







Additive Procedures for keratoconus in 2025

Ahmed Elmassry MD.PhD
Professor of Ophthalmology,
Alexandria University,
Egypt.















Team of ACED study

- Ahmed Elmassry MD.PhD
- Mohamed Shafik MD.PhD
- Mohamed Hosni MD.PhD
- Miltos Ballidis MD.
- Marwan Gabra MD.

- Moanes Abdullah MD.
- Shahiera Rashad MD.PhD
- Ahmed Sharaby MD.
- Shaimaa Elbassiouny MD.
- Ibtesam Yacout











ACKNOWLEDGEMENT

Shaimaa Elbassiouny

Consultant Ministry of Health

Ahmed Sharaby

Consultant ministry of health











What is XENIA Implant

Intrastromal decellularized Porcin Corneal Lenticular Implantation

De-cellularization to remove foreign cells including antigether. then it is crosslinked 500 times.









What is XENIA Implant

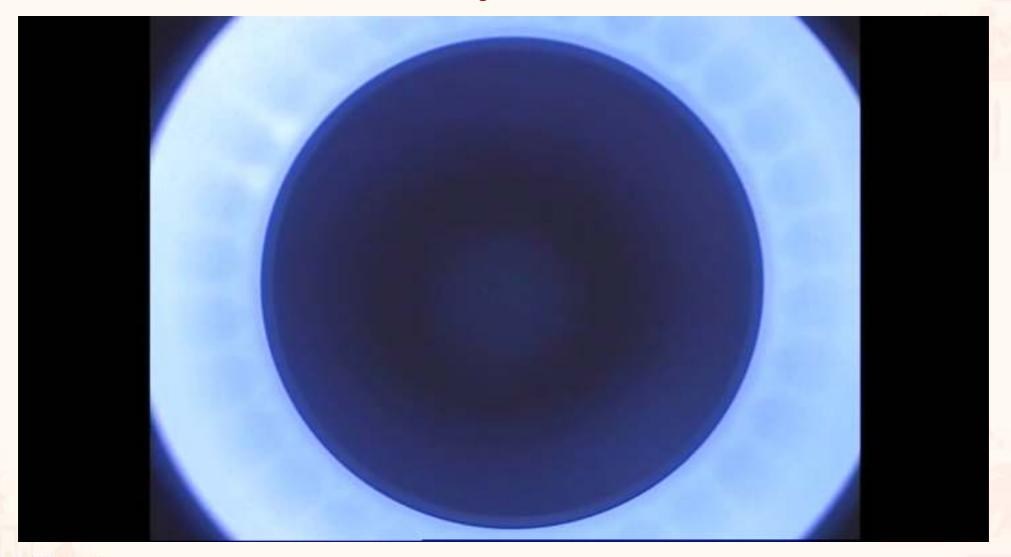
The implant is significantly stronger than the patient's own stroma:

- XENIA stabilizes the patient's cornea.
- Flattening the corneal topography.
- Regularizes the patient cornea.
- Reducing higher order aberrations.



