Surgical Solutions

from Katena

Instruments to help with those frustrating situations

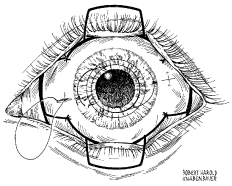
PROBLEM: You have difficulty with extremely fine sutures slipping through the jaws of your tying forceps when you are suturing a corneal transplant.

SOLUTION: The Maumenee Tying Forceps, with its interlocking jaws, was designed specifically to eliminate this problem. One side of the jaw has a V-shaped concave surface and the other a V-shaped convex surface which are perfectly matched (see illustration). The jaws interlock, preventing even the most delicate sutures from slipping out, while a guide pin in the handle of the forceps helps to keep the jaws properly aligned.

K5-5234 Maumenee Tying Forceps, straight K5-5235 Maumenee Tying Forceps, angled

PROBLEM: You are going to perform a corneal transplant and want to avoid scleral collapse which could cause anterior displacement of the iris, lens and vitreous.

SOLUTION: The McNeill-Goldman Ring has been developed to provide firm global support with only four strategically placed sutures (see illustration). This ring features medial and temporal openings for greater access to the surgical field and two lid retractors to prevent eyelid closure by the patient.



K1-7311 McNeill-Goldman Global Fixation Ring, small
K1-7312 McNeill-Goldman Global Fixation Ring, med.
K1-7313 McNeill-Goldman Global Fixation Ring, large

"Not every eye needs a ring for PK surgery, but I can't always tell ahead of time which ones will and which ones won't – so I always use it." - James McNeill, MD.

PROBLEM: You want to polish the cornea after excising a pterygium but the small motorized rust ring remover in your set does not have enough torque for that purpose.

SOLUTION: The Katena Pterygium Drill is specifically designed for polishing the cornea after excision of a pterygium. The powerful motor combined with a hi-energy lithium battery supply the necessary torque for smoothly polishing residual lamellar tissue. A larger 5mm diameter diamond burr is also available for polishing a greater surface area.

2/3 actual size

K2-4920 Pterygium Drill, complete with 3.5mm burr, lithium battery and case
K2-4925 Diamond Burr, round 5mm diameter K2-4921 Lithium Battery

Solutions for Cataract

PROBLEM: You want to use a chamber maintainer for continuous irrigation but you are not confident that you will get enough flow and/or the tip will stay in the incision.

SOLUTION: The "Positive Grip" tip of the Brierley Chamber Maintainer has three single direction fins on its anterior and posterior surfaces to securely engage the corneal stroma preventing the tip from "popping" out during surgery. It is almost impossible to pull the tip out of the incision except when it is intentionally turned 90° for removal. The flared shaft seals the incision while its large 20-gauge diameter thin-wall tip provides ample irrigation to maintain the chamber.

K7-6715 Brierley Chamber Maintainer
titanium w/silicone tubing and adaptor
(U.S.Patent Number 6,004,302)

PROBLEM: Your lens hook slips off while attempting to manipulate the IOL in the capsule.

SOLUTION: The recessed, bulbous shaped tip of the Lester Lens Pusher positively engages the lens for manipulation without slipping off. With this lens manipulator you can push, pull, lift or depress an IOL with or without holes. The vaulted shank enables you to engage the inferior haptic without touching the dome of the IOL.

K3-2691 Lester Lens Pusher

PROBLEM: You're concerned about contact with the posterior capsule during phacoemulsification, especially in cases with a shallow chamber.

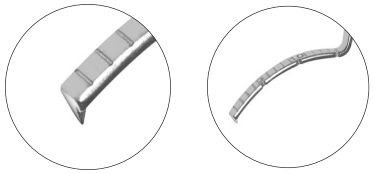
SOLUTION: In situations where the chamber is shallow or where surge is proving to be a problem, the crescent shaped bend of the Cole Nucleus Manipulator provides the maximum distance between the phaco tip and the posterior capsule. The wedge shaped edge on the anterior surface is used to direct and divide nuclear fragments against the phaco tip.

K3-2424 Cole Nucleus Manipulator

Solutions for Strabismus

PROBLEM: You want to measure and mark the distance from the limbus to the location for the muscle reinsertion and find it difficult to accomplish with a Castroviejo caliper.

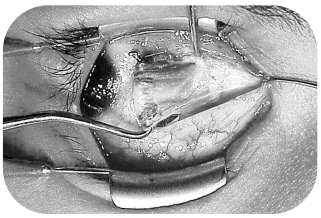
SOLUTION: The Helveston Scleral Marking Ruler is designed to simplify measuring and marking the sclera for strabismus surgery. The ruler is vaulted to conform to the curvature of the globe and features lines in 1mm increments with a single tooth at the tip to mark the reinsertion site. To attach a muscle 6mm from the limbus you would place the 6mm mark of the ruler on the limbus and indent the sclera with the pointed tip of the ruler to identify the location for the sutures.



