



JETT® IN OPHTHALMOLOGY

One Portable Device.
Diverse Eyecare
Applications.

Transforming Eye Care Through
Direct Current Energy



INTRODUCING JETT®

Power of Two:
Dual Treatment Modes for Versatility and Precision

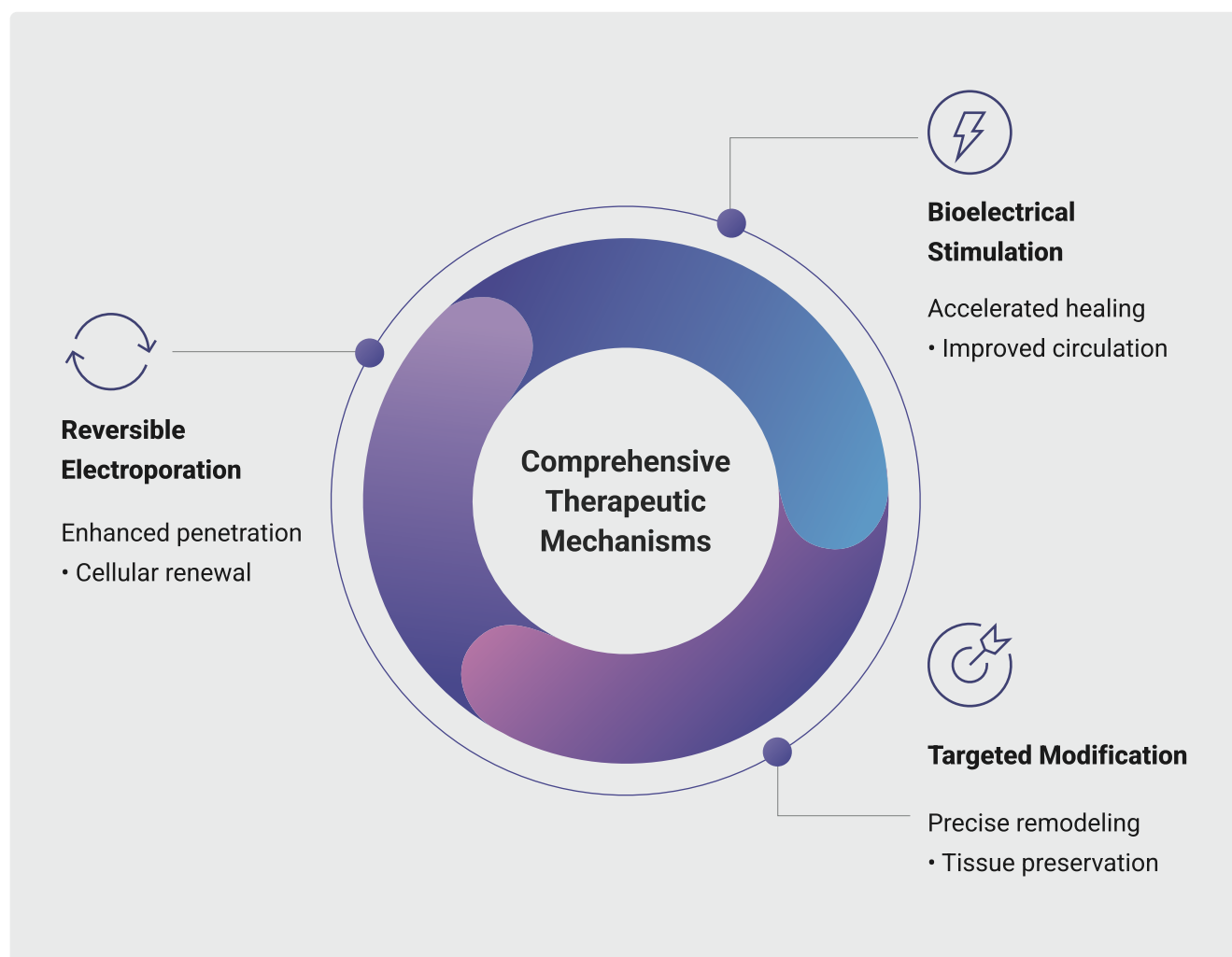
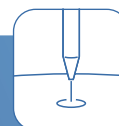
Non-Ablative Mode – Bioelectrical Stimulation

Advanced direct current modulation



Ablative Mode – Precision Tissue Remodeling

Controlled plasma micro-discharges



One Versatile Platform. Validated Ophthalmic Applications.



