

which?

Laser eye surgery



Considering laser eye surgery?

Get all the facts and information from Which?

If you hate wearing glasses or contact lenses, laser eye surgery adverts offering to 'transform your life' can appeal. Most people get good results, but our investigation into the advice and testing you get at initial consultations found that less than half of the visits were up to scratch and none were ideal.

We also found that – in the case of Optical Express and Optimax – prices were often hundreds of pounds higher than those advertised. Overall, researchers were often pressured to opt for pricier options, or – at one branch of Optical Express – to sign up straight away so they could get a discount. None of the chains came out better overall and, according to our experts, it's clear that they (and independents) need to improve standards of consultation and sales techniques.

CONSULTATION STANDARDS

Laser eye surgery has been available for about 20 years. Around 80% of patients use the high-street names Optical Express, Optimax and Ultralase, but laser eye surgery is also performed in independent clinics, some of which are in NHS or private hospitals.

When we investigated initial phone advice on laser eye surgery in 2005, the results were poor. Surgery techniques and regulation have moved on considerably, so we sent researchers to clinics to see whether advice there was any better.

Risks explained?

Not so, it seems. More than half of the visits were rated 'unsatisfactory', as staff got the basics wrong. Clinics played down the level and possible duration of risks and complications. Serious complications are rare but, in extreme cases, patients can be left with debilitating long-term problems such as severe dry eyes or poor night vision, and can even lose some sight.

One branch of Optimax told our researcher that she would be at higher risk of night vision problems because of her large pupils, but incorrectly minimised the small chance of this being long term, saying 'this only lasts up to about two months'. Three out of five Optimax visits were rated satisfactory by our experts.

Three of our researchers have problems with dry eyes but, out of their nine consultations, only four clinics addressed it or mentioned the risk of longer-term dry eye that surgery might cause. These

CAN YOU TRUST A LASER EYE CONSULTATION?

Our researchers had 18 consultations to discuss the possibility of having laser eye surgery. These were rated by our expert panel



Eye-openers

Considering laser eye surgery? Some clinics fail to give the full facts about risk – and adverts belie actual costs

IN BRIEF

In this report we help you to:

- understand what makes a good laser eye surgery consultation
- find out about the risks and true cost of laser eye surgery

were two branches of Optimax, one Optical Express and one Ultralase.

During one visit to another branch of Optical Express – rated 'very unsatisfactory' – one researcher was told: 'As long as you're under my control, you won't get even an infection or any inflammation'. Another staff member there told the researcher: 'Things cannot go wrong'. One of our experts says: 'This is dreadful practice – no professional can give this guarantee'. None of the four branches of Optical Express had a satisfactory rating.

He adds: 'No matter how good the written information is – and I must praise the high-street clinics for the quality of written material – if someone tells you that there's no risk or "vision will be fixed", that's what you'll believe.'

Our experts also criticised an Ultralase clinic where the researcher was told that her eye was 'abnormal' and 'suspicious-looking'. The researcher says: 'I was made to feel that there was something inherently abnormal about my eyes.' Only one of the five Ultralase branches was rated satisfactory.

One of our experts says: 'Although we considered this visit satisfactory overall, the way the findings were communicated was unprofessional and could have caused great concern.'

Eye history

During initial consultations, certain questions and tests are vital if you are to make an informed decision about the best option for you, and be aware of any increased risks relating to your eyes.

➔ The lowdown on laser eye surgery

What is laser eye surgery?

Laser eye surgery treats short and long-sightedness and astigmatism (uneven curvature), by reshaping the cornea. There are four main types of surgery:

1. Lasik (laser assisted in situ keratomileusis)

How it works The cornea is cut by a mechanical blade or laser (often an 'Intralase' laser) to create a flap.

The surface underneath is then sculpted using a laser, then the flap is replaced.

Why? Used for around 95% of procedures, it causes minimal pain and vision recovers quickly.

2. Lasek (laser epithelial keratomileusis)

How it works A thin flap of the cornea's outermost layer is created, usually using dilute alcohol. The flap is lifted out of the way during the laser treatment, then replaced and held in place by a special soft contact lens while the eye heals.

