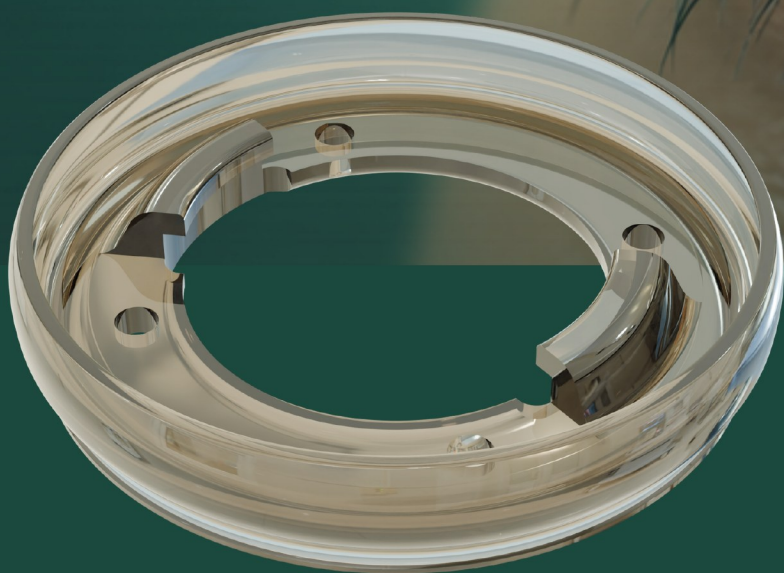




Preserving capsular shape  
and endocapsular space



eyepcr.com  
info@eyepcr.com



# The capsular environment matters

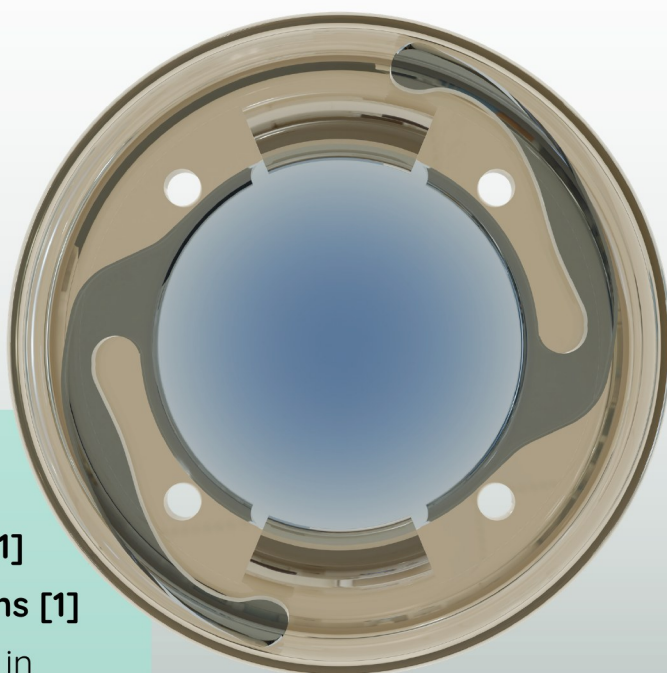
Capsular bag changes and postoperative fibrosis following surgical replacement of the natural lens with an intraocular lens (IOL) implant may lead to:

- Postoperative complications, including posterior capsule opacification (PCO), IOL instability, dysphotopsia, posterior vitreous detachment (PVD), and refractive surprises
- Greater complexity in future IOL exchange procedures
- Reported complication rates of up to 30% at 3–5 years postoperatively\*

## A new paradigm in capsular management

From reactive complication management to proactive capsular care, fixOflex is designed to preserve capsular shape and endocapsular space/volume following phacoemulsification.

- Barrier to lens epithelial cell migration
- Retention clips to support IOL stability
- Designed to facilitate future IOL exchange
- Reduced dysphotopsia
- Designed to limit vitreous movement



## Our clinical evidence

- **PCO incidence: 0.83% vs 13.0% at 12 months [1]**
- **Nd:YAG capsulotomy: 0% vs 6.5% at 12 months [1]**
- Adverse-event rates within the range reported in published cataract-surgery data [1]
- Preserved IOL optical quality and stable centration [2]
- Reduced dysphotopsia [3]

\* Peer-reviewed publications, full reference available at [eyepcr.com/resources](https://eyepcr.com/resources).

[1] Pallikaris IG, Elmassry A, et al. Transl Vis Sci Technol. 2026;15(2):8. DOI: 10.1167/tvst.15.2.8.

[2] Britz L, Hammer M, Łabuz G, et al. Transl Vis Sci Technol. 2026;15(7):5. DOI: 10.1167/tvst.15.7.5.

[3] Pallikaris IG, Tsoukalas S, Christaras D, Ginis HS. Entoptic Phenomena with the fixOflex Endocapsular Device. ARVO 2025, Poster A0413

## EXPLORE THE EVIDENCE

Clinical evidence · Surgical Guide  
IFU · Professional resources



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CE  
2803

EYE PCR B.V.  
Westerdoksdiijk 423  
1013 BX Amsterdam · The Netherlands  
[info@eyepcr.com](mailto:info@eyepcr.com) · [eyepcr.com](https://eyepcr.com)

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For professional use only. Refer to the IFU for complete indications, contraindications, warnings, and instructions for use.