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Effectiveness of intravitreal antibiotics/steroid injection at the conclusion of cataract surgery

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Postoperative endophthalmitis represents a serious yet infrequent occurrence after cataract surgery. Prophylaxis against postoperative endophthalmitis has evolved from an antiseptic technique, to the postoperative use of topical antibacterial agents, to the addition of a Povidone sterile preparation of the ocular surface prior to the procedure, to the instillation of intracameral antibiotics (described by ESCRS 2013). For the last seven years, many USA surgeons have been instilling powerful and current generation antibiotics (moxifloxacin with or without vancomycin) in combination with medium strength particulate corticosteroid (triamcinolone) into the vitreous after IOL implantation with excellent reduction of infection risk plus providing clinical reduction of induced inflammation and postoperative cystoid macular edema (CME). This technique describes the Dropless Cataract Surgery event, in which most patients receiving TriMoxi or TriMoxiVanc do not need to purchase or instill topical eye drops, using an internationally patented intravitreal formulation developed and distributed by Imprimis Pharmaceuticals (San Diego CA, USA). This same proprietary product can be also injected intracamerally and subtenons if additional medication suppression is needed, and may even be applied topically (ex, LASIK/PRK). The utility of this product for physically challenged, surgical mission and resource-limited patients is overwhelmingly advantageous. Using meta-data analysis in conjunction with a recently completed double-masked randomized prospective drug performance study of the intravitreal Dropless product, infection risk has been shown to be dramatically reduced to 0.002% occurrence, postoperative inflammation is suppressed in over 95% of eyes, and clinically significant CME (visual acuity >6/9) is substantially reduced in health eyes (<1.8%) and at risk eyes (defined as having diabetic retinopathy, epiretinal membrane, glaucoma, surgical complications with CME occurrence 5-8%). The augmented role of topical NSAID (described as part of the LessDrops technique) to suppress breakthrough inflammation and further reduce the incidence of CME will be reviewed.

Biography

Jeffrey T Liegner is a Medical Director for the private practice Eye Care Northwest and Northwest Jersey Ambulatory Surgery Center. He is a Clinical Instructor at Rutgers New Jersey Medical School and Attending Physician for the VA New Jersey Health Care System. He is the Co-Inventor of the Dropless™ and LessDrops™ products and discloses investor and Consultant Relationships with Imprimis Pharmaceuticals. He is a board certified Fellow of the American Academy of Ophthalmology, the American College of Surgeons and the American Academy of Cosmetic Surgery.

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