Introduction and aim of the work

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Intra ocular lens implantation has gained a wide spread acceptance as the method of choice for correction of aphakia.(*Stark et al 1979*)

Other methods for correction of aphakia as spectacles or contact lenses may not be suitable for some cases as unilateral aphakia, young children or old aged patients.

Posterior chamber intraocular lens implantation is the most suitable method for correction of aphakia .It preserves the eye anatomy due to its position at the site of the crystalline lens .(*Anthony et al 1990)*

Anterior chamber intraocular lens implantation revealed lot of complications as bullous keratopathy, pupillary block, corneal odema ,secondary glaucoma ,especially early models of closed loops and semiflexible intraocular lenses. Requiring intraocular lens explantation (*Kraff et al 1986) (Price et al 1992).*

Suture fixation of posterior chamber intraocular lenses is the procedure of choice for secondary implantation when the posterior capsule or its remnants cannot support the lens .In some cases where there is irregular anterior chamber depth in leucoma adherent following rupture globe ,anterior chamber lens implantation is impossible ,so posterior chamber intraocular lens implantation is the only alternative for correction of aphakia .

Suture fixation of posterior chamber intraocular lenses is a technically more difficult procedure. There are lot of techniques some of them carries high risk of complications and difficulties. Which made some surgeons to refuse the idea of suture fixation .