On early postoperative visits, it is important to stress that the patient’s vision will constantly be improving. This improvement makes the greatest leaps during the first 3 months but continues over the next year. The patient should be made aware that not only will the vision become clearer, but the glare and halos will diminish, and the depth of field will increase. This should be a time of encouragement and support.

**STRATEGIES FOR ENHANCEMENTS**

Though we plan for perfection, we often are left with suboptimal outcomes. One needs to be comfortable with some basic skills or have access to techniques such as corneal relaxing incisions, piggyback lenses, and LASIK/PRK. When dealing with enhancements, it is best to wait until at least 1 month postoperatively when the eye has stabilized. At this point, one needs to determine the cause of dissatisfaction. Is it astigmatism, sphere, or both, and how much?

If you are dealing with small amounts of cylinder, a corneal relaxing incision can be quite effective (Figure 16-2). The multifocal platform can tolerate a little bit of residual sphere, whether myopic or hyperopic. Always anticipate what your post-LRI spherical equivalent is going to be. If it is going to be more than 0.5 D hyperopic or more than 0.75 D myopic, a different form of enhancement may be warranted.

If you are correcting residual sphere, there are a couple of options at your disposal. IOL exchange may be an obvious solution but may be a little more challenging than the other options. A relatively easy and cost-effective solution is the use of a piggyback lens. The STAAR Surgical AQ5010 is an ideal platform for piggybacking, as it has a 6.2 mm optic, which will overlap the multifocal optic and not require precise centration. In addition, it has very long haptics that allow for secure placement in the ciliary sulcus. The lens is made out of silicone and is not prone to interface opacification when piggybacked on