QuadraKone™ Contact Lens
GP Specialty Lens for Fitting Keratoconus & Other Irregular Corneas
This Guide is intended as a supplement to the TruKone Fitting Guide

In most cases it will be appropriate to trial fit the patient with the TruKone Design when suspecting keratoconus. At times when trial fitting the TruKone you will see a large amount of inferior dye pooling around the bottom periphery of the lens. Yet, the superior half of the lens dye pattern seems ideal. Past technology allowed fitters to change overall lens diameter or base curve and peripheral radii in order to strike at least a manageable balance between the semi-normal superior cornea and the steep irregular lower cornea.

Newer CNC technology has afforded the opportunity to fit these irregular corneas by changing the periphery of a lens like the TruKone. This peripheral change is made in different quadrants without changing the base curve, diameter or optic zone. By changing the lens in this manner you can achieve more symmetrical pooling around the outside of the lens while maintaining a light feather touch on the tip of a cone.

1. How to define the back periphery of a QuadraKone: It is necessary to utilize the anterior ophthalmic protractor to indicate which major meridians (0*, 90*, 180* & 270*) need to be adjusted in order to gain posterior symmetry.
2. How to gain symmetry on an irregular cornea: have the trial lens center as well as possible and evaluate the quantity of pooling under the major meridians. The major meridians with too much pooling must be steepened in order to minimize excessive pooling. Steepen the areas with excessive pooling by at least 3 to 4 diopters when ordering.

Below is Conventional fitting technology Vs. the QuadraKone symmetry fitting technique:

Ex 1. Flat Fitting TruKone
BC 6.62
Dia. 9.2
E.L. Std.

Ex 2. Steep Fitting TruKone
BC 6.54
Dia. 9.2
E.L. Std.

Ex 3. Symmetrical Fitting QK
0* 90* 180* 270*
9.25/8.36/9.00/7.34
BC 6.62
Dia. 9.2

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