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Surgical management of idiopathic macular holes using 25-gauge vitrectomy with room-air tamponade and 1-day prone positioning

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Statement of the Problem: Idiopathic Macular Hole (IMH) is a common macular disease occurring in elderly people and causes central vision loss. When surgical advances are mentioned, anatomical success rates are not the only aspects to consider; physiological and functional success as well as ease of patient rehabilitation and return to normal life styles are important considerations. Most authors focus on the following issues: (1) Whether prone posturing should be implemented, or not and (2) when prone posturing is recommended, the optimal time for implementing prone posturing, to evaluate the surgical outcomes of 25-gauge vitrectomy with air tamponade and 1-day prone positioning for IMH.

Methodology & Theoretical Orientation: In a prospective study, 39 patients (39 eyes) underwent 25-gauge pars Plana Vitrectomy (PPV) for idiopathic macular holes. After vitrectomy combined with the Internal Limiting Membrane (ILM) removal and fluid-air exchange, patients were instructed to keep prone positioning for only 1 day (the air series). These patients were compared to 30 consecutive patients with 25-gauge PPV with a gas bubble composed of 25% SF6, and were advised to remain in the same face-down position for 3 days postoperatively (SF6 series). These cases were performed prior to the current series. Idiopathic macular holes were selected for the study. The initial hole-closure rate, visual outcome and complications were evaluated for 6 months.

Findings: Anatomical closure of macular holes was achieved in 35 (89.7%) of the 39 eyes in the air series and in 27 eyes (90%) in the SF6 series. The postoperative visual acuity of stability or gaining 2 or more 2 lines was achieved in 33 eyes (84.6%) and 24 eyes (80.0%), respectively. Postoperatively, intraocular pressure was elevated temporarily in 2 eyes of the air series and 3 eyes in the SF6 series. No retinal break, retinal detachment or endophthalmitis occurred in either series.

Conclusion & Significance: Air tamponade with ILM removal followed by 1-day prone positioning was a useful intervention for treating unselected IMHs. Early recovery to a normal social life can be achieved for most IMH patients.

Biography

Juping Liu has his expertise in VR diseases treatment and epidemiology of ophthalmology. He studied fundus photos evaluation in Melbourne following Prof. Tienyin Wong in 2009. He finished Epidemiologic study of diabetic retinopathy in type 2 diabetes mellitus in Tianjin and Handan Eye study as a member of faculty. He has published more than 10 papers in the field of epidemiology.

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