XENIA Implantation







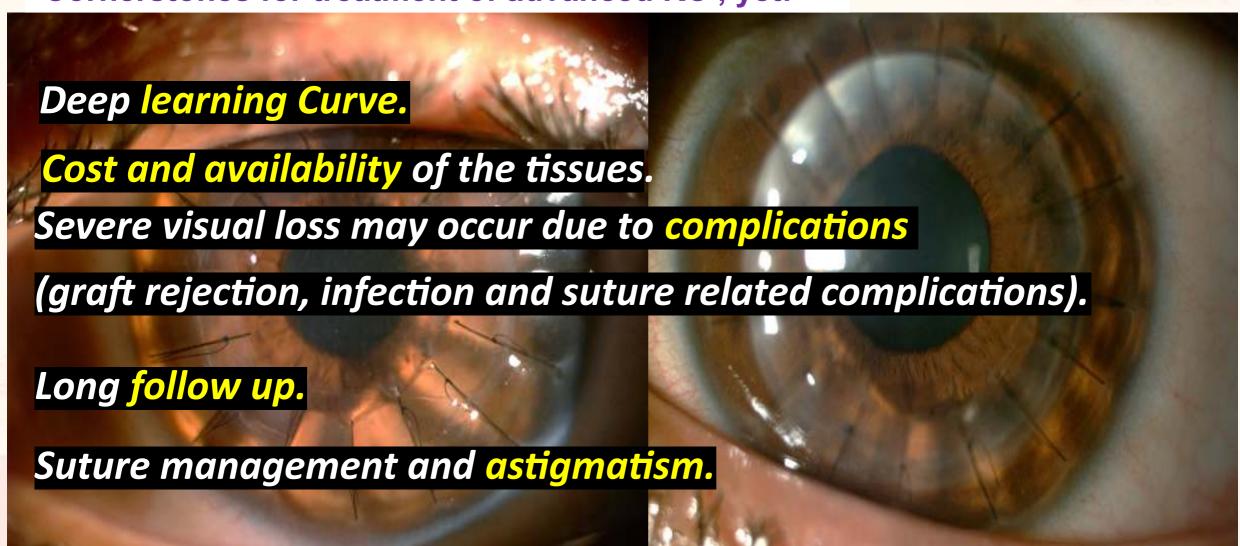


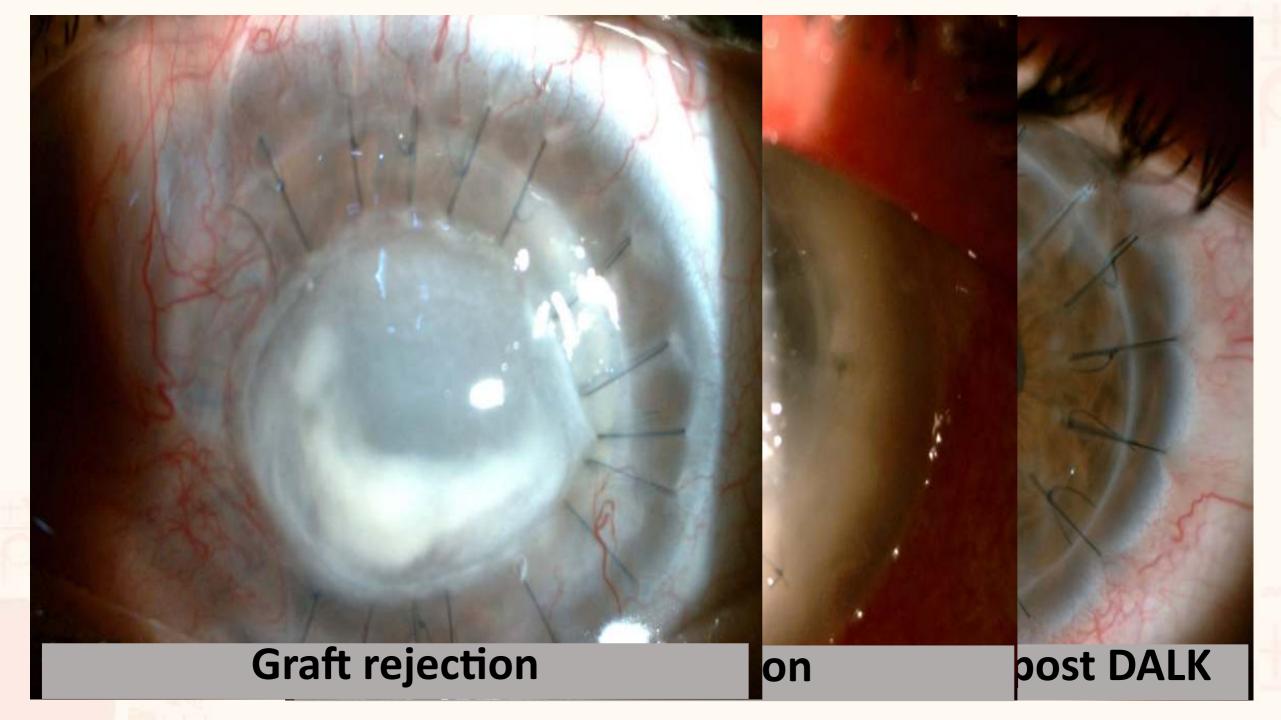


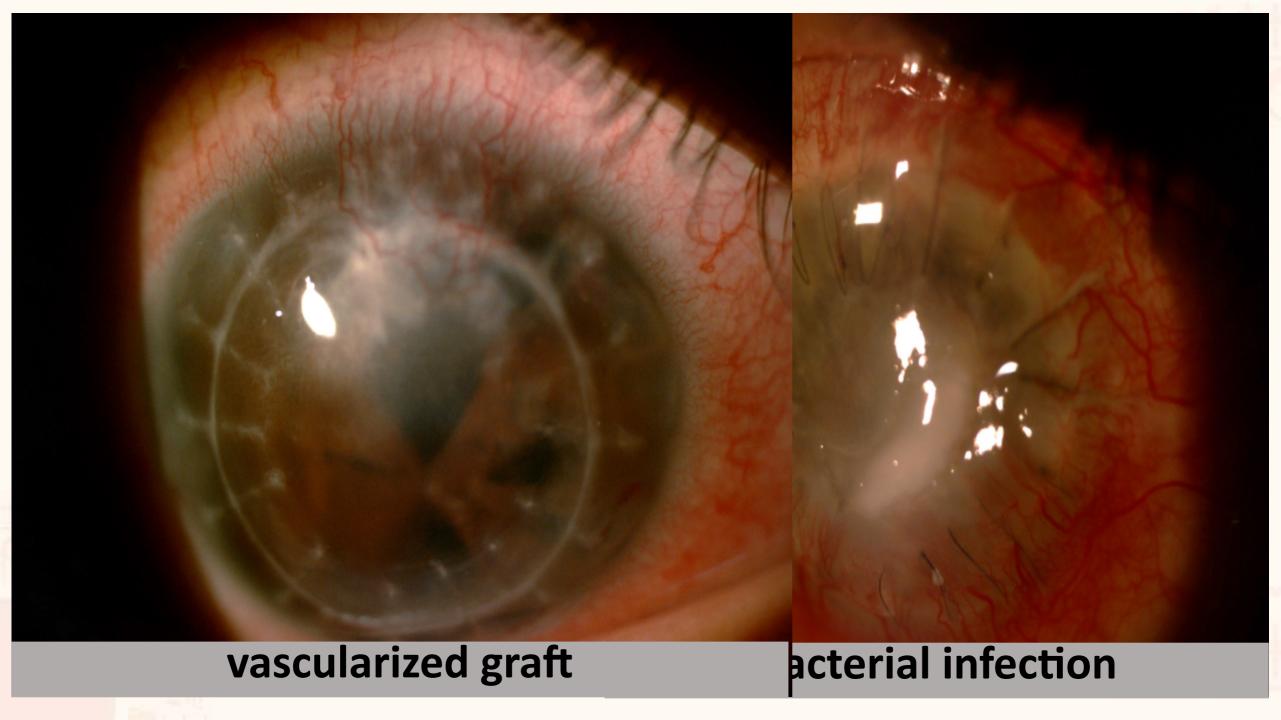


DALK & PKP

Cornerstones for treatment of advanced KC, yet:













Why Additive Procedures (Xenia) are safer than DALK in KC

- 1) Superior Biocompatibility.
- 2) Minimizing Surgical Complications.
- 3) Clinical Trials and Real-World Evidence.
- 4) Regulatory Approvals and Certifications.
- 5) Cost-Effectiveness.
- 6) Conclusions.









Why XENIA implant is safer than DALK

1) Superior Biocompatibility

- XENIA implants integrate easily with the human body.

- NO rejection rates compared to other implants.

- Reduced risk of infection and inflammation.









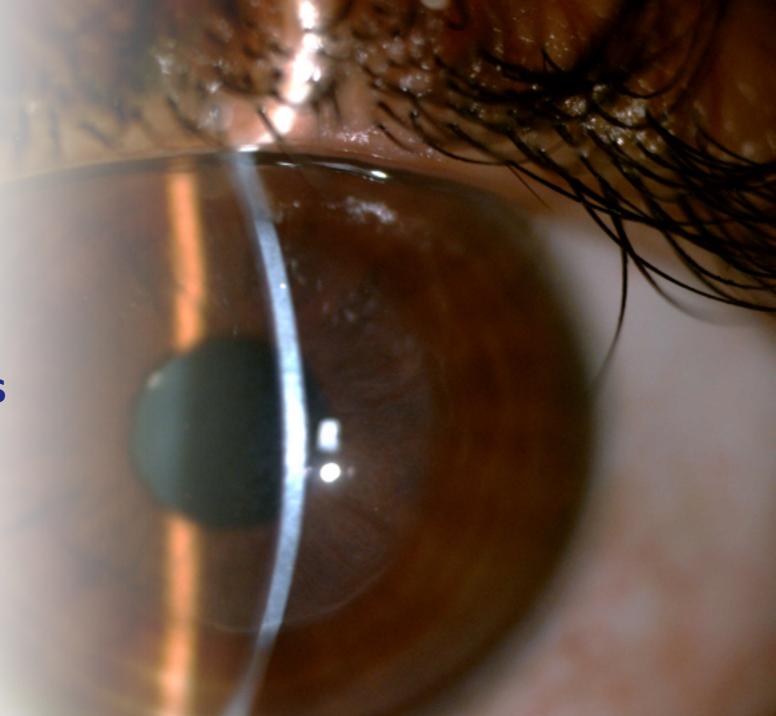
Why XENIA implant is safer than DALK

2) Minimizing Surgical Complications:

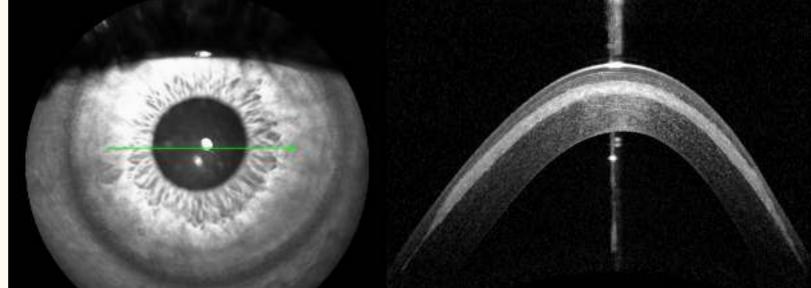
- XENIA's design reduces surgical risks.
- Easier implantation process, leading to shorter surgery times.
- Faster recovery periods for patients.
- Comparison with traditional implants (fewer complications, better results).