Ocular Surface Health

- Meibomian Gland Dysfunction
- Blepharitis
- Chalazion
- Trichiasis and Distichiasis
- Conjunctivochalasis
- Pinguecula
- Calcific concretions in the tarsal conjunctiva

Periocular Aesthetics

- Non-surgical Blepharoplasty
- Xanthelasma removal
- Rhytid (wrinkle) reduction
- Ectropion and Entropion correction
- Scar correction
- Facial and periocular Rosacea
- Removal of warts, pigmentation, fibromas, cuperosis and hemangiomas



Focal electro-energy delivery
for Trichiasis/Distichiasis



electro fulguration
and coagulation

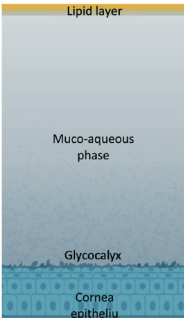
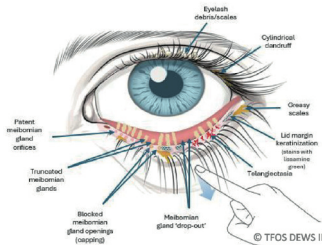
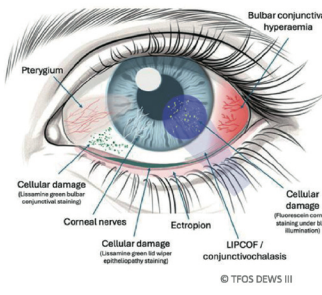


Ocular surface treatment
lid margin conditioning

JETT® IN DRY EYE

The landmark **TFOS DEWS III Report**^[1] establishes validated treatment algorithms targeting three critical pathophysiological domains:

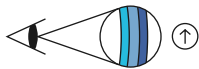
- **Tear Film Deficiencies**
- **Eyelid Anomalies**
- **Ocular Surface abnormalities**

