INTERNATIONAL PROSTHETIC EYE CENTER
National Center For Ocular, Facial & Somato Prosthetics
Timeline

2010
Established 14 Jan 2010

2012
Dedicated Maxillofacial Prosthetics Services
Oct 2012
Asia’s 1st Diplomat Oculist

2013
Dr. Kuldeep Raiazada
First Board Certified Oculist in Asia & Middle East - March 2013
1st Digital prosthesis was made in Asia. All eye prosthesis were digitalized 22 Sep 2013
1st Medical 3D Printing Unit, April 2013
Human Color detection system, Spectromatch System installed 1st in Asia Sep 2013

2014
1st Magnet- retained Facial prosthesis
Jan 2014
1st Dedicated 3D Simulated Facial Prosthetic services
July 2014

2015
Was declared by Hon’ble Dy. Chief Minister as Center of excellence National Center for Ocular, Facial & Somato Prosthetics
Dr. Kuldeep Raiazada received Fellow of American Academy of Optometry (AAO), USA
Oct 2015

2016
Dr. Kuldeep Raiazada elected as a Director of IAA Board, USA
May 2016

2018
1st Women to receive in Asia Board Certified Oculist
by Deepa D Raiazada
March 2018

2019
Ranked worldwide 4th from market study report 2018-23
by Chip Rockets, NY, USA

About Us
International Prosthetic Eye Center, Hyderabad, a reputed center is well-known to provide the best customized Ocular (artificial eye), Maxillofacial (orbital facial, ear, nose) and Somato prosthetics (finger, toe, nipple-areolar prosthesis) services. Prosthesis is an artificial medical device that replaces the lost organ or part of the body to improve the cosmetic appearance and/or function.

Aim
International Prosthetic Eye Center is dedicated to provide the highest quality of prosthesis to those who need these services.

Our Vision
Our vision is to establish a "World class Ocular & Maxillofacial Prosthetics Center, as a landmark center in Asia-Pacific region."

Our Affiliations
National
- All India Ophthalmological Society
- Oculoplasty Association of India
- Indian Optometric Association
- Indian Society of Oculist
- Hyderabad Ophthalmological Association
- Andhra Pradesh Ophthalmological Society
- Telangana Ophthalmological Society
- Optometry Council of India

International
- American Society of Ocularists, USA
- International Anaplastology Association, USA
- International Academy of Ocularistry, USA
- American Academy of Optometry, USA
- King’s College London, UK
- Institute of Maxillofacial Prosthetics & Technologists, UK
- Global Cancer Research Foundation, USA
- Ophthalmic Prosthetics Inc, USA
- Asia Pacific Society of Ocular Trauma Society,
- World Society of Pediatric Ophthalmology & Strabismus
Prosthetic Services

- Custom Ocular Prosthesis
- Nasal Prosthesis
- Auricular Prosthesis (Ear)
- Oculo-facial Prosthesis (Orbital)
- Finger Prosthesis
- Nipple-areolar prosthesis
- Toe Prosthesis
- Partial Hand Prosthesis
- Partial Foot Prosthesis
Kuldeep Raizada, Ph.D, BCO, BADO, FAAO  
Board Certified Ocularist, USA  
Board Approved Diplomate Ocularist, American Society of Ocularists  
Fellow of American Academy of Optometry, USA  
Chief Ocularist & Anaplastologist  
Director & Founder  
International Prosthetic Eye Center

Dr. Kuldeep Raizada is a Board Certified Ocularist (BCO) from National Examining Board of Ocularists, USA, and a Board Approved Diplomate Ocularist (BADO) from American Society of Ocularists. He is working in the field of ocular prosthetics since 2001.

Dr. Raizada places his emphasis on the satisfaction and well-being of every patient. His clinical skill and expertise are equally matched by his personalized care for patients and attention to detail. Dr. Raizada carries his Bachelor of Science in Biology, Post Graduation in Optometry and Vision Science, and Ph. D in Alternative Medicine.

Dr. Raizada completed his basic optometry education at Gandhi Eye Hospital, Aligarh; and his Fellowship and Training at L V Prasad Eye Institute, Hyderabad. He was the Founder and Head of the Department of Ocular Prosthesis Services at L V Prasad Eye Institute until December 2009.

He completed his second fellowship in Anaplastology at MD Anderson Cancer Centre, Houston, USA. He has been trained by top most ocularists and anaplastologists in USA.

Dr. Raizada is the Founder and Director of the International Prosthetic Eye Center since 2010. His clinical interests include ocular and facial prosthesis, particularly in pediatric patients. His research interests lies in the development of innovative designs in prosthetic devices. He also specializes in providing newer solutions for anophthalmic and microphthalmic patients as well as ptosis correcting glasses. He has published in various journals and presented world wide.

