APPLIANCE

MODIFICATION OF BELL'S ERISOPHAKES*†

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THE use of the suction cup to aid in the extraction of a cataractous lens has become very popular. Hulen (1911) recommended this method, and its use has been encouraged by the work of many surgeons, including the Barraquers, Dimitry (1933), Nugent and Fisher (1933), and Castroviejo. The Bell and Harrington erisophakes are now very frequently used.

FIG. 1(a).—Contact lens suction cup, with needle as in the original Bell's erisophake.

(b).—B.D. adapter (H-468-L).

(c).—Modified erisophake, with suction needle inserted into the luer lock terminal of the B.D. adapter.

I have now designed a modified form of the Bell erisophake which has several advantages in use. The original instrument was too light to handle with precision, and too short to manipulate. I have therefore added a B.D. adapter (H-468-L) which gives length and manoeuvrability to the instrument. The weight is now much the same as that of eye-scissors and forceps, and the added weight is centralized to act as a fulcrum for the manipulation and extraction of the lens, once the suction has been applied. This luer lock terminal allows the suction needle to be more easily removed for cleaning or storage.

REFERENCES

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