**Ocular Landers Wide Field Temporary Keratoprosthesis**

<table>
<thead>
<tr>
<th>Product Code</th>
<th>Image Mag</th>
<th>Contact Diameter</th>
<th>Static FOV</th>
</tr>
</thead>
<tbody>
<tr>
<td>OLTK - 7.2</td>
<td>2.29x</td>
<td>7.2mm</td>
<td>28°</td>
</tr>
<tr>
<td>OLTK - 8.2</td>
<td>2.29x</td>
<td>8.2mm</td>
<td>30°</td>
</tr>
</tbody>
</table>

Produced with:
Maurice B. Landers, III, M.D.
Chapel Hill, NC

**Design**

- The Landers Wide Field Temporary Keratoprosthesis is designed with a convex anterior surface to facilitate viewing of the peripheral retina and the posterior pole during vitrectomy and corneal transplant surgery.
- This lens has six suture holes around its peripheral edge. Lens design is suitable for phakic, aphakic and pseudophakic eye.
- Once the sutures are in place, the lens/cornea interface acts as a seal and provides a closed system for a vitrectomy procedure.
- May be used in conjunction with our handled vitrectomy lenses (OBVI, OFVI, OMVI, OPGVI, OPVI-3) or the Machemer Flat Vitrectomy Lens (OLV-5).

**Technique**

- A 7.0mm or 8.0mm corneal trephine is used to remove corneal button. The 7.0mm is most commonly used.
- The Keratoprosthesis (0.2mm larger than the button) is placed through the opening and rotated down into the cornea.
- The Keratoprosthesis is sutured to the cornea using 8.0 nylon suture.
- A Flieringa ring should also be sutured to eyes with flexible scleras.
- The large aperture provides a wide angle view of the posterior retina and permits clear visualization of the peripheral retina when combined with scleral depression.
- In some cases, the fundus view can be improved by placing a Machemer Flat Vitrectomy Lens on the keratoprosthesis with a drop of visco-elastic material between the lenses.
- At the conclusion of the pars plana vitrectomy, the sutures holding the keratoprosthesis are removed. The donor button is sutured in place.

**Cleaning & Disinfection**

See Cleaning Method 1