Introduction
The TransPRK (Transepithelial Photo Refractive Keratectomy) by Amaris 750S a Schwind Thecnology Is a refractive procedure with no-contact surgery. Corneal epithelium is removed by the laser without manual interference.It brings more accuracy and perfect deepithelization.

This innovative laser system delivers an unsurpassed Repetition rate of 1050 HZ and consequently an extremely short ablation time of just 1.3 seconds per dioptre. That means even greater safety and comfort for the patient. The risk of the córnea drying out is minimised, and the length of time the patient has to fixate on the green ligh is reduced.

The Smart Pulse tecnology use a gemetrical model based on a fullerene structure other, importante instrument of security is the integrated contact free optical pachymetry that provides precision information about the thicness ofthe córnea throughout the entire duration of the treatment. The 7D eye impresses a apart from the linear movements (1st and 2and dimentions). Compensations of the eye rotation around its optical axis.

Method
We treated and studied in two years 452 eyes of 224 patients , 96 males and 128 females. The average degrees of spherical refraction was -3.70 DE and cylindrical refraction was -0.75. We use 1% tetracaine hydrochloride as anesthesia and mitomicin-c 0,01% for 25 minutes or more. and contact lens after the application. Drops of moxifloxacin hydrochloride 0,5 for antibiotic therapy.

In the postoperatory we use moxifloxacind hydrochloride 0,5 4 drops a day for 7 days, trometamol cetorolac 0,45% 4 drops a day for 7days and carmellose sodium and sodium hyaluronate for 1 month.

Results
We had 96,3 % with 20/20 in the end of two eyes of study and 6 eyes presented a little manifestation of haze. 93% had epithelial regeneration in 3 days after surgery and all patients in 5 days. 96,3 % showed a spherical refraction target of 0,48 and a cylindrical refraction of 0,5 degrees. The corneal architectural structure became preserved and we have to pay attention when we have diameters below 9.5 mm which may occur overcorrection in the results.

The results modified with a little between 12 to 24 months . The dry eye occured in 72% of patients in the first month and kept with the same incidence of all population after 3 months of the surgery.

Conclusion
The TRANSPRK showed an ecxelent and safe procedure with 96,3% of good results of myopia and astigmatism. We need to observe the development of dry eye in the three months of pos -operatory [1-5].

References