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Is prophylactic 360 degree laser photocoagulation necessary during vitrectomy for dropped nucleus?

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Purpose: We aimed to evaluate benefits of prophylactic 360 degree laser photocoagulation during vitrectomy for dropped nucleus.

Materials & Methods: Medical records of the patients who underwent PPV due to the development of dropped nucleus after cataract surgery by phacoemulsification between 2003 and 2014 in three different centers were retrospectively reviewed.

Results: The mean age of 79 patients with dropped nucleus enrolled in the study was 67.04 ± 7.36 years (range, 51-82 years); 51.9% were female. Retinal tear was present before PPV in 5 of the patients. Proliferative vitreoretinopathy (PVR) was present in 6 of 9 patients with RD; 8 patients underwent PPV surgery for twice and 1 patient underwent PPV surgery for three times. We determined that proliferative membranes originated from prolifactive laser border in patients with PVR.

Conclusions: We concluded that prophylactic 360 degree laser photocoagulation is not necessary during vitrectomy for dropped nucleus. Instead of this process, it should be paid attention for scanning the periphery of fundus for peripheral retinal breaks. If retinal breaks are encountered at that time retinal breaks should be surrounded by laser photocoagulation.

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