



# Vision With Attitude

Medicals International

## YEAR 2007; COMMITMENTS & CHALLENGES

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Dear valuable customers, partners and friends,

At the onset of a new year I wish you all a happy, healthy and prosperous 2007.

We are glad that our 2007 engagements continue to focus on two levels:

- 1- Horizontal expansion in terms of market coverage and diversification of product line.
- 2- Continuous steps in our organizational restructuring to ensure we have a solid infrastructure to service you better. This is a campaign that we started back in July 2005 and we are continuing to develop.

Both objectives are reachable. We believe fully that a happy and satisfied customer will bring growth which in turn will fuel our expansion plan. Medicals is on the growth ride again and your commitment to

us translates into an enhanced responsible steps from our side that will ensure that you are a happy and committed partner of ours.

The above means more investment in customer service, after sales service and enhanced development on the skill transfer level. That is all humane and involves individuals through them our commitment to you will be showcased.

I am committed to ensure that the person you will next meet with a Medicals International business card will be worthy that label and you shall comfortably pass on ample trust to him/her which allows our advancement together.

Our industry and line of work is no longer about trade. It is about fueling partnership that will challenge our potential and capabilities that shall ensure



proper seeding for our mutual benefits.

Trust your business to Medicals International and our commitment shall translate into furthering our prospects with you until we reach a level which will ensure full patient satisfaction and at all levels.

**Together then, we shall be able to think of the patient first,**

Happiest Seasons Greetings,  
Your Partner and friend,

Walid G. Barake.  
President & Founder

## MEACO 2007; ENSURE YOU ARE THERE!

As we are getting close to MEACO 2007, at Medicals International we are intensifying efforts to ensure that we have a successful meeting for all. Thursday the 29th of March Medicals will host a full evening entitled Pearls of Advanced Refractive Surgery with a list of top international speakers enlisted to present from the US, Europe, and the rest of the world. We will ensure to send you an invitation to attend as time comes closer. Besides we will work with the ISRS team to have full wet lab facilities for Femtosecond for those who are attending accredited ISRS courses.

If you are still hesitant whether to attend or not, I wish to encourage you to ensure that you are in Dubai for MEACO 2007. I am sure that it will be worthwhile your time, the scientific program is going to be very rich and Dubai will offer you a beautiful weather and recreation time if you are to spend few extra relaxing days away from your practice.

Looking forward to meeting you all in Dubai.  
Communication Department-  
Medicals International

## ARE ALL YAG LASERS THE SAME?

superQ®

### Certainly not!

To highlight why different, we will discuss all the features of Ellex YAG lasers, and through those we will discover how this innovative company makes the whole difference.

First, I will talk about the Modularity. The laser machine is made from a small number of modules and each, has its own function in the laser operation. If we have a problem in the laser, we just find the defective module and replace it. Then we follow with a quick check up and alignment and the laser is back to work.

While talking about the components we must discuss the most important one that is the YAG laser cavity with its Q-switch. The Q-switch is a small component inside the YAG laser cavity that allows bursts of energy to leave the laser cavity.

The first generation of the Q-switch was the acetate chemical switch which aged and became defective after 75,000 shots while the lasing medium is still fully functional.

When the Q switch failed, we needed to change the cavity. Ellex introduced the new modification of the Q-switch; the sealed one. The new Q-switch prevented dust and humidity from getting inside the chemical Q-switch, thus extended its life time up to 425,000 shots.

Ellex continued the innovation and developed the Super Q switch which is an optical switch formed by the addition of different optics that when put together they extended the life time of laser cavity to 450,000 shots which is the normal life time of the lasing medium.

Fortunately Ellex continued the innovation and now we have the ultimate YAG laser with Ultra Q switch with its unparalleled mirror moving in rapid way to achieve the smallest exposure time, high repetition rate per second, and provide the smallest spot size 6  $\mu\text{m}$  compared to 8  $\mu\text{m}$  in the Super Q switch and to 40  $\mu\text{m}$  in other laser machine, which by the way reduce the total power needed, and that lead to extend the life time of the laser machine, and make lesser crack to IOL's during the posterior capsulotomy.

Now you have the choice. Ensure it is an Ellex Laser Machine.

Firas Gharzeddine  
Biomedical Engineer  
Medicals International, Kuwait



Super Q Beauty

## A PROFESSIONAL'S POINT OF VIEW; DR. CHARLES HELOU

Dr.

Charles Helou; MD in ophthalmology, he is the chairman of Ophthalmology department in the Lebanese Canadian Hospital, in Lebanon, as well as a member of the Lebanese society and the French society of ophthalmology. We are honored to have had the opportunity to take few minutes of his precious time and share with him a valuable discussion about the situation of phacoemulsification and foldable lenses as stated in the following questionnaire.

**Q:** Since when did you begin to operate phacoemulsification in Lebanon?

**CH:** Since year 1997...

**Q:** How many procedures you perform each year?

**CH:** About 250 operations yearly

**Q:** 3. How can you describe the actual market of foldable lenses in Lebanon?

**CH:** The foldable lenses market is in continuous progress. Despite the fact that it is a little bit expensive, people are asking for it because they are becoming more aware of its advantages over the hard lenses.

**Q:** What would be the specifications of the lens of your choice?

**CH:** Basically, it must be easy to fold and to insert with a simple delivery system. In the past, I preferred to use hydrophobic lenses over hydrophilic since the latter suffered from various surface changes such as getting opacified after 6 months of the procedure. But currently and especially after the manufacturer dealt with potential problems, I shifted to hydrophilic which in my opinion complies with all the necessary specifications a patient and a doctor might need.