Dr. Raizada has been recognized by the American Society of Ocularist, USA; International Anaplastology Association, USA and by several other professional organizations, for his excellence in research and clinical practice. He is the visiting faculty in numerous universities & colleges around the world, and also hold honorable positions at various organizations globally including

- Former Director at the International Anaplastology Association, USA (2016-2018).
- Advisor for Global Cancer Foundation, USA
- Director at Ophthalmic Prosthetic Inc, Houston, USA
- CEO & Chairman of Akriti Group of Companies

He is also a reviewer for several national and international journals like Contact Lens & Anterior Eye, International Journal of Anaplastology, Oculoplastic and Reconstructive Surgery (OPRS) and many others.

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Deepa D. Raizada, M.Sc, BCO, CCA, AIMPT
Board Certified Clinical Anaplastologist, USA
Board Certified Ocularist, USA
Chief Anaplastologist | Maxillofacial Prosthetist
Director & Founder
Facial & Somato Prosthetics Clinic
International Prosthetic Eye Center

Deepa Raizada is a Board Certified Ocularist (BCO) from National Examining Board of Ocularists, USA; and Clinically Certified Anaplastologist (CCA) from Board for Certification in Clinical Anaplastology, USA. She pursued her M.Sc in Maxillofacial and Craniofacial Technology from King’s College London, UK.

Deepa is an Active Member of International Anaplastology Association (IAA), USA; and Associate Member of the Institute of Maxillofacial Prosthetist & Technologist, UK (AIMPT).

She has made a remarkable success in becoming “India’s First lady having Board Certification in Clinical Anaplastology, ranking India as a Fifth Nation to have a Board Certified Clinical Anaplastologist.

She pursued her basic training in Ocular prosthetics from L V Prasad Eye Institute, Hyderabad (2002); and advanced training at Moorfield’s Eye Hospital, London, UK (2005).

She is also founder of Ocular Prosthesis Department at L V Prasad Eye Institute, and worked there from 2002 to 2010.

Her clinical interest include making her career in the art and science of facial and somato prosthetics. Her work was well recognized and appreciated by various societies. Her passion to work for disfigured and give them a new look, inspired many patients to face the society with confidence.

Her research interest lies in developing new techniques in the field of facial prosthetics, and undertake research on material properties.

Deepa Raizada has been recognized by several professional organizations in India as well as Internationally, for her excellence in research and clinical practice.

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Custom Ocular Prosthesis

Prosthetic eyes are fitted in post-evisceration and enucleation cases. Enucleation is a surgical procedure to remove the entire natural eye, where as evisceration is the surgical procedure to remove only the inner contents of the eye, outer coat (sclera) is preserved. In both the procedures, an orbital implant is placed inside the socket wherever indicated. This is to replace the lost volume and provide movements to the prosthetic eye. The fabrication process can usually begin approximately six weeks following the surgery. Always get your prosthetic eye fitted by a Board Certified Ocularist (BCO) for best results. Ocularist takes an impression to custom mold the prosthesis to your socket. This procedure ensures that each patient attains the maximum comfort and movement with the prosthesis.

Usually, it requires 2 appointment visits for the complete procedure. Same day service can be arranged who travel from long distances with prior appointment. The patient is later seen every 6-12 months for polishing the eye.

- Full Thickness Ocular Prosthesis
- Scleral Cover Shell
- Digital Prosthesis
- Digital Iris Replication
- Silicone Prosthesis
- Socket Expander
- Hydrogel Socket Expander
- Balloon Socket Expander
- Fissure Socket Expander
- Serial Socket Expander
- Stem Pressure Conformer Device
- Pediatric Ocular Prosthesis
- Pediatric Ocular Shell
- Full Thickness Ocular Prosthesis
- Scleral Shell Prosthesis
- Ptosis Crutch Ocular Prosthesis
- Dilated Pupil Prosthesis
- Light-weight Ocular Prosthesis
- Self Lubricating Ocular Prosthesis
- Peg Prosthesis
- Ptosis Crutch Prosthesis
Orbital Prosthesis
An orbital prosthesis restores the appearance of lost eyeball and its surrounding structures including eyelids, eyelashes and eyebrow. It is required for patients with post-exenteration (cancer treatment) and for severely contracted sockets (congenital or acquired). The prosthesis can be retained using medical adhesives, attaching in spectacles or with osseointegrated implant system. Osseointegrated implants are surgically placed into the bone, and magnets or bar and clips connect them to the prosthesis.

