

The capsular Anchor in complicated cases



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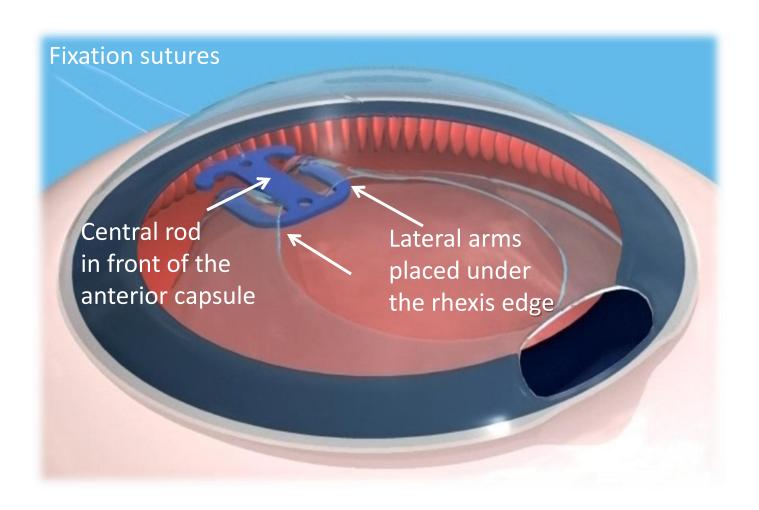
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The Capsular Anchor is approved by the CE but is NOT FDA approved

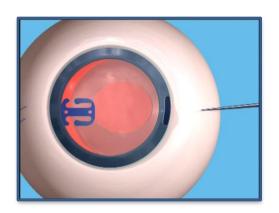
The capsular Anchor

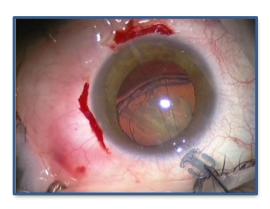
A device for the management of subluxated lenses



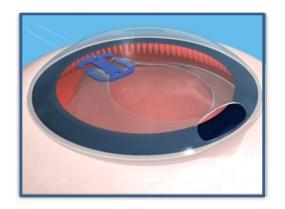
The capsular Anchor – surgical technique

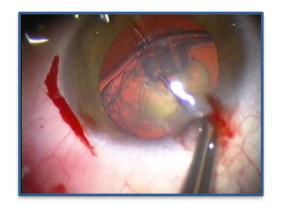
The Anchor acts as a capsular clip



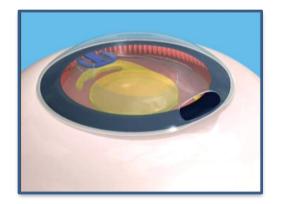


The capsular Anchor is secured to the scleral wall





A PC-IOL is implanted in a stable and centered bag





Study aim

To report clinical experience with the Capsular Anchor in complicated subluxation cases.

Methods

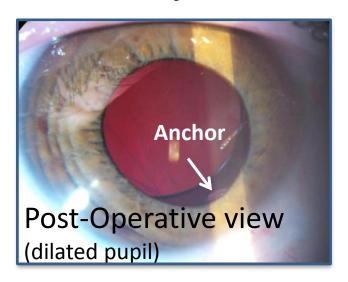
- The Anchor was used in 34 cases of subluxated lenses:
 - Marfan syndrome
 - Penetrating and blunt ocular trauma
 - Pseudoexfoliation syndrome
 - Primary ectopia lentis
 - High myopia and microsherophakia
 - Aniridia

Results

Total Nº of cases	34 eyes
Mean age (range)	47.3 years (17-87)
Etiology	
Trauma	8
Marfan syndrome	7
Cataract and aniridia	2
Other etiologies	14
Subluxated PC-IOL	3
Visual acuity (Snellen)	
Pre-op UCVA (24 eyes)	0.29 ± 0.27
Post-op UCVA (24 eyes)	0.72 ± 0.30

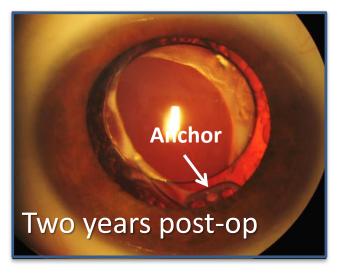
Capsular Anchor in Marfan syndrome





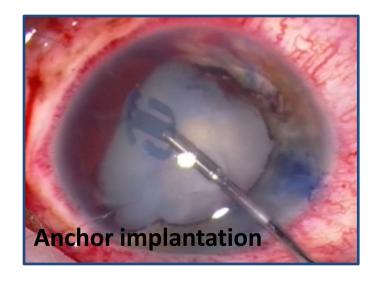
Long term follow up

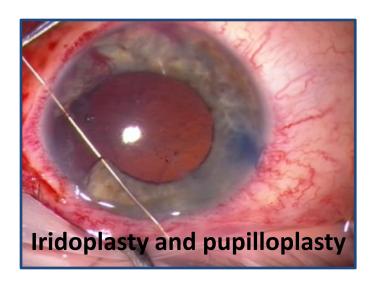




Complex paintball injury





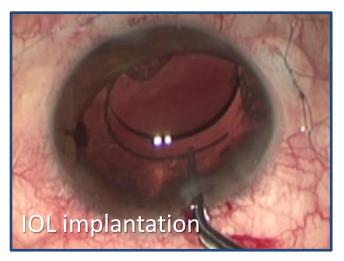


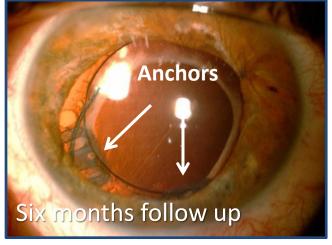


Extensive zonular injury managed with 2 Capsular Anchors









Aniridia







Subluxated intraocular lens









Video Management of 2 cases of traumatic subluxated cataracts

Case #1- Penetrating ocular trauma

The Capsular Anchor is placed early in the procedure following capsulorhexis, facilitating lens removal and stable central IOL fixation.

Case#2 –Severe blunt ocular trauma

Despite anterior capsular tear extending to the periphery, the implanted Capsular Anchor allows bag stabilization and safe traumatic cataract removal.

Conclusions

- The Capsular Anchor is an effective device for the management of subluxated lenses.
- The Anchor may be utilized also in cases in which other capsule stabilizing devices cannot be used, such as anterior capsular tear or to reposition subluxated PC-IOLs.

