

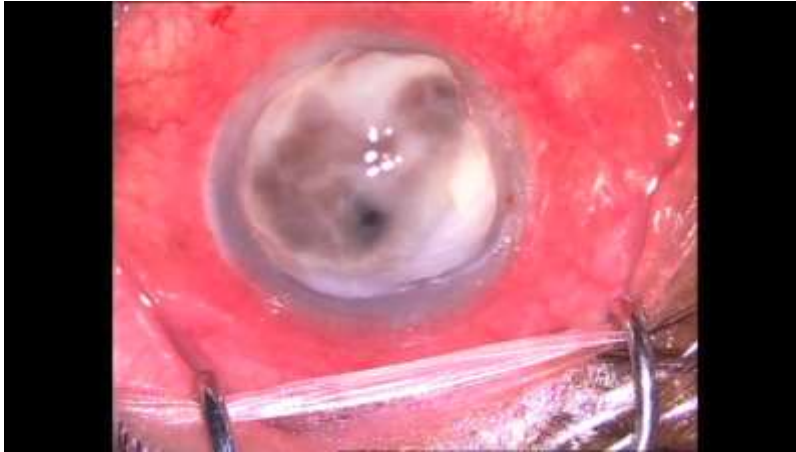
# CHALLENGING TRIPLE PROCEDURES

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## **TRIPLE PKP**

- **Biometric errors**
- **Working in an open sky**
  - Difficult capsulorhexis
  - Difficult nucleus expression
  - Difficult I/A

## TRIPLE PKP



## TRIPLE PKP



## **TRIPLE PKP**



## **TRIPLE DALK**

- Risk of DM rupture during phaco
- DM tears at the phaco wound
- Biometric errors

## **TRIPLE DALK**



## **TRIPLE DALK (TYPE 2 BUBBLE)**

- Type 2 bubble is very thin
- Type 2 bubble extends to the periphery of the cornea

## **TRIPLE DALK (TYPE 2 BUBBLE)**



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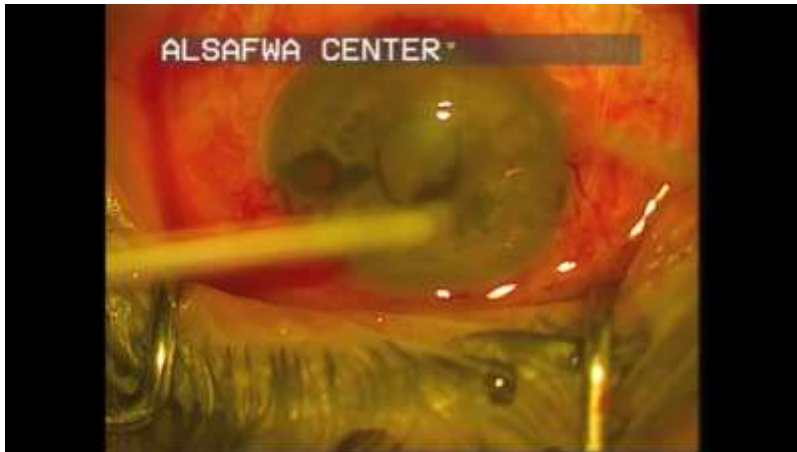
## **TRIPLE DALK**

- It is safer to postpone cataract to be done months after DALK
- If type 2 bubble is anticipated, better to avoid air injection and continue with manual dissection
- Small trephination to avoid wound related DM detachment

## **TRIPLE DMEK ICE SYNDROME**



## **TRIPLE DMEK CROWDED AC**



## **TRIPLE DMEK**

- Triple DMEK is recommended in most phakic eyes with endothelial problems
- Although difficult in hazy media, removal of the lens facilitates the DMEK procedures and avoids the need of other interventions

**THANK YOU**

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