Larger the defect, more complicated the case will be to achieve satisfactory results. However, these cases have been very well managed at International Prosthetic Eye Center using Hi-tech technology by experienced staff.

- Spectacle-mounted Orbital Prosthesis
- Silicone & Glue-on Orbital Prosthesis
- Implant-retained Orbital Prosthesis
Auricular Prosthesis

An auricular (ear) prosthesis artificially restores all or part of the ear which has been lost due to radical cancer surgery, burns and/or congenital defects. The function of the prosthetic ear shape is to direct sound waves into the auditory canal and to maintain a proper environment for the inner ear membranes. It normally improves hearing by about 20%. The prosthetic ear will retain eyeglasses, and hearing aids, if needed. It is held in place using medical adhesives or osseointegrated implant system.

- Silicone & Glue-on Auricular Prosthesis
- Implant-retained Auricular Prosthesis
Nasal Prosthesis

A Nasal (Nose) prosthesis is needed for individuals who lost their nose (either partly or completely) following injury, cancer treated or born without nose. Fabrication and fitting of a silicone nasal prosthesis restores their complete facial appearance as it was before injury. The prosthesis either can be attached by medical adhesive or with the help of our new Magnetic Implant Technology, which make it very secure to use it.

Advantage of Implant retained prosthesis: Prosthesis does not need to have adhesive cleaned off each time it is used. Security, comfort, and convenience of implant-retained prostheses is much better accepted. The prosthesis can be made thinner, with feathery edges that blend with the skin. This offers the patient with improved aesthetics.

- Silicone & Glue-on Nasal Prosthesis
- Implant retained Prosthesis
Finger, Partial Hand, Toe & Partial Foot Prosthesis

Custom fingertip, finger, thumb, partial hand, toe and partial foot prostheses can be fabricated and fitted for patients who have experienced loss of form and function due to:

- Traumatic injury
- Surgery – cancer or tumor removal, amputation
- Disease – such as diabetes, infection
- Congenital defects of the hand / foot

Our silicone prostheses (prosthetic fingers or toes) are designed to protect sensitive tissue, improve function and normalize appearance.
Nipple-Aerolar Prosthesis
If you have not yet had your mastectomy and your breast cancer is low-risk and not near the skin or nipple, you may be eligible for a nipple-sparing mastectomy.
There is absolutely no more realistic end result than keeping your originals! Be sure to ask your surgeon if this type of mastectomy could be an option for you. Perhaps your mastectomy and breast reconstruction is already finished, but you are not interested in additional surgery or the idea of tattoo needles to try to recreate nipples. You might want to consider non-invasive nipple areolar prosthesis.

Cosmetic Camouflage
Vitiligo is a long term skin condition characterized by patches of the skin losing their pigment. The affected skin become white and usually have sharp margins. The hair from the skin may also become white. Although this disease is not life threatening or contagious, the disfigurement of vitiligo can be devastating to its sufferers, especially to the ones with darker skin tone.
Remedial cosmetic medically approved cover creams help conceal the blemish of vitiligo at least temporarily. A high concentration of pigment is incorporated into water–free or anhydrous foundations to give a color that matches the patient’s skin, thereby concealing vitiligo patches.

Ptosis Crutch Glasses
Ptosis is a rare problem, where the upper lid is dropped due to various conditions such as traumatic, palsy of cranial nerve, progressive ophthalmoplegia, mitochondrial myopathy, congenital defects of LPS muscle, as well as blepharospasm, where the eyes lids gets closed involuntarily and blocks the patient’s visual axis.
Ptosis Crutch glass helps in lifting the upper eye lid so that vision gets clear. The attachment made in the glasses holds the upper lid in right position. International Prosthetic Eye Center is specialized in making custom ptosis crutch glasses for the individuals to solve the problem, where with the glasses patient can close and open the eye as well.
FAQ’s for Ocular Prosthesis

What material is used in making the eye?
They are made using dimensionally stable, medical quality PMMA (Acrylic). This material is compatible with being surgically inserted into the body, therefore allergies to the material are highly unlikely.

When will I get my prosthesis?
After six weeks of your surgery (post eye removal), you can get your prosthesis fitted. In others, depends on condition, please discuss your ocularist.

Will my prosthesis look like my other eye?
Yes, the prosthesis looks very natural. The color and appearance are made to match your other eye.

What kind of results can I expect?
Results vary from person to person, and are dependent on factors such as age, type of surgery/implant, and general condition of the eye socket. See examples of actual patient results for a general idea of optimum results, however please discuss your anticipated queries with the ocularist at our center.

