IRIDEX®

Cyclo G6®
Laser Console

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Cyclo G6® Laser Console

One laser and three delivery devices for treating a wide variety of glaucoma cases

The Iridex Cyclo G6® Laser Console and probe delivery devices (G-Probe® and G-Probe Illuminate® used in continuous-wave mode, and MicroPulse P3® used in MicroPulse mode) are used to deliver laser energy for the treatment of glaucoma, including primary open-angle, closed-angle, and refractory glaucoma.

- **Safe, versatile, and repeatable non-incisional treatment**
- **Continuous-wave and MicroPulse® treatment modes**
- **Can be used in the office or operating room**
- **Portable design with quick setup and an intuitive user interface**
- **Built-in white light illumination source**

> The Cyclo G6 Laser has become a versatile tool in my practice. I use it for transscleral laser therapy in both continuous-wave and MicroPulse modes, which gives me valuable flexibility in patient care.

Michael C Giovingo, MD
Giovingo Eyecare, Chicago, IL, USA

Evolution of Transscleral Cyclophotocoagulation

1992

Classic Continuous-Wave Transscleral Cyclophotocoagulation (CW-TSCPC)

- Gaasterland reported the first clinical results using 810 nm diode laser with the OcuLight® SLx Laser and G-Probe® Delivery Device as an advancement over 1064 nm Nd:YAG laser.[1]
- Subsequent prospective studies showed effective intraocular pressure (IOP) reduction with the need for repeat treatments, generally mild and transient postoperative reactions, low rates of severe complications, and no cases of hypotony or phthisis over 1-year follow-up.[2, 3]

2009

Slow-Coagulation CW-TSCPC

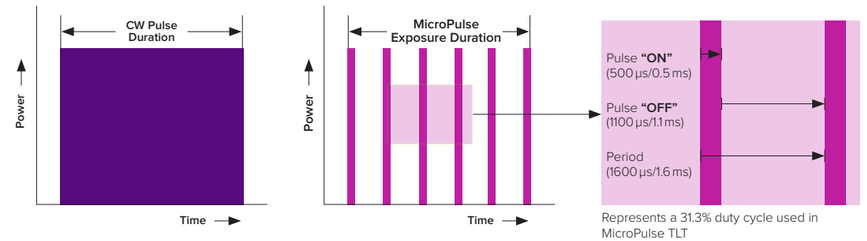
- Shifted from titrating to a “pop” to slow-coagulation with lower power and longer duration[4] to achieve comparable IOP and visual acuity outcomes with fewer post-op complications.[5, 6]
- Slow-coagulation CW-TSCPC demonstrated to provide safe, efficient, reproducible efficacy across a wide range of glaucoma types, including patients with good vision, those without prior incisional surgery, and medically refractory glaucomas.[3, 6, 7]

2010

Transscleral Laser Therapy using Iridex’s Patented MicroPulse® Technology

- First published study showed transscleral laser treatment with MicroPulse technology using the Iridex OcuLight SLx and original MicroPulse P3® Probe, is a safe and effective method of lowering IOP in cases of refractory glaucoma and is comparable to classic CW-TSCPC.[8]

MicroPulse Technology: Only from Iridex. Since 1994.



Represents a 31.3% duty cycle used in MicroPulse TLT

2015

The Cyclo G6® Laser was released at the American Academy of Ophthalmology

> In my experience, slow-coagulation CW-TSCPC can be used safely, efficiently, reproducibly, and efficaciously in a wide range of glaucoma types including those with no history of incisional surgeries, good visual acuity, and medically refractory glaucomas.

Richard K Lee, MD, PhD
Bascom Palmer Eye Institute, Miami, FL, USA

MicroPulse P3® Delivery Device

Transscleral Laser Therapy with MicroPulse® Technology

A versatile and non-incisional glaucoma procedure

Transscleral Laser Therapy with MicroPulse Technology, [referred to in literature as "MicroPulse TLT" and/or "MicroPulse Transscleral Cyclophotocoagulation" (MP-TSCPC)] is a cost-effective combination of safety, effectiveness, and repeatability in a non-incisional approach to glaucoma care. Since 2015, more than 250,000 patients in over 80 countries have been treated using MicroPulse TLT with the MicroPulse P3 Delivery Devices and the Cyclo G6® Laser Console.

Excellent Safety Profile and Efficacy

- Typically achieves intraocular pressure (IOP) reduction of 30-50%[9]
- Helps reduce medication burden in most patients[10-12]
- Can achieve sustained IOP reduction with minimal complications up to 5 years[11]

Quick and Easy to Perform

- Performed in the OR or office in less than 7 minutes
- Minimum post-op follow-up; most patients resume normal activities within 24 hours
- Leaves future treatment options open[13, 14]
- Covered under CPT 66710 in the United States

Patients to Consider

- Can be used for indicated glaucoma patients with:
  - Maximum tolerated medical therapy and compliance issues
  - Compromised ocular surface
  - Cataract undergoing phacoemulsification
  - Post penetrating keratoplasty
  - Need for emergency IOP reduction
  - Need to remain in a seated and/or supine position
- Can be used pre or post trabeculectomy, valve or plate, drainage devices, and/or stent

> In my experience, MicroPulse TLT has been a valuable treatment option in managing my glaucoma patients. I continue to use it prior to, concurrent with, and following MIGS and traditional filtration surgeries across varying glaucoma types and severities.

