



• Lens measurements

Birth: *mm* equatorial, *mm* anteroposterior





• Lens measurements

• Birth: 6.4 mm equatorial, 3.5 mm anteroposterior





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- Adult: #
 mm equatorial, #
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Cataract surgeons will sometimes employ an age-based rule of thumb for guesstimating the A-P depth of a lens—what is it?





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The fact that the magnitude of this number correlates with age implies that the lens never stops getting thicker. Is this the case?



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What is the cause of this thickening? That is, does it result from enlargement of existing cells/structures, or the creation of new cells (ie, replication)?





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What is the cause of this thickening? That is, does it result from enlargement of existing cells/structures, or the creation of new cells (ie, replication)? It's both—but it must be stressed that replication is the driving force.





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Which cells are doing the replicating?





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Where are the lens epithelial cells found?

They line the inner aspect of the anterior capsule all the way out to the equatorial region. They are squamous? columnar? in shape





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They line the inner aspect of the anterior capsule all the way out to the equatorial region. They are cuboidal in shape





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They line the inner aspect of the anterior capsule all the way out to the equatorial region. They are cuboidal in shape, and arranged in a single -layered fashion.





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Lens epi cells and their relation to the capsule, GZ, and bow region





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Is this pronounced 'bow' as in 'bow tie,' or bow as in 'take a bow'? It's pronounced 'bow' as in 'the bow of a ship' (which is what it looks like in cross-section; look back at the Figure)

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 - Lens curvature

 $\overset{\text{increases vs}}{\rightarrow} \overset{\text{tor}}{\rightarrow} \text{refractive power}$





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- With age...
 - Lens curvature increases \rightarrow \uparrow refractive power
 - Refractive index

increases vs decreases \rightarrow refractive power




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 - Birth: 6.4 mm equatorial, 3.5 mm anteroposterior
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 - Lens curvature increases $\rightarrow \uparrow$ refractive power
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So which do people become with age—more myopic or more hyperopic?





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 - Refractive index decreases $\rightarrow \downarrow$ refractive power

So which do people become with age—more myopic or more hyperopic? As the change in an individual's refraction is a function of the interplay between these, it can be either





























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No question—proceed when ready



No question—proceed when ready



The lens of a 25-year-old woman demonstrated by Scheimpflug photography. The lens is in the nonaccommodative state in *A*, and accommodating in *B*.





Lens Measurements







The lens of a 25-year-old woman demonstrated by Scheimpflug photography. The lens is in the nonaccommodative state in *A*, and accommodating in *B*. Note that the anterior radius of curvature is shortened in the latter case.





• Embryologically, the vitreous vitreous





Zonules

• Embryologically, the *tertiary vitreous*







Zonules

• Embryologically, the *tertiary vitreous*

Originate from	the	very specific tissue	of the	
pigmented vs nonpigmented	epit	helium of the	specific portion 1	and
specific portion 2	the	ciliary body		





- Zonules
 - Embryologically, the *tertiary vitreous*
 - Originate from the basal lamina of the nonpigmented epithelium of the pars plana and pars plicata of the ciliary body





- Zonules
 - Embryologically, the *tertiary vitreous*
 - Originate from the basal lamina of the nonpigmented epithelium of the pars plana and pars plicata of the ciliary body
 - Three sets of fibers:

1) ?

2) **?** 3) **?**



- Zonules
 - Embryologically, the *tertiary vitreous*
 - Originate from the basal lamina of the nonpigmented epithelium of the pars plana and pars plicata of the ciliary body
 - Three sets of fibers:
 - 1) Equatorial
 - 2) Anterior
 3) Posterior





- Zonules
 - Embryologically, the *tertiary vitreous*
 - Originate from the basal lamina of the nonpigmented epithelium of the pars plana and pars plicata of the ciliary body
 - Three sets of fibers:

1) *Equatorial*: Insert at the same location (duh)

2) Anterior
 3) Posterior



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 - Embryologically, the *tertiary vitreous*
 - Originate from the basal lamina of the nonpigmented epithelium of the pars plana and pars plicata of the ciliary body
 - Three sets of fibers:

1) *Equatorial*: Insert at the equator (duh)

