



Lacri**Max**

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Lacri**Max** is a 980 nm laser diode system specially developed for Transcanalicular laser assisted Dacryocystorhinostomy (DCR). The entire system is designed and crafted for simplicity and efficiency. Preset parameters make the system straightforward and easy to use.

Stenosis of the nasolacrimal duct is a common disorder and may lead to recurrent infection with pathogenic bacteria, sepsis, sinus thrombosis or corneal ulcer. Dacryocystorhinostomy (DCR) is the treatment of choice for these patients.

TRANSCANALICULAR LASER ASSISTED DCR

Transcanalicular laser assisted DCR is a minimally invasive and quick procedure for treatment of nasolacrimal duct obstruction. The procedure features very short operating time, minimal complications (less bleeding and charring) and is mainly performed under local anesthesia on an outpatient basis.

Its wavelength of 980 nm is perfectly matched to the absorption peak of water, which, together with its excellent absorption in hemoglobin, results in cutting and hemostasis with minimal lateral thermal damage. It leaves the operating field clean and sterile. There is little or no pain and swelling during and after the procedure.

Using a specifically developed technique of endoscopic laser DCR with bicanalicular intubation provides results comparable to classic DCR (90-95%) and better than TNE-DCR (80-85%) or other endoscopic laser DCR procedures (70-80%).



TRANSCANALLICULAR LASER DCR PROCEDURE SCHEME

Cannula is delivered through superior or inferior canaliculum to the nose bone. The site of osteotomy is just anterior and inferior to the attachment of the middle nasal concha. Osteotomy is achieved by applying laser energy via an optic fiber inserted into the lacrimal sac with a cannula attached to a handpiece.

Transcanalicular laser assisted DCR is a minimally invasive technique. It can be performed under endoscopic control or with transnasal visualization of the fiber position alone.

The aiming beam transilluminates the nasal mucosa and bone indicating the position of the proximal end of the fiber inside the lacrimal duct and giving operator precise control over the procedure. Use of endoscope enables quality observation and control of the procedure, enhancing treatment performance and preserving safety.

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HANDPIECE - SAFETY, PERFORMANCE AND COMFORT COMBINED

The dedicated patented handpiece - a key element of Lacri**Max** system - enables great accuracy at positioning the laser beam and irrigation, delivering excellent results.



TECHNICAL SPECIFICATIONS & ACCESSORIES

TECHNICAL SPECIFICATIONS	
Laser diode	980 nm, 10 W
Laser delivery system	Optical fiber 400 μ m and 600 μ m
Aiming beam	laser diode 635 nm, < 0.5 mW
Display	Color graphic LCD
Dimensions (W x L x H)	190 x 220 x 115 mm
Weight	4 kg
Power requirements	100 V - 240 VAC, 50-60 Hz, 100 W
Auxiliary connections	Door interlock, Nasal camera charging, Footswitch, Service

Specifications are subject to change without notice.

Single use set: disposable cannula for 400 & 600 μ m fiber, disposable irrigation tube. Safety goggles

Packaging Suitcase

Accessories Handpiece Fiber 400, 600 µm Fiber stripper Fiber scribe Footswitch





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