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360 degree trabeculectomy best way to treat congenital glaucoma

22 May 2008
Ophthalmology Times Europe

Using a microcatheter to perform 360° trabeculectomy is a safer and more consistent way to treat congenital glaucoma than traditional trabeculectomy, according to information presented at this year's meeting of the American Glaucoma Society (AGS).

Adam C. Reynolds, MD of the Dean McGee Eye Institute, University of Oklahoma, US and colleagues performed 360° trabeculectomy using the iTrack catheter (iScience Interventional), a laser guided microcatheter designed to pass 360° through Schlemm's canal, in 12 congenital glaucoma eyes (nine patients) where trabeculectomy or goniotomy would have been the traditional surgical approach. Mean IOP of preoperative eyes was 31 mmHg.

In 75% of treated eyes (n=8), 360° trabeculectomy from a single surgical site was performed successfully. Of the remaining eyes, 50% (n=2) had previously undergone goniotomies, but most of the remaining angle (for a minimum of 200°) was cannulated using this method.

After 6.6 months, two eyes had required shunts to be placed. Although the follow-up period was too short to gauge postoperative visual outcomes, corneal clarity has improved and medical therapy been discontinued in the majority of cases. Mean IOP, postoperatively, was 17 mmHg.

The surgeons concluded that this method of treating congenital glaucoma is effective and offers a lower risk of surgical complications, although the follow-up period was too short to make any definitive assessment of long-term outcomes when compared with traditional methods.

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