**Table 2. Surgical Complications.** 

	Myopic LASIK $(n = 424)$	Toric LASIK $(n = 130)$
Intraoperative complications		To a delication of the
Inadequate suction pressure	3	2
Microkeratome malfunction	2	1
Incomplete cap	160 1	0
Free cap	3	1
Thin or perforated corneal flap	1 20 1	1
Perforated cornea	0	0
Eccentric laser ablation	69 1	1
Early postoperative complications		
Pain	0	0
Displaced flap	0	0
Epithelial defects	4	1
Infection	0	0
Interface particles	5	2
Epithelial ingrowth	2	1
Stromal melting	o o	0
Late postoperative complications		
Errors in refractive predictability		
Overcorrection above 2 diopters	0	0
Undercorrection above 2 diopters	plaitip 5	1
Irregular astigmatism	4	2
Central islands	2	0
Corneal haze	0 techni	0
Corneal ectasia	0	0
Night glare	7	2
Total eyes	13	OS = nyrorw OI = 5 mm
Complication rate	3.1%	3.8%

and post-LASIK ocular examination and regular follow-up. The complete pre-LASIK ocular examination included uncorrected visual acuity, cycloplegic and manifested best corrected visual acuity, autorefraction with keratometry, intraocular pressure, slit lamp examination and external eye photography, fundoscopy, corneal topography, pachymetry and specular microscopy. Patients were excluded if any of the following exclusion criteria were found: previous ocular surgery, clinical or topographic evidence of keratoconus, or systemic disease that might influence wound healing.

Myopic LASIK and toric LASIK surgery were performed with ALK (Automated Corneal Shaper, Chiron Vision, Claremont, CA) to make a corneal flap and then with a Summit Apex Plus excimer laser using aspheric multizone technology to ablate the stromal bed or using laser disc technology to ablate the spherocylindrical refractive cut simultaneously on the stromal bed.<sup>24,25</sup>

## RESULTS

Preoperative patient data are shown in (Table 1), and the surgical results at a 3-month visit are described below.