<div>ETIOLOGIC DRIVER TESTS</div> <div><div>Lipid</div><div>Tear film lipid layer thickness interferometry</div><div>Meibomian gland expressibility</div><div>Meibum quality</div><div>Aqueous</div><div>Tear meniscus height</div><div>Veniscometry/Schirmer+/phenol red thread test+</div><div>Mucin/glycocalyx</div><div>Lissamine green /rose bengal staining</div><div>Coniunctivalimpression cytology</div></div>	<div>TEAR FILM DEFCENCIES</div> <div></div>	<div>EVIDENCE-BASED INTERVENTIONS</div> <div><div>Lipid</div><div>Tear supplementation/stabilization (lipomimetics)</div><div>Tear conservation devices (moisture-retaining spectacles)</div><div>Pharmacological tear stimulation /restoration</div><div>Device tear stimulation/restoration</div><div>Blink therapies</div><div>Topical lid hygiene</div><div>Aqueous</div><div>Oral nutrition (Omega 3)</div><div>Tear supplementation/stabilization</div><div>Tear conservation devices</div><div>Pharmacological/device tear stimulation/restoration</div><div>Topical anti-inflammatories</div><div>Ocular surface regenerators</div><div>Surgical options</div><div>Mucin/glycocalyx</div><div>Tear supplementation/stabilization (HP guar)</div><div>Topical anti-inflammatories</div><div>Pharmacologicaltear stimulation</div><div>Device tear stimulation (neurostimulation)</div></div>
<div>ETIOLOGIC DRIVER TESTS</div> <div><div>Blinking /lid closure</div><div>Incomplete blinking</div><div>Anterior bepharitis</div><div>Eyelid biomicroscopy - greasy (seborrheic) or flaky (staphylococcal)</div><div>Eyelash base - cylindrical dandruff-Demodex</div><div>Meibomian gland dysfunction</div><div>Pouting, missing, displaced glandorifices</div><div>Meibomian gland expressibility</div><div>Meibography-truncated, dilatedglands, 'drop out'</div><div>Telangiectasia</div><div>Lid margin keratinization</div></div>	<div>EYELID ANOMALIES</div> <div></div>	<div>EVIDENCE-BASED INTERVENTIONS</div> <div><div>Blinking/lid closure</div><div>Blink exercises</div><div>Anterior blepharitis</div><div>Topical lid hygiene</div><div>Oral antibiotics</div><div>Veibomian gland dysfunction</div><div>Oral nutrition (vitamin D3)</div><div>Tear supplementation/stabilization (lipid-based, androgen)</div><div>Pharmacological tear stimulation / restoration (topical azithromycin, selenium sulfide)</div><div>Device tear stimulation/restoration (internaland external lid heating; IPL; LLLT; QMR; radio-frequency)</div><div>Lid margin debridement for significant keratinization</div><div>Oral antibiotics</div></div>
<div>ETIOLOGIC DRIVER TESTS</div> <div><div>Anatomical misalignment</div><div>Biomicroscopy e.g. pterygium,LIPCOF/coniunctivochalasis. ectropion /entropion, lagophthalmos</div><div>Neural dysfunction</div><div>Corneal sensation</div><div>In vivo confocal microscopy</div><div>Celular damage /disruptor</div><div>Cornea(fluorescein)</div><div>Bulbar Conjunctiva (lissamine green)</div><div>Lid wiper epitheliopathy (lissamine green)</div><div>Inflammation/oxidative stress</div><div>Bulbar conjunctival hyperemia</div><div>Inflammatory markers</div></div>	<div>OCULAR SURFACE ABNORMALITIES</div> <div></div>	<div>EVIDENCE-BASED INTERVENTIONS</div> <div><div>Anatomical misalignment</div><div>Surgical options</div><div>Neural dysfunction</div><div>Tearsupplementation/stabilization</div><div>Surgical options (punctal occlusion)</div><div>Celular damage/disruption</div><div>Oral nutrition (vitamin D3)</div><div>Tear supplementation/stabilization</div><div>Pharmacological tear stimulation /restoration</div><div>Device tear stimulation /restoration (IPL)</div><div>Topical lid hygiene</div><div>Topical anti-inflammatories</div><div>Ocular surface regenerators</div><div>Surgical options (punctal occlusion)</div><div>Inflammation/oxidative stress</div><div>Oral nutrition (omega 3/vitamin D3)</div><div>Tear supplementation /stabilization</div><div>Pharmacological tear stimulation /restoration</div><div>Device tear stimulation /restoration (IPL)</div><div>Topical lid margin hygiene/debridement</div><div>Topical anti-inflammatories</div><div>Ocular surface regenerators(amniotic membrane)</div><div>Surgical options (punctal occlusion)</div></div>

[1] Jones, L., Craig, J.P., Markoulli, M., et al. TFOS DEWS III Management and Therapy Report, American Journal of Ophthalmology. 2025 Jun 3.
Original images @2025 Tear film and Ocular Surface Society. Modified from: Jones L, Craig JP Markoulli M, et al. TFOS DEW'S II management andtherapy report, Amer Ophthalmol. june 2, 2025 lin press),
Reproduced per Creative Commons 4.0 license, See originals for additional detail.

JETT®: The Complete Therapeutic Solution for DED

Unlike single-mechanism treatments, JETT® delivers coordinated intervention across all three TFOS-validated domains:



Tear Film Optimization

Enhances tear-film stability







Eyelid Dysfunction Resolution

Addresses lid-margin disease and MGD



Ocular Surface Regeneration

Promotes ocular-surface recovery

	Treat various causes of DED	Multiple mechanism of action
Meibomian Gland Dysfunction		DC stimulation dissolves blockages and restores natural oil flow
Demodex/Blepharitis		Electrochemical disruption reduces demodex, biofilm, and bacteria load
Conjunctivoc halasia		Precise removal of excess conjunctival tissue
Eyelid abnormalities		DC plasma corrects structural defects through precise remodeling