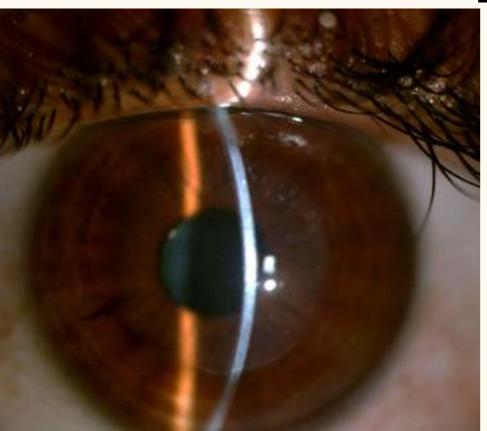
3) Clinical Trials and Real-World Evidence

successful clinical trials and studies on XENIA implants.



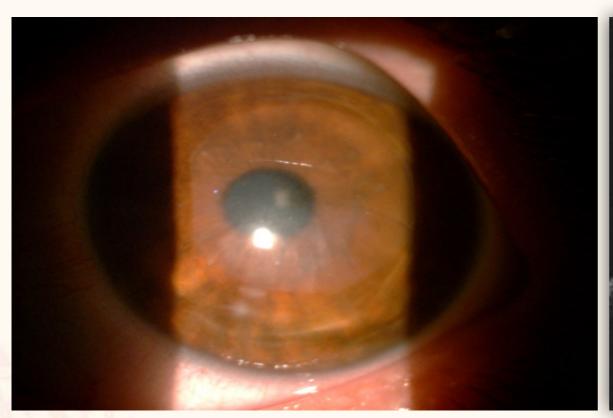
Xenia

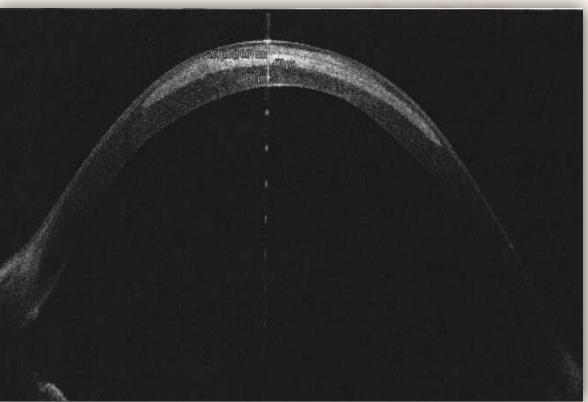




- The first published study was done in July 2019, Roayah Eye Center, Alexandria, Egypt.
- Follow up on these patients demonstrates a long-term safety of the material.

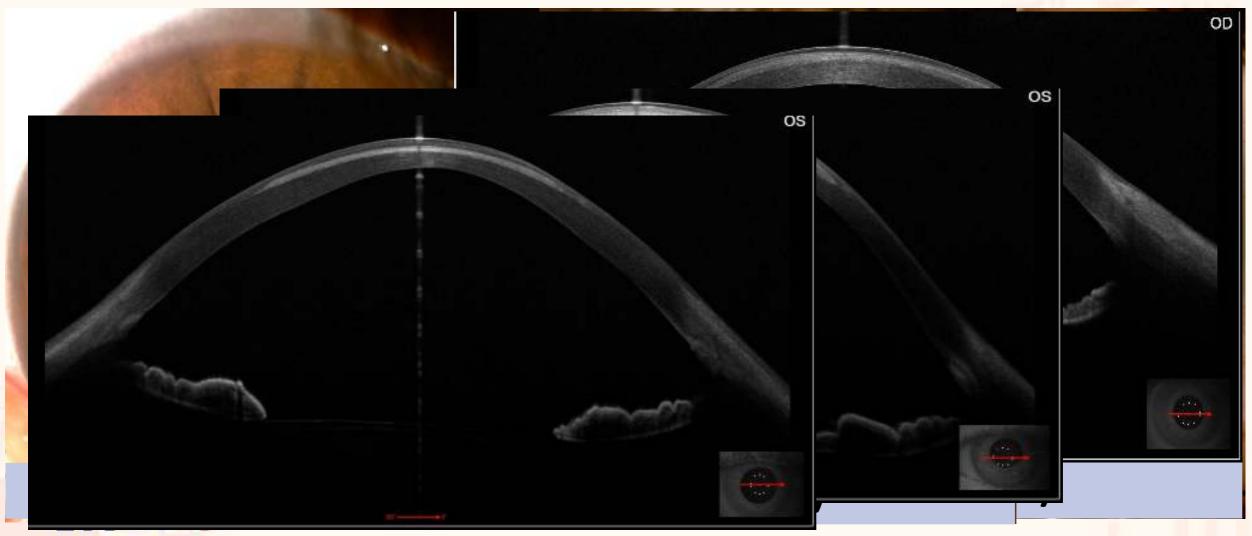
Three years follow up (Slit lamp & Anterior segment OCT)





3 years follow up

Five years follow up (Slit lamp& Anterior segment OCT)

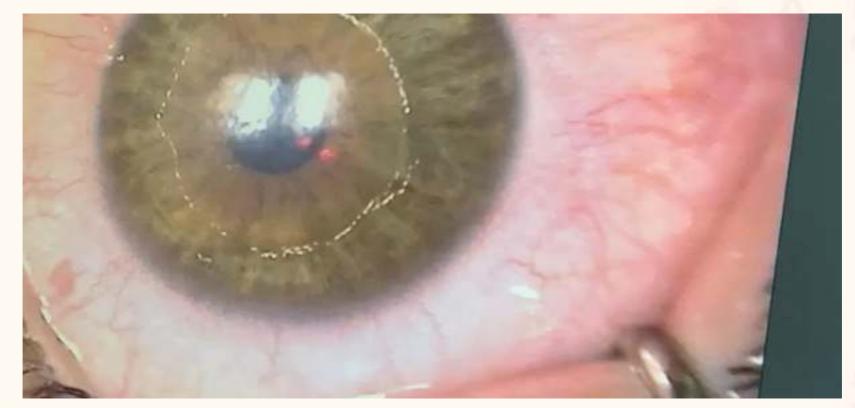








- All cases were **Cross linked** three months Post corneal implant except the post lasik Ectasia.
- Epi-Off CXL.









Results

- The mean age of the patients was 27.67 ± 9 years.
- All the surgical procedures were uneventful.
- One eye had wrinkles and opacified graft, and it was exchanged 3 months postoperatively.
- All patients (7 eyes) completed Five years of follow-up.
- No episodes of rejections were encountered up till 5 years.



