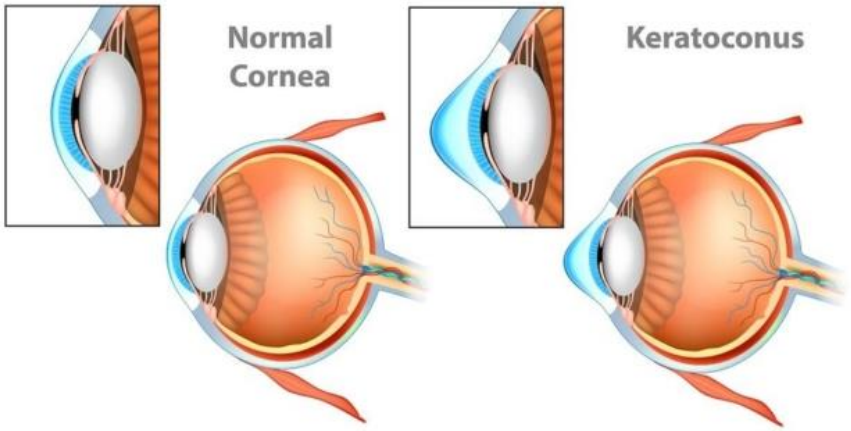
Keratoconus

WHAT IS KERATOCONUS?

Keratoconus is an eye condition that causes progressive bulging and thinning of the central zone of the cornea, the front window of the eye.

This results in distorted vision which in most cases can not be corrected with glasses.



WHAT CAUSES KERATOCONUS?

Keratoconus is an inherited disorder which occurs in about one in 3000 people.

It is a recessive condition, requiring genetic factors to be inherited from both parents, so the chances of the children of a person with keratoconus also having the condition are low (around one in 50).

WHAT DO PEOPLE WITH KERATOCONUS EXPERIENCE?

Keratoconus usually becomes apparent between the ages of 10 and 25 years and is sometimes associated with other conditions such as allergies, infantile eczema, asthma, reduced night vision, double jointedness, and in rare instances, with occasional short bouts of chest pain.

In advanced cases, when the cornea becomes very thin the back surface of the cornea may rupture spontaneously. This is known as corneal hydrops and will cause a sudden and painful deterioration in vision.

CAN KERATOCONUS BE TREATED?

Because keratoconus is a genetic condition it cannot be treated with drugs, but glasses and contact lenses can give good vision, and surgery can be used to treat severe cases.

Keratoconus does not cause blindness.

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As keratoconus progresses, the shape of the cornea becomes irregular, and the vision is unable to be corrected with glasses alone. In such cases, rigid contact lenses can be used to provide good vision. The contact lenses essentially provide a new, regular front surface for the eye, eliminating the distortions caused by the keratoconus.

Because the cornea continues to change shape, it is important that people with keratoconus have regular examinations to ensure their contact lenses fit correctly. A procedure known as corneal crosslinking is suitable for some cases and aims to strengthen the cornea to minimise further corneal thinning.

In approximately 85% of cases of keratoconus the condition gradually stabilised by the age of 35 years, although exceptions are always possible. In the remaining 15% the condition progresses, and vision and tolerance to contact lenses may deteriorate. For members of this group, a corneal graft may be necessary.