Will people notice that I have an artificial eye?
Patient results vary from case to case, however many people have who wear artificial eye successfully conceal this from public (and in some cases, even from close family and friends!) Please share any concerns you have regarding the results of your prosthesis with your ocularist at our center.

Is the application of prosthesis painful?
In adults, or co-operative subjects, the fitting is not at all painful.

How often should I remove my prosthesis?
In the case of enucleation or evisceration, routine removal of an ocular prosthesis is not recommended. As long as the prosthesis remains comfortable, it need not be removed. However, the prosthesis may accumulate residual mucous secretion deposits on its surface. These deposits warrant removal and cleaning. After following the recommended cleaning procedure, reinsert the prosthesis. It is important to minimize the frequency of removal. This seems to result in fewer problems with mucous discharge. Most people are able to keep the prosthesis in place until the next scheduled visit with the Ocularist. This can be for as long as six months. Your Ocularist and Ophthalmologist will help you decide an appropriate care regimen.

How often do you have to see an ocularist?
The ocular prosthesis, like hard contact lenses, needs to be polished regularly in order to remove surface deposits and evaluate the health of an eye socket. It is generally recommended that infants under 3 years of age be seen every 3 months; patients under 9, twice a year; and all other patients, at least once a year.
FAQ for Facial Prosthesis

How can I obtain a facial or somato prosthesis?
Prostheses are custom made for the individual. They are not "off the shelf" items. Several appointments will be needed to create a safe and effective prosthesis that is also realistic in appearance. Please call +91 986 634 5851 to set up an appointment or consultation. We look forward to speaking with you.

Are prostheses covered by my health insurance?
Prostheses are considered durable medical equipment and are covered by most medical plans (including Medicare) under the DME rider portion of their policy in western world. However, in Indian system it is not covered by any insurance of private or government body.

When can a prosthesis be made for me?
The patient will need to wait a set period of time after surgery for healing to occur before treatment begins. It is preferable that all swelling subsides so the impression that is taken as the first step is accurate. Otherwise, the final prosthesis will show noticeable gapping in previously swollen areas. To determine when the patient is ready for the prosthetic treatment, surgeon / physician consultation is obtained.

How long does a prosthesis last?
The expected lifetime of the device is usually 1-3 years for an adhesive-retained prosthesis; whereas osseointegrated prostheses tend to last 2-4 years. Since these are separate from the body and made from artificial materials, prostheses can be lost, damaged, or discolored by smoke, UV light etc. Subsequent remakes can be made using molds which are kept on file for the patient.

How does the prosthesis stay in place?
Retention of the prosthesis is one area that is of particular concern to the patient. Prostheses should be well retained to the tissue they cover. Prostheses are removed daily, at the end of the day. They are not permanently attached to the site. Various methods of retention with different strengths are available. These include: adhesive, attaching to glasses, engaging into anatomical undercuts and osseointegrated implants.

How is the method of retention chosen?
The retention method is considered during the treatment planning process. It is chosen in consultation with the physician and the patient based on factors such as age, visual acuity, manual dexterity, sensitivity of skin, and post radiation treatment.

What is "osseointegrated retention"?
Osseointegrated implants are surgically placed in the bone, and magnets or bar and clips connect prosthesis to the implants. Patient does not require to apply and remove adhesive on a daily basis, simply attach their prosthesis using a magnet or clip system. However, general cleaning of skin and the prosthesis is mandatory.

How do I care for my prosthesis?
Your prosthesis requires daily care and maintenance procedures. Prosthesis is removed on a daily basis. Skin, osseointegrated implant abutments and prosthesis are cleaned. In adhesive-retained cases, adhesive is applied and cleaned off on a daily basis.
Awards & Certificates

Received “Bharat Ratna APJ Abdul Kalam Award” on 15th October 2015, Telegu University, Nampally, Hyderabad

Most Innovative Ocular & Maxillofacial Prosthetic Center in India, Times Cyber Media International Healthcare Award, 16th July 2017, Mumbai, by Indian Cricketer Mr. Rohit Sharma

Most Trusted Center for Ocular & Maxillofacial Prosthesis of the year 2018, Award given by Member of Parliament & Movie Actress Mrs Aruna Irani, New Delhi India 27th Jan 2018

Diploma
Raiande Kadep
participant of the 18th Congress of the Association of European Ocularists

Certificate of Recognition
This certificate of recognition is presented to
Dr Kuldeep Raizada
in recognition of his outstanding entrepreneurship in the ophthalmic field by the Alumni of L V Prasad Eye Institute Optometrists on 24th January 2016

