

Corneal Transplant Surgery and The Honan Balloon

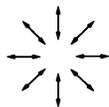
The most important reason for using the Honan Balloon before corneal transplant surgery is to lower the IOP to that of atmospheric pressure. This greatly reduces the chance of a expulsive hemorrhage or iris prolapse caused by a sudden intraocular pressure drop. Lowering the intraocular pressure reduces the chance of intraocular contents bulging forward when the corneal button is removed.

After the Honan Balloon has been used preoperatively, the eye usually has a very low intraocular pressure. A Schiøtz tonometer scale reading with a 5.5 gm wgt. may be 15 or over indicating very low intraocular pressure. With this low pressure the iris diaphragm may be flat or even be depressed. Surgery is facilitated without bulging of the ocular contents.

Reduced vitreous volume and compression of orbital contents may both contribute to the lowered intraocular pressure after use of the Honan balloon.

Method of use

- Tape the eyelids closed to avoid corneal abrasion.
- Apply a cotton eye pad or 4 x 4 gauze over the eye.
- Apply the head strap around the back of the head.
- Position the balloon over the cotton pad on the eye to be operated and secure the headband firmly but not tight.
- Inflate the balloon to the desired pressure. Some use 30-mm mercury. A pressure of 20-mm mercury is satisfactory.
- Keep the balloon on the eye for 20 minutes or longer.
- The balloon may be removed to apply eye drops and reapplied.
- **Remove the balloon in the OR just before the surgical prep.**
- **Early removal of the balloon will allow the normal intraocular pressure to return and increase the risk bulging of the ocular contents during penetrating corneal transplant surgery.**



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