

# The use of I-ZIP® Adherent Ocular Bandage to help cataract surgery incisions seal more effectively

<b>Submission date</b> 09/07/2009	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 04/09/2009	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 31/01/2013	<b>Condition category</b> Eye Diseases	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

Not provided at time of registration

## Contact information

### Type(s)

Scientific

### Contact name

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### Contact details

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## Additional identifiers

### Protocol serial number

Protocol 1, version 2

## Study information

**Scientific Title**

The use of I-ZIP® Adherent Ocular Bandage to help cataract surgery incisions seal more effectively: a prospective consecutive randomised case-controlled study

**Acronym**

I-ZIP®

**Study objectives**

To determine whether I-ZIP® improves the sealing and architectural profile of clear corneal incisions and reduce the risks of leaking and endophthalmitis.

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

Berkshire Ethics Committee approved on the 9th June 2009 (ref: 09/H0505/35)

**Study design**

Prospective consecutive randomised case-controlled study

**Primary study design**

Interventional

**Study type(s)**

Treatment

**Health condition(s) or problem(s) studied**

Endophthalmitis/cataract surgery

**Interventions**

The methodology is identical for both arms, except for the application of the I-ZIP® bandage in the treatment arm, or not in the control arm. Both arms will receive clear corneal incision 2.2mm wide micro coaxial phacoemulsification cataract surgery. The intraocular lens will be injected using C-cartridge and wound-assisted techniques. Patients will then be receive either the application of I-ZIP®, or not.

Within 1 hour of completing surgery: optical coherence tomography (OCT) examination

Within 2 hours of completing surgery: slit lamp examination using 2% fluorescein and measurement of intraocular pressure (IOP)

Day 1 post-operative examination: OCT, slit lamp and IOP, slit lamp photograph

Day 7 post-operative examination: OCT, slit lamp and IOP

**Intervention Type**

Other

**Phase**

Not Applicable

**Primary outcome(s)**

Measured less than 1 hour, less than 2 hours, 1 day and 7 days post-operatively:

1. Optical Coherence Tomography (OCT) wound architecture
2. Intra-ocular pressure

**Key secondary outcome(s)**

No secondary outcome measures

**Completion date**

30/12/2009

## **Eligibility**

**Key inclusion criteria**

1. Routine cataract surgery
2. 2.2 mm wide clear corneal incision
3. No wound enlargement
4. No stromal hydration of wound
5. Typical "older patient" of either sex, no specific age limits

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Other

**Sex**

All

**Key exclusion criteria**

1. Anterior segment ocular disease
2. Corneal endothelial dystrophy
3. Complicated cataract surgery
4. Corneal suture
5. Stromal hydration required

**Date of first enrolment**

18/06/2009

**Date of final enrolment**

30/12/2009

## **Locations**

**Countries of recruitment**

United Kingdom

England

**Study participating centre**  
**Department of Ophthalmology**  
Windsor  
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## Sponsor information

**Organisation**  
Royal Berkshire NHS Foundation Trust (UK)

**ROR**  
<https://ror.org/034nvr87>

## Funder(s)

**Funder type**  
Industry

**Funder Name**  
I-Therapeutix, Inc. (USA)

## Results and Publications

Individual participant data (IPD) sharing plan

**IPD sharing plan summary**  
Not provided at time of registration

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/11/2010		Yes	No
<a href="#">Participant information sheet</a>	Participant information sheet	11/11/2025	11/11/2025	No	Yes