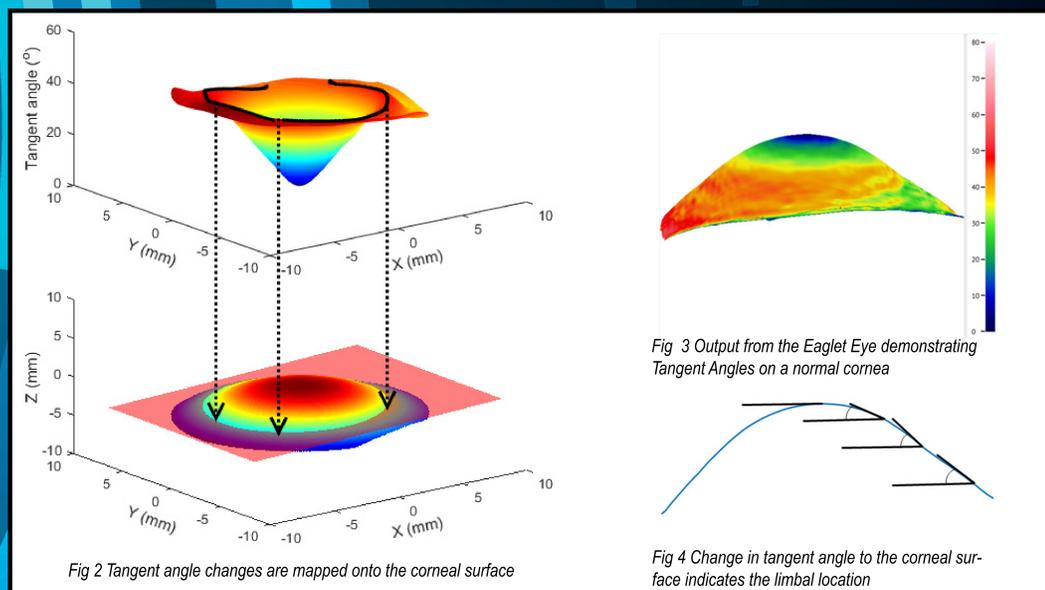
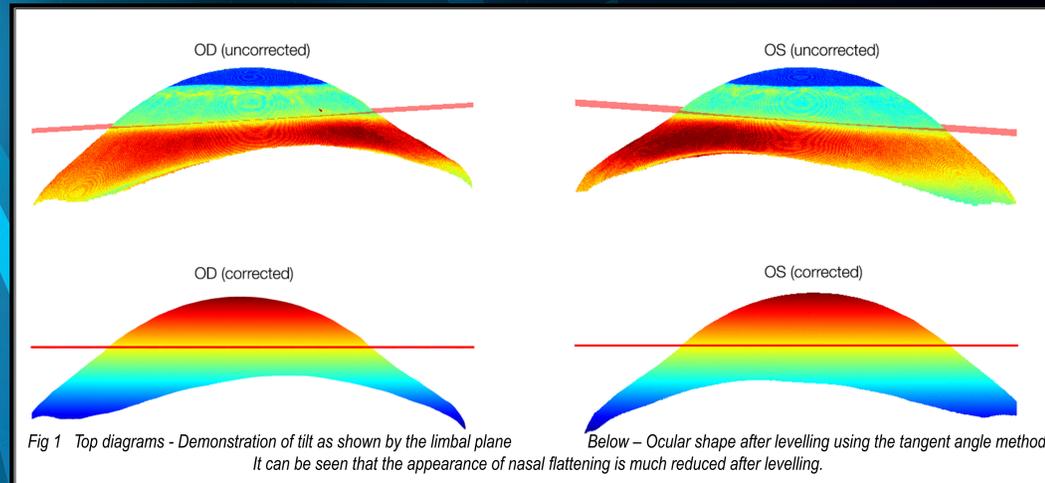
Topography data were collected from three different machines; Pentacam, Galilei G6 and the Eye Surface Profiler (Eaglet Eye Netherlands). Height data were exported in coma separated file format (CSV) and then used as input files for a custom built Matlab code to be processed.

The levelling process uses two different approaches to level the surfaces according to the topography machine collecting them.

For Pentacam and Galilei G6, a first order Zernike polynomial is fitted to the front surface of the cornea and eye height data rotated until the Zernike plane is horizontal.

For the ESP, the limbus was detected using the tangent angles and the all limbal points fitted to a plane which is rotated until it becomes horizontal.

The final levelled eye position was then compared to the software output of commercial topography machines.

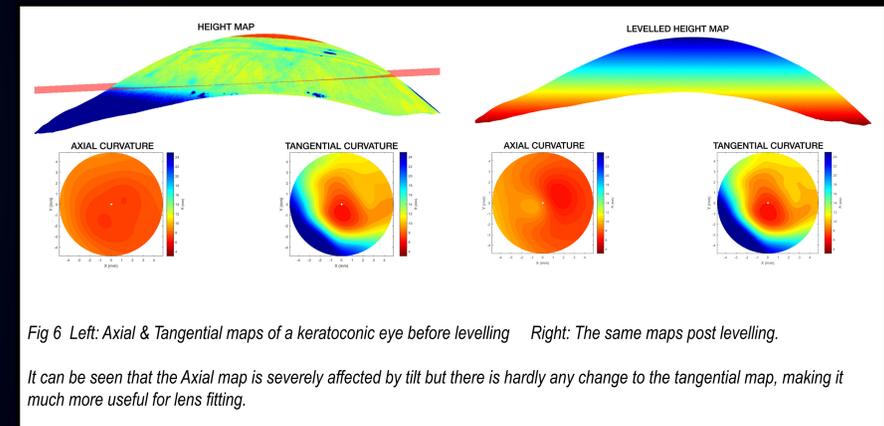


RESULTS

Comparing final levelled eye positions and maps to those of commercial topography machines show that maps based on Axial or Sagittal topography are very sensitive to tilt. Additionally, they are not fully representative of actual ocular shape, particularly in the mid peripheral regions.

However, Tangential maps are much less sensitive to tilted geometry and give a much more representative overview of real eye shape.

For keratoconic patients, the study also showed that tangential maps are the most representative maps in identifying the cone position.



CONCLUSIONS

Tilted topography maps can be misleading and affect both contact lens fitting and the design of new lens products. This tilting effect is a natural consequence of the position of the retinal fovea/visual axis.

This study has shown that levelling the eye is possible using first order Zernike polynomial fit or limbus detection technique based on tangent angle mapping.

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