AUROSIL PLUS

(High Quality, Purified, 5000 cSt Silicone Oil)

- *Greater stability*
- *Reduced emulsification due to a high degree of purification and low level of reactive -OH end groups*
- *Less tissue impregnation*
- *Subject to all physical and chemical analysis (H-NMR spectral test, gel permeation chromatography study and gas chromatography) to ensure purity level*
- *Low level of catalyst impurities minimize the risks of interactions with the ocular environment*
- *High quality product*

CE 0197

DESCRIPTION

AUROSIL PLUS-(5000 cSt) is a (Purified Polydimethyl siloxane) highly purified long chain Polydimethyl siloxane trimethyl siloxy terminated silicone oil designed for prolonged tamponade after surgical treatment for severe retinal detachment.

CHARACTERISTICS

Viscosity (at 25°C)	: 5000 cSt ± 250 cSt
Refractive index (at 25°C)	: 1.4013- 1.4053
Specific gravity (at 25°C)	: 0.967 – 0.975
Average Molecular Weight (Daltons)	: 50,000 ± 1000
Toxic Residue	: Nil
Content of –OH end groups	: < 70 ppm

INDICATIONS

AUROSIL PLUS is indicated for use as a prolonged retinal tamponade in selected cases of complicated retinal detachments like proliferative vitreoretinopathy (PVR), traumatic retinopathy, Proliferative diabetic retinopathy (PDR), Cytomegalovirus (CMV) retinitis, Giant tears, primary use in AIDS – related CMV retinitis and other viral infections affecting the retina.

CONTRAINDICATION

AUROSIL PLUS is contraindicated in patients with known hypersensitivity to silicone oil. In Pseudophakic patients with silicone intraocular lens (silicone oil can chemically interact and opacify silicone elastomers).

PRECAUTIONS

As with any surgical procedure posterior segment surgery using AUROSIL PLUS presents risks which the surgeon must evaluate.
Do not resterilize. Single use product only. Do not use if packaging that ensure sterility is damaged. Do not use after the expiry date.

DIRECTIONS

In aseptic conditions transfer the contents of the bottle into a sterile syringe. Place the syringe in a syringe driver in order to facilitate the injection. Plug in the infusion terminal to the tip of the syringe. Inject slowly.

During withdrawal avoid leaving silicone bubbles in the vitreo-retinal cavity. Once AUROSIL PLUS is removed from the patient's eye it should be treated as any human biological product.

ADVERSE REACTIONS

The most common adverse reactions include cataract, anterior chamber oil migration, keratopathy and glaucoma. Other adverse reactions include cornea band-shaped degeneration, corneal opacity, silicone oil emulsification, angle blockade, macular pucker, optic nerve atrophy, traction detachment, phthisis, redetachment of retina, vitreous hemorrhage, rubeosis iridis, temporary IOP increase, hypotony, endophthalmitis, aniridia, choroidal detachment, subretinal infusion, cystoid macular edema, proliferative vitreoretinopathy reproliferation, subretinal silicone oil, and Corneal decompensation.

ADMIXTURE INCOMPATIBILITY

Do not admix with any other substance prior to injection

STORAGE

Store between 2°C and 35°C

SUPPLY

10ml vial in a sterile pouch

Information published in this catalogue is subject to change without notification

aurolab
Excellence . . . in sight

No 1, Sivagangai Main Road, Veerapanjan, Madurai 625 020, India.
Phone: 91 452 2446100 Fax: 91 452 2446200
E-mail: sales@aurolab.com Web: www.aurolab.com

Issue 2 - 08/10