

Yamani technique made easy

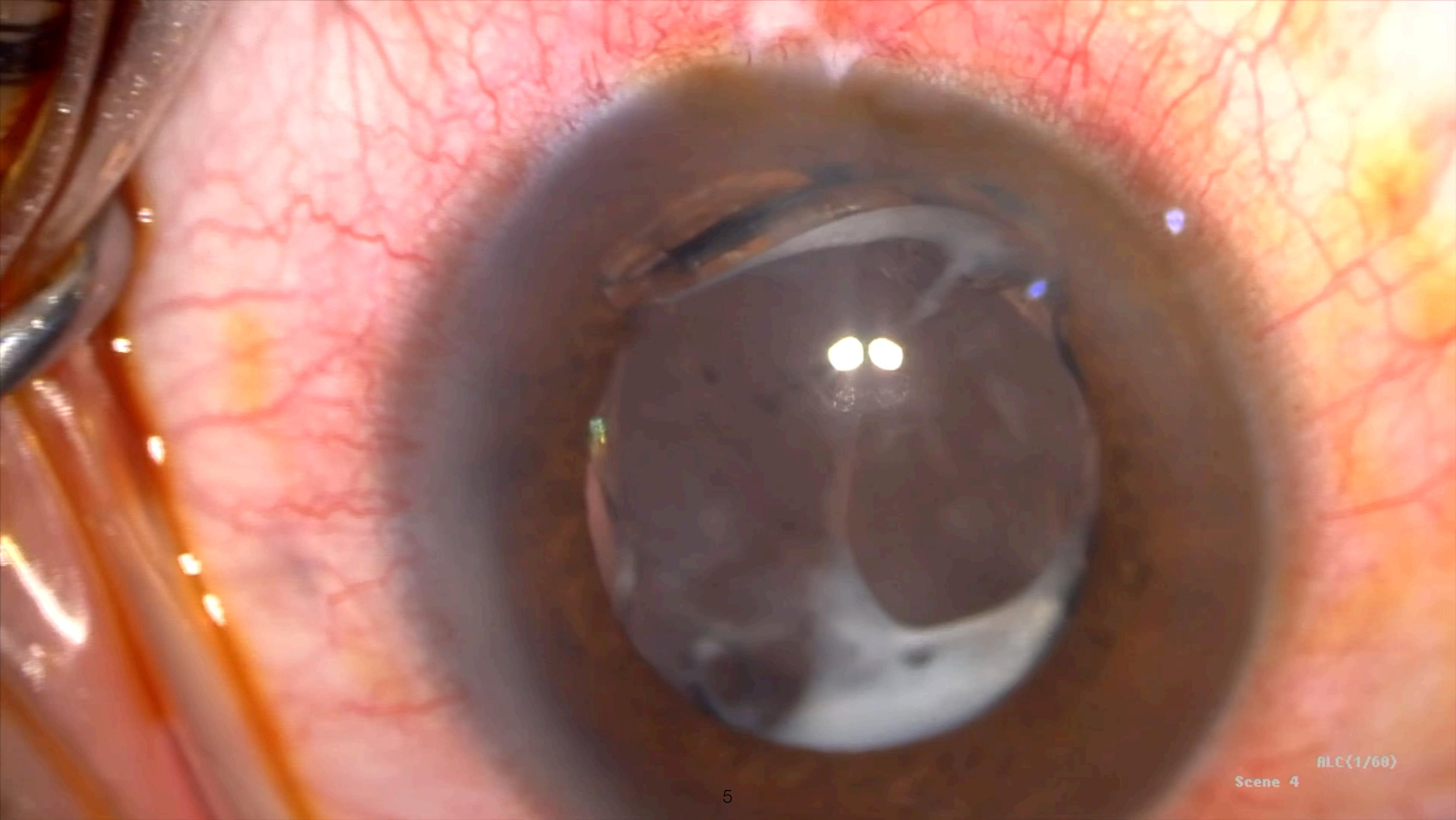
**No financial disclosure**

# Yamani tricks

- Select the three piece IOL.
- Make sure the needle is Compatible with IOL haptics.
- Clear AC and pupil margin from any vitreous.
- Infusion maintainer is essential.
- Proper marking.

