



**EGYPTIAN
OPHTHALMOLOGICAL
SOCIETY**

**Summer
Meeting 2018**

27-28
September
2018

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ASU

SCIENTIFIC PROGRAM



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Different approaches?

- Straightforward phaco
- CTR
- Lensectomy or ICCE with IOL (iris claw or scleral fixated)

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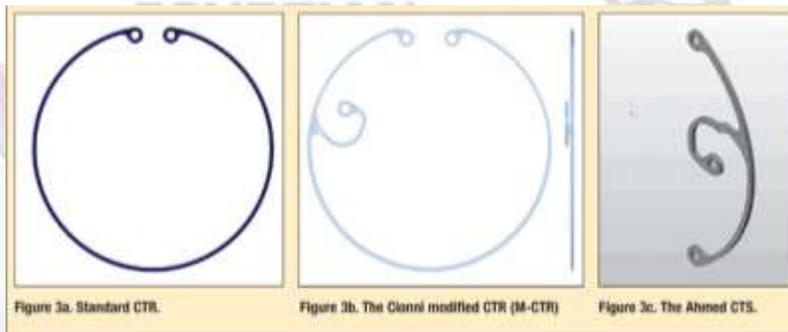
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CTR

CTRs were introduced in 1991, used in Europe since 1993, but were only approved by the U.S. FDA in late 2003.



How does it work?

- Keeps the bag stretched throughout the procedure allowing greater safety during all intraocular manipulation
- Prevents concentration of forces on individual zonular fibers by distributing all forces to the entire zonular apparatus



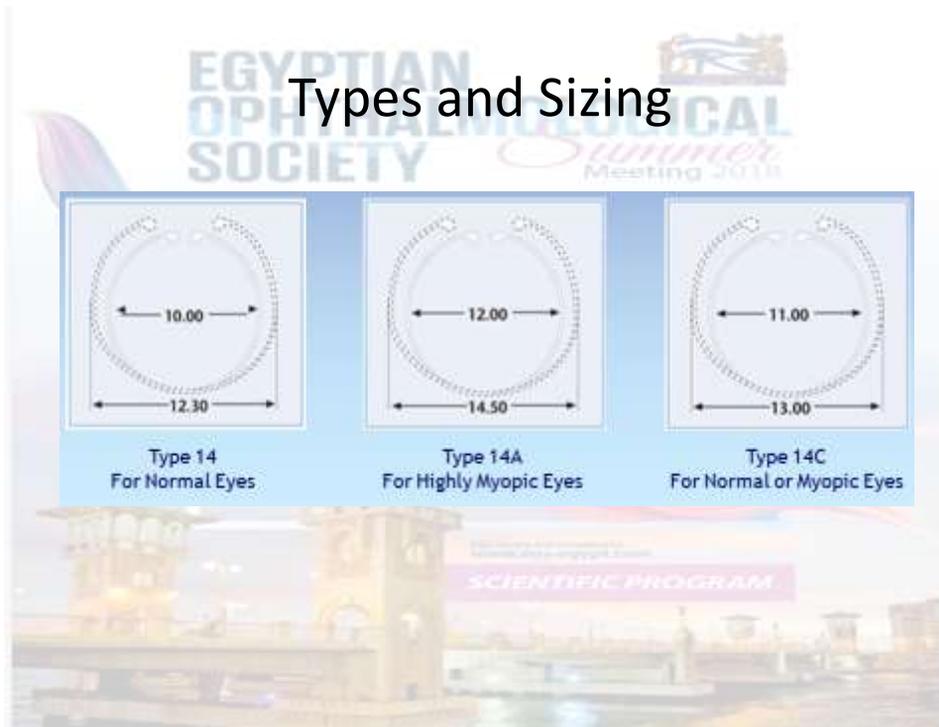
When can I use it?

- Zonular damage less or more than 4 hours
- Intraoperative, traumatic, or congenital zonular dialysis
- Zonular weakness due to: trauma Pseudoexfoliation Marfan's and Weill Marchesani syndrome
- IOL Subluxation resulting from:
 - Ocular trauma
 - Postoperative capsular bag shrinkage leading to IOL decentration tilting or closure of the capsular opening
- High Myopia:
 - Soft IOL:
 - Silicone IOLs and soft IOLs with disc designs tend to dislocate

Zonular Dialysis

- Less than 4 hours (120°): standard CTR
 - More than 4 hours: Cionni CTR / Ahmed CTS
- Both can be fixated to the sclera



