

Who We Are

About Us

Dr. Cecchi offers a wide variety of eye and vision related services. Specializing in cataract surgery, he also offers comprehensive eye exams, glaucoma screening and treatment, macular degeneration monitoring, and functional eyelid surgery.

Contact Us

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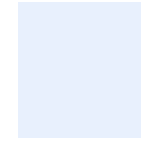
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Presbyopia

The lens inside the eye functions just like the lens of a camera. It actually changes shape by becoming fatter when we attempt to see objects up close and thinner when we gaze into the distance.

This system works well until we get close to forty. The lens gradually loses its ability to focus up close. Blurred vision for near objects is the result. Slowness in changing focus from near to far may be noted. This loss of the ability to focus up close is called Presbyopia or age-related focusing dysfunction. Near sighted (myopic) patients in this age group may take their glasses off to read. This is one of the advantages to myopia. Hyperopic (far-sighted) patients may have more difficulty with focusing at an earlier age because they start out with too little focusing ability.

The chief complaint of patients with presbyopia is difficulty seeing up close, which may be aggravated by reading small print or reading in dim light. Holding the reading matter further away may alleviate the strain temporarily, but the best way to correct for presbyopia is with lenses of the proper power to bring things into focus. This can be achieved in several different ways.

Bifocals: This is the most common option if there is need for distance correction as well as near. The top portion of the lenses provide the distance correction while at the bottom is the reading power. These can be with a line delineating the reading section, or can be a transitional type lens without a visible line. The advantage to “no line” bifocals is that there is a blending of the transition from distance at top to reading at bottom. The disadvantage is that the appropriate place through the bottom needed to keep clear near vision can be small and hard to find.

Reading Glasses: These work well and have the advantage of giving the full field of vision while reading. This is an excellent option for those who are avid readers or spend a prolonged time with near work.

Half-glasses: These are the kind made famous by Ben Franklin. They provide good near vision, and if the patient has good distance vision without glasses, clear distance vision is obtained by simply looking over the top of the glasses.

Contact Lenses: Monovision can be achieved to have one eye in focus for reading and one for distance. This can be difficult for many patients to adjust to. Those who can adjust it do very well with this option. Contact lenses also come in a bifocal form which can provide good distance and near correction.

Surgery: In some cases, if a cataract is present, the eye’s natural lens which has become cloudy can be removed and replaced with an intraocular lens (IOL). The IOL can be of a bifocal variety which can also aid with reading. Monovision can also be achieved while using standard monofocal IOL’s. So called “Clear lens extraction” (CLE) is an option for those wanting to pursue surgical options before a cataract has formed. Other corneal procedures are being developed for presbyopia as well such as corneal inlays.