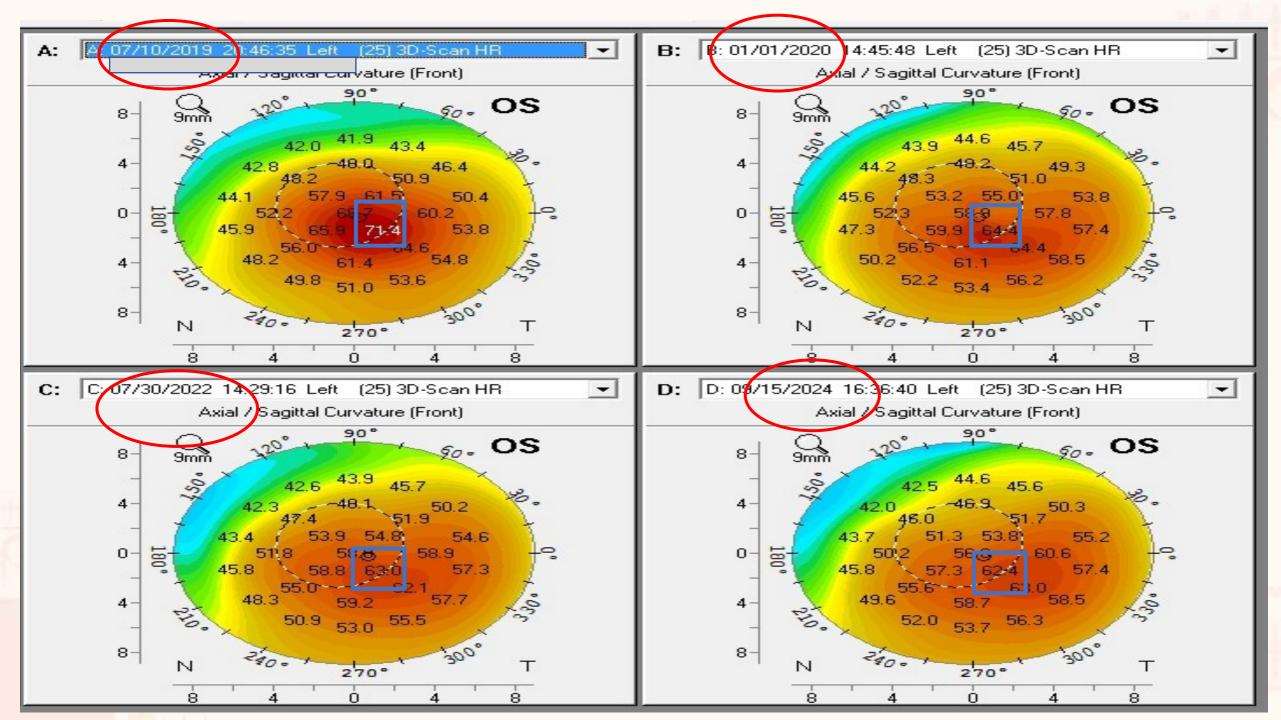


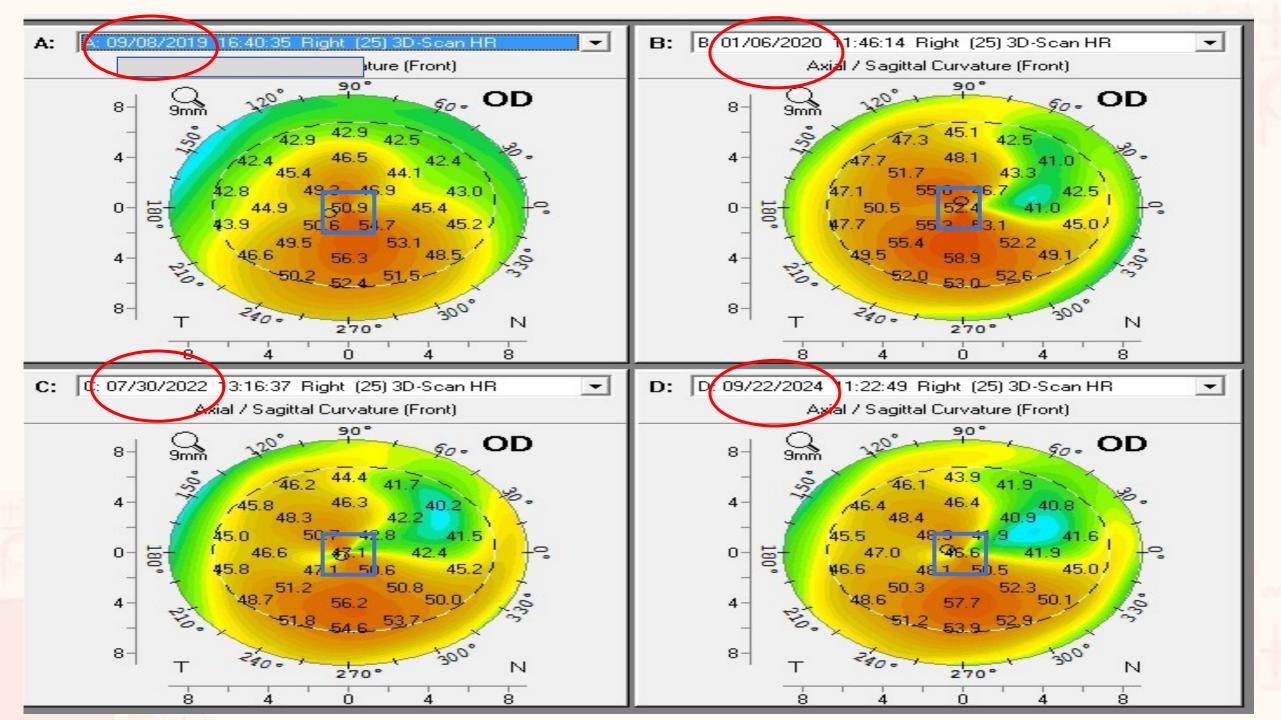




Results

- Visual acuity improved in all patients at 6, 12 months, 3
 years and Five years (Stable from 6 months till 5 years)
- The mean CCT measured with Pentacam increased & stable at 1,3 and 5 years.
- 5 years follow up showed stability and clear lenticules all over the follow up period.











Xenia ACED study

2023 the latest version (version x4) of the XENIA implant:

High degree of optical transparency.

•Well-balanced material strength to provide optimized corneal stabilization and regularization in KC patients.









Xenia ACED study

On November 2024 in Alexandria and as a pilot of ACED study on the new Xenia version IV:

- · 12 eyes were implanted.
- VisuMax 500 femtosecond laser and they are on

follow ups. EOS 2025









Xenia ACED study

Patients were of advanced KC but clear corneas:

- Their K max ranged from 55 to 80.
- They are all in the age of KC activity (17~30 years).
- The thinnest pachymetry ranged from (310 ~ 480) using Ms-39.
- Xenia 4 implants of thickness 40 microns were implanted at 210 microns depth from the epithelium.











