

**Silicone application sets**

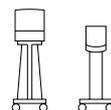
# MAKING THE DIFFERENCE WITH FAST SILICONE OIL INJECTION & EXTRACTION



NEW

**Features and benefits**

- Extraordinary fast injection
- Efficient trocar-based extraction
- Time saving as the valve remains in the trocar
- Easy connection of adapter tubing for maximum user comfort
- Snap lock cannula 23 G for safe connections
- Universal cannula for all Gauge sizes



Silicone application set, **10 cc** ⊗ ● 23 G  
incl. universal visco cannula ● 25 G  
● 27 G

VV690350

**Universal** visco cannula ⊗ ● 23 G  
● 25 G  
● 27 G

VV690340

Silicone application set, **10 cc** ⊗ ● 23 G  
incl. **snap lock** visco cannula

VV690353

**Snap lock** visco cannula ⊗ ● 23 G

VV690343

Silicone application set, **10 cc** ⊗ ● 20 G  
incl. cannula

VV690310

All articles are delivered sterile, single use, box of 10

## Filling and removing a silicone oil endotamponade

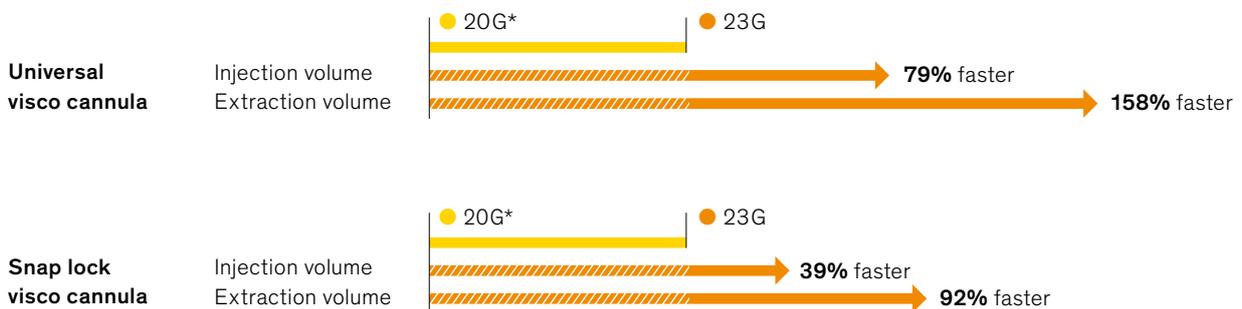


**MD Michael Georgopoulos, chief consultant for vitreoretinal surgery, Department of Ophthalmology, Medical University of Vienna, Austria reports his experience with the silicone application set:**

«I usually use different expanding gases for an endotamponade. Only in more complicated cases do I use silicone oil, which I actively fill into the air-filled eye. To fill the eye, I place the Oertli Universal Visco Cannula on a syringe, which is connected to a trocar, in the same stable way that the BSS infusion is connected to the trocar. Using a 23-gauge approach, the system fills the eye very quickly. It takes only about 5 minutes for me, using 5,000 cs silicone oil. Lower-viscosity oils (1,000 or 2,000 cs, for example) would be faster, but I have the best clinical experience with 5,000 cs. I wait at least 3 months with the silicone oil in the eye, and then I check to verify that the retina is perfectly attached and there are enough laser scars to protect the retina from redetachment.

To remove the silicone oil with our older system, we cut a sclerotomy and filled in the BSS; the oil came out through the sclerotomy on its own. This passive extraction took about 5 minutes, and then we sometimes spent another 10 minutes or so suturing the sclerotomy and the conjunctiva. Now I actively extract the silicone oil through the 23-gauge trocar and the snap-lock visco cannula with no need for sutures. With a trocar-based system, I remove the trocar and am finished with surgery. The time saved is enough to make a difference in the experience of patients and surgeons, as well as to affect management of the operating room.»

## Speed comparison between the previous Oertli 20G\* and the new 23G solution:



\*through 23G Caliburn trocar system



The **universal** visco cannula is placed in all available Caliburn trocar systems and held manually for maximum performance.



The **snap lock** visco cannula is easily snapped in the 23G Caliburn trocar and provides a reliable connection.



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