The future of vision
AJL GLAUCOMA IMPLANTS:

- ESNOPER V2000
- AL ESNOPER CLIP
  - NON PERFORATING DEEP SCLERECTOMY (NPDS)
  - OPEN ANGLE GLAUCOMA

The future of vision
ESNOPER V2000
The scleral implant V2000 is indicated in non-perforating surgery of open angle glaucoma.

It is specifically designed for the fixation to the sclera, placed on the scleral bed, and implanted in the suprachoroidal space. Its aim is to create a fixed space that eases and prolongs the aqueous humour drainage in patients with open angle glaucoma.

**Material / Composition**

The Esnoper implant is manufactured with nonionic polymer, hydrogel and an excellent tensor resistance.
**Product's Specifications**

**Definition**
Scleral implant “Esnoper “

**Total height**
3.0 mm

**Thickness**
0.20 mm

**Suprachoroidal side length**
1.40 mm

**Base length**
2.85 mm

**Suture hole**
Sclera fixation

**Longitudinal hole**
Drainage

**Material**
Biocompatible acrylic

**Sterilization method**
Steam

**Expiration**
3 years
## ESNOPER V2000 Glaucoma implants

<table>
<thead>
<tr>
<th>Reference</th>
<th>V2000</th>
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<tbody>
<tr>
<td>Brand name</td>
<td>ESNOPER V2000</td>
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<tr>
<td>Definition</td>
<td>“ESNOPER V2000” Scleral Implant</td>
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<tr>
<td>Indication</td>
<td>The ESNOPER V2000 scleral implant is indicated for non-penetrating deep sclerectomy (NPDS) in open-angle glaucoma surgery.</td>
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<tr>
<td>Product description</td>
<td>The ESNOPER V2000 scleral implant is a non-reabsorbable implant that provides a fixed, permanent intrascleral space that facilitates the drainage of aqueous humour.</td>
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<td>Supracoroidal lateral length</td>
<td>2.85 mm</td>
</tr>
<tr>
<td>Orifices</td>
<td>2 (suture/drainage)</td>
</tr>
<tr>
<td>Longitudinal orifice</td>
<td>Drainage</td>
</tr>
<tr>
<td>Material</td>
<td>Hydroxyethyl Methacrylate (HEMA).</td>
</tr>
<tr>
<td>Sterilization method</td>
<td>Steam</td>
</tr>
<tr>
<td>Supply</td>
<td>The ESNOPER V2000 implant comes in an individual sterile vial housed in a clamp support and immersed in a liquid medium to maintain proper device hydration.</td>
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<td>Shelf-life</td>
<td>3 years</td>
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ESNOPER CLIP
The **ESNOPER CLIP** is an Uveoscleral implant specifically designed for the technique non-perforating **Deep Sclerectomy** in open angle glaucoma.

With the new implant **ESNOPER CLIP** we claim to take advantage and promote two differentiated drainage tracts, **TRABECULAR** (INTRASCLERAL and SUPRACILIARY) and **UVEOSCLERAL**, inserting a plate in the suprachoroidal bag and positioning the other over the scleral bed, making the aqueous humor to flow through them.
- A superior 4/0 nylon traction suture through the superior cornea and a fornix based conjunctival flap is dissected (Fig. A), followed by cauterization of bleeding vessels and dissection of the superficial scleral flap (5x5 mm$^2$) of 1/3 of the scleral depth, extending 2 mm into clear cornea.

- A Deeper 4x4mm$^2$ scleral flap is dissected and removed, and Schlemm’s canal is deroofed with a capsulorhexis forceps.

- The implant has two plates; one was placed in a full-thickness suprachoroidal bag 2 mm behind the scleral spur (Fig. B)
- After folding the implant the other foot is placed into the intrascleral lake (Fig. C). It can be fixed without suturing because it has two lateral notches that do not allow anterior displacement.

- To achieve higher intrascleral blebs, an intrascleral pocket could be created at the posterior limit of the intrascleral bed to fix the posterior edge of the implant, thereby helping to keep the scleral lips apart (Fig. D).

- For the superficial scleral flap no suture or a loose one is enough, and the conjunctiva has to be sutured.
ESNOPER CLIP
SURGICAL
PROTOCOL
SURGICAL INSTRUMENTS

- EPNP-2001 Espéculo/ Blefarostato 14 mm blade
- EPNP-2002 Marcador Escleral
- EPNP-2003 Espéculo de Glaucoma
- EPNP-2004 Forceps
- EPNP-2005 Micro-tijeras

The future of vision
Our Facilities

Latest Technology

100% Inspection and Quality Control

Clean Rooms
Our Facilities

Wet labs

Customized Service

R&D PROJECTS
We want you to be part in new projects and development in Ophthalmology

- International growing
- Research new lines
- Developing new projects
- Scientific Studies
- Surgical Training
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