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Extra-central presentation of the epiretinal membrane as tractional posterior hyaloid in diabetic macular edema

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Statement of the Problem: There is still controversy whether the central epiretinal membrane (ERM) in diffuse diabetic macular edema (DME) is tractional.

Methodology: Summary of the known data regarding the association between central ERM and the incompletely detached posterior vitreous (PVD) in diffuse DME in the central field, as detected by spectral-domain optical coherence tomography (SD-OCT; Topcon 1000) in b-scan figures and video clips were studied and presentation of extra-central association between these two membranes. In this retrospective study, findings were analyzed in one eye of consecutive patients. Excluded were eyes that had undergone vitreoretinal intervention or that had either complete PVD or complete vitreous attachment.

Results: Of the 44 eyes with diffuse DME and ERM, incomplete PVD was apparent in 23 (52.2%) eyes. Unified ERM/posterior hyaloid membrane or EVi membrane was apparent in 20 (87.0%) of the 23 eyes. Two major OCT presentations (n=23) were encountered: Incomplete vitreopapillary detachment (n=11; 48%) while the ERM is attached to the macula and posterior vitreous detachment from the macula associated with vitreopapillary adhesion (n=10; 43%), in four different manifestations. In the remaining two eyes, there was no detectable association between the ERM and the posterior hyaloid. In some other eyes without central unification of the two membranes, they were detected as one unified membrane at extra-central sites, beyond the vascular arcades.

Conclusions & Significance: In eyes with central ERM associated with diffuse DME, the findings suggest that the ERM is actually the posterior hyaloid membrane associated with or without vitreoschisis. This explains the tangential forces implemented on the ERM by the incomplete PVD, in a centrifugal direction. These findings may have clinical importance in the context of treating diffuse DME associated with central ERM.

Biography

Avinoam Ophir has completed his Medical studies and Residency in Hadassah Medical Center in Israel. During his Retina Fellowship in Bascom Palmer Eye Institute, he together with Mark Blumenkranz introduced the antimetabolites, primarily 5-FU to the ophthalmology world, in order to treat non-malignant proliferating cells, especially in the prevention of postoperative scarring. He was appointed as the Chairman in the Department of Ophthalmology in Hadera in 1993, associated with the Technion School of Medicine. For the last 4 years he works at the Retina Unit in Wolfson MC.

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