

CONCLUSIONS

Modifications of traditional CXL have already begun to occur, and TCXL will undoubtedly continue to evolve. The formulation of riboflavin, standardization of riboflavin loading of the cornea and further advances in UV-A irradiation technology will overcome the main objections to TCXL.

Epithelium-off CXL and TCXL each has its unique indications in management of KC, for example combining CXL with PRK can offer patients the best possible treatment results which could only be done in epi.off technique, on the other hand TCXL is considered a reliable surgical option especially for eyes with thin corneas, childrens and patients with poor compliance, including Down syndrome patients.

AS-OCT represents an effective tool to monitor the effective depth of CXL.