DED Treatment

A Simple and Versatile Protocol



1 session in **15** min

1 week between sessions

3-4 sessions for complete treatment

Covering Tarsal Conjunctiva, Eyelid margin, Periocular area



Conjunctiva



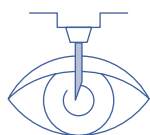
Eyelid margin



Periocular area

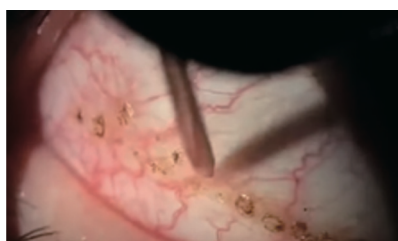
Conjunctivochalasis Treatment

Precise and minimally invasive protocol



1 session in **15** min

micro-ablation, converting conjunctival tissue from a solid to a gas through sublimation

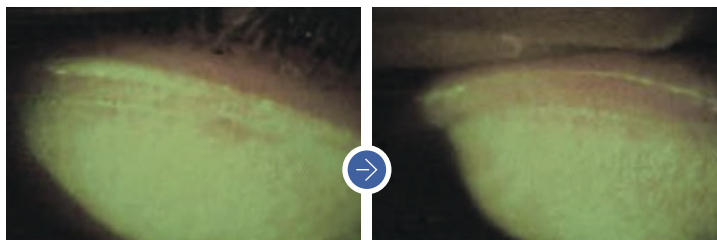




Clinical Efficacy: Proven Results

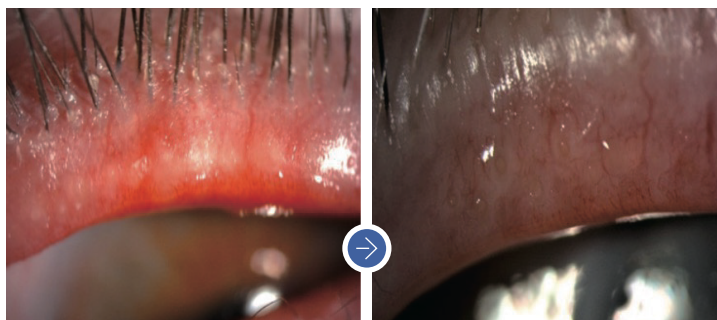
Significantly improves lid wiper
epitheliopathy and associated discomfort

Credit: Dr Pablo Dieghiero



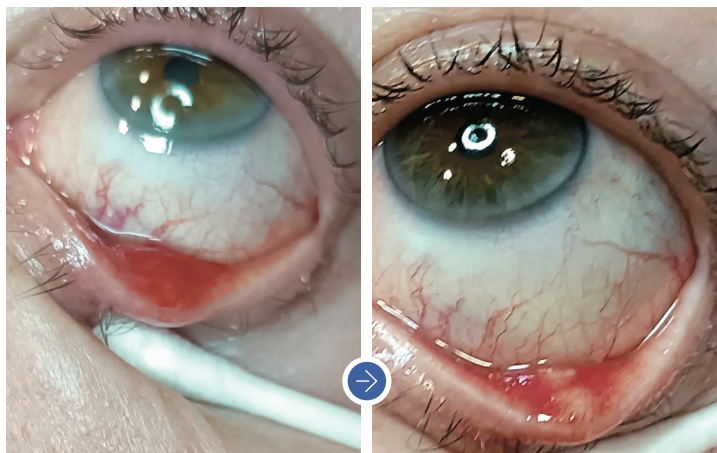
Reducing biofilm^[2]

Credit: Dr Marketa Zemanova



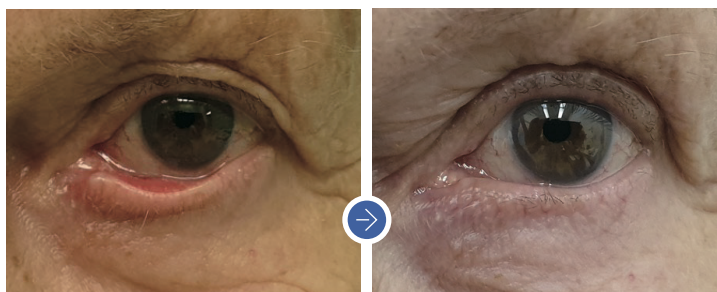
Reducing inflammation

Credite: Dr Katia Chaita



Fix eyelid abnormalities

Credit: MUDr. Marie Petrikovitsová



[2] Adv Ophthalmol Vis Syst. 2020;10(5):127-130.

