

A New Instrument for Cleaning the Posterior Capsule

Jack T. Holladay, M.D.
Richard L. Kimbrough, M.D.
Robert H. Stewart, M.D.

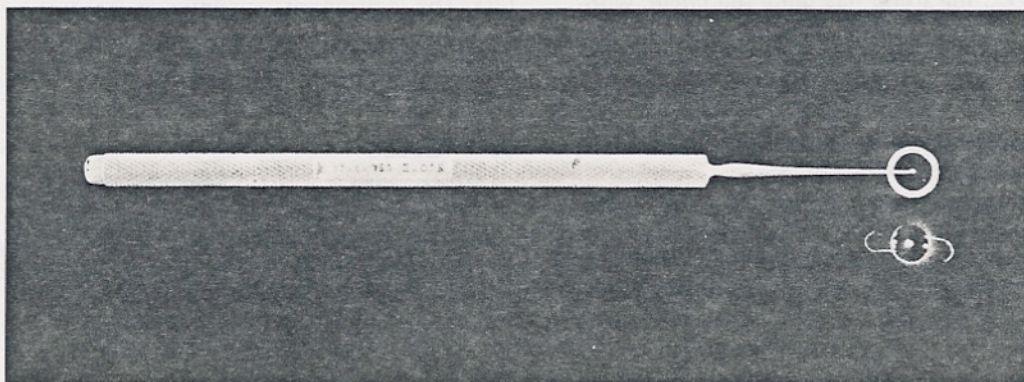


FIGURE 1A: Instrument for cleaning the posterior capsule.

The number of planned extracapsular cataract procedures has increased in recent years.¹ Management of the posterior capsule with regard to primary discission has been the subject of debate. Reports of posterior capsular opacification vary from 10% to 53% with a 2- to 3-year follow-up.² This wide variation is difficult to explain precisely because of many variables such as medications,

instrumentation, type and extent of cataract, patient population and care in cleaning the posterior capsule.

Opacification of the posterior capsule can result from the proliferation of epithelial cells on the posterior capsule. Most extracapsular surgeons will agree that the fewer plaques and epithelial cells remaining on the capsule the smaller the potential for opacification. Two instruments commonly used for capsular cleaning are the Kratz scratcher (first described in 1972 by Dr. Richard Kratz, Van Nuys, Ca., personal communication) and the 0.5-mm chalazion curette (first described in 1973 by Dr. James Gills, New Port Richey, Fla., personal communication). The Kratz scratcher is available in two forms: The original design was sand-blasted and the more recent has a

From the University of Texas Medical School, Department of Ophthalmology, Hermann Eye Center, Houston, Texas.

Requests for reprints should be addressed to Jack T. Holladay, M.D., Hermann Eye Center, Hermann Hospital, 1203 Ross Sterling Avenue, Houston, Texas 77030.

NOTES

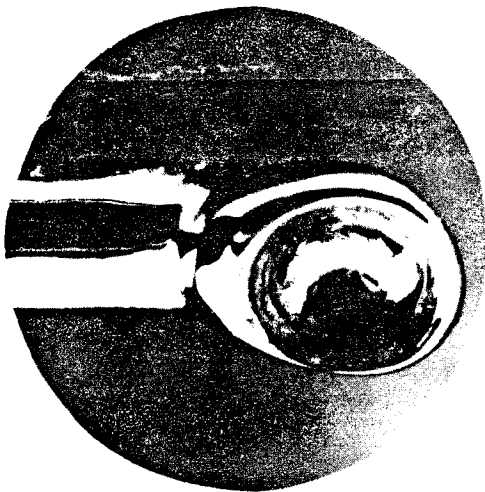


FIGURE 1B: Enlarged view of tip from oblique view.

and-impregnated surface, the latter being more
ve. Since 1972, the trend has gone full circle, with
surgeons returning to the sand-blasted surface
se of the increased safety margin. The instrument
is ideal for removing epithelial cells and loosely
ent plaques. For larger, adherent plaques, the
ion curette is better able to achieve edge separation
opacity and permits more rapid removal.

ccurred to us that by sand-blasting the back of the
ion curette, the resultant instrument would have the
ages of each of the previous instruments. We have
his modified curette and found cleaning of the



FIGURE 1C: Enlarged view of tip from side view.

posterior capsule to be an easier and less time-consu-
task. The instrument* is shown in Figure 1.

*Manufactured by Storz Instrument Co., 3365 Tree
Industrial Blvd., St. Louis, Mo. 63122.

REFERENCES

1. Worthen DM, Boucher JA, et al: Interim FDA rep-
intraocular lenses. *Ophthalmology* 86:85, 1979.
2. Emery JM: *Current Concepts in Cataract Surgery: Se-*
Proceedings of the Fifth Biennial Cataract Surgical Con-
ed 1. St. Louis, CV Mosby Co, 1978, p 119.