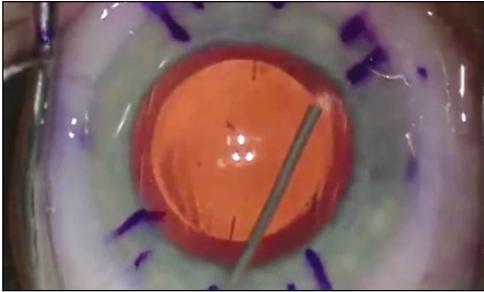


This Month's Videos on Eyetube.net



TRANSZONULAR TRIMOXI TECHNIQUE

By Ahad Mahootchi, MD

Dr. Mahootchi demonstrates a transzonular technique for injecting TriMoxi (moxifloxacin; Imprimis Pharmaceuticals), an antibiotic and steroid formulation, during cataract surgery.

The video shows several views of the medicine entering the eye.

According to Dr. Mahootchi, this intraoperative drug therapy reduces, and may even eliminate, the need for eye drops postoperatively.



REMOVAL OF A COSMETIC IRIS IMPLANT

By Stephen G. Slade, MD

Dr. Slade demonstrates how to remove cosmetic iris implants. The implantation procedure was performed overseas, and the implants, which were made of thin silicone, were not FDA approved.

The patient had symptoms of raised IOP; inflammation; and loss of corneal cells, iris tissue, and visual acuity, all of which improved after the implants were removed with microcoaxial forceps through a 2.4-mm double incision with a hand over hand technique.

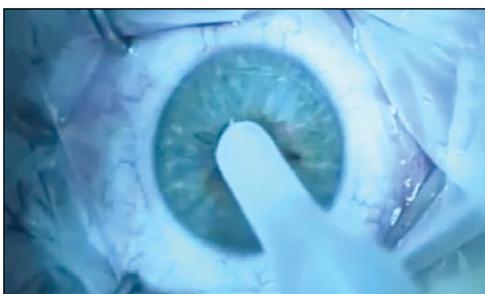


TUCKED IN LAMELLAR KERATOPLASTY WITH PHACOEMULSIFICATION

By Soosan Jacob, FRCS

Dr. Jacob presents a variation on lamellar keratoplasty in a case of severe pellucid marginal degeneration. She tucks a skirt of tissue into an inferior peripherally dissected pocket to increase the inferior corneal thickness in pellucid marginal degeneration.

Kaushal and colleagues first described this procedure, tucked-in lamellar keratoplasty, in 2008.¹



ADVANCED ALL-LASER Z-LASIK LASER EYE SURGERY

By Allon Barsam, MD

Dr. Barsam presents his variation of Z-LASIK with the Femto LDV Z (Ziemer Ophthalmic Systems). He shows an example of how to customize a thin LASIK flap to speed up healing and prevent dry eye. ■



1. Kaushal S, Jhangji V, Sharma N, et al. Tuck in lamellar keratoplasty (TILK) for corneal ectasias involving corneal periphery. *Br J Ophthalmol.* 2008;92:286-290.