JETT® IN Periocular Rejuvenation

| Turn Back Time Without Surgery

The Eye Area Challenge

The delicate periorbital region reveals aging first—fine lines, sagging skin, and volume loss that traditional treatments struggle to address safely and effectively.



JETT® transforms eye aesthetics with breakthrough Direct-Current (DC) technology engineered for ophthalmology practices



Dual-Mode versatility



Controlled Plasma Mode

- Skin tightening with collagen regeneration
- PControlled Plasma Mode: pinpoint tissue effect for remodeling and precise lesion work



Direct current Biostimulation Mode

- Regeneration in cellular level through bioelectrical stimulation
- Enhanced deep tissue delivery

JETT®'s Unique Advantages



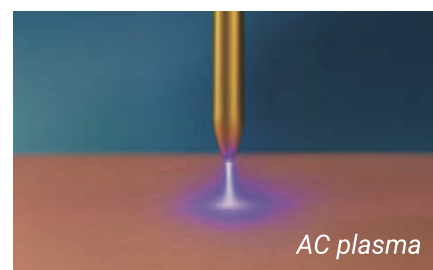
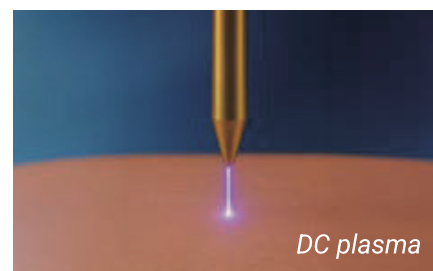
Controlled Plasma Mode

Controlled Energy Delivery -

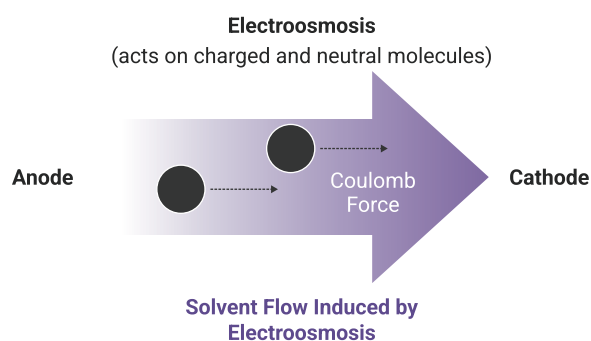
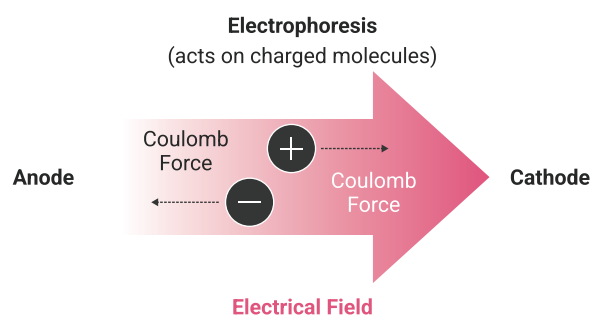
Precise plasma arc targets specific tissues

Immediate + Long-term Results -

Instant tissue restoration with progressive rejuvenation



DC Biostimulation Mode



No thermal damage:

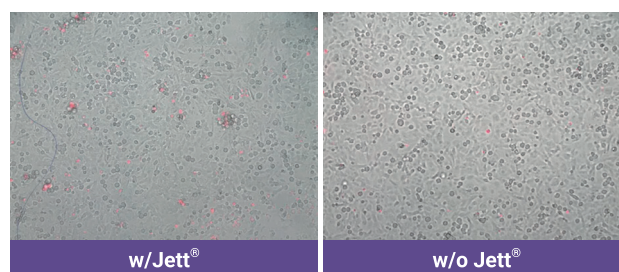
Non-thermal approach protects delicate eye area

