



STANDARD
LIST

ESSENTIAL EQUIPMENT LIST

for screening and surgery for
Trachomatous Trichiasis (TT)



IAPB considers appropriate information as a vital resource in improving eye health in developing countries. In resource-constrained settings especially, procurement decisions can play an important role in ensuring that a maximum number of people have equitable access to quality services, the investment makes a satisfactory social return and significantly enhances the quality of life of the beneficiaries.

The IAPB consults panels of experts with considerable experience in resource constrained settings, to identify good practice and assist with the compilation of **Essential Equipment Lists**. Armed with IAPB's Essential Equipment lists, NGOs, Ministries of Health, District Health Services, eye clinics and hospitals in developing countries can plan and purchase inventory which will support the delivery of high quality care and enhance health outcomes.

Trachoma is the world's leading cause of preventable blindness, particularly in the most vulnerable populations. Trachoma is estimated to blind one person every 15 minutes. Surgery is one component of the SAFE strategy to address trachoma. The *IAPB Essential Equipment for screening and surgery for Trachomatous Trichiasis* (TT) list suggests a minimum set of items to perform high quality TT surgery under conditions prevalent in most endemic areas. It reflects the procedures and requirements outlined in the WHO's Trichiasis Surgery for Trachoma (second edition, 2013) and is aligned with the conclusions and recommendations from the ICTC's preferred practices Global Scientific Meeting in Trachomatous Trichiasis (2012). This list thus offers suggestions for instruments for alternative surgical procedures: Trabut surgery (2.1) and two types of Bilamellar Tarsal Rotation (BLTR) Surgery (2.2.1 and 2.2.2).

Please visit the IAPB Standard List at <http://iapb.standardlist.org> for latest pricing and special rates for IAPB members and their partners.

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- Martin Kollmann, CBM Senior Advisor for Neglected Tropical Diseases and Chair of the International Coalition for Trachoma Control (ICTC)
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- Sheila West, El-Maghraby Professor of Preventive Ophthalmology, Dana Center for Preventive Ophthalmology

Description	Standard List Section or locally purchased (L)	Essential (E)	Unit
SCREENING			
Binocular 2.5 Loupe (Also recommended for surgery)	<u>5.15</u>	E	1 pc
Solar powered Torch/Magnifier (Archlight Pen Ophthalmoscope)	To be added 2014	E	1 pc
SURGERY			
Stainless Steel Sterilization Case (large)	<u>4.5</u>	E	1 pc
Autoclave or Pressure Cooker	<u>3.8</u> or L	E	1 pc
Metal Bowl 4.5L 260mm x 125mm	<u>3.15</u> or L	E	1 pc
Kidney Bowl 0.5L 250mm x 36mm	<u>3.15</u>	E	2 pcs
Galley Pot	<u>3.15</u>	E	1 pc
INSTRUMENTS FOR TT – LID SURGERY			Quantity required for one set
1 For all procedures below:			
Moorfield's Suture Forceps	<u>4.1</u>	E	1 pc
Suture & Dissecting Forceps – Serrated Ends	<u>4.0</u>	E	1 pc
Silcock's Needleholder	<u>4.2</u>	E	1 pc
Scissors Straight – Blunt tips	<u>4.0</u>	E	1 pc
Scalpel Handle No 3	<u>4.0</u>	E	1 pc
1.2 Additional Equipment for alternative surgical procedures:			
1.2.1 Trabut lid surgery			
Mosquito Forceps Straight	<u>4.0</u>	E	2 pcs
Trabut Lid Plate	<u>4.5</u>	E	1 pc
1.2.2 Bilamellar Tarsal Rotation (BLTR) Surgery			
1.2.2.1 Type 1 Bilamellar BLTR Surgery with TT-clamp			
TT-clamp	<u>4.5</u>	E	1 pc
1.2.2.2 Type 2 Bilamellar BLTR Surgery without TT-clamp			
Mosquito Forceps Straight	<u>4.0</u>	E	2 pcs
2 Complete sets of instruments for alternative surgical procedures:			
2.1 Trabut lid surgery	1 + 1.2.1	E	1 set
2.2 Type 1 Bilamellar BLTR Surgery with TT-clamp	1 + 1.2.2.1	E	1 set
2.3 Type 2 Bilamellar BLTR Surgery without TT-clamp	1 + 2.2.2.2	E	1 set
CONSUMABLES AND DISPOSABLES			Unit
Scalpel Blades no 15	<u>4.0</u>	E	1 pack: 100 pcs
Vicryl Sutures Double Armed Cutting Needle	<u>3.1</u>	E One double armed suture can be used for one patient	1 pack: 12 pcs

