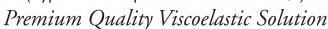
# **AUROVISC**

(Hypromellose Ophthalmic Solution 2% w/v)





- Consistent physical & chemical properties
- Dual filtration to ensure particle/fiber free solution
- Effective in the protection of corneal endothelium
- Non-antigenic & non-inflammatory

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AUROVISC is a viscoelastic solution of high molecular weight, highly purified grade of Hydroxypropyl methylcellulose 2%, clear, isotonic, sterile, non inflammatory and non-pyrogenic in nature. It is used for intraocular injection during anterior segment surgery of the eye.

#### **PROPERTIES**

: 20 mg/ml (2%) Concentration Molecular Weight : 86,000 daltons Viscosity @ 27°C : 3000 - 4500 cPs Osmolality : 250-350 mOsm/kg : 6.0 - 7.8

## **CHARACTERISTICS**

AUROVISC is a medical device used in the anterior segment surgery of the eye. It has the following unique characteristics:

- It maintains the depth of the anterior chamber of the eye and protects the periocular tissues.
- Outstanding Rheological properties.
- Completely transparent
- Totally non antigenic.
- Easy to remove from the anterior chamber.
- Does not contain any proteins that are likely to cause any inflammatory reactions and /or foreign body reactions.
- Does not require refrigeration and should not be stored at temperatures above 35°C. Does not interfere with the process of Cicatrisation.

#### **INDICATIONS**

AUROVISC is indicated as a surgical aid (medical device) in the anterior segment of the eye including extraction of the lens and insertion of intraocular lenses. It maintains the depth of the anterior chamber during the whole surgical procedure and permits greater operative precision without the risk of damaging the endothelium of the cornea or other intraocular tissues.

## **PRECAUTIONS**

Overfilling the anterior chamber of the eye with AUROVISC may cause increased intraocular pressure, glaucoma or other associated ocular damage. The following precautions are recommended during surgical procedures.

- Do not overfill the eye chamber with Aurovisc.
- AUROVISC should be removed from the anterior chamber at the end of the surgery. Remove as much AUROVISC by irrigation and / or aspiration at the end of the surgery with out jeopardizing the integrity of corneal endothelial cells.
- Carefully monitor intraocular pressure especially during the immediate post operative period. Transient increased IOP may occur following surgery because of pre existing glaucoma or due to surgery itself. If the post operative IOP increases above expected values, treat with appropriate therapy.
- Installation of AUROVISC should be done so as to avoid trapping of air bubbles behind hydroxypropyl methylcellulose solution.
- Avoid reuse of the cannula.
- Although not reported to date, the concurrent presence of medication in the chamber or associated ocular structures may interact with AUROVISC to cause clouding. Physicians should consider this potential if such a phenomenon is observed.

## **CONTRAINDICATIONS**

It is contraindicated in patients with known history of hypersensitivity to its ingredients.

## **SUPPLY**

3 ml, 5 ml vials and 2 ml pre-filled glass syringes.



Information published in this catalogue is subject to change without notification

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