No Downtime -

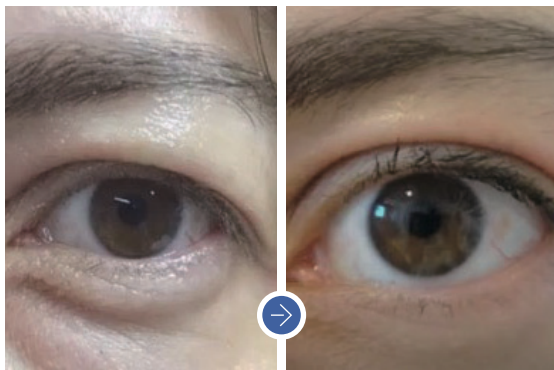
Patients return to activities quickly

Turbo ingredient delivery:

Electroporation pushes active ingredients for high efficiency and targeted absorption



In vitro experiments with human dermal fibroblasts demonstrated enhanced biomarker penetration under Jett treatment



Eyelid Lift Without Surgery

Tightens droopy eyelids with DC plasma that **stimulate collagen**, mimicking blepharoplasty results—no scalpel, minimal downtime^[3]

Credit: Dr Tadaaki Yamada



Remove Benign Lesions

Effectively vaporizes xanthelasma, skin tags, milia, and pigmented spots with **pinpoint control**—ideal for the sensitive eye area.

Credit: Dr Tereza Jestrabova



Smooth Fine Lines & Wrinkles

Reduce **crow's feet**, under-eye creases, and periorcular wrinkles.

Credit: Dr Vicente Rodriguez



Needle-Free Molecular Infusion

Jett® opens cellular channels and drives potent actives deep into tissue—no syringe, no downtime.

- Brighten with high-dose **Vitamin C** for an even, luminous complexion
- Revitalize with **PRP, exosomes, collagen** to deliver the coveted “glass-skin” glow

[3] De Goursac C. Medical blepharoplasty using Jett® Plasma Lift Medical. PRIME J. 2018 Jul 20.

Class of protection against electric shock	II
Class of protection	IP20
Device type model	With the applied part of BF type
Power supply – external source (adapter) – built-in accumulator	5 V (DC), max. 2,5 A 3,6 V, 24 000 mAh (Li-Ion accumulator)
Automatic battery charging	After connecting an external power supply
Battery charge status indication	Bar graph on display
External power supply type (supplied accessories)	XP Power ACM18US05t
Power supply input voltage	100-240 VAC
Power supply input frequency	47-63 Hz
Power supply input current	Max. 0,5 A
Power supply output	5 VDC, max. 2,5 A,
No-load HV generator voltage	(3 – 5) kV (DC), (without detecting patient connection, the output voltage is zero - the HV generator cannot be turned on)
Output impedance of generator	900 kΩ (+5%)
Maximum power on applicator	(0,4 – 4,4) W
Maximum output current (at output short circuit - applicator and indifferent electrode)	(0,7 – 2,5) mA (DC)
Transportation	transport in the original packaging in a covered transport area, at a temperature of -10°C to +40°C and a relative humidity of 15–90% without condensation, atmospheric pressure range 70–106 kPa

Grow your Practice

- ✓ Versatile Tools
- ✓ Time efficient inoffice procedures
- ✓ High patient satisfaction
- ✓ New revenue stream

Enhanced Patient Experience

- ✓ Non-invasive or minimal invasive approach
- ✓ Satisfy both medical and aesthetic needs
- ✓ Excellent safety profile

JETT®

- Two Modes.
One Vision.
Endless applications.



Co-funded by
the European Union



MINISTRY OF INDUSTRY AND TRADE
OF THE CZECH REPUBLIC



Ready to Transform Your Practice?

✉ export@jett.eu | 🌐 www.jett.eu

Compex S.r.o
Palackého tř. 105, 612 00 Brno-Královo Pole, Czechia



📺 Youtube: JETTPlasmaDevices
📘 JETT Plasma Devices
📷 jettplasmadevices
🏢 COMPEX, spol. s r.o.