Xenia preparation

Operational steps

2

Femto-pocket creation

3

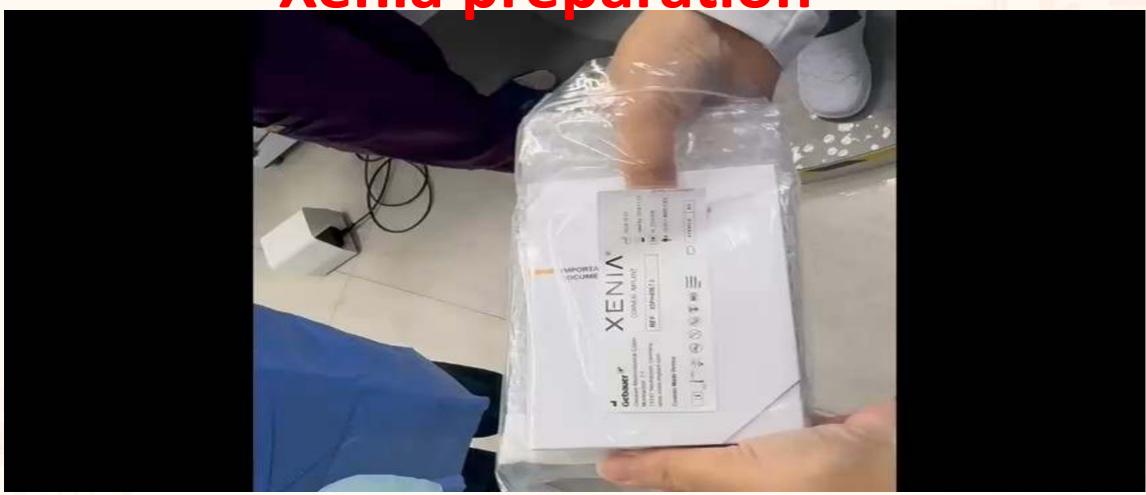
Xenia implantation





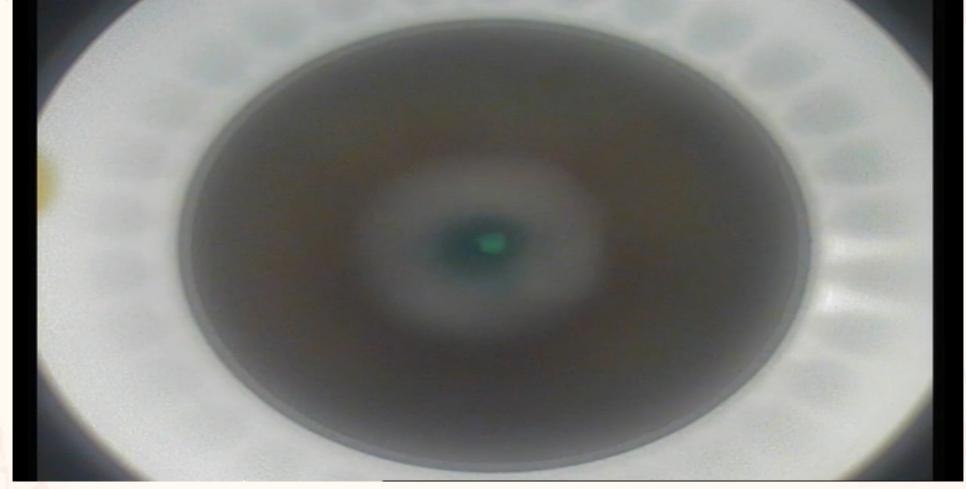


Xenia preparation





Femto-pocket creation and Xenia implantation

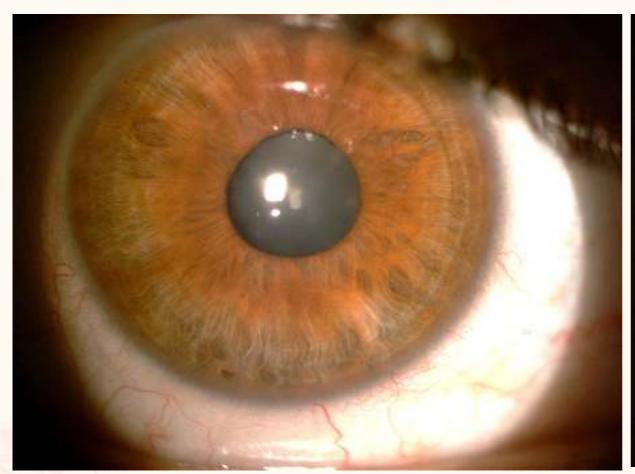


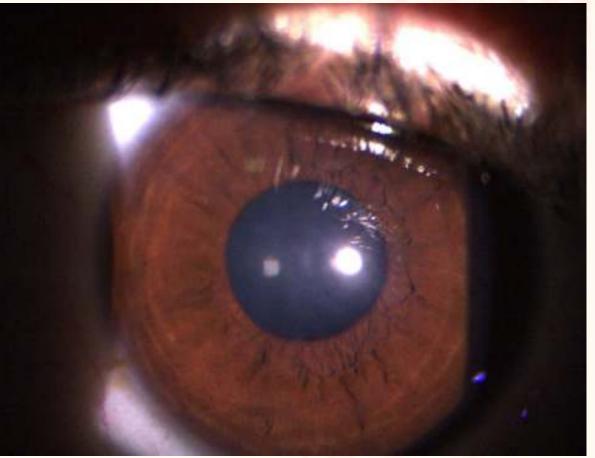












One week post operative

EOS 2025
EGYPTIAN OPHTHALMOLOGICAL SOCIETY

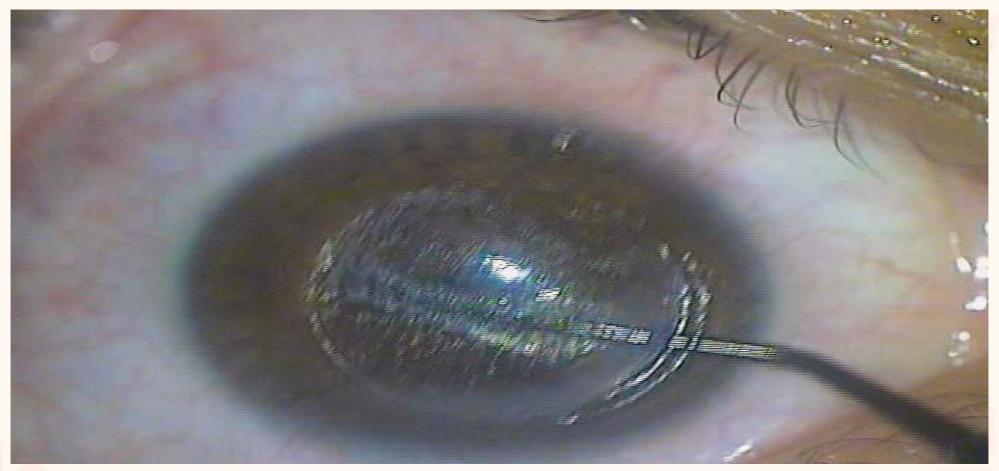




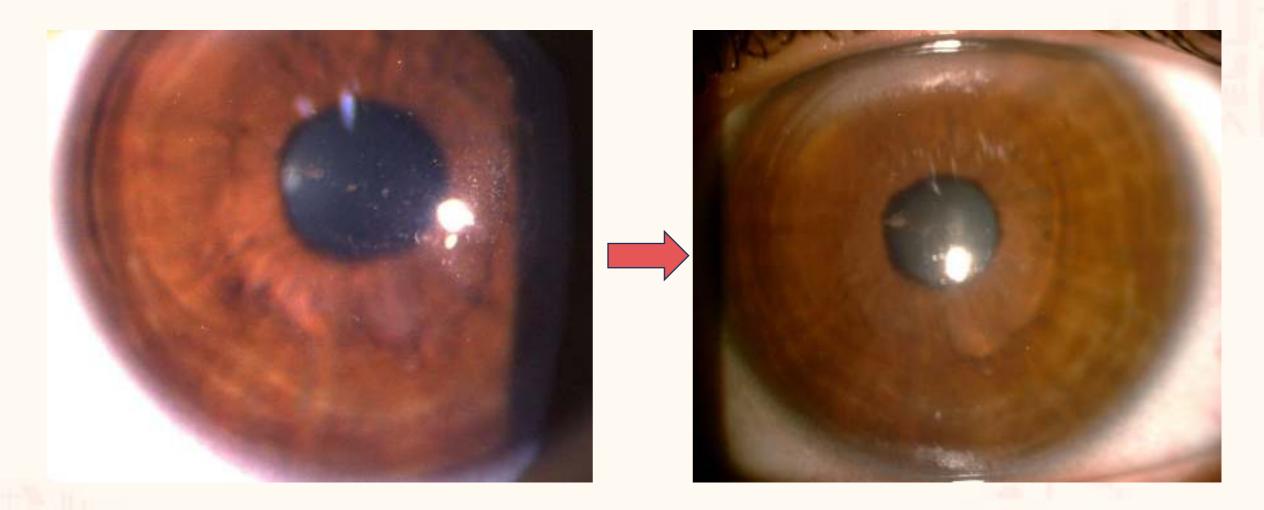




Difficult dissection of the







Corneal edema at D1 due to difficult D7 after resolution of edema dissection of femto pocket