King's College London

Deepa Rani Diddi
being recognized by approved overseas studies and awarded the degree in the Higher Degree Award
Music of Korea
Musical and Conducting Technology
Graduation
2014
Prosthesis (_singular), Prostheses (plural)
Custom Artificial Eye: Handcrafted medical device that replaces the lost eye and restores the function and aesthetics.
Scleral Shell: Handcrafted medical device fitted over an existing eyeball.
Ocularist: An ocularist is a thoroughly trained professional skilled in the art of fitting, painting and fabricating a custom ocular prosthesis. In addition to creating custom ocular prostheses, and providing long-term care through periodic examinations, an ocularist provides the patient with comprehensive instructions on the care and maintenance of their prosthesis.
Anoplastologist: Skilled professional in fabrication and fitting of facial and somato prosthesis.
3D Artificial Eye: Digitally created custom artificial eye
Ptosis Bulbi: Shrunken eye ball
Atrophic Bulbi: Atrophied and living eyeball
Microphthalmia: Born with small remnant eyeball
Anophthalmia: Born without an eyeball
Cryptophthalmus: Fused skin over the eyebrows
Socket expander: Medical devices to expand the socket
Suction Cups: Device to insert and removal the eye prosthesis
Polishing: Removing of deposits over eye prosthesis and restoring its glaze.
Facial Prosthesis: Medical device replacing eyeball with surrounding eye structures (orbital), ear and nasal defects.
Somato Prosthesis: Somato prostheses are custom made breast, nipple-areolar, fingers, partial hands, toes, and partial foot prosthesis.
Water based adhesive: Medical adhesive which can be cleaned off with water
Finger Prosthesis: A medical device that replace the lost finger
Magnetic Prosthesis: Prosthesis retained using magnet attachments over osseointegrated implants.
Light weight Prosthesis: A hollow double walled custom ocular prosthesis
Dilating Prosthesis: Hi-tech technology in ocular prosthesis where pupil size is made to change with lighting conditions.
3D Print: Technology to create digital facial and somato prosthesis and then print with various materials to real time use.
Nipple-Areolar Prosthesis: Nipple-Areolar prosthesis are fabricated by breast prosthesis manufacturers and anoplastologists, for breast cancer survivors post mastectomy.
National Examination Board of Ocularist: NEBO awards the title, Board Certified Ocularist (BCO), to those Ocularists who successfully complete a comprehensive two-part (written and practical) examination. All BCOs must complete continuing education requirements and be recertified by NEBO every six years.
Board Certified Ocularist: The National Examining Board of Ocularists (NEBO) is the certifying agency for ocularists in North America. NEBO designates the title of Board Certified Ocularist for Ocularists who have passed the NEBO examination. Those ocularists who have achieved and maintained certification by NEBO are designated as Board Certified Ocularists (BCO). An ocularist with this title has also pledged to make custom prosthesis as opposed to stock prosthesis.
Board Approved Diplomate Ocularist (BAD): To become BAD, one must complete a 5 years apprenticeship with another ocularist and comply with all regulations and continuing education standards set by ASO and NEBO.
American Society of Ocularists: The American Society of Ocularists is an international, non-profit, professional and educational organization founded in 1957 by professionals specializing in the fabricating and fitting of custom-made ocular prosthetics (artificial eyes).
The International Academy of Ocularists: The International Academy of Ocularists was founded in 2015 in order to create a base of academic knowledge in the field of ocularistry. The Academy promotes advancements in evidence based research and technology, as well as improved professionalism in the field.
Fellow of American Academy of Optometry: The letters “FAAO” (Fellow of the American Academy of Optometry) after an optometrisit’s, scientist’s or other qualified person’s name signifies that rigorous qualifications for fellowship have been met.
International Anaplastology Association: The International Anaplastology Association is an international organization founded in 1980 as American Anaplastology Association and incorporated in California as a 501(c)6 Nonprofit Mutual Benefit Corporation. The association originated to bring together a wide variety of specialists involved in providing restorative prostheses for patients with facial and somato disfigurement due to cancer, trauma, or congenital origin.
Board for Certification in Clinical Anaplastology: An anaplastologist who achieves and maintains certification is designated as a Certified Clinical Anaplastologist, C.C.A. It is the intent of BCCA to provide a national standard that can be used as a measure of competency by interested agencies, groups and individuals.
Institute of Maxillofacial Prosthetist & Technologists: The Institute is an established professional body that oversees the training, qualifications and practice of the Maxillofacial Prosthetist while at the same time maintaining a communication and support network for the membership. The Institute also works alongside and advises medical, professional and governmental groups on issues relevant to the specialty.