**Q:** Which lens currently embodies your requirements?

**CH:** I usually use Aquasense. It is a good lens in all aspects. It is affordable and has no complications. My patients and I are pleased with Aquasense results

**Q:** How do you convince your patients to ask for a foldable lens?

**CH:** I would highly recommend my patients to ask for a foldable lens when undergoing a phacoemulsification because a foldable lens would only need a small incision to be implanted thus less wound-

related complications, faster healing, faster visual rehabilitation and less astigmatism, ensuring that patients will go back to their daily routines in a short period of time.

**Q:** What is your advice to phaco practitioners?

**CH:** First of all, my advice to all phaco practitioners is to shift to foldable lenses since, as I mentioned before, it is a revolution in the cataract surgery field. Second, I advise them to work with a scleral incision instead of corneal incision because the latter, even easy, may cause post-operative irritation and dryness and it induces more astigmatism.

**Q:** Why do you deal with Medicals International?

**CH:** Medicals International is not just a company that sells high quality ophthalmic products, it is a company that provides superior professionalism and high quality service that every doctor would ask for.

**Dr. Helou was interviewed by our new Jr. Territory Manager, Surgicals in Lebanon, Roula Shedid.**



## REVOLUTIONARY NEW TECHNOLOGY FROM SEIKO

For many years SEIKO has been a global leader in spectacle lens technology so it will be no surprise that they have developed a radically new product; SEIKO ORGATECH.

What is so special about SEIKO ORGATECH? The answer is that this is a totally organic 1.67 index product. The benefit of this is that the lens material can be heated up to 100°C before the ant-reflection coating might crack. This is a major improvement when compared to conventional 1.67

index lenses which will crack at about 60°C! In addition SEIKO ORGATECH has significantly enhanced scratch resistance and improved resistance to excessive chuck pressure when being edged. To top it all off the lenses also benefit from the very latest generation of SEIKO water, grease and dirt resistant hydrophobic surface coating called SEIKO ORGATECH CLEAN.

As you might expect, this technology has been applied to our most sophisticated products; the double aspheric single vision

SSV AZ, the inner surface progressive P-1SY 1.67 and the individualised inner surface progressive SUPER P-1 NEO 1.67. So now your customer can benefit from excellent vision, previously unobtainable durability, great looks and improved comfort.

SEIKO ORGATECH is available from January 2007. For more details please contact Elyse El-Chouiefaty at [echouiefaty@medicalsintl.com](mailto:echouiefaty@medicalsintl.com).

David Nicoll, International Sales  
Seiko Optical UK

## FITTING THE IRREGULAR CORNEA (IC) WITH THE ROSE K IC LENS

BY DR. PAUL ROSE

Fitting the irregular cornea (IC) is probably the greatest challenge to even the most experienced GP fitter. These corneas often follow no patterns and have large amounts of irregular astigmatism often oblique, with steep and flat areas arbitrarily placed around the cornea so that achieving an optimal fluorescein pattern is nearly always impossible and the bottom line often becomes "can the patient wear the lens for a reasonable number of hours, is it stable, does it provide good vision, and is it affecting the cornea?"

Typically post graft, keratoglobus, pellucid marginal degeneration (PMD), and post Lasik ectasia all fall into the irregular cornea (IC) category.

In my experience fitting a significantly larger diameter lens is necessary to get reasonable location and vision and controlling the diameter becomes the most singularly important factor to achieve a successful fit.

It was with this in mind that I designed the Rose K IC lens where the trial lens has a standard diameter of 11.4 mm (although

any diameter from 9.5 through to 12mm can be ordered). This lens has a large posterior optic zone which decreases as the base curve steepens, an aspheric posterior surface for aberration control, and reverse geometry in the flatter bases to provide more accurate central and peripheral fit. I have found this lens extremely useful when all else has failed.

The Rose K systematic fitting philosophy continues with this design, whereas the trial lens has a standard lift but edge lift is controlled by ordering other lift values to ensure good tear exchange behind the lens. The lens has an extensive base curve range from 6.0 through to 9.3 so will fit even the flattest post Lasik ectasia right through to the steepest keratoglobus. It is designed to sit inside the limbus as in my experience once you start to cover the limbal area, tear exchange and subsequent corneal oedema and in some cases even vessel growth into the corneal stroma, become major problems. Very large lenses are often more comfortable than small lenses, so serious corneal damage can occur before the

patient comes in to you with problems. By keeping the lens inside this delicate area, good movement and tear exchange are retained resulting in longer wearing time and a healthier cornea. Even with the modern high DK materials with good oxygen transmission like Boston XO (Dk 100) I have experienced some major corneal trauma fitting outside of the limbus, as the actual Dk/T is very low where the lens is the thickest, and that is often near the limbal zone.

The Rose K IC lens was first released in the USA in September 2006 followed by the UK in November. The lens has already gained popularity from many experienced GP fitters who are finding the IC design a very useful tool for these extremely challenging cases. Trial sets can be obtained from Medicals International.



Paul Rose  
B. OPT, B. SC, FNZSCLP

## BIOMEDICS TORIC; ALWAYS AT THE RIGHT PLACE, AT THE RIGHT TIME

Suddenly, and in short time, the benefits started to rise from the customers and from the wearers themselves. Biomedics Toric is a true leap forward in toric Contact Lens performance. The unique design provides unparalleled stability following a simple empirical fitting to spectacle axis 93% of the time. Hence, patients experienced unsurpassed satisfaction in comfort and vision.

In their daily practice, optometrists can easily make a difference by introducing their



patients to Biomedics Toric. Because of the empirical fitting the outcome of wearing Biomedics toric is tangible. In a simple refraction procedure during the eye test you can show your patient the difference in vision between wearing a spherical lens, after compensating the cylindrical power, and the clear vision provided by Biomedics toric lenses.

