

Canaloplasty Advances With New Approval

Glaucoma Treatment Could Be More Widely Adopted.

■ Glaucoma patients may have a promising new treatment option for the reduction of elevated IOP. Very small, complex catheters can now be inserted into small drainage structures within the eye, enabling glaucoma surgeons to enlarge these compromised outflow passages for the treatment of glaucoma. These microcatheters are measured in microns, or approximately the size of four to five human hairs combined.

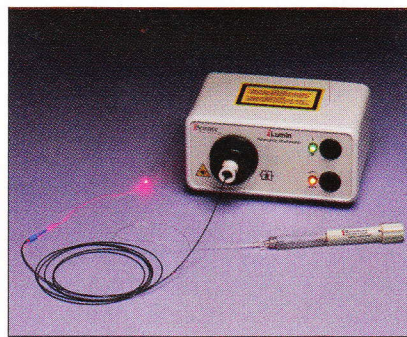
iScience Interventional, Menlo Park, Calif., recently received expanded indications for use from the FDA for their microcatheters for specific treatment of primary open-angle glaucoma (POAG).

“We have been using the same surgical procedures for the last 50 years with only small modifications,” noted Richard A. Lewis, M.D., past-president of the American Glaucoma Society. “Historically, we have been looking for ways to drain fluid out of the eye by using surgically created holes. A relatively new procedure known as the canaloplasty now rejuvenates the eye’s natural system to lower pressure.”

This minimally invasive surgical technique uses a 250 μ m micro-

catheter to access the drainage channels and utilizes the eye’s natural drainage system to remove fluid from the eye. This interventional procedure has been performed worldwide for more than 3 years.

Supporters of canaloplasty say that, much like its more advanced predecessors in interventional cardiol-



Canaloplasty microcatheter and fiber optic illuminator.

ogy and interventional neuroradiology, canaloplasty is emerging as a practical alternative to more invasive surgical procedures. It is believed that canaloplasty will have its major appeal with glaucoma specialists who can master the learning curve for this demanding procedure.

“Canaloplasty strengthens ophthalmologists’ options for patients

with primary open-angle glaucoma,” asserts Dr. Lewis. “Ophthalmologists have recognized for decades that the ideal solution to glaucoma would restore or maintain the eye’s natural drainage system. The canaloplasty does just that.”

Bradford J. Shingleton, M.D., of Ophthalmic Consultants of Boston and associate clinical professor of ophthalmology, Harvard Medical School, added, “The canaloplasty is a procedure that is grounded in high technology and science. Over the past several years, respected researchers in Europe, Canada and the United States have amassed clinical data that support the safety and efficacy of canaloplasty for patients with POAG, as well as the significant reduction of costly medications.”

During a 30-minute canaloplasty procedure, the surgeon inserts a microcatheter through a small incision, enlarges the main drainage channel and places a small suture inside the canal to maintain the opening so it can function normally. Once completed successfully, this procedure ideally rejuvenates the native drainage system, thus lowering the pressure in the eye.

IN THE NEWS

■ **Visian sales increase.** STAAR Surgical Company reported that global sales of the Visian ICL phakic lens increased approximately 52% during the third quarter of 2008. Sales in the United States increased approximately 25% over

year-ago levels.

“An increasing number of patients and physicians are choosing the Visian ICL as an alternative to LASIK, evidenced by our growth rates of 30% during the first quarter, 40% in the second quarter and

approximately 52% for the third quarter,” said Barry Caldwell, STAAR president and CEO.

The Visian ICL has now been implanted in approximately 125,000 eyes worldwide.

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