EOS 2025
EGYPTIAN OPHTHALMOLOGICAL SOCIETY







Difficult implantation of





Effect of xenia







Case 1

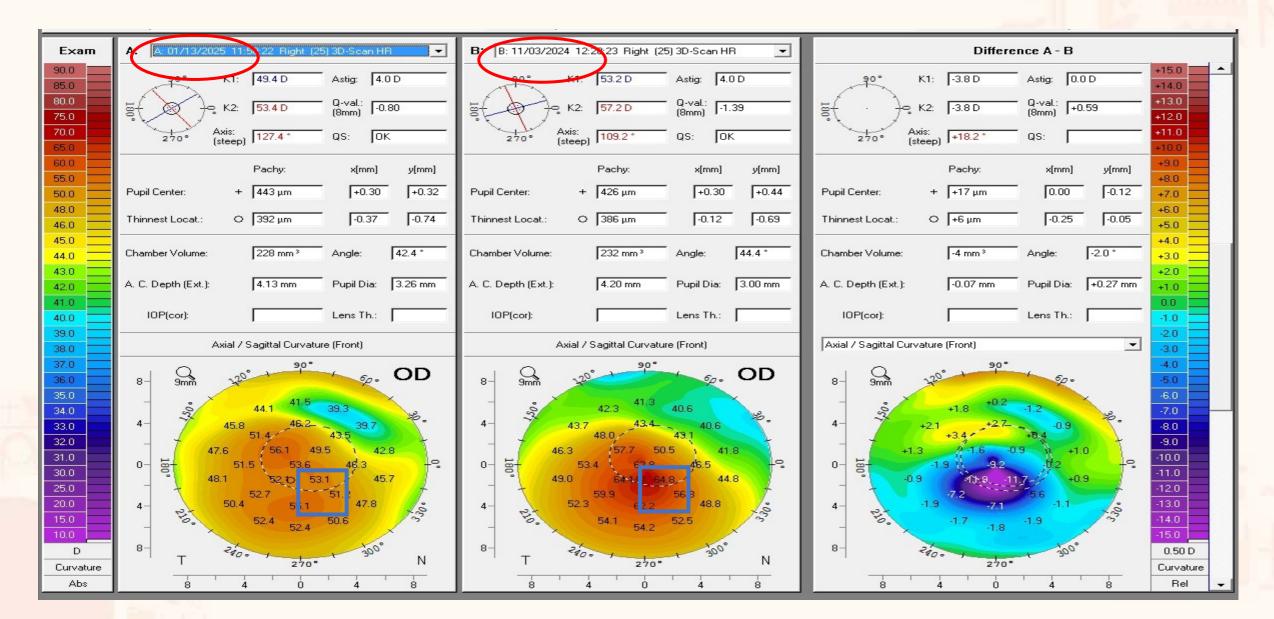
	PRE-OP	1 WEEK	2 MONTHS
UCVA	0.2	0.9	0.9
BCVA	0.3	NOT NEEDED	NOT NEEDED
COMA	-3.373	-1.930	-2.433
Sph.Aberr	-2.088	0.118	-0.801

2 months difference map







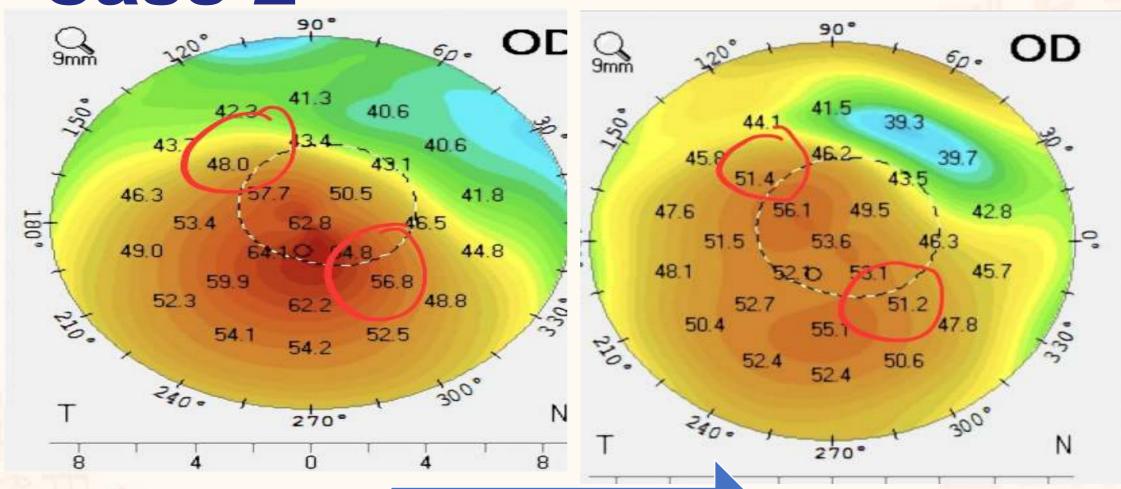








Case 2



EOS 2025

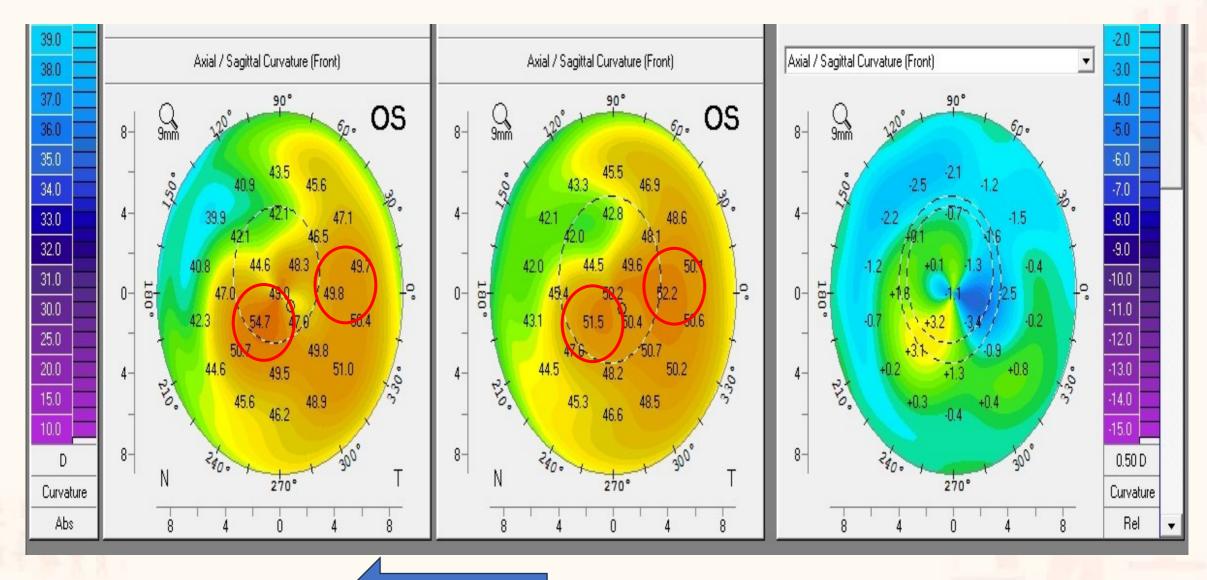
2 months







	PRE-OP	1 WEEK	1 MONTHS
UCVA	0.05	1.0	1.0
BCVA	0.3	NOT NEEDED	NOT NEEDED
СОМА	2.202	0.655	0.545
SPH.ABARR	-0.411	- 0.016	-0.091



