



Centurion Nick Phaco Tips

Nicholas Lee
 Consultant Ophthalmologist
 The Hillingdon Hospital and The Western Eye Hospital
www.nicholaslee.co.uk

Tip 1. Prevention of Cataracts



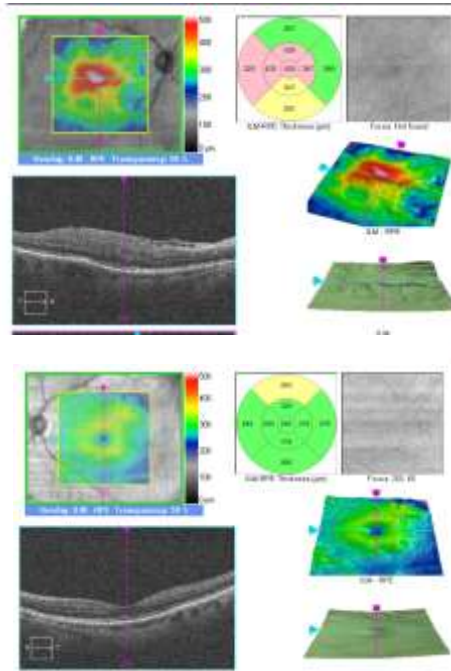
- Smoking¹ – x3 risk from 27 Studies – Nuclear Cataract formation
 - Alcoholics
- Age, Female, Family History, Race
 - UK² 30% over 65
 - 16% 65 – 69
 - 24% 70-74
 - 42% 75-79
 - 59% 80-84
 - 71% >85
 - India 74% of over 60's in India have had cataracts or operations.
- Genetics – 48-59% heritability
- Drugs – Steroids
- Diabetics

1. J Cataract Refract Surg. 2005 Dec;31(12):2395-404

2. 2010 RCO College guidelines on Cataract Surgery

Tip 2. Pre Operation OCT

- Undetected Macular Pathology
 - Normal OCT
 - Abnormal OCT
- Unexpected post op visual results
- Corneal topography as well as K's
 - Undetected Keratoconus



Tip 3 Eye Preparation 3 Minutes

- Moorfields Eye Hospital
- Tayside
- Betadine 10%
 - BSS Dilution
- Chlorhexidine 0.05%
- Antibiotics
- Minims 5%
 - 80p each



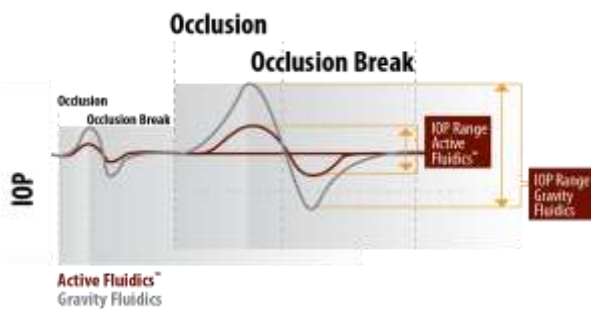
Tip 4. New Alcon Phaco Machine Centurion Alcon



Tip 5 Active Fluidics Technology

Occlusion Break Surge Comparison

The Active Fluidics™ system results in reduced occlusion breaks compared to procedures using gravity fluids¹.



1. Data on File, Alcon Laboratories.

My Experience

- Very familiar interface
- More customisation
- Footpedal Wireless
- Backup Power Supply!
- Anterior Vitrectomy Solid stability
- Ozil compatible
- New Swan tip to try



Tip 6. When the lights go out!