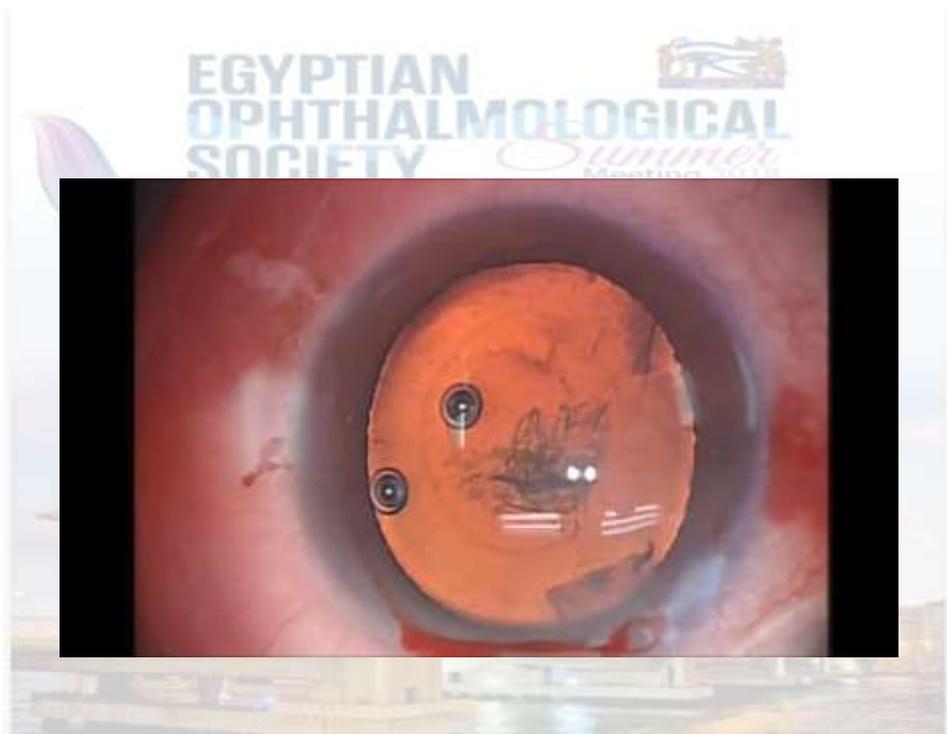
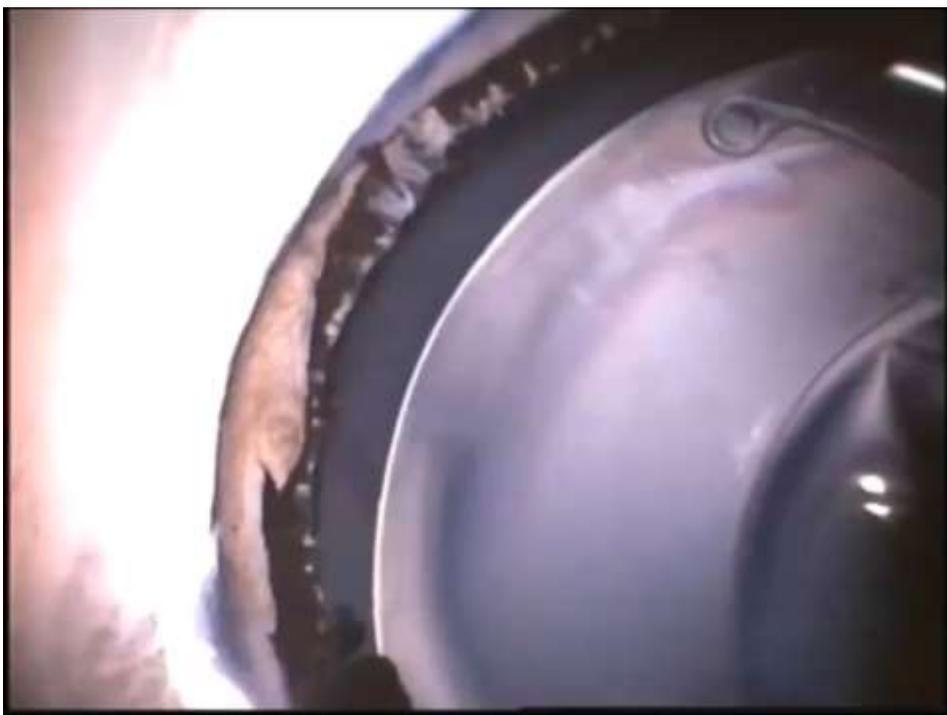


Types and sizing

Type	Expanded	Compressible	Axial length
14	12.3mm	To 10.0mm	< 24mm
14A	14.5mm	To 12.0mm	> 28mm
14C	13.0mm	To 11.0mm	24 - 28mm

Type	Expanded	Compressed	White to White
14	12.3mm	To 10.0mm	< 11mm
14A	14.5mm	To 12.0mm	> 12.5mm
14C	13.0mm	To 11.0mm	11-12.5mm

for eyes with a large section of weakened zonules necessitating greater stability, a larger size may be the best choice even in a smaller eye.





Thank you for staying
so long