1 MONTH

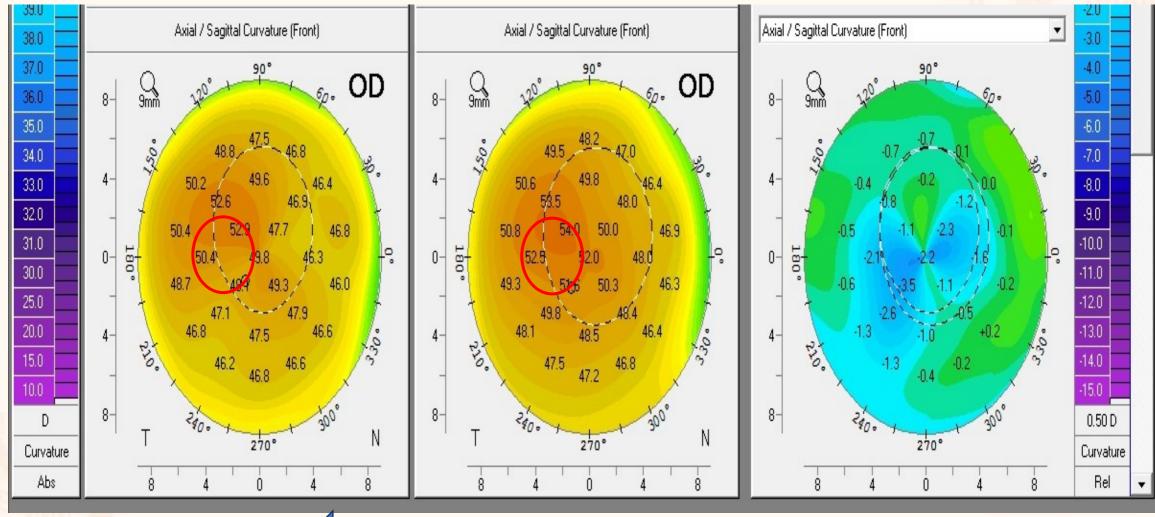






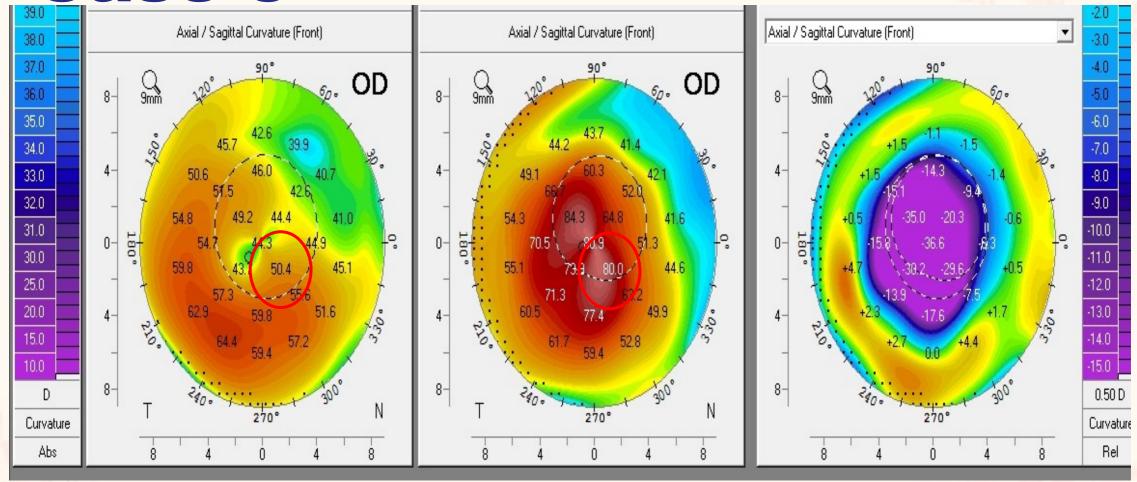


	PRE-OP	1 MONTH
UCVA	Cf 3m	0.6
BCVA	0.3	0.8
COMA	-2.797	-0.373
SPH.ABARR	-2.10	-0.373

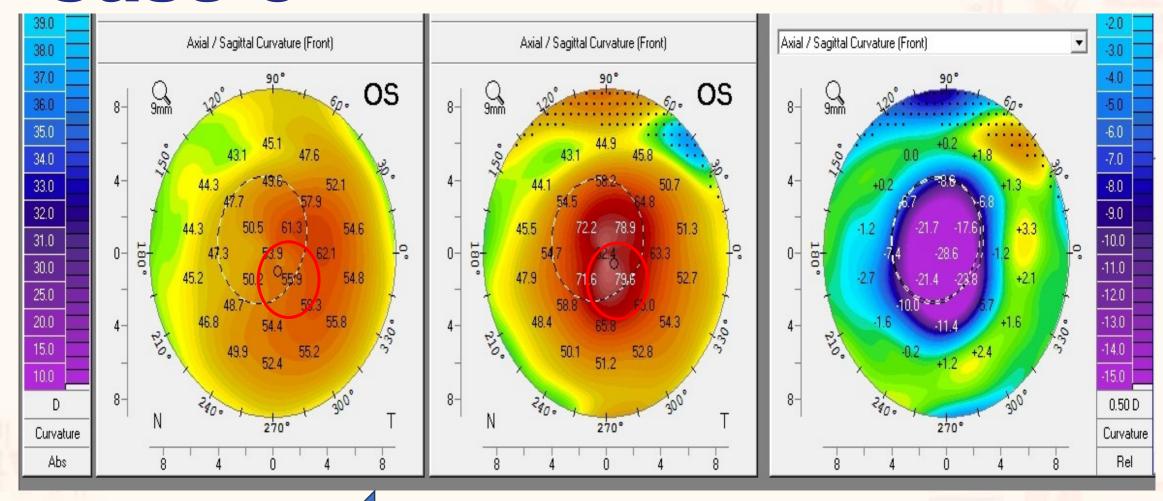


EOS 2025

EGYPTIAN OPHTHALMOLOGICAL SOCIETY











- Central corneal flattening mean ~ 11D.
- Marked improvement of corneal HOA.
- A refractable eye in 100% of cases.
- Improvement of UCVA to 0.1 ~ 0.9
- BCVA gained more than 4 lines.









Xenia 4

REGULARIZES

Patient's Corneal Topography

DECREASES
Higher Order
Aberrations.