- Regular Irregular Event
- Predictable
- Risk Assessment
- Patient Safety
 - No Microscope light
 - No Fluid, No Phaco
- Recovery time?
 - 15 seconds to 20 minutes
- Medical Grade UPS £704
 - Long enough to finish operation

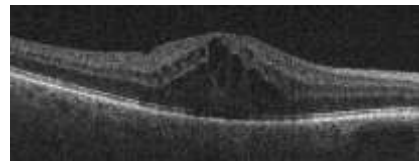
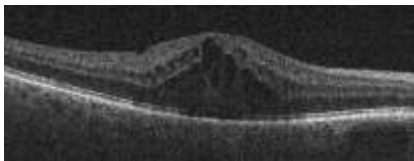


Tripp-Lite SMX1200XLHG uninterruptible power supply (UPS)

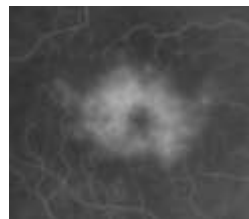
Tip 7. Iris Hooks/Expanders



- "I never regret using Iris hooks"



Tip 9. CMO/CME in the Phaco era Myth or Reality



Nepafenac Approval – Diabetic Patients NSAID

All Wales Medicines Strategy Group
Grŵp Strategaeth Meddygyniaethau Cymru Gyfan

Final Appraisal Recommendation
Advice No: 1813 – July 2013

Nepafenac (Nevanac[®]) 1 mg/ml eye drops, suspension

Submission by Alcon Laboratories (UK) Ltd

Recommendation of AWMSSG

Nepafenac (Nevanac[®]) is recommended for use within NHS Wales for reduction in the risk of postoperative macular oedema associated with cataract surgery in diabetic patients.

Scottish Medicines Consortium

Approved 2013

Submission Process Public Information Scottish Antimicrobial Prescribing Group

Home | SMC Home | News | SMC Questions (General) | Withdrawal Requests (General)

SMC Advice Strategy
Billing Rate
Funded Access Schemes
Following Submissions

Briefing note: nepafenac (Nevanac)

SMC accepted nepafenac for inclusion in the list of postoperative ocular systems associated with cataract surgery in diabetic patients.

- Nepafenac is a non-steroidal anti-inflammatory drug that is used as eye drops to reduce pain and inflammation in the eye. SMC issued its recommendation advice for nepafenac for the prevention and treatment of postoperative pain with cataract surgery in diabetic patients.
- Because the benefits do not differ a substitute for SMC. The submission refers to a product containing the identical active ingredient to that of the current eye drops and is a generic product with an equivalent rate of efficacy. It is given three times daily as eye drops in the affected eye, beginning 1 day after surgery and continuing up to 14 days following surgery. In contrast the use of nevanac contains an additional drug should be administered 10 to 15 minutes prior to surgery.
- It is only for those that require eye drops within the occurrence of macular oedema (compared with vitreous) or blurry vision of eye drops (including nevanac).
- SMC accepted nepafenac because the benefits of costs and safety mean that it was considered to offer value for money.

- England - Approved in many but not all hospitals
- No national system
- Application by every hospital/district

Prevention of CMO 84% are not Diabetic

- NSAIDs more effectively prevent CME after cataract surgery compared with corticosteroids
- Lack of randomised controlled trials Evidence
- ESCRS PREMED study population consists of 1,050 patients without diabetes and 300 patients with diabetes mellitus who require cataract surgery in at least one eye
- NSAID arm included
- 2015 Results

The Hillingdon Hospital regime for non diabetic standard risk patient
Post operation Tobradex four times a day for a week, twice per day for a week and stop
Bromfenac twice per day for one month and stop, continue another month if high risk
Clinically significant CMO pre regime 50 cases per year Post Regime – 0 – Zero!

<http://escrs.org/publications/eurotimes/12October/CME-PREVENTION.pdf>

Top 10 Tips

www.nicholaslee.co.uk

1. "Shades for the Day" , Stop Smoking
2. Pre Operation Optical Coherence Tomography
3. Minims 5% Povidone Iodine
4. Active Fluidics "Centurion"
5. Tips Ozil, Kelman 45, Swann Neck
6. UPS for Microscope & Phaco
7. Iris expanders, hooks
8. Pre Loaded Intraocular lens, Toric Intraocular lens's
9. Prevention better than cure "Non-steroidal anti-inflammatories"
10. Audit outcomes - Medisoft