Why? This is considered more uncomfortable post-surgery, with a slower recovery than Lasik, but it's

better for people with thin corneas, as it preserves more tissue that may be needed for future treatment. It is often used for sports-people who risk contact injuries to their Lasik flap.

The forerunner of Lasek, PRK, is rarely performed these days.

3. Wavefront

How it works This laser technology, which is customised to treat the specific shape of a person's eye, is usually an add-on to standard surgery, and costs more.

Why? This option may be better than the standard option on the laser systems in many clinics.

4. Intraocular lenses

How it works Some patients have their eye lens replaced by an artificial one, or an additional lens inserted to change the eye's power. This treatment is more complex than laser surgery and is therefore more expensive.

Why? This is an alternative where laser surgery isn't possible.

Laser eye surgery risks

■ **Infection and loss of vision** Infection is rare (1 in 500) and can usually be treated, but some cases can't be easily controlled by medication, which could cause some reduction in vision, or loss of sight in extreme cases.

■ **Loss of vision or reduced quality of vision** A small proportion of people don't see as well following surgery as they did with their spectacles or contact lenses before surgery. In about one in 200 eyes, this can't be corrected with spectacles and relates to a reduction in the optical quality of the eye.

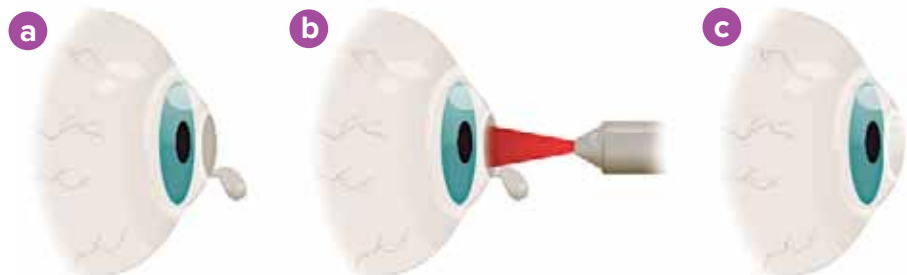
■ **Under or over-correction** It's difficult to know exactly how an individual's eyes will heal, so between 5% and 15% of cases (depending on the patient and the clinic), require another treatment. Ask clinics about their results.

■ **Dry eye** This is common after surgery and usually clears up, but it can persist in the longer term (see 'Long-term problems', p29). It's more common in certain people – including those with a history of dry eye – who should be specifically warned of the increased risk.

■ **Night glare** Some patients experience glare or halo effects round lights when driving at night. This is more likely for those with higher corrections and possibly those with larger pupils. Very occasionally, it is permanent.

To find out more, see our laser eye surgery FAQs at www.which.co.uk/lasereyefaqs.

How Lasik laser eye surgery works



In the most common type of laser eye surgery, a flap is made in the cornea (a) and a laser sculpts the surface underneath (b), then the flap is replaced (c)



One researcher has binocular vision problems, so further tests are needed to see if she is at risk of double vision after surgery. But one branch of each of the three high-street chains failed to ask the right questions, or read the answers on her health questionnaires, to find out that she had the condition.

And one independent clinic was criticised for inadequate eye testing. It is unlikely that they would have found out, for example, if the researcher had glaucoma, which would have made her a very high-risk patient. However, three out of four independent visits were rated satisfactory.

High expectations

You may expect that the 'visual freedom' claimed in adverts means freedom from glasses or contact lenses. But even if your eyes are fully corrected for distance vision, you're still likely to need reading glasses



when you reach 45-50 years of age. Almost half of our researchers weren't told about this, despite asking whether they might need glasses after surgery.

Priya Singh, medical director of the Medical Protection Society, which indemnifies doctors, says: 'Most complaints about surgery are down to unrealistic expectations... advertising shows young healthy people who do not need glasses - clinics must ensure that they communicate the reality, including the need for glasses as we age, to patients.'

Meeting the surgeon

With the three high-street companies, it's likely that you'll first meet your surgeon on the day of surgery, though the Royal College of Ophthalmologists standard says that you should meet them at least 24 hours before surgery.