Simply, applying this procedure in your day to day practice, will lead you to differentiate your eye clinics among all others. Moreover, and dramatically you will notice the spread of loyalty among your highly satisfied patients.

Georges Obeid  
Sr. Territory Manager  
Medicals International- Kuwait

## ACTIVITIES BY MEDICALS INTERNATIONAL

### LEBANON; 2ND ASTRA USERS MEETING



On the 15th of December 2006, Medicals International organized its 2nd Astra Users meeting at the Habtoor Grand Hotel, Al Hamra Hall Sin El Fil. Mr. Walid Barake, president and founder of Medicals gave a brief introduction about the company's history and lines of operations. The meeting included a series of presentations by Pr. Antoine Berberi, Dr. Elie Azar Maalouf and Dr. Bassam Bourji.

vinced about Astra's contribution to the advancements in the field of Implantology. Dr. Atwi noticed that in order to gain optimal results one should abide by the recommendations provided by the system. Finally, he thanked Medicals for its contribution to the dental field and he is looking forward to attend future events. After the meeting, everyone was invited to dine at the exchange restaurant.

See you all at the 3rd Astra Users Meeting

By Jad El Hajj  
Jr. Territory Manager, Dental



The speakers presented cases which were the result of long term usage of the Astra dental Implant system. They revealed Astra's superior esthetic results over a 3 year period. Furthermore, in some cases not only there was no site for bone loss but bone remodeling was clearly shown. Around 40 dentists participated in the event and shared their experiences with the Astra dental system. Dr. Mihdi Atwi, one of the participants, stated that after the meeting he was con-



## U A E ACTIVITIES ON HAND

Group Technical Seminars, Presentations and Activities in the Contact Lens department are enthusiastically back to Dubai office. MI launched during the past quarter the NEW COLORS of TRIKOLOR in the UAE market along with it we launched a series of talks, presentations and workshops:

On the 7th of November, my team and I were happy to host Al Jaber Group at the Rydges Hotel on Al-Diyafa street to present and discuss keratoconus disease and the appropriate correction alternatives; Rose K is one sure solution. The presentation discussed diagnostic, fitting and ordering procedures. As well, we introduced the two new colors of Tri kolor and reviewed various

marketing activities.

On the 3rd of December we gathered all practitioners in Abu Dhabi at Le Meridien Hotel. Talks included overall industry news and common optical business concerns in the UAE then followed by a launching session on Biomedics Evolution and Tri kolor new colors. Lunch was served after in a beautiful and friendly environment.

Dubai operation is committed to ensuring that we are as close as possible to our valued client base and we will make all efforts necessary to bring about positive change to the contact lens fitting industry in the UAE.

Mireille Gemayel  
Associate Sales Manager- Dubai

## EXCELLENT PRODUCT, EXCELLENT SERVICE...

It is a pride for us to carry such a testimonial from a professional such as Dr. Frank Holz.

Dr. Frank Holz, M.D. is a professor and chairman of Department of Ophthalmology in University of Bonn, Germany. He wrote this thank you note after meeting with our great team in Kuwait.



*"Dear Kuwait team,*

*It was a great pleasure to meet you in Kuwait.*

*My first hand experience using the Oertli OS3 system for vitrectomy was outstanding. The machine was easy to handle and everything worked just perfectly.*

*The support by Medicals International (Off Shore) headed by Salah G. Malek when installing and using the Oertli OS3 system was excellent. It was so good that I wish they could extend their service to Europe!*

*Best wishes*

*Frank"*  
Dr. Frank, it was our pleasure...  
Medicals International team

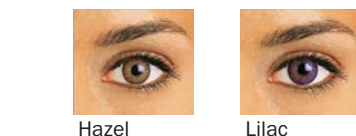
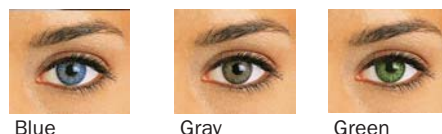


## LAUNCHING THE NEW TRIKOLOR SHADES IN KUWAIT

Pfortner and Medicals International partnership dates back to the initial days of our work in the Middle East. We believed then, according to our record, that Middle Eastern Women and Cosmetic needs are very different from ones accepted in Europe and therefore we went all the way to Argentina to work with Pfortner Cornealent on a package of tints suitable to our market needs.

The development of the TriKolor line in the Middle East was phenomenal. Celebrities, dignitaries, people with good taste and ones with special interest i.e.: advertising and modeling agencies welcomed us with open arms. We got a green color that embellished the beauty of a model and a grey that added life to a wearer that enjoyed enhancing the way he or she looked. The patterns we

decided on early in our start with Pfortner simply got the market place they deserve.



Blue Gray      Dark Green

Both Colors are very attractive and fit exactly when an already Grey wearer wanted to accentuate their actual Grey and goes, especially with darker skins, top- when picking up our new Green.

Thanks to the development team at Pfortner and congratulation to the market where these products will be launched, I can simply say one word they are thrillingly beautiful.

Joseph Nachawaty, Associate Sales Manager  
Medicals International Kuwait, Qatar & Bahrain

I am very privileged today to see that our TriKolor family here in Kuwait is welcoming a long awaited for two colors; Dark Green and Blue Grey.

## INDO'S OPERA SCAN WINS 2006 SILMO D'OR AWARD

### INDO SYSTEM; THE FIRST STEP ON TRACK

The optical department in Medicals International in Lebanon is proud to introduce to the Lebanese market the revolutionary lens cutting technology incorporated in the Indo Machines.

