ABSTRACT

Background: Excimer laser photorefractive keratectomy (PRK) is the first operative technique using excimer laser for the eye to correct the eye's refractive ability. PRK is used effectively for moderate myopi, astigmatism, and hyperopic using the surface ablation technique. But over the time, another technique to correct the eye's refractive ability is Lasik in Situ Keratomileusis (LASIK), until now, it is still debatable wheter LASIK has higher safety in patients who required refractive correction. Some research suggests that LASIK technique is associated with complications related to the flap and ectasia. Thus PRK remains to be the chosen method for refractory correction. Although, it is the chosen method for military officials, PRK has many complications including slow-healing epithelial defects, corneal haze and haloes, poor night vision and regression of refractive correction. For corneal hazing, it is caused by inflammation in the cornea. The inflammation can be observed from some of its clinical features which are blepharospasm, VAS score (subjective pain), and hyperemia.

Methods: This study is a pre and post study. The subjects in the study are patients who will undergo PRK procedure in eye hospital dr. Yap Yogyakarta.Patients that have underwent PRK would then be examined using slitlamp by the examiner at the hospital at 1 day, 7 days, 14 days, 1 month, and 2 months after PRK. The data is analyzed from its incidence and the time of appearance.

Hasil: There are 68 eyes that is included in this study from April 2014 to Mei 2015. From 68 eyes, the incidence of the inflammation features is highest at D+1 follow-up with values of 81% for blepharospasm, 75% for conjunctivae Hyperemia, and 82% for subjective pain

Key Words: *photorefractive keratectomy,* blepharospasm, conjunctivae hyperemia, subjective pain.