Though surgeons must then examine you, ensure you fully understand the risks and make the final decision on your suitability for surgery, our experts consider the initial consultation key to your decision. As one expert says: 'By the time the patient sees the surgeon, they're psyched up and unlikely to pull out, even if the surgeon has a different view on the level of risk or most suitable procedure.'

Not meeting your surgeon until the day of surgery can also lead to costly last-minute changes in treatment, as the daughter of Which? member Carol Pattinson found out.

At her initial consultation, Louise Holder was told that she was suitable for standard Lasik treatment at a branch of Optical Express. But, when she met the surgeon on the day, she was shocked that she needed Wavefront treatment, as she has large pupils. Despite a discount offered on a higher price treatment, she paid more than £1,500 extra to go ahead.

COMMERCIAL PRACTICES

The most recent Mintel report into the industry found that in 2007 the average laser surgery spend per eye was £900. Our researchers also collected pricing information during their visits.

Optimax and Optical Express advertise prices from £395 per eye - £790 for both eyes - varying because of factors such as the individual's prescription. But the lowest price that our researchers were offered was £1,090 at one branch of Optical Express. Indeed, a staff member from another Optical Express branch told another researcher: 'We keep the lower prices for advertising, really.'

But prices for the same treatments often vary between chains and branches. For example, prices for Lasik with Wavefront and Intralase for both eyes ranged from £2,590 at one Optical Express to £3,990 at a branch of Ultralase. Premium treatment techniques were heavily promoted by staff and sometimes, according to our experts, the benefits were exaggerated.

For example, one researcher at a branch of Ultralase was misleadingly told: 'The only way of guaranteeing that you're not going to have glare is with the wavefront treatment.' One expert says: 'Customers can choose standard treatments but, given the descriptions of more expensive options included comparing "a Porsche and a Mini", you feel as though you don't have a choice.'

One researcher's suggested treatments ranged from Lasek, at £2,490, to intraocular (implantable) lenses, at £6,200.

But there may be several treatments that are right for your eyes. What's recommended will vary between clinics and their expertise, so it's important to ask lots of questions and shop around.

Sales techniques

It's hard to tell who's giving the best information, though. When we asked our researchers to each choose their top clinic, they told us that 'friendliness' was key. However, our experts rated their choices as 'unsatisfactory' or 'very unsatisfactory'.

Our experts also criticised financial incentives used at the big three clinics, including discounts of up to £200 for quick bookings or recommending a friend.

But the experts were most concerned that our 19-year-old researcher was pressured into making an immediate booking at a branch of Optical Express. She was repeatedly asked to contact her parents to get her deposit, even though she told staff that they were busy. One expert said: 'To cajole people into making snap decisions regarding operations is inappropriate and unprofessional.'

WHICH? SAYS

Consumers must be told about all the potential risks of laser eye surgery if they are to make informed decisions about whether it is right for them, and they should receive good-quality, accurate verbal as well as written information about services on offer from the outset.

Companies must keep themselves up to date with consumer protection regulations to ensure that they don't use misleading statements during consultations. And even where companies are acting within the letter of the law, they should also act within the spirit of it by making sure that advertised prices are as close as possible to what surgery is likely to cost for the average patient.

Health regulators must ensure that their inspections get to the heart of the quality of what's offered. Introducing mystery shopping would encourage services that people can commit to with their eyes open. And we're worried that in Scotland there is currently no inspection, though we're told that this is planned in the near future by the Care Commission.

If laser eye surgery isn't for you, see our report on p30 to find out how to buy glasses and contact lenses.

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OUR RESEARCH

In winter 2008, five undercover researchers with a range of eye conditions asked for consultations at 18 laser eye clinics, including high-street chains Ultralase, Optimax and Optical Express, smaller groups and independents.

The recorded consultations were assessed by a laser eye surgeon and two clinical researchers with expertise in laser eye surgery.

Our experts based their own criteria on voluntary standards of the Royal College of Ophthalmologists and the National Institute for Health and Clinical Excellence (NICE) guidelines.