The Indo machines are specialized in performing high quality cutting jobs for the ophthalmic lenses. The speed edger, in its standard version, makes a general job in 3 basic steps: measuring step, roughing step and finishing step (pin beveling, polishing grooving) within the edger, the Combimax tracer –blocker uses 3D digital technology. The shape of rims and the curvature of the frame can be seen in real time and simultaneously for both eyes.

By means of a high resolution TFT color screen, it supplies necessary information in a clear, logic and comfortable way.

The equipment has a memory able to store jobs as well as shapes. This last feature is particularly helpful in the case of rimless frames.

Medicals International has installed its first demo machine in Lebanon last April to demonstrate the high performance of this machine in terms of cutting, polishing, drilling and finishing perfect jobs. The success of the tryouts resulted in concluding the installation of the first system in Lebanon at Hakim Optical Center, in Beirut Lebanon. Hakim Optical is an old and loyal client and his trust is based on the reliability of our products and service.

Indo machines gain their credibility and reliability from the continuous efforts of their manufacturing company for innovation and research, assured lately by the "Silmo D'or" award, European recognition in the optical field.

Elyse El-Chouefaty



OPERA Scan won the Silmo d'Or Award for the most innovative product for design and technology in the category of Equipment / Tools for Opticians and Optometrists



Indo team with the Award

On Friday, 27 October 2006, INDO won the award for its OPERA Scan product during the 2006 Silmo d'Or awards ceremony in Paris.

OPERA Scan is a device that automatically recognizes pattern contours and drill-point coordinates for rimless glasses. The device is the only one of its kind in the optical industry that uses scanner technology to determine coordinates. Thanks to its independence and ease of use, it adapts perfectly to any kind of work environment and makes the job of assembling rimless glasses much easier while guaranteeing total quality. OPERA Scan is designed to be used in conjunction with the



respected OPERA Drill system, a computer numerically controlled drill.

INDO's commitment to continuous technological innovation at the service of the optical industry has been acknowledged for the third consecutive year by the organizers of these prestigious international awards: in 2004, the OPERA Drill device was nominated for a Silmo d'Or in the same category, while INDO was also nominated in the Lens category in 2005

for EyeMADE, the only completely personalized progressive lenses.

With this award at the 13th edition of the Silmo d'Or Awards, INDO has demonstrated its firm commitment to innovation and technological progress, and has positioned itself as one of the leading companies in the optical industry.



Opera Scan; Front view



## SOMETHING I LEARNED FROM A FRIEND! WHY NOT SLT FIRST?

Recently, a friend of mine has been diagnosed for Primary Open Angle Glaucoma!

Having a father who suffered for 20 years from the same disease, he was worried and anxious of how his life style would change. We spoke together and i explained that this is a very common pathology and that with proper care and attention, there would be little to worry about. The news was im-mense. I never truly was able to estimate the physiological trauma that patients would experience after being told that they have a pathology that will stay with them for as long as a possible life time.

As he is “plugged in” to the digital modern life, he resorted to Google and the Internet for a massive search on the disease, the treatment options and bombarded me with all when we met the week after.

### EYE DROPS; THE FIRST INTERNATIONALLY RECOMMENDED LINE OF DEFENSE

Among the most popular treatment alternatives are the Glaucoma eye drops one of which is what has been recommended by the screening doctor and which his father has been using for so long. Funnily speaking, it was my recommendation as well when we had met earlier. He had a list prepared for why he will not start with the drug and below is a summary of it.

1. **Compliance** issue; this is something he was very well aware of. He has always followed up on his father to stick to the schedule of the drug intake time. He knows how hard it is for someone to appreciate the importance of the schedule and to abide by it.
2. The **Experienced Diurnal Pressure Changes**; being educated, he was concerned on how Glaucoma could destroy his optic nerve silently and without pain. He specifically mentioned the “Vision Thief”.
3. **Costs**; again this is something that he is well aware of, he was not really happy with a solution that involves regular payments that will add up to serious budgets when added together in the future.
4. Associated **Side Effect**; be it localized - redness, dryness and itchiness - or systemic in the case of Beta blockers - asthmatic and cardiovascular.
5. **Future Higher Surgical Failure Rate** in patient with a long history of eye drops use; it has been well documented that the long terms use pro-duces localized tissue inflammation - that could be even subclinical - and fibroblastic reactions that will affect the success rate of the future trab sur-geries.

### SELECTIVE LASER TRABECULOPLASTY (SLT); THE GENTLE TREATMENT

To him, SLT with its gentle, safe, selectivity and repeatability sounded like a perfect treatment. Unlike the drugs that sounded similar to a pain killer, SLT felt like a treatment requiring very little maintenance.

The idea of a possible re-treatment was quite acceptable for him as he knew SLT does not disturb the anatomical structure. However, the thing that most pushed him to choose SLT, was the absence of side effects. He wanted and insisted to start on SLT prior to the drugs as “if it does not benefit, it wouldn’t hurt and would not alter the efficacy of other treatment potentials”.

### THE LESSON

Thinking about it, I believe that we, as industry members, have been ignoring the patient perception on Glaucoma. We have inherited the drug solution and we were shortsighted and may afraid to change our habits. What could be every day news in a Glaucoma clinic for you, is maybe the worst news in many years for your patients. I suggest that we should listen to them more often.

By Salah Malek; VP Surgicals  
Medicals International

## ICL PRACTICE START-UP IN SOUTH KSA; A TESTIMONY BY DR. MOHAMMAD HANTERA FROM MAGRABI HOSPITAL; KSA

Medicals International is proud to launch the Visian ICL Phakic IOL practice in South KSA through the efforts of Dr. Mohammad Hantera in Magrabi Hospital – Assir. Visian ICL (Implantable Contact Lens) is an injectable posterior chamber intraocular lens that can be implanted in the eye (behind the iris and in front of the crystalline lens) through a simple surgical procedure, to correct moderate to high refractive errors, which cannot be corrected by laser refractive surgery. The Visian ICL was FDA approved in 2005 and has been used all over the world for more than 13 years.

