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Online Spectacles Museum


The evolution and development of spectacles over the past seven centuries qualifies as a long, significant and fascinating journey through history. The impact of spectacles on society deserves to be better recognized.

The Web site, www.antiquespectacles.com, is a noncommercial endeavor developed with the assistance of more than 830 educators and 500 institutions worldwide to inform people everywhere about the history, cultural importance and beauty of those visual aids that have been used by billions and have changed our lives. This online museum is made up of some of the finest and most interesting historical items from both private and public collections, including paintings and other works of art.

As the curator, I have included more than 210 Web pages, including over 20 pages of interesting topics such as the spectacle's relationship to religion, 60 slideshows and many educational games. More than 3,000 described and dated images are also on our Web site (all of which are copyright protected). A links section includes the major museums, art institutes, churches and libraries around the world that are supporting our endeavor.

If anyone has suggestions, comments or leads on possible museum pieces, they are welcomed to contact me at drdavid@antiquespectacles.com.

*David A. Fleishman, MD
Sharon, Mass.*

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Fugo Blade Capsulotomy

I commend you on "Pseudoexfoliation: Six Strategies for Success" ([Clinical Update, March](#)).

I suggest herein that the argument of small vs. large capsulotomy should be based on safe case completion without complications rather than capsular opacity issues, which is the major focus of most articles on this topic.

In cases with small pupils, the Fugo blade is often invaluable as it is the only FDA-approved electrosurgical device for anterior capsulotomy, transiliary filtration and peripheral iridotomy.

To manage small, constricted pupils, ablate a large capsulotomy with a Fugo blade. This will take several seconds under an iris that has been elevated with viscoelastic. The localization of the Fugo blade tip's placement, though not directly visible, is possible by seeing the iris slightly elevated above the tip. Though the Fugo blade is out of the surgeon's direct view, the ablation isn't difficult to perform and results in distinct advantages in the control of surgery and surgical outcome.

Capsulotomy enlargement and revision can be done by ablating over the area of anterior capsule that the surgeon wishes to remove.