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ROYAL MAXIM PALACE KEMPINSKI, CAIRO

***WHEN THE BAG FAILS – DOUBLE
FLANGED FIXATION FOR A SECOND
CHANCE***

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Management of Dislocated IOL

Case Presentation

Patient: 60 years old male patient

Chief Complaint: Sudden right eye decreased vision (DOV) 3 months ago

History: Right eye phacoemulsification + IOL implantation

Examination of Right Eye:

Autorefraction: Unremarkable

Vision: Unaided 0.05

Cornea: Clear with stitch marks at 12 o'clock

Examination Findings

Anterior Segment

IOL: One-piece foldable IOL dislocated anteriorly
One haptic in sulcus, other dislocated anteriorly capturing the

Haptics: iris.

Capsule: Lost anterior capsule rim, opened posterior capsule

Vitreous: Vitreous band in anterior chamber

Posterior Segment

No abnormality detected (NAD)

IOP: 14 mmHg by Air puff

Clinical Challenge: Management of dislocated one-piece foldable
IOL with compromised capsular support

Double Flanged Scleral Fixation

Double Flanged Scleral
Fixation

An intraoperative photograph showing a double flanged scleral fixation procedure. A surgical microscope provides a magnified view of the eye. A green, double-flanged scleral fixation device is being positioned on the sclera. A surgical instrument with a green handle is visible on the right, and another instrument is on the left. The eye is held open by a speculum, and the surgical field is illuminated.

Dr. Ahmed Sheikh ElArab

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Post-Operative Results

Visual Outcome

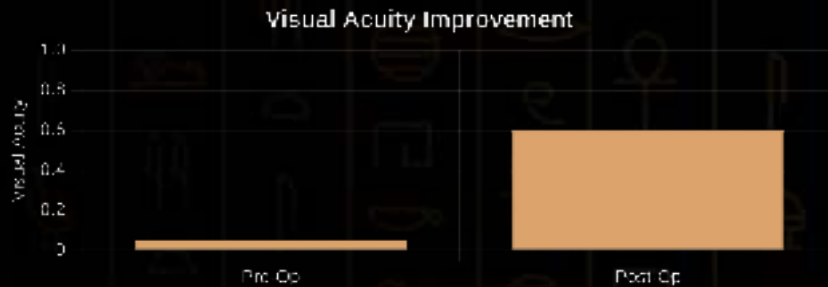
Refraction: -0.75 / -1.00 × 130

BCVA: 0.6

Anterior Segment

IOL Position: Stable, centered

Haptics: Securely fixated with double flanged technique



Surgical Success

Double flanged scleral fixation technique successfully restored visual function and IOL stability

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THANK
YOU

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