Dr. Hantera is also working with the Toric ICL for patients with astigmatism. He said, “although LASIK can cover a broad spectrum of refractive errors but still there is a certain percentage of patients who are not able to have LASIK e.g. thin corneas, suspicious topographies, “Forme Fruste” Keratoconus, and high refractive errors. Those are the candidates to have Phakic IOLs.”

Visian ICL makes the surgery easy for Dr. Hantera (and any refractive surgeon) and it gives excellent results for the patient because:

1. It is made from Collamer™ – keeps the lens foldable and highly biocompatible with ocular tissues.
2. It covers a wide range in correction of myopia (-3.0 to -23.0 D) and (+3 to

+ 21.0 D) hyperopia. Toric ICL covers -6.0 to -23.0 D of sphere and up to +6.0 D of cylinder.

3. No delay in ordering the IOL (if available in stock, you can get it in KSA within 3 days); and even if it is not available, it takes 10 days to be available. “This is really a true relief” as per Dr. Hantera since “other Phakic IOLs take much longer time to be delivered”.

4. The surgery is so simple: it is done within 4-5 minutes under topical anaesthesia (with or without intracameral anaesthesia) – through temporal clear corneal incision 3.00 mm (easy to surgeons who are used to phacoemulsification).

5. Rapid visual rehabilitation (90% of Dr. Hantera’s patients reach 20/20 on the first day postoperative).

Dr. Hantera added: “it gave me a strong push in my career ... ‘word-of-mouth’ is the best advertisement for any surgeon !”

Dr. Hantera performs most common refractive procedures including LASIK, LASEK, PRK, Intracorneal Rings, and other phakic IOLs.

We congratulate Dr. Hantera and Magrabi Group in general for the launching of this new practice in Assir.

Youssef M. ALWAN,  
Senior Product Specialist,  
Medicals International- KSA



## SURGICAL DEPARTMENT; BIG ACTIVITIES IN KUWAIT

**DR. MANSOUR COMPLETES HIS INTACS CERTIFICATION- MABROUK!**



**DR. BAHBAHANY PERFORMS SUCCESSFULLY THE 1ST VISIAN TORIC ICL IN KUWAIT**



**MI KUWAIT WAS THE MAIN SPONSOR OF THE VITRECTOMY COURSE HELD AT ARMED FORCES HOSPITAL**



# O E R T L I ; P R O D U C T L A

## H I S T O R Y

The ultimate goal in cataract surgery is to reduce the incision size required for implanting an IOL to below 2 mm. This will be less traumatic to the eye with faster healing and total neutrality of astigmatism. The term MICS has become of widespread use and stands for Micro Incision Cataract Surgery.

The approach taken until short was to eliminate the infusion sleeve from the phaco hand piece, thus reducing the incision size to accommodate the blank phaco tip only. This method requires two conditions to be fulfilled:

1. The tip must remain cool in the incision
  2. The infusion must flow through a separate instrument
- Cool phaco was subsequently developed and the technique became bi-manual with the infusion entering the eye through the chopper or nucleus manipulator.

While cool bi-manual phaco brought 1.5 mm incisions and advantages like reduced total ultrasound energy, better followability (thanks to micro-pulse power modulation) and total elimination of wound burns, the bi-manual technique is a real draw back because of significantly reduced chamber stability and poor ergonomics.

**BIMANUAL MICS THEREFORE APPEARS TO BE A DEAD END ROAD! INITIAL ENTHUSIASM HAS FADED AWAY.**

Recent developments concentrate on designing a standard coaxial phaco tip and sleeve arrangement of reduced size. Alcon promotes standard 20G phaco with 2.2 mm incision size. This is identical to Oertli 20G tip (VV800220) and micro sleeve (VV603220) or 20G phaco pack (VV630011B) and has been available from Oertli for more than 2 years now!

But the goal is to achieve the same size as with bimanual MICS: 1.6 mm!

**CO-MICS WILL REPLACE BIMANUAL COOL PHACO, AND PROBABLY THE 3 MM STANDARD PHACO TECHNIQUE TOO...**

Oertli CO-MICS is the solution. Our CAD design methods and

advanced proprietary manufacturing techniques have resulted in a tip and sleeve concept which requires 1.6 mm incisions only, offers very good efficiency of emulsification and aspiration and assures high chamber stability.

The advantages of CO-MICS over bimanual MICS are absolutely convincing!

## WHAT ARE THE RESULTS?

We have consulted four of our key investigators: Prof. R.Menapace (Vienna), Prof. C.Prünte (Basel, now Vienna), Dr. Detlev Breyer (Zeitz Breyer private clinic Düsseldorf) and Dr. G.B.Marcon (Monfalcone, Italy). The results are very positive. Using a standard phaco technique with practically no learning curve, lens removal is accomplished with phaco times comparable to standard 3.0 mm incision phaco and certainly much faster than with bimanual MICS. It is unbelievable that even hard grades of cataract can be emulsified and aspirated through such a small tip and incision.

## WHAT ARE THE MACHINE SETTINGS?

Chamber stability is very good and followability is excellent. The incision is tight with no leakage.

Small lumen tips of course require higher vacuum settings. The relationship between flow and vacuum for the CO-MICS tip is illustrated on the advance leaflet.

