

FOCUSED ON ADVANTAGE



USER REPORT CATARACT SURGERY

INNOVATIVE DESIGN FOR MINIMALLY INVASIVE CATARACT SURGERY
**HIGHEST PRECISION AND EFFICIENCY FOR
SMALLEST INCISIONS**



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In cooperation with Prof. Dr. med. G. Auffahrt Geuder developed the new **MICS DOUBLE-CROSS-ACTION CAPSULORHEXIS FORCEPS**. The double-cross-action system of the new rhexis instrument grants the surgeon more mobility for an effective and secure execution of the capsulorhexis technique.

A large advantage of the forceps is its independence of the size of phaco incision. Already an incision size of 1 mm, particularly from 1.2 mm on, suffices for the secure execution of the rhexis, meaning entry can be gained through the paracentesis.

Because of the small entry, there are a multitude of possibilities:

- MICS operations can be completely performed through the paracentesis.
- For juvenile cataract the complete operation can be performed through the paracentesis as well.
- For triple procedures the rhexis can be selected at the start of surgery through a small entry and does not have to be set up later via "open sky".
- Normal cataract surgeries can of course also be performed with the forceps at regular incision sizes.

For half a year the double-cross-action capsulorhexis forceps have been in use in Heidelberg and have proven themselves. In contrast to other forceps which were adapted from use in the posterior segment to use in the anterior segment, the double-cross-action capsulorhexis forceps convey the same haptics and the same sense of handling security as classic ultrara capsulorhexis forceps.

Even in difficult situations and with diagonal or sideways entry, the double-cross action forceps performed securely and without complications. Furthermore, the superimposed forceps branches prevent the iris from getting clamped, especially in cases of Intraoperative Floppy Iris Syndrome (IFIS). The development of the capsulorhexis technique in the 80s by Neuhann and Gimbel brought cataract surgery a significant step forward. Even 20 year later, the capsulorhexis technique is still current.



Auffarth MICS Double-Cross-Action Capsulorhexis Forceps