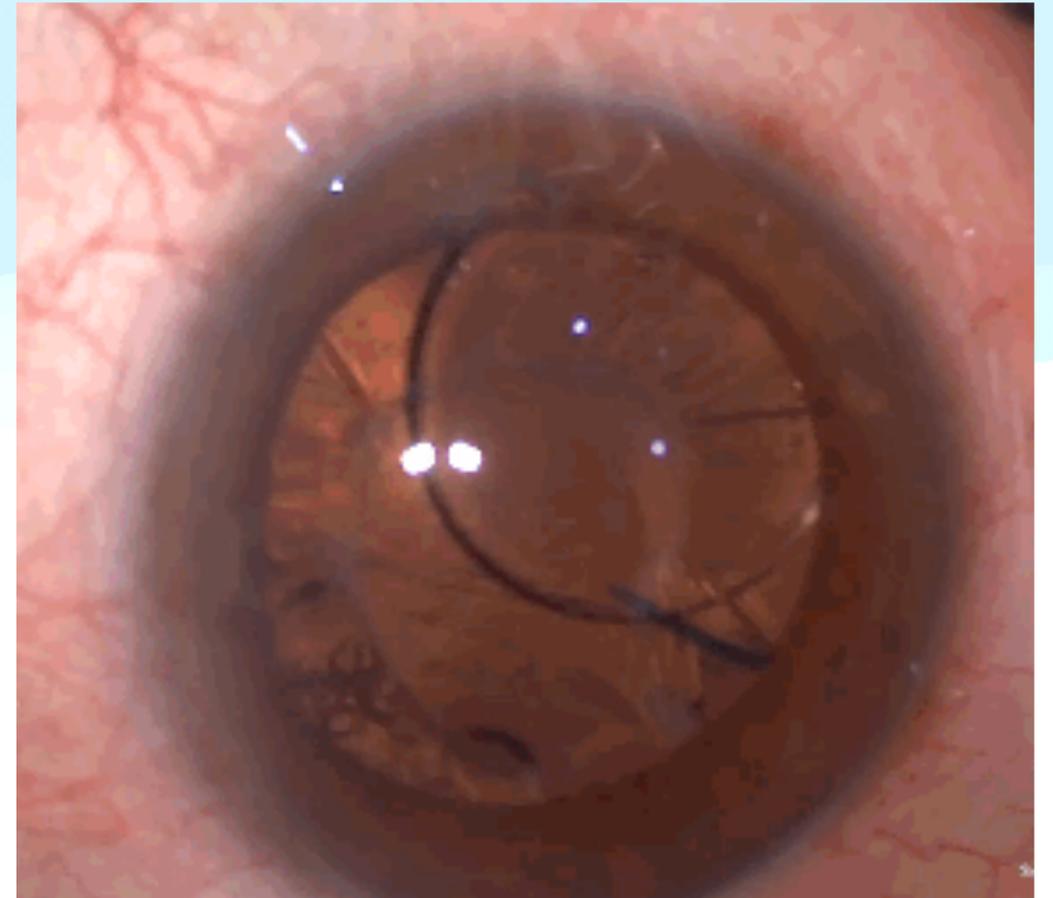
# Yamani tricks

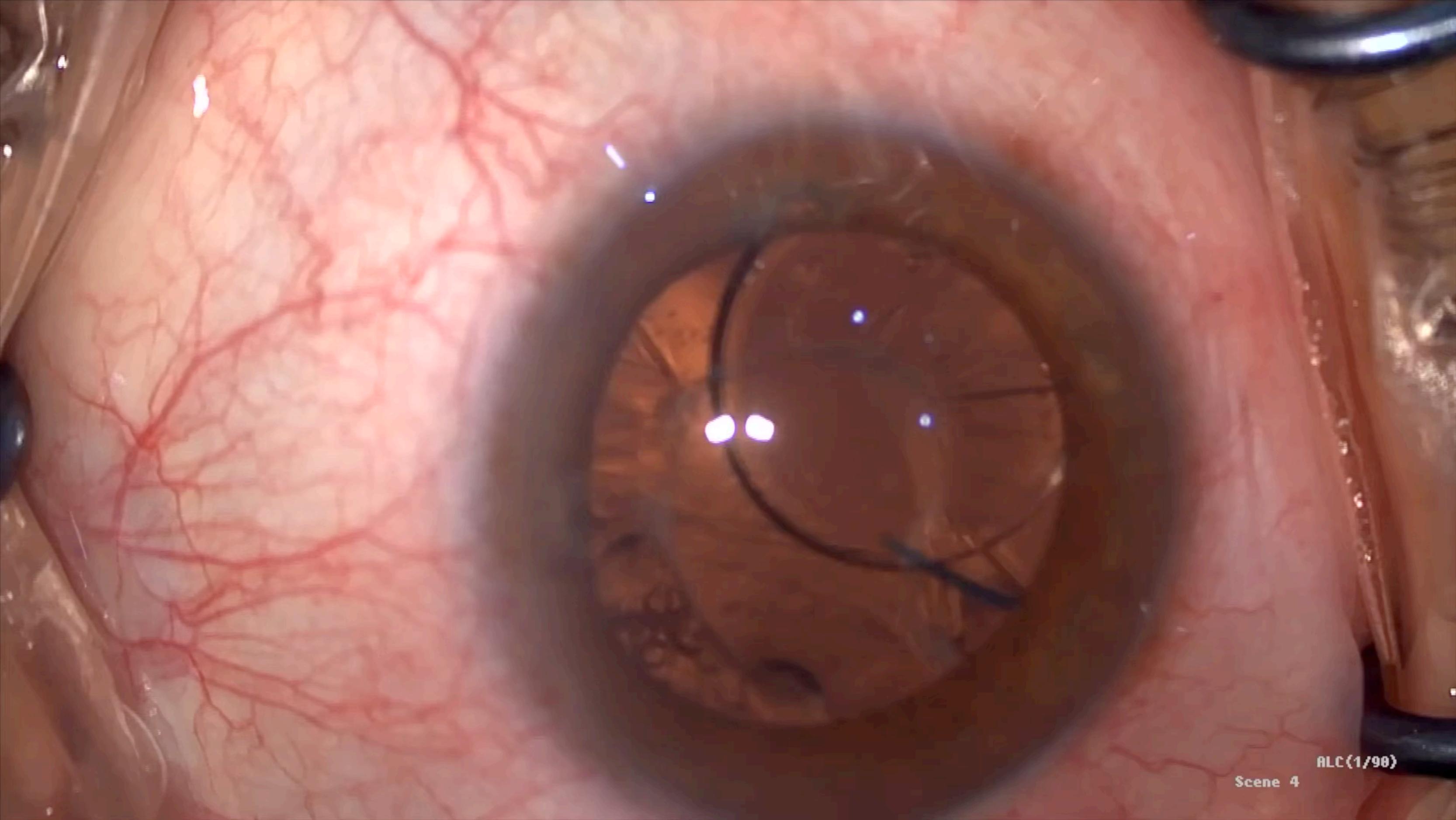
- Use non serrated micro-forceps.
- It is a bimanual technique.
- You may need iris support for the first haptic.
- All IOL haptics are not the same.
- No aggression to avoid haptic break.
- **Leave the first needle inside the eye without the syringe. For IOL orientation.**



# Case

- Male patient.
- 3 Ys ago, phaco+ 3 piece IOL.
- Examination: BCDVA 0.2
- Slit lamp: -phimotic bag + IOL displaced inf.  
-posterior segment: no abnormalities.
- Biometry for IOL exchange.