We recommend:

For grooving                      For fragment removal

Vacuum limit                      50 to 100 mmHg    350 to 500 mmHg  
Flow (peristaltic)                15 ml                20 to 25 mm

## WILL CMP BECOME OBSOLETE?

Of course not! But we will use the term CMP in a different way: Cool Micro-pulse Phaco (instead of Cool Micro-incision Phaco). CMP technology is the Oertli answer to White Star technology with same performance features. It offers numerous advantages which are valid for standard coaxial phaco, bi-manual phaco and CO-MICS phaco:

- Significantly less ultrasound energy delivered to the eye
- Total elimination of wound burns
- Excellent followability thanks to micro-pulses

Micro-pulse has become of wide-spread use and works well with CO-MICS. However, since CO-MICS does not require real cool phaco, one can work with lower cooling factors (higher duty cycles) and hence gain in efficiency.

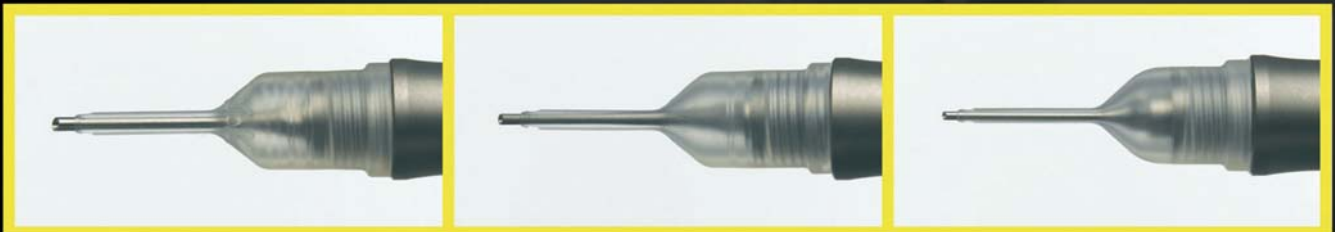
CO-MICS	Bimanual Cool Phaco
Standard phaco technique	Difficult two handed technique
Very good chamber stability	Often inadequate chamber stability
Good, constant flow of infusion fluid	Fluid flow changes with position of infusion chopper
High machine settings possible	Restricted machine settings
Non leaking incision	Blank tip not well sealed in the incision
Good efficiency	Longer phaco times
1.6 mm incision	1.5 mm incision



# U N C H : C O - M I C S T I P



## Die Oertli Evolution



**Excellerator**  
2.8 - 3.0 mm

**Microtip**  
2.2 - 2.4 mm

**CO-MICS tip**  
1.6 - 1.8 mm



## SUPPLIER'S CORNER: INTRALASE

# INTRALASE ACHIEVES ONE MILLION BLADE-FREE LASIK PROCEDURES WITH ITS FS LASER – *THE TECHNOLOGY FOR ALL-LASER LASIK*

### A FLASH BACK IN TIME!

Not long ago, may be long for some others, I was involved of the launch of the Staar foldable IOLs. I still remember those early days for me at Medicals when I used to go and attend new adopted phaco surgeries all over Lebanon and pray to come out with non eventful surgeries so that we can use the new lens.

Two days ago, Intralase Inc. celebrated the one millionth Intralase procedures. I feel truly privileged for being involved in the launch of this highly technical surgery in our part of the planet.

In Jan 2006, Medicals International started promoting the femtosecond laser technology and selling the Intralase. Initially I thought how would we be able to promote such an expensive device? Witnessing the global growth was a huge riddle and rather contradictory to my initial feelings.

Now and after escorting the successful launch of 8 different centers in the Middle East, the riddle has solved itself. But a new question posed itself! "Is the first one millionth procedure a call for celebration?". In a way yes, but the truth is that in 2005, 45 % of the total lasik procedures in the US were done using the Intralase.

If it took 4 years to get to the first million, my feeling is that it will take 4 months to get to the second. The precision, predictability and the quality of vision associated with the Intralase procedure made Intralase the inevitable next evolution in refractive surgery.

Here is where I would like to congratulate Intralase for this achievement and thank Medicals International for putting me another time at the far front of action making our patients see better.

I am privileged to witness and be part of the launch of foldable IOLs, the Phaco and the Micro-Phaco procedures, the Selective Laser Trabeculoplasty as well as the corneal ring surgery, and now Intralase.

Salah Malek- Vice President Surgicals  
Medicals International

IRVINE, Calif., (Nov. 8, 2006) – IntraLase Corp. (NASDAQ: ILSE) announced today that over one million LASIK procedures using the IntraLase Method™ have been sold worldwide to date, confirming the demand for IntraLase® FS Laser technology as blade-free LASIK grows among surgeons and patients.

The IntraLase FS laser is the first technology for a truly all-laser, blade-free LASIK procedure, replacing the hand-held microkeratome blade historically used in creating LASIK corneal flaps – the first step of the procedure – with a computer-guided, ultra-fast femtosecond (fem-to-second) laser. The IntraLase laser virtually eliminates the majority of the most severe sight-threatening LASIK complications related to use of the microkeratome and, by creating an optimal corneal surface below the flap, provides for better visual outcomes – taking many patients to 20/20 vision and beyond.

“Accomplishing one million advanced IntraLase Method procedures sold speaks to the rapid adoption of our technology world-wide among the top LASIK surgeons in the field – a fact we are very proud of,” said Robert J. Palmisano, president and chief executive officer of IntraLase Corp. “We are building upon the success of our LASIK platform to create a versatile refractive and therapeutic instrument for ophthalmic surgeons.”

IntraLase continues to make impressive worldwide gains in both sales and procedure volume as surgeons convert to the all-laser LASIK platform as a means of invigorating their practice. With 518 lasers installed worldwide as of September 30, 2006, the company reported approximately 363,000 procedures sold in the first nine months of 2006, representing a near 50 percent increase in volume over the same period in 2005.

