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Role of routine laser peripheral iridotomy without pliocarpine in primary angle closure suspects during covid pandemic

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Statement of the problem: Laser Peripheral Iridotomy(LPI) is routinely used for the management of Primary Angle Closure Suspects (PACS). Since the Covid Pandemic the number of visits by patients to the clinics became limited. Pre pandemic there were a total of 3 clinic visits: the first clinical assessment, second for the LPI & the final post laser assessment. We decided to merge these appointments into one. The routine use of pilocarpine during LPIs prevents us to accurately assess the angle structures so the patients need to be brought back to for final assessment post LPI. This can avoided if the LPI can be done without Pilocarpine.

Material & Methods: We studied a cohort of 30 patients who were referred as cases of PACS with normal Intraocular Pressure (IOP) and healthy optic discs to the eye clinic and these patients had their drainage angles assessed in a single visit and had their LPIs done during the same visit and post LPI their angles were reassessed again by gonioscopy and Intraocular pressure checked.

Results: 25 (83%) of the 30 patients were discharged post laser in a single visit as their angles were open on gonioscopy. 5 patients need to be booked for further assessment due to multiple reasons like IOP spikes, angles still narrow on gonioscopy or for a re-do LPI.

Conclusion: This method of doing LPIs without Pilocarpine minimizes patient visit to the eye clinic especially in the COVID era and provide a quick and effective way of patient management.

Recent Publications

- 1. Serial TSH-receptor antibody levels to guide the management of thyroid eye disease: the impact of smoking, immunosuppression, radio-iodine, and thyroidectomy. Eye (Lond). 2018 Nov 6. doi: 10.1038/s41433-018-0242-9.
- 2. A P Vignesh, Renuka Srinivasan: Concurrent Acute Retinal Necrosis in a Patient With Iridocorneal Endothelial Syndrome. Cornea 06/2016; DOI:10.1097/ICO.00000000000928.
- 3. A.P. Vignesh, Renuka Srinivasan, SwathiKaranth: Fallbericht von schwererHornhaut-Toxizit tnachtopischerAnwendung von 0,5%igem Moxifloxacin. 10/2015; 1(2):96-98. DOI:10.1159/000438912.
- 4. A.P. Vignesh, Renuka Srinivasan, SwathiKaranth, Sai Vijitha: A Case Report of Vogt's Limbal Girdle and Retinitis Pigmentosa in a Thirteen-Year-Old Boy: A Rare and Unusual Association. Case Reports in Ophthalmology 09/2015; 6(3):311-316. DOI:10.1159/000439265.

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- 5. VigneshAp, Renuka Srinivasan: Advances in Ophthalmology & Visual System Pseudo-Foster Kennedy Syndrome Due to Diabetic Papillopathy.
- 6. Ammapati Paul Pandian Vignesh, Renuka Srinivasan: Ocular manifestations of rheumatoid arthritis and their correlation with anti-cyclic citrullinated peptide antibodies. Clinical ophthalmology (Auckland, N.Z.) 02/2015; 9:393-7. DOI:10.2147/OPTH.S77210.
- A.P. Vignesh, Renuka Srinivasan, SwathiKaranth: A Case Report of Severe Corneal Toxicity following 0.5% Topical Moxifloxacin Use. Case Reports in Ophthalmology 02/2015; 6(1):63-65. DOI:10.1159/000376606.

Biography

Vignesh Paulpandian has completed his M.B.B.S & MD ophthalmology from JIPMER India. He did his FRCS from Royal college of Glasgow .He is currently working as a Speciality Doctor in Norfolk & Norwich University Hospital. He has published around 7 papers in reputed journals and has been serving as a Reviewer in International Journal of Ophthalmology.