

'Tis Better to Give Than to Receive

BY RICHARD M. AWDEH, MD; WILLIAM B. TRATTLER, MD;
AND ELENA ALBÉ, MD

This holiday season, reward yourself with the gift of Eyetube.net. Ophthalmic surgeons across the globe have uploaded videos to present their surgical pearls to you. Here are some great new additions to this growing video resource.

LASER-ASSISTED DESCMET'S STRIPPING ENDOTHELIAL KERATOPLASTY AND GLUED IOLs

This month, Dr. Awdeh had the pleasure of spending time in the clinic with Adil Agarwal, FRCS; Ashvin Agarwal, FRCS; and Anosh Agarwal, FRCS, from Dr. Agarwal's Eye Hospital in India. These three brilliant brothers embrace the future of our field. In their video offering, they demonstrate the use of the IntraLase FS Laser (Abbott Medical Optics Inc., Santa Ana, CA) for the preparation of a donor corneal graft for Descemet's stripping endothelial keratoplasty. They also combine the procedure with a vitrectomy, pupilloplasty, and glued IOLs, which are inserted through a scleral tunnel. A challenging case, made to look simple, and three gifts for one are offered in this exciting video (Figure 1) (eyetube.net/?v=fafel).



Figure 1. The surgeon seals the scleral flap with fibrin glue.

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A separate video by Amar Agarwal, FRCS, demonstrates the fibrin glue technique for the insertion of a multifocal IOL. This video begins with a smart animation demonstrating each stage of the procedure (eyetube.net/?v=hejem). Dr. Agarwal also presents a case of a lens coloboma in which he implants a glued IOL and performs a closed-globe refixation of a dislocated IOL with glue (eyetube.net/?v=sifos).

REPOSITIONING AN IOL'S HAPTIC 1 YEAR AFTER SURGERY

Som Prasad, MS, FRCSEd, offers a nice case of a patient who had uneventful cataract surgery and was found to have recurrent uveitis with an area of infero-temporal iris thinning, suggestive of a haptic placed in the sulcus rather than the capsular bag. He places a

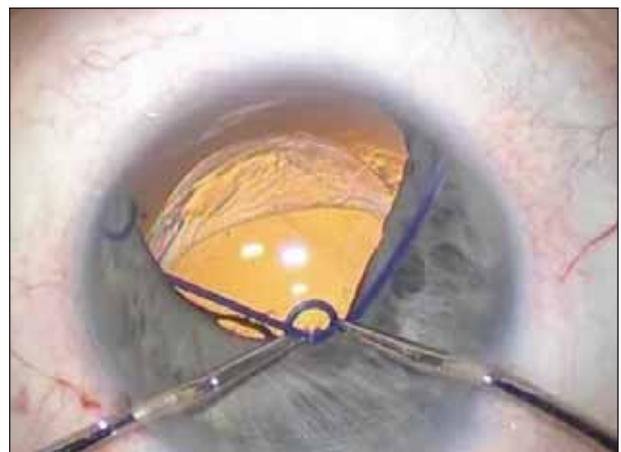


Figure 2. The surgeon inserts a Malyugin Ring to expand the pupil.



Figure 3. The surgeon uses a Rentsch Curette (Geuder AG, Heidelberg, Germany) to polish the anterior capsular rim.

Malyugin Ring (MicroSurgical Technology, Redmond, WA) in order to get good exposure, uses a forceps to reopen the bag, and performs bimanual maneuvers to place the haptic in the capsular bag (Figure 2) (eyetube.net/?v=gubuw).

NEW PHACO TECHNIQUES

Marcos Gomez, MD, demonstrates his phaco tunnel technique for medium-to-hard cataracts (eyetube.net/?v=jojee). Eslam Ramadan, FRCS(Glasg), reviews his pearls for the surgical management of hard cataracts (eyetube.net/?v=pihoh). Jason Jones, MD, shares his methods for polishing the posterior capsule and creating the primary posterior capsulorhexis, which he demonstrates for the removal of a posterior capsular plaque from a posterior subcapsular cataract (Figure 3) (eyetube.net/?v=tehur).

“Dr. Vold uses the collagen matrix to help maintain the subconjunctival space of the bleb and prevent postoperative fibrosis.”

PRESSURE MANAGEMENT

Steven Vold, MD, presents his technique for implanting the P50 model of the Ex-Press mini glaucoma shunt (Alcon Laboratories, Inc., Fort Worth, TX) followed by the insertion of the Ologen Collagen Matrix Implant (Optous, Roseville, CA), a biodegradable scaffolding matrix that induces a regenerative wound healing process without the need for antifibrotic agents. Dr. Vold uses the collagen matrix to help maintain the subconjunctival space of the bleb and prevent postoperative fibrosis (Figure 4) (eyetube.net/?v=hocri).

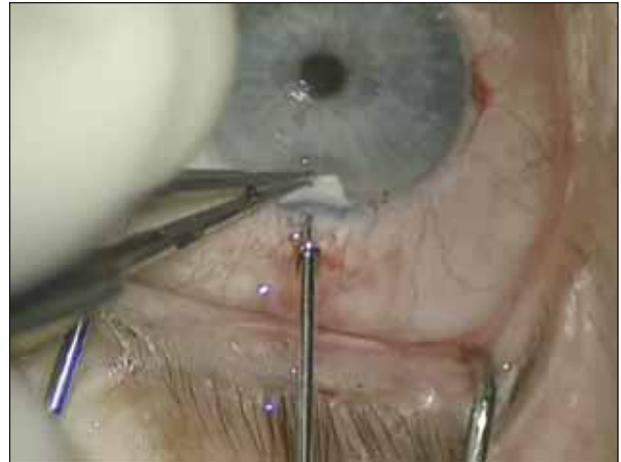


Figure 4. The surgeon places an Ex-Press mini glaucoma shunt in the anterior chamber.

CONCLUSION

We hope that you explore these and the other gifts that are available to you on Eyetube.net! We look forward to directing you to interesting videos in 2011. We would also like to introduce you to our European colleague, Elena Albé, MD, who will be joining us as a co-section editor of this column. She will no doubt help us maintain a worldview. Please join us in welcoming Dr. Albé! ■

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