“We have seen a significant improvement in our visual acuity outcomes and a meaningful reduction in our LASIK complication rate using the IntraLase Method. The blade-free approach is a very comforting message to patients, since it addresses one of their primary obstacles – fear of the surgery”, said Richard L. Lindstrom, M.D., founder and attending surgeon at Minnesota Eye Consultants, national medical director of TLC Vision and past president of the International Society of Refractive Surgery. “Adding the IntraLase all-laser LASIK platform to our patient offering has been a very positive experience for our patients, referring doctors and surgeons.”

More than 1,200 surgeons worldwide have incorporated the blade-free IntraLase Method into their LASIK practices. In fact, the majority of the top ophthalmic teaching institutes including Duke University Medical School, the Wilmer Eye Institute at Johns Hopkins, the Bascom Palmer Eye Institute at University of Miami, and Stanford University use the IntraLase FS laser technology to train future generations of LASIK surgeons. These early adopters are well positioned for success as the blade-free approach continues to gain the attention and favor of LASIK candidates.

#### **Lasik with the advanced IntraLase method in action:**

The 4th Generation IntraLase FS laser uses an infrared light beam, generating 60,000 pulses per second, to prepare the intracorneal bed and create the corneal flap in the first step of LASIK.

- Using an “inside-out” process, the laser beam is precisely focused to a point within the cornea.

- The laser pulses then create thousands of microscopic bubbles which define the incision within the intracorneal surface.

- Along the edge bubbles are then stacked up at a beveled angle – a feature unique to the IntraLase Method – to the corneal surface to complete the flap.

- From start to finish, the IntraLase Method typically takes 15 - 30 seconds.

**Company Celebrates Rapid Procedure Volume Growth: Nearly 50 Percent in 2006**

IntraLase Surgeons Leverage the Ultra-Fast Laser and Its Promise of Safety and Better Vision to Drive Patient Demand for Blade-Free LASIK with the IntraLase Method

*For More Information Contact: Liana Miller [liana@goolsbygroup.com](mailto:liana@goolsbygroup.com) 949.276.8920*

... CONT'D "INTRALASE ACHIEVES ONE MILLION BLADE-FREE ..."

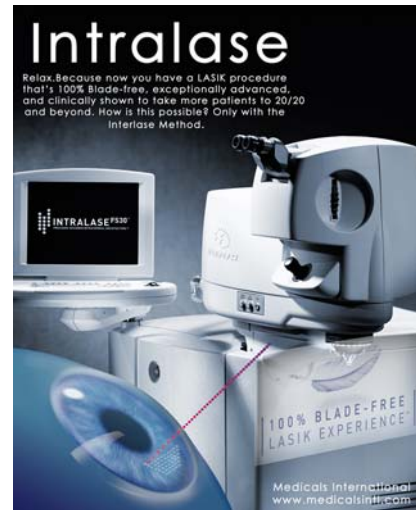
- The physician then exposes the prepared corneal bed for excimer laser treatment (the second step of LASIK) by lifting the flap.
- The LASIK procedure is complete when the flap is securely repositioned on its beveled edge.

With the IntraLase laser, the surgeon can precisely control the critical first step of LASIK. Physician-programmed laser specifications include flap diameter, depth, hinge location and width, and side-cut architecture – factors which can be varied to meet patients' needs. The IntraLase laser creates a distinctive beveled-edge flap, which allows for precise repositioning, alignment and seating after LASIK is completed. This feature reduces the risk of flap displacement, a complication seen with microkeratome flaps.

**Blade-Free Safety and Better Vision with All-Laser LASIK**

The IntraLase laser makes LASIK safer by replacing the hand-held microkeratome blade with the computer-guided precision of a laser, virtually eliminating almost all the most severe, sight-threatening blade-related LASIK complications as a result. Leading LASIK surgeons report on data of the more than one million IntraLase Method procedures, which demonstrate an impressive safety profile.

Beyond improving the safety of the procedure, LASIK with the advanced IntraLase Method is clinically proven to deliver better visual outcomes in both standard and Custom LASIK procedures with more patients achieving visual acuity of 20/20, 20/15 and even 20/12.5. These remarkable results are the product of the optimized corneal surface prepared by the IntraLase FS laser in creating the corneal flap. The precision of the laser reduces the microscopic inconsistencies on the corneal bed, providing an optimal surface for the vision correction performed by the excimer laser in step two of the LASIK procedure.



OFFICE ID; JORDAN OFFICE

With the objective of delivering the organization's message of giving our customers the best of what the industry has to offer in terms of products, added to it our concern of best servicing, Medicals International opened its office here in Jordan.

Three years ago, what was implemented as a small office, being part of a big organization, is turning to become a major player in the local market, which in its turn changed and improved a lot during that same period.

All of that couldn't be possible without the basic resources of knowledge, will and beliefs of the people behind this idea and successful story. Starting with knowledge, Medicals International brought to Jordan more than 10 years of business know-how and experience and implemented them in a market that was still immature but thirst for knowledge. This practice could be seen with the introduction of the latest innovations, and in the efforts of increasing the standards of service and providing a better outcome to our main target, the end user or in other word, the patient.

When it comes to will, and without forget-

ting that being an economical entity after all, investing resources, either tangible or not, would need a certain ground to be based on, which already existed in that booming country, that will is incarnated in the people who are working in the shadows to transform our customers need into something they can finally possess, and their patients' worries into an actual positive asset they have within their reach.

Medicals International had always this belief of being a partner to its customers and not a simple supplier of their goods, of being someone they can rely on with their necessities, share with them their dreams of expanding and their needs of improving their ways of serving their clients, which will for sure lead to their market empowerment and the organization getting one step ahead to its basic objective.