Xenia between past and present

- Implants have been made more resistant, and more stable.
- The implants used in **Pilot study** were **smaller in diameter** (some of them only **6.5mm**).
- The implants of the ACED study were used earlier March2025 was
 7.8 mm diameter.
- If Xenia reduced the diameter as directed to, 7.0mm this may have an effect on outcomes.
- The improvements are coming from the larger diameter, deeper insertion (220 micron) and harder xenia.

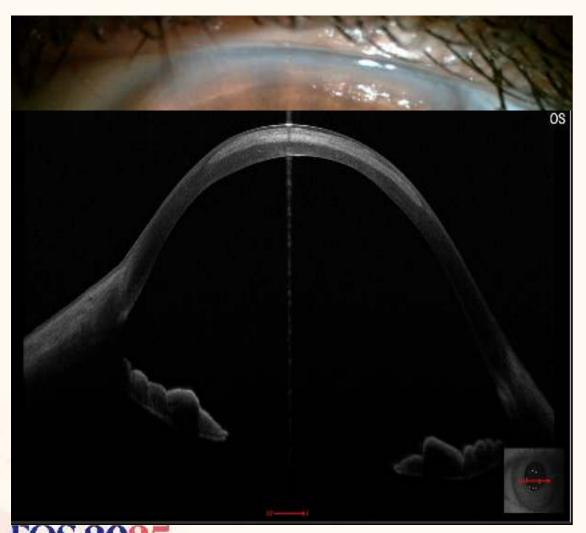




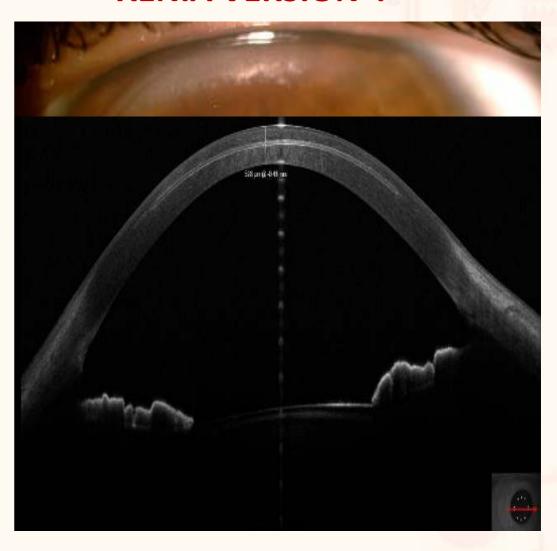




XENIA VERSION 1



XENIA VERSION 4









Why XENIA implant is one of your Safest BET

4) Regulatory Approvals and Certifications

- International certifications and approvals.

- XENIA's adherence to global safety standards.

-Trust from surgeons and healthcare institutions worldwide



4) Regulatory Approvals and Certifications









ORIGINAL RESEARCH

Safety and Indicative Effectiveness of Porcine Corneal Lenticular Implants in Patients with Advanced Keratoconus and Post Lasik Ectasia: A Retrospective Clinical Study

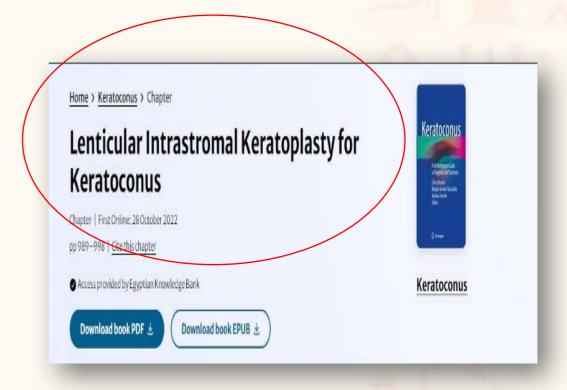
Ahmed El-Massry
Osama Ibrahim
Moones Abdalla
Ihab Osman
Shahira Mahmoud

Department of Opinishing byy. Alexandria faculty of Hedicine. Alexandria, Eggit Purpose: This study aimed to evaluate the safety and feasibility of implanting decellata sed portion corneal tenticules in a femiosecond laser asserted pocket for patients with advanced knownerous and post-lastic relate.

Methods: This is a note-operative clinical strate of implanting a procine conteal from entaimplant in severn eyes at with advanced kendecenins and clear course, and one with
advanced post-Last, eccasia with a follow-up for 12 membra. The lendoules are extracted
from porture trace, subjected to a decellularization percess internetly cross-traked, steatlased
and packed. They are a minimisting at 100+130-min that decess. The fermioscond
bear was usual at crosse an intra-stornal packet, and then the tenticules wase implanted
inside the packet. Ellowed by conteal cross-briding 2 mentla later for six out of seven eyes.
Results: Pive criticists had hemoconus to eyes) and one patient tone eye) had post-Lastic
actions. Visual actualy improved in all patients except for one case at 5 and 12 months and this
was statistically significant (Pw0.002 and 0.007). At one-year to low-up, the mean central
conteal thickness inacconal from 389.43 ± 48.41 or 429.33± 63.20 pm. The maximum
bending decreased from 64.8 ± 51.1 or 62.82± 6.16 D, the mean conteal resistance factor
(CRT) increased from 5.07 to 8.42, and the total higher-order absorptions decreased from
1.80 to 1.16. Both charges in the CCT and CRT were statistically significant. One eye had
writeles are operation grain, and it was exclusived 5 months postuperatively.

Conclusion: Pareira, corneal, articules implentation is immunologically safe and well telement in patients with calvanced keraterious and post-flusic cetasia and may be feasible to an attenuative to henduclasts.

Reywords: kentocenus, kentoplasty, fermesecond, ectapiti











5) Cost-Effectiveness

Long-term **cost savings** due to fewer complications and replacements.

-Lower post-operative care costs.

-Competitive pricing without compromising on quality.









Conclusions

Tissue augmentation with decellularized Porcine lenticules (XENIA Implants) and Corneal cross-linking results in improvement in

- Visual acuity.
- Corneal Curvature.
- Corneal hysteresis.
- Decreased Corneal higher order aberrations.*



EGYPTIAN OPHTHALMOLOGICAL SOCIETY

^{*} Safety and Indicative Effectiveness of Porcine Corneal Lenticular Implants in Patients with Advanced Keratoconus and Post Lasik Ectasia: A Retrospective Clinical Study. Clinical Ophthalmology. 26 July 2021.

Ahmed El-Massry, Moones Abdalla, Ihab Osman, Shahira Mahmoud.

https://www.dovepress.com/getfile.php?fileID=72045







Conclusions

- Five years follow up, confirmed the transparency, and *Immunologically Stable Implants*, improvement of Pentacam readings, increased thickness by U/S pachymetry.*
- Further studies with a *larger number and longer follow-ups*, new version of the *Implants* are needed to confirm its effectiveness and stability over time.



* Lenticular Intrastromal Keratoplasty for Keratoconus.
Keratoconus. Chapter First Online: 28 October 2022
Mirko R. JankovII & Ahmed Elmassry
https://link.springer.com/chapter/10.1007/978-3-030-85361-7 86







Lenticular Intrastromal Keratoplasty for Keratoconus.
Keratoconus. Chapter First Online: 28 October 2022
Mirko R. Jankov II & Ahmed Elmassry
https://link.springer.com/chapter/10.1007/978-3-030-85361-786

Bibliotheca of Alexandria **THANK YOU** XXX Bibliotheca of Alexandria ahmad.elmassry@gmail.com