



experimental assessment and first ophthalmic applications

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Adaptive optics ... into clinics ?

• many optical setups are now able to image the retina or manipulate aberrations using AO

 dynamic range of correction devices is sometimes a limitation to these AO applications on an extensive range of patients, limiting the potential clinical studies



Development of a deformable mirror with characteristics consistent with ophthalmic clinical requirements

Aberration correction

- Closed-loop correction 8 Hz
- 6 iterations
- Myopic eye, irregular cornea
- Pupil diameter
 6.6 mm





Aberration correction

Adaptive Optics Visual Simulator

Irx3 aberrometer



Mirao52d deformable mirror



OLED microdisplay



- AO visual simulator = AO phoropter
- = an ophthalmic instrument able to:

•Manipulate and control ocular wavefront aberrations

•Subjectively assess visual performance in the presence of user-defined aberration



Crx1 AO Visual Simulator



Adaptive Optics Visual Simulator

Comparison between best sphero-cyl and full AO correction



Courtesy K. Rocha

Flood illumination retinal imaging



UHR Spectral Domain OCT



Courtesy E.J. Fernandez, W. Drexler

UHR Spectral Domain OCT



Courtesy W. Drexler, E.J. Fernandez



Mirao 52d: electromagnetic deformable mirror

- 52 actuators
- Effective diameter 15 mm
- Overall size 66 x 66 mm
- Voltage range -1 V to +1V





Membrane reflectivity





Experimental setup



Hartmann-Shack wavefront sensor HASO32

Deformable mirror mirao52d



Single actuator surface response



Linearity





Hysteresis

Single actuator response in 8 up-down cycles (open loop)





Temporal characteristics





Wavefront changes over time Open loop, open setup, standard room conditions (A.C.)





Zernike mode generation / correction

Wavefront range (PV)



Zernike mode generation / correction

Precision:

- Difference between expected and measured Zernike coefficients
- Expected Zernike coefficient: 1 µm RMS







- Magnetic deformable mirror:
 - > high stroke (max. 50 µm)
 - generates / compensates large wavefront aberrations
 - tilt capability
 - Inear (predictable behaviour)
 - safety (low voltage)
- Suitable for many ophthalmic applications:

 ability to create / compensate both low and high-order aberrations (ex. keratoconus)
 good candidate for integration on clinical systems

Thanks !

- Universidad de Murcia
 - E. J. Fernandez
- Cardiff University
 - B. Hermann, A. Unterhuber, B. Pova_ay, W. Drexler
- CNRS LESIA Observatoire de Paris
 - M. Glanc
- MaunaKea Technologies
 - F. Lacombe
- Imagine Eyes
 - N. Chateau, L.Vabre, X. Levecq, F. Martins

Mode coupling





F. Lacombe, LESIA Observatoire de Paris, 2004

