INFECTION PREVENTION

Post-operative infections are a risk Eversight diligently mitigates at the time of tissue procurement so surgeons and patients alike can have the best possible transplant experience.

Contamination risk

While the risk of fungal and bacterial tissue contamination leading to post-operative infections is low, such infections can be devastating for surgeons and their patients. Eversight researched, developed and implemented a donor preparation technique focused on the prevention of tissue contamination at the time of procurement.

Double antiseptic soak

Eversight's stringent donor preparation protocols now include two antiseptic soaks of 5.0% povidone-iodine (PI) for five minutes each, as follows:

1. Thoroughly clean the interior folds and exterior edge of the eyelid.
2. Apply first PI soak to the eye for five minutes.
3. Rinse PI from the eye.
4. Excise the conjunctiva 360 degrees at the limbus, decreasing bioburden of the soft tissue.
5. Apply second PI soak to the eye for five minutes, disinfecting exposed sclera.
6. Rinse PI from the eye.
7. Make scleral incision and continue corneal excision.

Putting surgeons & patients first

All surgeons and their patients deserve access to safe, effective antifungal and antibacterial solutions. That's why Eversight's infection prevention protocol is included in our tissue service fees and does not incur any additional cost.

Backed by science

This double antiseptic soak mitigates both fungal and bacterial infection risk at the primary source of contamination: ocular bioburden. Research shows PI application reduces infection incidence sevenfold compared with other antiseptic protocols[1] and increasing the PI exposure time during recovery decreases the rate of positive fungal cultures, positive bacterial cultures and post-operative fungal infections.[2,3] Eversight also conducted studies that demonstrate a second PI application does not increase toxicity to the epithelium.

Leading the industry

Eversight continually assesses the latest scientific research and eye banking practices to ensure our techniques best mitigate the risk of post-operative infections. In fact, Eversight's average post-operative infection rate 2015-2018 was 0.038%, notably lower than the EBAA member average of 0.069% over the same period.[4] Eversight is redefining eye banking industry standards as a leader in infection prevention.

1. Levinson, Joshua D., et. al. Timing of Povidone–Iodine Application to Reduce the Risk of Endophthalmitis after Intravitreal Injections. Ophthalmology Retina. Volume 2, Issue 7, 2018, Pages 654-658. ISSN 2468-6530. https://doi.org/10.1016/j.oret.2017.06.004.
2. Salisbury, C. Drew, et. al. Increasing Povidone-Iodine Exposure in Endothelial Keratoplasty Tissue Processing and Fungal Infection Impact. Cornea: September 2019, Volume 38, Issue 9, Pages 1093–1096. doi: 10.1097/ICO.0000000000002006.
3. Nguyen CL, et. al. Povidone-iodine 3-minute exposure time is viable in preparation for cataract surgery. Eur J Ophthalmol. 2017 Aug 30;27(5):573-576. https://doi.org/10.5301/ejo.5000964. Epub 2017 Apr 7.
4. 2018 Eye Banking Statistical Report, Eye Bank Association of America.