Brian A Francis, MD, MS
Doheny and Stein Eye Institutes, University of California Los Angeles, CA, USA

Evolution of Transscleral Cyclophotocoagulation

2020

Ergonomically Designed Revised MicroPulse P3 Probe

- Concave, scleral-matching “bunny ear” footplate provides probe stability, maintains proper angling, and aligns with the limbal contour for easy and intuitive placement.
- Small footplate enables access to smaller eyes, and the elongated stem enhances visibility and can serve as a speculum.
- Integrated fluid channel retains coupling gel to ensure consistent fiber immersion and optimal light coupling.

2022

International MicroPulse TSCPC Delphi Panel Provides Clinical Guidance

- Based on disease severity and target endpoints, the panel recommended starting treatment settings and dose escalation of 20–25% to optimize treatment results while maintaining initial safety profile.[9]

2024

1-Year Data Supports Delphi Recommendations

- A 12-month prospective, randomized study evaluated the safety and efficacy of MicroPulse TSCPC using the Cyclo G6® laser and revised MicroPulse P3® probe in a post-MIGS cohort via escalating doses.[15, 16]
- No IRB-reportable safety events.
- Escalating dose (by decreasing sweep speed) seems to increase efficacy predictably, while maintaining safety within this cohort.

Dose Escalation Cohort		Pre Op[15]			POM 3[15]			POM 6[15]			POM 12[16]		
Power for all cohorts: 2500 mW, 31.3% duty cycle		N= 62	IOP Mean	# Meds Mean	N= 38	IOP (Mean) ↓	# Meds (Mean) ↓	N= 42	IOP (Mean) ↓	# Meds (Mean) ↓	N= 49	IOP (Mean) ↓	# Meds (Mean) ↓
#1	**Five** 10-sec sweeps/quad Duration/eye: 200 secs	20	23.85	1.45	10	16.30 (37%)	1.40	11	14.64 (40%)	1.27	15	14.50 (39%)	1.13
#2	**Four** 15-sec sweeps/quad Duration/eye: 240 secs	20	26.60	1.60	15	16.33 (39%)	1.33	14	14.64 (46%)	1.50	19	15.21 (43%)	1.42
#3	**Five** 15-sec sweeps/quad Duration/eye: 300 secs	22	32.32	2.27	13	16.92 (50%)	2.15	17	17.06 (49%)	1.71	15	15.53 (56%)	1.86

G-Probe® and G-Probe Illuminate® Delivery Devices

For Continuous-Wave Transscleral Cyclophotocoagulation

The G-Probe Delivery Device has been used for more than 30 years to perform Continuous-Wave Transscleral Cyclophotocoagulation (CW-TSCPC), the gold standard for treating severe to end-stage glaucoma. The G-Probe Illuminate, introduced in 2017, added built-in illumination to provide optimal probe placement. Both delivery devices offer a cost-effective combination of safety, effectiveness, and ease of use in a non-incisional approach to glaucoma care.

Established and Highly Effective

- Well tolerated with minimal post-op follow-up[7]
- Patient downtime is significantly low[7]
- Performed in the OR or office
- Covered under CPT 66710 in the United States

Patients to Consider

- Can be used for indicated glaucoma patients with:
  - Poor candidacy for filtration surgery
  - Prior failed filtration surgery
  - Secondary glaucoma in which failure is a likely outcome of filtration surgery
  - Loss of ambulatory-level vision
  - Need for emergency IOP reduction
  - Need to remain in a seated and/or supine position

> In my practice, CW-TSCPC with both the G-Probe and G-Probe Illuminate play an important role in managing refractory glaucoma. In eyes with atypical or variable anatomy, the G-Probe Illuminate enhances visualization and positioning to help optimize outcomes.

