

Inami **!NNOVATIONS**

INAMI ORIGINAL SURGICAL INSTRUMENTS



A specialized hook of Trabeculectomy by intraocular approach

TANITO MICRO HOOK
TMH®
Original-ed.



M-2215S



M-2215L



M-2215R



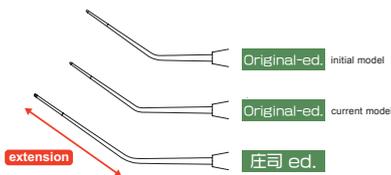
TMH ORIGINAL edition, Tanito ab interno Trabeculectomy Micro-hook (Designed by Prof. TANITO)

- M-2215S Straight whole length 101mm
- M-2215L Left whole length 100mm
- M-2215R Right whole length 100mm
- M-2215SS Set of all three hooks



material: SUS

M-2215SS a set of all three hooks comes with a sterilization tray M-2700A



Comment from Prof. Masaki Tanito (Department of Ophthalmology, Faculty of Medicine, SHIMANE University)

It is a specialized hook of Trabeculectomy by intraocular approach. There are 3 types of hooks : one is a straight type for ear or upper approach, and the rests are a left and a right angled type for nasal approach. By incising the hook tip into Schlemm's canal smoothly along trabecula dye band under angle prism observation, surgeons can move the procedure directly to Trabeculectomy. The depth at which the tip of the hook can be seen through the trabecular meshwork is appropriate.



The hook has such a tip design that surgeons can feel the resistance of trabecula incision, when, in order to avoid damage of Schlemm's canal outer wall, the insertion of the hook tip is too deep, and in this case, Trabeculectomy should be performed at the depth without any resistance by pulling the hook tip to a bit shallow location.

Inheriting the TMH ORIGINAL-ed. In wider and thinner incision.

TANITO MICRO HOOK
TMH®
Shoji-ed.



M-2220S



M-2220L



M-2220R



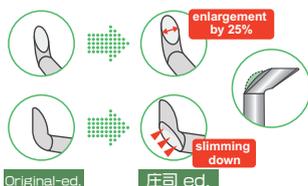
TMH SHOJI edition, Tanito ab interno Trabeculectomy Micro-hook (Designed by Dr. SHOJI)

- M-2220S Straight whole length 101mm
- M-2220L Left whole length 105mm
- M-2220R Right whole length 105mm
- M-2220SS Set of all three hooks



material: SUS

Comparison with the original edition.



Comment from Dr. Takuhei Shoji (KOEDO EYE CLINIC in SAITAMA)

It is an evolved version of Tanito ab interno Trabeculectomy Micro Hook that was very well received. Inherited the basic concept of the original Tanito hook, this hook can enlarge the incision area by approx.25%, compared to the original version and secure the same incision area as that by Rotom with conventional external approach.



In addition, it enables to prevent damage of Schlemm's canal outer wall and the safe incision by slimmed down the bend part. Moreover, the angle type for nasal incision improves the visibility at incision by increasing the length to the bend part.

Extraction of the intraocular lens in one action

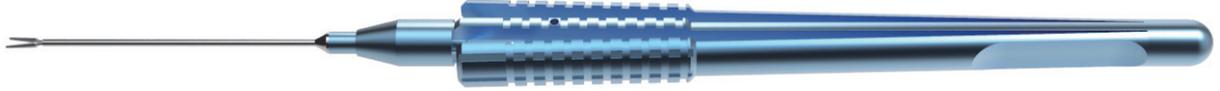
Also suitable for ICL setting



DS-2022S



DS-2022L



Noguchi Lens Grabber II
(Designed by Dr. NOGUCHI)

DS-2022S whole length 137mm /shaft 13.5mm /diameter 19G

DS-2022L whole length 159mm /shaft 36.0mm /diameter 19G

Material : Titun(tips:SUS)

Comment from Dr. Santaro Noguchi (ASUCA EYE CLINIC in SENDAI)

ICL was, basically, extracted from small cut after intraocular division. However, Lens Grabber has made the extraction possible operated at one action. The enlargement of the incision wound is small. Especially, it is good news for surgeons to extract hydrophilic lens or silicon lens much easier, since both of them are difficult to operate for extraction.



Lens Grabber updated to version.2 has increased its folding force, to enhance one action extracting rate of lens and decreased the rate of loss and damage of the forceps, by increasing their design strength. In addition, it became possible to extract silicon lens by one action without division, and for a long version, to attach ICL to the cartridge easily and safely like PACman Forceps.

Pupillary extension can be operated safely and reliably with these two hooks.



M-127T



M-128T



TOME1 Hook
(Designed by Dr. TOMEMORI)

M-127T whole length: 97mm

material: SUS

TOME2 Push-hook
(Designed by Dr. TOMEMORI)

M-128T whole length: 97mm/tip size:0.9x1.5mm

material: SUS

Comment from Dr. Ryota Tomemori (TOMEMORI EYE CLINIC in WAKAYAMA)

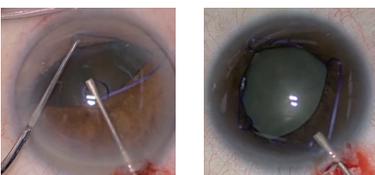
In such cases as microcoria or IFIS, pupillary extended operation is required during surgery. Any unreasonable operation may harm pupillary margin, iris, or angle to lead to hyphemia. In order to prevent such situations and for smooth insertion, ①tome 1 hook,

②tome2 push hook are developed. By using two hooks like in the video, it is possible to prevent tissue damage and decrease post operative inflammation.



①can be used for the operation of taking the ring out of the injector or attaching it to iris. The top is processed in a round shape to prevent damages of iris and anterior capsule of lens. It can also be used for nucleus treatment or adjusting the location of intraocular lens.

②is used for the insertion at twelve o'clock. It is designed, when the ring is pushed, to control the ring location without sliding, and after insertion, to take off naturally without any damage for iris, if this instrument is pulled out straight. Basically, two hooks are operated shrinking the ring like a diamond type pantograph on a train. According to iris condition, only ② can be used for insertion.





Craftsmanship

One of the cores of the skill that supports Inami's high quality products is "memory" of the craftsman's fingertips. Our craftsmen are not just routine workers but are always going through trials and errors for every improvement. And the results of the efforts are marked in their fingertips. The skills polished this way have been inherited generation to generation and support today's high quality of Inami products.

In order to maintain the "memory" and incarnate further quality improvement, we have also been concentrating our effort on training of young craftsmen and standardisation of the skills.



No.24-2, Hongo 3-chome, Bunkyo-ku,
Tokyo 113-0033, Japan
Tel: +81 (3) 3814-5916 Fax: +81 (3) 5684-2126
<https://inami.co.jp/en/>