Description	Standard List Section or locally purchased (L)	Essential (E)	Unit
Either 4-0 Black Braided or Silk Suture	<u>3.1</u>	OPTION to Vicryl i) If armed, it has needle attached ii) If on reel needs attachable and re-usable cutting eye needles, 3/8 circle	1 pack: 12 pcs
21G Sterile Disposable Needles	<u>3.3</u>	E One needle per eye: 1 unit of 100 needles may last for 50 patients with bilateral surgery	1 pack: 100 pcs
5ml Sterile Disposable Syringe	<u>3.3</u>	E If kept sterile one syringe can be used for the same patient only under outreach conditions (so 1 unit of 100 syringes may last for up to 100 patients with bilateral surgery)	1 pack: 100 pcs
Gauze Roll 90cm x 91M	<u>3.4</u>	E	1 pack: 10 pcs
Zinc Strapping 2.5cm x 5m (10 pcs)	<u>3.4</u>	E	1 pack: 10 pcs
Mask and Cap for Surgeons	L	E	1 pack
Sterile Surgical Gloves (appropriate size)	<u>3.2</u>	E If kept sterile, one pair of gloves can be used for both eyes	1 pack: 50 prs
Sterile Drape – approx. 1 metre, with a central hole approx. 10 x 10cm made of linen	L	E 1 eyelet per patient	1 drape
Sterile Drape – disposable made of sterilized paper		OPTION For campaign mode outreach only due to expense. As an alternative use the inner paper of the gloves as a drape by making a hole in it.	
MEDICATIONS/SUPPLIES			
Tetracycline 1% Eye Ointment or Chloramphenicol 1% Eye Ointment	<u>1.1</u>	E For the general prevention of postoperative infection antibiotic ointment is applied once at the end of the operation in theatre before the operated eye is patched	1 pack: 25 5g tubes
Azithromycin Tabs 250mg*	<u>1.1</u> National programs can apply to the International Trachoma Initiative (ITI) and include it into their annual drug donation programme requests Unit: 1 Bottle of 500 tabs	E Reduction of risk for recurrence of Chlamydial infection: Around TT surgery give one dose of Azythromycin tablets (4 tabs needed per adult) *If Azythromycin tablets are not available, or for persons not eligible such as pregnant women, alternatives are Tetracycline eye ointment for a full 6 week treatment course; or Azythromycin eye drops	Blister packs of 4 tabs are, available to purchase outside of the donation programme

Description	Standard List Section or locally purchased (L)	Essential (E)	Unit
Azithromycin Dihydrate 200mg Base 5ml Suspension	<u>1.1</u>	Only for very young children with TT (rare and not everywhere); for those you would also need everything for general anaesthesia (GA) Average needed is 15ml per child. (Usually for MDAs average POS needed is 10ml per child. 15 ml per child is suggested because many may be older children)	1 bottle 30ml
Amethocaine hcl 0.5% Eye Drops (or similar topical anaesthetic)	<u>1.8</u>	E for about 20 patients per bottle	1 bottle 10ml
Lignocaine 2% hcl + adrenaline	<u>1.8</u>	E for about 10 patients per bottle (2.5ml per eye)	1 bottle: 50ml
Povidone Iodine 10% Solution 200ml – Skin Preparation	<u>1.1</u>	E	1
70% Alcohol	L	E	1
Sterile Distilled Water or normal Saline	L	E	1

NB: The notes in column 3 are general guidelines for planning/budgeting orientation only, all responsibilities remain entirely with surgeons, programmes and partners.

Prices for the products can be found on the IAPB Standard List of Equipment – Register free on the following website/link:

<http://iapb.standardlist.org>

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Resources

Publication/Manual	Published by	Where available	Cost
WHO Trichiasis Surgery for Trachoma. The Bilamellar Tarsal Rotation Procedure (Yellow Book)	WHO	http://bit.ly/1fdgDza	Free
Final Assessment of Trichiasis Surgeons	WHO	http://bit.ly/IM4a9J	Free
Trachomatous Trichiasis Surgery – Surgery Training DVD. A step By Step Guide to Trachoma Surgery	ICEH	http://bit.ly/1hll6xd	Free
Trachoma Tool Kit – Implementing the SAFE Strategy for Trachoma Control	The Carter Center	http://bit.ly/18Pb0lr	Free
Trachoma Simplified Grading card	WHO	http://bit.ly/18Pb5Mg	Free
Trachoma Grading Self Directed Learning	CERA	http://bit.ly/IM4Coz	Free
Overview of trachoma	Medscape e-medicine	http://bit.ly/19wir1s	Online
Trachomatous Trichiasis and its Management in Endemic Countries	Surv Ophthalmol. 2012 March; 57-341(2): 105–135	http://1.usa.gov/1dhFWWhA	Online
The Outcome of Trachomatous Trichiasis Surgery in Ethiopia: Risk Factors for Recurrence	PLoS Negl Trop Dis. 2013 August; 7(8): e2392	http://1.usa.gov/1gjMktH	Online

WORKING TOGETHER TO ELIMINATE AVOIDABLE BLINDNESS

IAPB's Essential Equipment Lists identify equipment and consumables considered essential, minimum requirements to perform high quality medical interventions in eye health contexts. IAPB produces these lists in collaboration with leading experts from around the world and updates them from time to time.



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