



OASIS IRIS EXPANDER

Using an iris expander for small pupil cases provides sufficient visualization to perform surgery.

BY ADELAIDE PRIESTER, DO

The OASIS IRIS EXPANDER (OASIS Medical) is a molded polypropylene ring that expands the pupil and maintains access and visibility throughout the surgical procedure. The pupillary expansion device's four pockets gently cradle the iris rim without pinching or clamping. Once the expander is removed, the iris returns to its normal shape and function.

I have been using the OASIS IRIS EXPANDER for 3 years. I use it for small pupils that will not dilate well for cataract surgery and for patients with intraoperative floppy iris syndrome, which can manifest as an adverse reaction to some medications. I prefer to use these iris expanders because they go through the main incision and they are less expensive than other expanders.

There is a small learning curve when first using the OASIS IRIS EXPANDER, but after the first few uses it becomes routine. The device is simple and safe to remove at the end of the procedure, which I see as an advantage. When first learning to use this device, I recommend insertion for a pupil that is not too small, perhaps 4 mm or so. Do not try catching the iris in the pockets during initial insertion, simply insert and float the device on top of the iris. Then, I start by placing each of the four pockets, or corners, beginning with the corner closest to me and then going counter-clockwise until all four corners are in place. I use a lens manipulator to put each corner in place, and I always make sure the manipulator is positioned 90° straight up and down so that I can easily remove it from the positioning hole. Postoperatively, I often increase the patient's steroids for several days because any manipulation of the iris can cause an inflammatory response.

This article presents two cases in which I used the OASIS IRIS EXPANDER.

CASE NO. 1

I performed cataract surgery on a 64-year-old woman with a small pupil (about 2 mm) who had anterior synechiae. The pupil would not dilate, so to perform the surgery I attempted to free her pupil from the anterior capsule with viscoelastic. However, her pupil still would not dilate. At that point, I decided to use the OASIS IRIS EXPANDER.

The device comes in two sizes. If patients have a very small pupil, I choose a 6.25-mm expander, and if they have a medium-sized pupil (about 4.5 mm or larger), I use a 7-mm expander. I do not want to stretch the pupil too much and risk tearing it. I only want to expand it enough so that visibility is sustained throughout the procedure. The patient did very well. The pupil stretched, and her pupillary margin did not tear. When the surgery was complete, her pupil was larger than 2 mm, but it was round and symmetrical. The iris expander provided sufficient visualization for me to perform the surgery.

CASE NO. 2

This is an interesting case because the patient, a 56-year-old woman, started with a large pupil. I performed a femtosecond laser procedure on this patient, but by the time I moved her from the laser suite to the surgery suite, which took about 5 minutes, her pupil had decreased in size to 2 mm. I decided to use a 7-mm expander because of her previously large pupil. I also wanted to ensure that I did not catch the capsulorhexis with the pupillary expander. I like the OASIS IRIS EXPANDER because I can slip it into the anterior chamber and then catch one edge of the iris. The patient's iris was near the center of the pupil, so I knew I would not catch the capsule. When the first two pockets of the expander were in place, I moved the whole iris expander toward my incision to make sure I was engaging the iris' margin and that I would not tear the anterior capsule. It was simple to place the device without trapping the anterior capsule with the iris. The surgery was a success.

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Request more pupil expansion device information by contacting (844) 820-8940 or sending an email to customerservice@oasismedical.com.

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