

Short-term surgical outcome of 25-gauge vitrectomy in epiretinal membrane with good visual acuity

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It has been reported that 25-gauge (G) vitrectomy has an advantage of faster visual improvement in cases of epiretinal membrane (ERM). However, metamorphopsia does not completely resolve in most of the cases even after ERM removal. Early removal of ERM is considered to have the advantages of recovery of visual acuity (VA) and resolution of metamorphopsia.

Purpose: To evaluate the efficacy and safety of ERM removal in patients having good visual acuity.

Subjects and methods: A retrospective chart review of patients who underwent 25-G vitrectomy for ERM and whose preoperative VA was better than 0.046 logMAR was performed. Fourteen eyes of 14 patients (age, 56.8 ± 7.7 years, mean \pm standard deviation) observed for at least 3 months after surgery were included in this study. Mean logMAR VA and vertical and horizontal metamorphopsia scores before and 3 months after vitrectomy were collected. The metamorphopsia score was calculated using M-CHARTS (Inami Co., Tokyo, Japan).

Results: Postoperatively, a significant improvement in mean logMAR VA was observed (preoperative mean logMAR VA, -0.004; 3-month post-operative mean logMAR VA, -0.097; $P=.004$). Vertical metamorphopsia score decreased (preoperative mean score, 0.99; postoperative mean score, 0.69; $P=.099$). Horizontal metamorphopsia score decreased significantly (preoperative mean score, 1.22; postoperative mean score, 0.74; $P=.004$). No surgical complications were observed.

Conclusions: 25-G Pars plana vitrectomy for ERM in patients with good visual acuity is a safe and effective procedure and improves metamorphopsia and mean logMAR VA.

Biography

Hiroyuki Nakashizuka, M.D has completed his Ph.D. in 2011 from Nihon University. He is the clinical Associate Professor of Surugadai-Hospital, Nihon University School of Medicine. He performs 250 cases of 25-gauge vitrectomy every year.

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