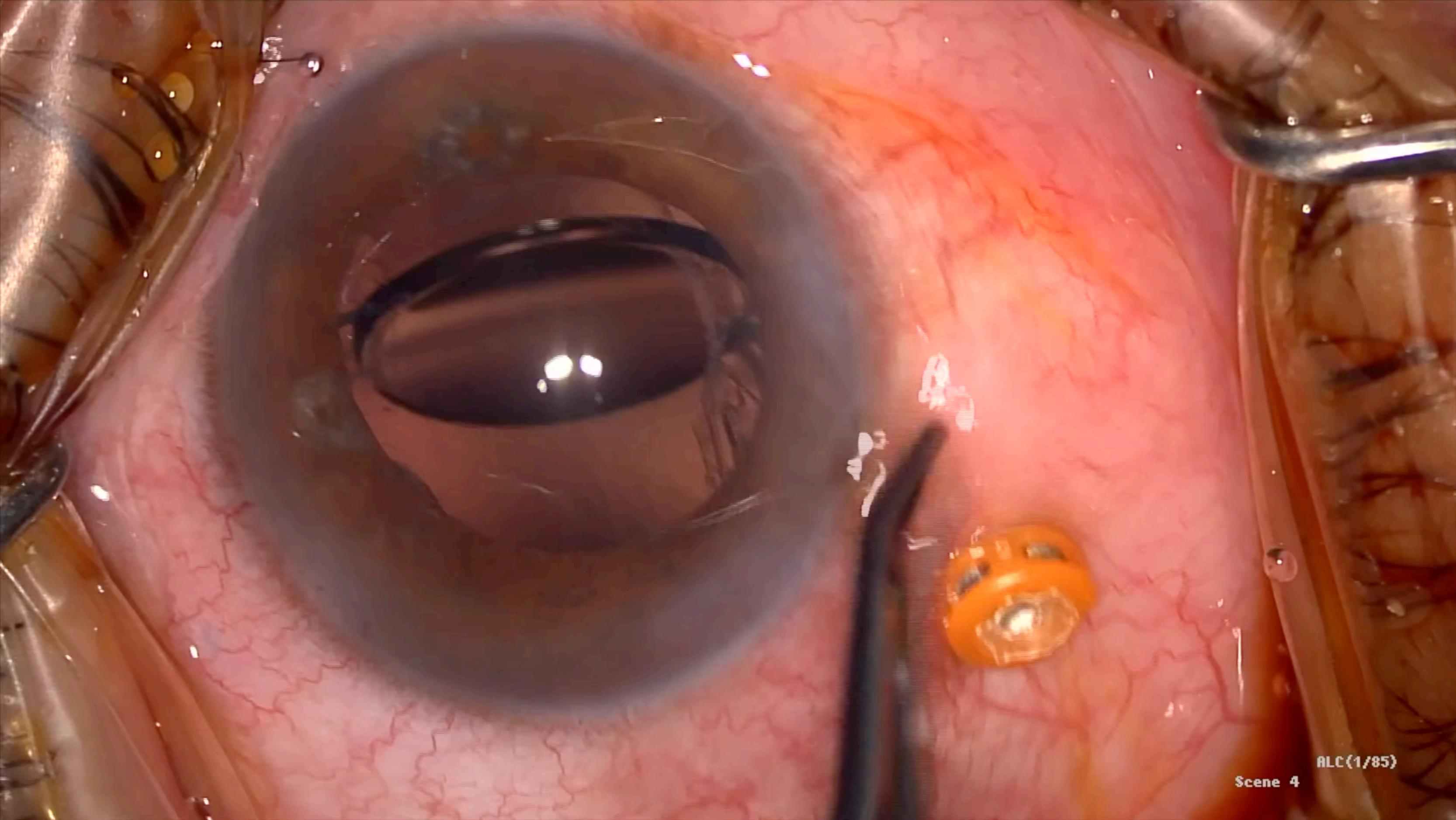


1st. day  
**VA 2/60**

# What to do?

- A. Remove the IOL and implant AC IOL.
- B. Refix IOL.
- C. Remove IOL and implant another one flanged technique.
- D. Refere to posterior segment surgeon.
- E. Non of the above.





# Take home message

- Opening the bag in the first surgery in my mind was the best solution if succeeded.
- Or I should not trust the implanted IOL and to change it from the first surgery.
- Learning multiple options for such situation is the golden rule.
- Don't leave your patient tell giving him the best solution.
- Be prepared usually for the non ideal results.

**THANK YOU**