iTRACK™ CASE STUDY
EARLY MODERATE GLAUCOMA

Pseudophakic glaucoma with OSD and prior microtrabecular bypass surgery.

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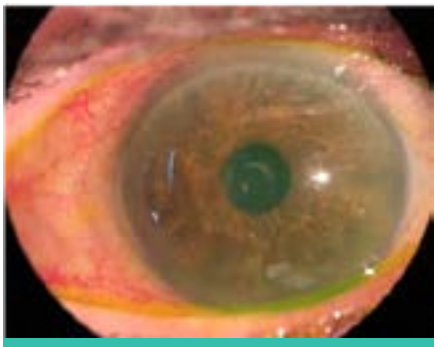
PATIENT ASSESSMENT

1. 4 patients (7 eyes) with POAG with prior microtrabecular bypass surgery (iStent®, single stent combined with cataract surgery)
2. 2-3 topical glaucoma medications
3. Decreased vision and irritation due to symptomatic OSD that was unresponsive to preservative-free glaucoma medications, lid hygiene, topical lubricants, steroid, NSAID or doxycycline



Preoperative: significant ocular surface disease secondary to glaucoma medication.

TREATMENT DECISION

1. Lower IOP, reduce the need for topical medications and reduce symptomatic OSD via iTrack™ canal-based glaucoma surgery as a standalone procedure

PATIENT OUTCOMES

1. Postop unmedicated mean IOP was 16.8 mmHg.
2. 2 eyes required 1 topical medication (Beta-blocker)
3. All patients reported improved vision and elimination of OSD symptoms
4. iTrack™ performed without disruption of previously placed stent.

Postoperative: resolution of ocular surface disease.

	Baseline	Post-op
Mean IOP	18.4 mmHg	16.8 mmHg
Mean medications (n)	2-3	0-1
Other conditions	Symptomatic OSD	Elimination of OSD symptoms
Conjunctival	≥ 2+	≤ 1+
Corneal epitheliopathy	≥ 2+	≤ 1+

CONTRAINDICATIONS: The iTrack™ canaloplasty microcatheter is not intended to be used for catheterization and viscodilation of Schlemm's canal to reduce intraocular pressure in eyes of patients with the following conditions: neovascular glaucoma; angle closure glaucoma; and, previous surgery with resultant scarring of Schlemm's canal.

ADVERSE EVENTS: Possible adverse events with the use of the iTrack™ canaloplasty microcatheter include, but are not limited to: hyphema, elevated IOP, Descemet's membrane detachment, shallow or at anterior chamber, hypotony, trabecular meshwork rupture, choroidal effusion, Peripheral Anterior Synechiae (PAS) and iris prolapse.

WARNINGS: The iTrack™ canaloplasty microcatheter is intended for one time use only. DO NOT re-sterilize and/or reuse, as this can compromise device performance and increase the risk of cross contamination due to inappropriate reprocessing.

PRECAUTIONS: The iTrack™ canaloplasty microcatheter should be used only by physicians trained in ophthalmic surgery. Knowledge of surgical techniques, proper use of the surgical instruments, and post-operative patient management are considerations essential to a successful outcome.

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