Contacts

Royal College of Ophthalmologists (patient guide) www.rcophth.ac.uk

Royal College of Optometrists (optical advice) www.college-optometrists.org

LaserMyEye (patient advice) www.lasermeye.org

Lasik Eyes (commercially funded advice including surgeon ratings) www.lasik-eyes.co.uk

Dr Foster (list of consultants) www.drfoosterhealth.co.uk/consultant-guide

REGULATORS

Care Quality Commission (England) www.cqc.org.uk

RQIA (Northern Ireland) www.rqia.org.uk

Healthcare Inspectorate Wales www.hiww.org.uk

FREE FROM CONTACT LENSES

Andy Mole 49, *engineer*

The best thing about laser eye surgery for Andy has been 'the freedom' from contact lenses after 28 years of wear.

It makes financial sense, too. He says: 'It was the excessive cost that my optician charged when I lost a lens that made me go for laser eye surgery.'

'With the money I'll save on glasses or contact lenses, the surgery will pay for itself eventually.'

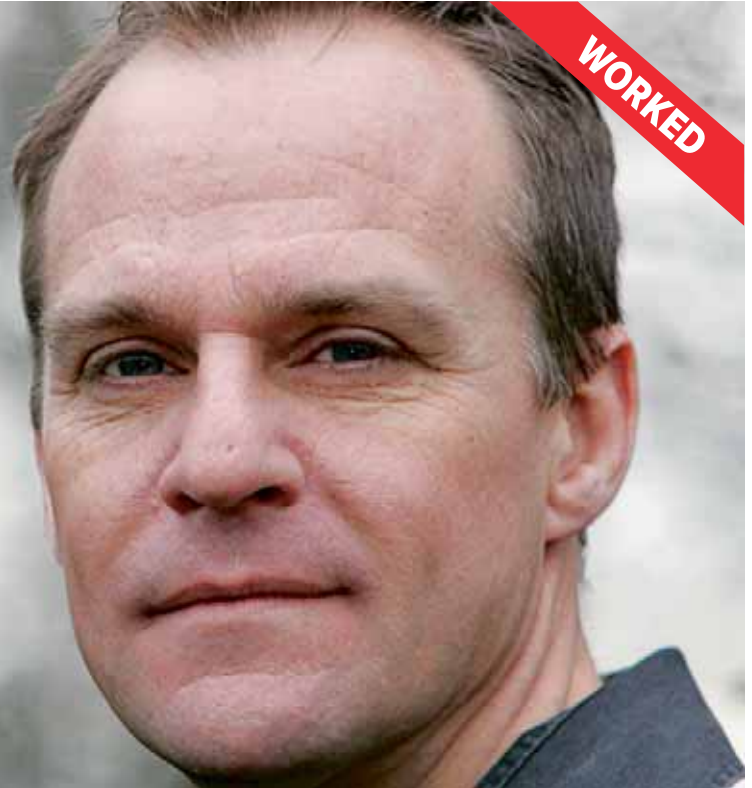
The laser eye clinic made sure that Andy was well informed of the risks, so when his vision

was blurry after his operation, he wasn't unduly concerned.

When his eyes settled, Andy needed a second treatment on one eye, but he was happy with the results.

'I had some hassle when arranging the re-treatment but, when I compare that to the hassle using contact lenses every day, I'm glad I had the surgery.'

'My vision is balanced now, and although I still need age-related reading specs, I've got 20-20 driving vision, so I'm pleased about that.'



LONG-TERM PROBLEMS

Margaret Grimshaw 50, *university residence manager*

Margaret, who is long-sighted, was looking forward to being free from glasses after 20 years, but laser surgery failed to fully correct her vision, and it created new problems.

Margaret's vision became blurred after surgery and her eyes were constantly dry. Two years on, the dryness and soreness remain.

She can't see properly in the distance and has night glare – lights look blurry at night.

After countless appointments with optometrists, trying out eye drops and eye pads, and even resorting to laser surgery again, her problems still haven't been solved.

Margaret's vision is better than before the first surgery, but she still requires further correction. She has turned down surgery for a third time, choosing to spend £280 on a pair of glasses instead.

Margaret recalls that she only met the surgeon on the day of treatment, and she felt he was 'very abrupt'. She admits she had been given written information but, as there was so much of it, she didn't read it all.

She says: 'You pay much more attention to what you're told verbally. If I'd been told well before surgery about all that could go wrong, I would have thought twice about having it done.'

