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HEADLINE: Provo woman first in Intermountain region to receive artificial cornea

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BODY:

A Provo woman is recovering from transplant surgery after becoming the first patient in the Intermountain region to receive an artificial cornea, her doctor said Wednesday.

Marilyn Riding, 67, underwent the surgery Tuesday at the University of Utah's John A. Moran Eye Center.

"The skin over the prosthetic is healing," said Dr. Majid Moshirfar, director of the center's cornea and **refractive surgery** division.

After nearly a decade in development in Australia, the artificial cornea received approval for use in the United States last year. The cornea, which costs about \$7,000, is made of hydrogel, a porous, synthetic substance. Manufacturer AlphaCor says it is designed specifically for the one in five transplant patients who have rejected donor transplants.

For Riding, who could only see light and dark shadows in her left eye, the artificial cornea was the only option because her body had previous rejected a donor cornea.

"This may be an intervention for some patients who have given up hope," said Moshirfar, who had practiced the surgery on cadavers, but never before on a live human.

The cornea is the window on the front of the eye that protects it and aids in focusing. Cornea transplant surgery is usually performed when patients suffer from corneal injury or disease.

During the 3 1/2 hour operation Tuesday, Moshirfar cut a slit in Riding's cornea to create a pocket, into which he placed the 7 millimeter artificial cornea in front of Riding's pupil. The wound was then sewn up with 24 sutures.

After three months, Moshirfar will punch out a small circle in the front section of Riding's damaged cornea to unveil the artificial one beneath. Only at that point will Moshirfar be able to assess the quality of Riding's future vision.

"I'm praying for 20/200 vision, best scenario," he said.

Riding's vision in her left eye began to fail more than ten years ago. Cataract surgery that resulted scar tissue and calcium deposits on her cornea was followed by two unsuccessful

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donor transplants in 2000 and 2001, Moshirfar said.

There are an estimated 10 million people worldwide who need cornea transplants. In Utah, about 100 people are waiting on any given day, although only about seven would be good candidates for the artificial cornea, Moshirfar said.

But the artificial cornea may prove to be most beneficial in countries that do not have eye banks or eye donors. Moshirfar said he would like to travel to India and other countries to perform the surgery as a service to people who suffer from corneal blindness.

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