**IN-THE-BAG IOL DISLOCATION**

**IRIS-SUTURED IOL OPTIONS**

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1. Subluxated IOL: Scleral or iris fixation
2. IOL exchange and secondary AC-PC IOL

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Iris-fixation of the dislocated IOL

1. Less structural manipulation
2. No new biometrics measures

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Replace and suture a new IOL

1. New incision & remove the dislocated IOL
2. New biometrics measures
1. Anatomic integrity of the iris diaphragm
2. Appropriate IOL DESIGN (≠ plate design)

History

1. 1970-1980
2. 1993: Hoh, for aphakic eyes

Advantages

1. It is possible to suture the same subluxated lens
2. No need conjunctival dissection or sulcus sutures
3. No need to re-calculate the IOL power
4. Minimum instrumental manipulation in the AC
5. Low endothelial cell loss
6. Bigger anterior chamber depth
7. Low angle compromise
Iris-fixation of the dislocated IOL

Disadvantages

1. Risk of hyphema
2. Possibility of pupillary ovalization
3. Risk of pupillary capture
4. Risk of pigment dispersion
5. Risk of secondary glaucoma
6. Delayed IOL-subluxation: suture degradation

Surgical technique

Two clear corneal incisions are performed
The IOL is placed in the anterior chamber
The first haptic is retropupillary positioned

The suture is passed through limbus-iris-limbus

The suture ends are exposed and tied

Suture the second haptic, as in the first haptic
Final positioning: to lightly press the lens optics

Cases

BSCVA: 1,0
TCR, 80 yo
In-the-bag IOL dislocation (PSX+iris-sutured IOL).

SAO, 51 yo
Traumatic cataract+glaucoma+in-the bag IOL dislocation

JUA, 49 yo
Subluxated IOL (vitrectomy+iris-sutured IOL).

JBD, 66 yo
Luxated cataract (vitrectomy+iris-sutured IOL).
Intraoperative complications

1. Bleeding...
2. Pupillary ovalization...
3. IOL decentration...
4. Others...

Postoperative complications

1. Pupillary ovalization...
2. IOL capture & descentration...
3. Endothelial cell loss...
4. Pigmentary dispersion...
Iris-fixation of the dislocated IOL

Postoperative complications

1. Pupillary ovalization…
2. IOL capture & descentration…
3. Endothelial cell loss…
4. Pigmentary dispersion… ¿glaucoma?

Iris fixation of the dislocated IOL

Two clear corneal incisions

Recommendations
Conclusions

Key points...

... ability to stabilize any IOL.
... avoids need of IOL replacement.
... technically simple.
... technically safe.

Rescue surgery!