This was a broader look of an inspiration that could be touched now. But plans need execution on the ground and this is where MI-Jordan team comes. A team of young people so dedicated to accomplish things and use whatever achievement as only a

base of what they can get to in the future. Call the company and you will get a warm welcoming from the customer service department, people just sitting anxious of getting your requests and orders served in the way that suits you the most. Wait a while, and you will be visited by our delivery team member who, with a smile, hands you whatever you requested and thank you for dealing with us. All of that without forgetting our sales team's role of implementing a market presence and distributing the main message of better servicing and best products availability.

Three years now, and the story is still in its beginning. More challenges are waiting for us ahead. More determination is needed to prove that this team of people is here to stay, to spread the message of this regional player into a market full of potentials and of course helping our partners in realizing their goals, and most importantly ease the distress of the patients, whom we think of first.

By Sami Sila, Associate IOM; Jordan



George Aratimos; Associate Sales Manager



Ala' Magdadi; Territory Manager-Contact Lens



Ashraf Hassan; Jr. Territory Manager-Surgicals



Sami Sila; Associate Internal Office Manager



Maha Maani; Operations Officer



Jalal Hamzeh; Customer Service Officer



Ossama Kokash; Delivery Officer

**Address:**  
 Howatri Bldg, Suite 4  
 Al Razi street, Jabal El Hussein  
 Amman, Jordan  
 P.O. Box 930298,  
 amman 11193  
**Tel:** 962 6 569 5166 ;  
**Fax:** 962 6 569 5177  
**Email:** info@medicalsintl.com

## GETTING PERSONAL

*While you always hear this statement; "It's business, nothing personal", I have developed over the years a contradictory belief: everything is personal.*



*Some cultures develop this "personal" trait around the individual himself, and others develop this trait in a collective sense. Many studies in business have tackled the cultural issue in strategic decisions describing the culture of firms and the social implications in doing business. Many authors have stressed on the importance of internal capabilities of the firm as primary source of competitive advantage, highlighting cultural and social dynamics in the top management and in the organization. Of those we can mention the classical study of Edith Pennrose (*The Firm as an Administrative Organization*, Oxford University Press for an extract of *The Theory of the Growth of the Firm* by Pennrose E., 1959) and Alfred Chandler in comparing the American competitive managerial capitalism with the personal managerial capitalism in Great Britain and the collective capitalism in Germany (*Scale and Scope: The Dynamics of Industrial Capitalism*, 1990). Other studies followed a more classical, also said "rational", approach for business strategy, stressing on the attractiveness of the industries and other external factors. Michael Porter's theory on how management should take decisions is the best example here.*

*Out of the wide and rich literature you may find, a person can only pick up what's true for him/her. You can take one side, or different points from both sides to create your own perception of your business. After all, the world is not neatly divided into specific quadrants.*

*So I've been asking myself, what's behind any huge multinational firm, with all its glamour and magnitude, behind its top managers and board of directors? Obviously there are the shareholders, the actual owners of the firm. Why and how a successful person launched such a firm? What drives someone to buy a stock or a share in that firm? They buy it because they're seeking a diversified portfolio to decrease the risk to a higher end of increasing their returns, or because it's related to the self-fulfillment. Or they want to influence the decisions in that firm...or they are day trading...or they simply want more gold! Isn't an investment one of cures of a lean purse?! (Classon G., *The Richest Man in Babylon*, 1926) Well Maslow's pyramid is perfectly applicable in this answer. So the way I see it, things can't get more personal than that! And by way, I believe everything human made is personal.*

*Don't you think that a loyal patient walks into your optical shop time after time because in his/her internal representations you are offering a sense of security and trust? Don't they trust you with their most precious? (Internal representations is how a person see or hear experiences in his/her mind) Don't you think the Biomedics Evolution lens can be found everywhere!?? Then why this particular patient keeps coming to your shop to buy this same lens!?*

*What I'm trying to say, Human Beings are driven by their believes to guide their entire lives. So yes it is personal when we implement a guarantee and return policy for our lenses. It is personal when we assist the doctor in the surgery room and monitoring our machines every step of the way. It is personal because we believe that your comfort and satisfaction will nourish ours, because we believe that's there's a mutual bond between us, not just a supplier-customer relationship, it's a win-win partnership where we seek your personal satisfaction.*

Bassam Khoury

Associate Internal Office Manager - Kuwait

**Head Office,**  
Mansourieh, Lebanon  
Tel. 961-4-530 630  
Fax: 961-4-409 365  
Email: info@medicalsintl.com  
Website: www.medicalsintl.com

P.O. Box: 90-1585  
Jdeidet El Meten,  
Meten 1202 2120



**We Think of The Patient First**



During the Leadership Training



Weird Training....



Full concentration and planning to meet the highly challenging new targets

## WHAT'S GOING ON AT MI?

At the end of each year, the long waited for annual meeting is there, witnessing the display of each office team achievements of the year, and discussing the different situations and challenges faced. From the other end, here is management setting even more challenging targets for 2007, where the attendees, after having achieved targets, despite all the difficulties we went through, were overwhelmed.

The preparations for the new challenging year started by the motivational leadership training, continued from previous years, and a relaxing and fun annual party where many presents were distributed for the team members that have been with the company for 10 years: Nassim Haddad & Maroun Youssef. The famous "Mont Blanc" pen was handed for Mireille Gemayel, Mohamad Zaatar, Majed Abou Arraj, Toni Abou Abboud, and Joe Mourad for their 5th anniversary in Medicals International. Appreciation gifts were also distributed to all the team in Lebanon as an appreciation for their commitment and perseverance during the war in the summer and their great efforts of achieving over targets.



Loudly FUN!



The boss cutting the cake with the team