2) Anterior
 3) Posterior





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 - Embryologically, the *tertiary vitreous*
 - Originate from the basal lamina of the nonpigmented epithelium of the pars plana and pars plicata of the ciliary body
 - Three sets of fibers:
 - 1) *Equatorial*: Insert at the equator (duh)
 - These zonules regress vs strengthen
 with age
 - 2) Anterior
 - 3) Posterior





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 - Three sets of fibers:
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 - These zonules regress with age
 - 2) Anterior
 - 3) Posterior





- Zonules
 - Embryologically, the *tertiary vitreous*
 - Originate from the basal lamina of the nonpigmented epithelium of the pars plana and pars plicata of the ciliary body
 - Three sets of fibers:
 - 1) *Equatorial*: Insert at the equator (duh)
 - These zonules regress with age
 - 2) *Anterior*: Insert ____mm anterior to equator
 - 3) Posterior





- Zonules
 - Embryologically, the *tertiary vitreous*
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 - Three sets of fibers:
 - 1) *Equatorial*: Insert at the equator (duh)
 - These zonules regress with age
 - 2) *Anterior*: Insert 1.5 mm anterior to equator
 - 3) Posterior





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 - Three sets of fibers:
 - 1) *Equatorial*: Insert at the equator (duh)
 - These zonules regress with age
 - 2) Anterior: Insert 1.5 mm anterior to equator
 - 3) *Posterior*: Insert _____mm posterior to equator





- Zonules
 - Embryologically, the *tertiary vitreous*
 - Originate from the basal lamina of the nonpigmented epithelium of the pars plana and pars plicata of the ciliary body
 - Three sets of fibers:
 - 1) *Equatorial*: Insert at the equator (duh)
 - These zonules regress with age
 - 2) Anterior: Insert 1.5 mm anterior to equator
 - 3) *Posterior*: Insert 1.25 mm posterior to equator



Lens Measurements

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 - Three sets of fibers:

Probably more important to remember the relative insertions of the anterior and posterior zonules rather than the specific distances

- 2) Anterior: Insert more centrally than the posterior
- 3) Posterior: Insert less centrally than the anterior





Same figure as a few slides ago, but this time *note the relative locations of the insertions of the anterior vs posterior zonules*





 What are the three lens/cataract layers as encountered in cataract surgery?



- ?
- ?





- What are the three lens/cataract layers <u>as</u> encountered in cataract surgery?
 - Nucleus
 - Epinucleus
 - Cortex

Lens Measurements





- lens capsule -
- cortex -
- epinucleus —
- inner nucleus (aka the endonucleus aka jes plain ol' nucleus)




- What are the three lens/cataract layers <u>as</u> <u>encountered in cataract surgery?</u> How do these layers differ from one another histologically?
 - Nucleus: ?
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 - Cortex: ?





• What are the three lens/cataract layers <u>as</u> <u>encountered in cataract surgery?</u> How do these layers differ from one another histologically?

- Nucleus:
- Epinucleus:
- Cortex:



Trick question—they don't! These terms refer to differences in *appearance* and *behavior* of lens material encountered during cataract surgery. They are *descriptive* terms, not histological.





Briefly, how does each layer look and behave during cataract surgery? **Nucleus**:

Epinucleus

Cortex





Briefly, how does each layer look and behave during cataract surgery? **Nucleus**: Opaque, usually with an amber hue. The nucleus is firm, and cannot be aspirated from the eye until/unless it is broken up (emulsified, hence the term *phacoemulsification*).

Epinucleus

Cortex





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Epinucleus: Clear to cloudy. The epinucleus is soft, and can be aspirated without emulsification (although emulsifying energy is often employed during epinucleus removal in order to make the process faster/more efficient).

Cortex

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- **Epinucleus**: Clear to cloudy. The epinucleus is soft, and can be aspirated without emulsification (although emulsifying energy is often employed during epinucleus removal in order to make the process faster/more efficient).
- **Cortex**: Thin and wispy, the cortex is like a layer of tape stuck to the inner aspect of the capsule. Using aspiration and vacuum power, it is peeled off at the end of the case. It requires no emulsification.