María Fernanda Delgado, MD
Private Practice, Sociedad de Cirugía Ocular, Colombia

Evolution of Transscleral Cyclophotocoagulation

2025

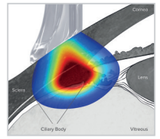
5-Year Study Confirmed Long-Term Efficacy and Safety

In 112 pre- and post-cataract eyes, treatment achieved a significant average IOP reduction of 32.5% ($p<0.001$) and a decrease in post-op medication burden by one drop compared to pre-op ($p<0.005$). A low rate of complications was observed across a broad range of glaucoma types and severities.[11]

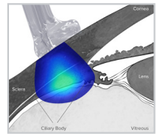
2025

Thermal Tissue Modeling of the Ciliary Body with CW-TSCPC & MicroPulse TSCPC

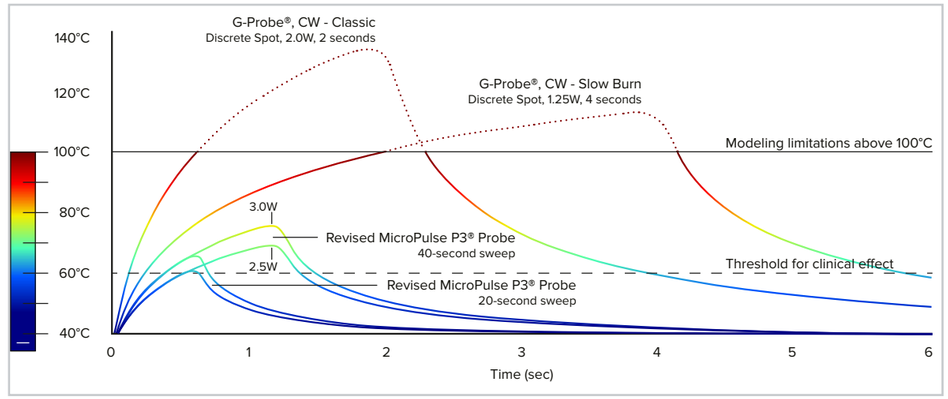
- CW-TSCPC can consistently achieve core tissue temperatures approaching 100° Celsius and beyond, based on the treatment parameters applied, striking a balance between safety and efficacy when treating severe- to end-stage glaucoma.[17]
- The rapid heating and cooling of the ciliary body (CB), due to MicroPulse® Technology, helps to limit the overall core tissue temperature and subsequent thermal spread, theoretically improving the safety profile of TSCPC.[17]



Slow coagulation CW-TSCPC modeling results at 1250 mW for 4 secs.



MicroPulse TSCPC modeling results at 2500 mW with a 30-sec sweep.



Graphic shows thermal modeling of CB core temperature at a single treatment spot, comparing peak temperature and temperature-time profiles for CW and MicroPulse TSCPC. MicroPulse TSCPC sweep velocity reflects a hemispheric treatment approach.

> The ability to safely repeat MicroPulse laser treatments while continuing long-term glaucoma care management without having to progress to more invasive glaucoma surgeries, is a huge advantage to clinicians and patients alike!

Ronald de Crom, MD
University Eye Clinic, Maastricht University Medical Center, The Netherlands

Specifications

Cyclo G6® Laser Console	
Wavelength	810 nm infrared
Weight	4.8 kg (10.5 lb)
Dimensions	27 cm x 29.5 cm x 19.7 cm (10.6” W x 11.6” D x 7.8” H)
Connector Type	RFID
Electrical	100-240 VAC, 50/60 Hz, <0.8 A
Cooling	Air cooled
Continuous-wave Exposure Duration	CW-Pulse: 10 ms – 9000 ms in 606 increments and continuous pulse up to 60 seconds
Continuous-wave Exposure Interval	CW-Pulse: 10 – 3000 ms in 598 increments and One Pulse
MicroPulse® Exposure Duration	MicroPulse: 0.05 – 1.0 ms in 19 increments
MicroPulse Exposure Interval	MicroPulse: 1.0 – 10.0 ms in 90 increments
MicroPulse Duty Cycle	Continuously adjustable from 0.5% – 50%, and preset selections of 5%, 10%, and 15% duty cycles
Aiming Beam	Diode laser, 635 nm nominal
Delivery Device Power Output	MicroPulse P3®: 0 – 3000 mW G-Probe® RFID: 0 – 3000 mW G-Probe Illuminate®: 0 – 3000 mW

Additional Features

- Countdown times with audible confirmations
- Programmable user presets for up to 10 individual presets
- Optional wireless footswitch (wired footswitch included)
- Color LCD touchscreen interface
- Backlit control knobs and Treat/Standby button
- MicroPulse treatment summary report

Ordering Information

Product	Part Number	Units per Box
Laser System*	CYCLO-G6-SYSTEM*	1
Laser Console	66245-1	1
Delivery Devices:		
MicroPulse P3®	15522	6
G-Probe® RFID	15980	6
G-Probe Illuminate®	16200	6

*Includes laser console, operator manual, power cord, keys, wired footswitch, and dust cover.

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The Netherlands

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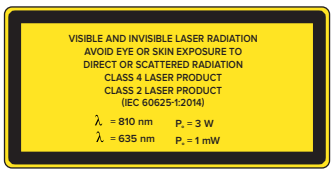

IMPORTANT Please be sure to review instructions for use and the operator manual for delivery instructions, including safety, warnings, and cautions. The MicroPulse P3 Delivery Device, G-Probe, and G-Probe Illuminate are single-use products.

Contact Iridex Customer Service today to learn more.

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