K3-9030 Helveston Scleral Marking Ruler

PROBLEM: You are going to perform a surgical recession on a tight extraocular muscle and you are concerned about needle placement and possible scleral perforation.

SOLUTION: The Bishop Muscle Hook is small enough to slip under a tight muscle while the moveable protective plate provides an extra margin of safety so that needles placed into the muscle cannot penetrate the sclera. It is also an excellent tool for teaching residents.



K3-6854 Bishop Muscle Hook with moveable protective plate

PROBLEM: When performing strabismus surgery you prefer to use two Moody Fixation Forceps instead of a traction suture to rotate the globe, however, you frequently have difficulty locking and unlocking the forceps.

SOLUTION: The old "snap lock" on the Moody Fixation Forceps has been replaced with a thumb activated sliding lock. This new lock eliminates the problem of bent or misaligned catches which would not open or close easily. The sliding lock is designed to securely hold the forceps in a closed position and it easily unlocks with a simple movement of the thumb.

K5-2553 Moody Muscle Forceps, lock location for left thumb

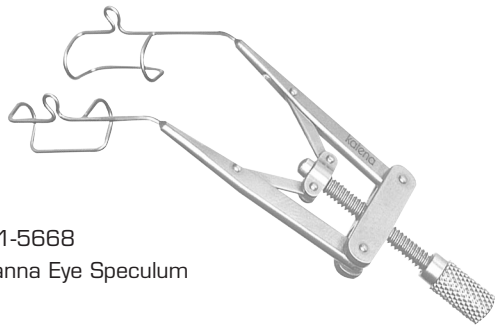
(K5-2554 shown)

K5-2554 Moody Muscle Forceps, lock location for right thumb

Surgical Solutions

PROBLEM: When preparing for a trabeculectomy procedure, you find it difficult to reliably anchor the traction suture to the drape.

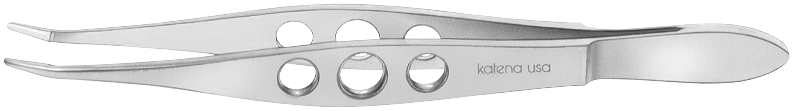
SOLUTION: This speculum is designed with looped wire posts on the top of the blades for anchoring the traction suture. With the suture anchored to the speculum instead of the drape, the globe can be rotated inferiorly in a very stable fashion.



K1-5668
Tanna Eye Speculum

PROBLEM: After performing a LASIK procedure you like to apply a therapeutic contact lens but often have difficulty picking up and handling the lens without creasing or damaging it.

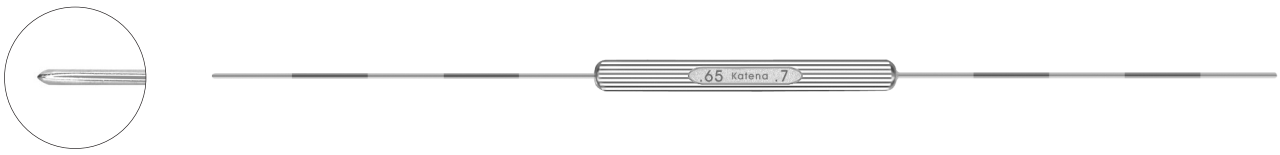
SOLUTION: Picking up and handling a delicate therapeutic contact lens is easily accomplished with the textured jaws of the new Barraquer Cilia Forceps. Its broad jaws provide just the right amount of surface contact to safely handle the lens without teeth or serrations which can damage the lens surface. It is also a great instrument for grasping and extracting eyelashes without slipping, which can be a problem with other cilia forceps.



K5-6000 Barraquer Cilia Forceps

PROBLEM: Insertion of the lacrimal probe is difficult and you are concerned about creating a false duct.

SOLUTION: The Miyake Lacrimal Probes were designed for ease of insertion with greater control to avoid the creation of a false duct. Each probe has a 1mm long taper at its end to facilitate initial entry into the punctum. Further insertion is easily accomplished by rotating the round handle between two fingers. All probes are marked at 10mm from the tip for measuring the approximate distance to any obstruction within the duct. (U.S. Patent Number 6,093,198)



K7-2480 set of five probes
K7-2481 .45 and .5mm diameters
K7-2483 .55 and .6mm diameters
K7-2485 .65 and .7mm diameters
K7-2487 .75 and .8mm diameters
K7-2489 .85 and .9mm diameters

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