

Surgical Management of an Encapsulated Lens Cyst 15 Years after Refractive Lensectomy

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The author has financial interests in IOP ophthalmics, Allergan and Abbott AMO.
There is no relevant financial disclosures in the subject matter of this
presentation.

Purpose

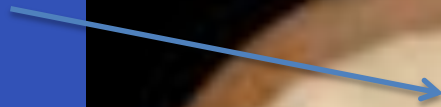
- To present the surgical management of an encapsulated lens cyst in an aphakic patient 15 years after refractive lensectomy.

Initial Presentation

- The patient was referred for 2 days of sudden-onset change in vision
- Patient had history of refractive lens extraction 15 years prior and was left aphakic
- Visual acuity was a “cloudy” 20/30

Initial Presentation

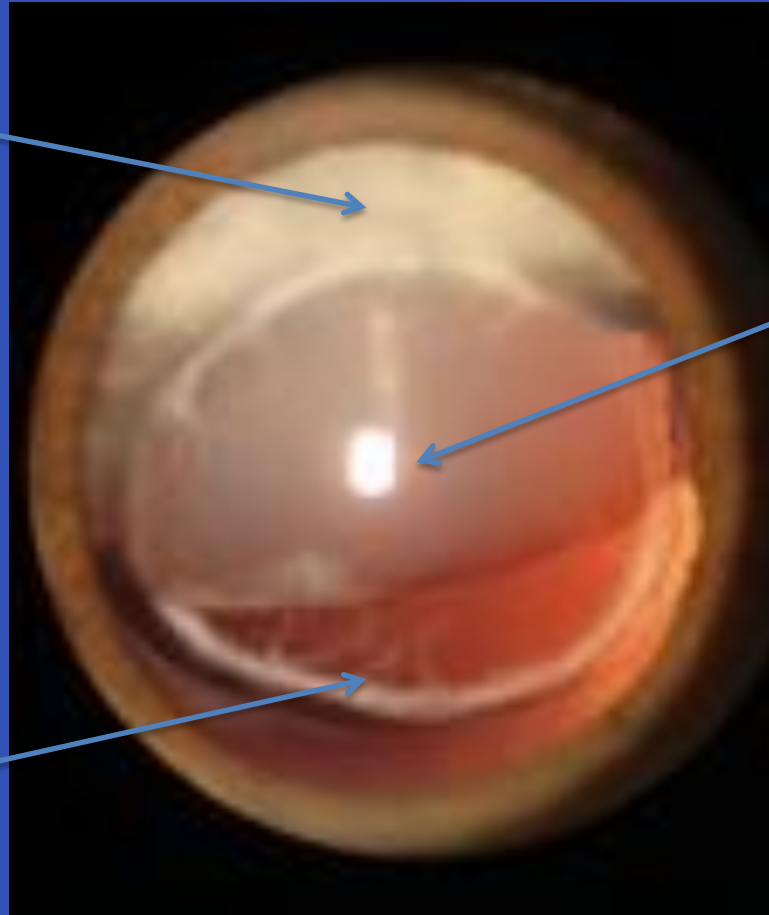
Residual lens material



3D- Lens cyst



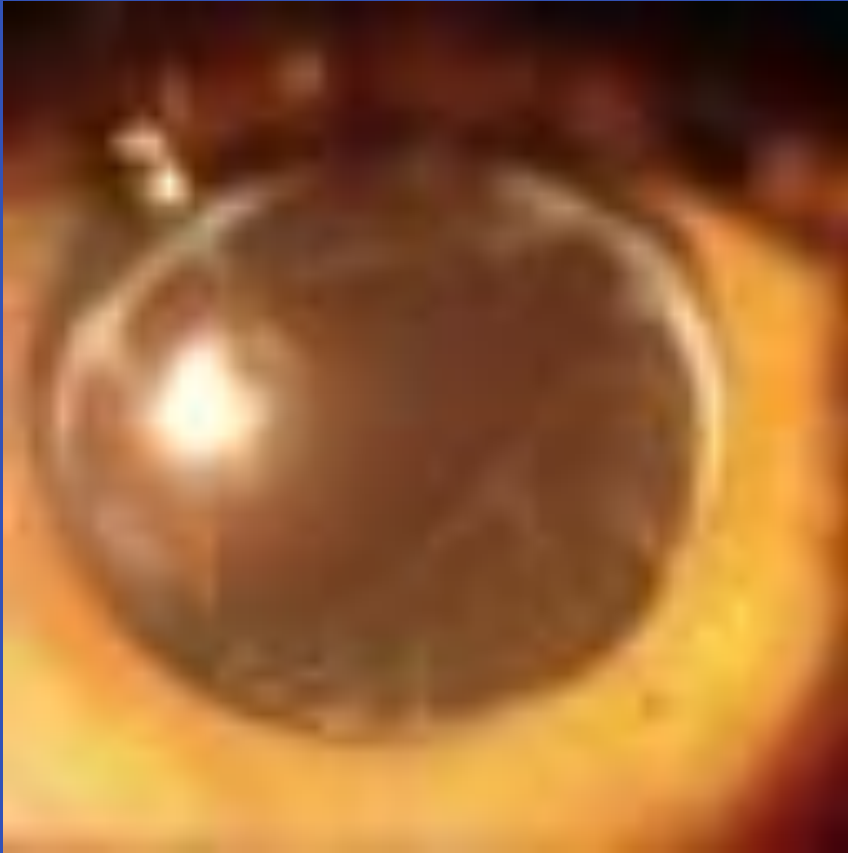
Sommering ring



Methods

- Decision was made to surgically treat the cyst with an anterior segment approach.
- In the OR, the capsule of the cyst was stained with trypan blue dye followed by viscoelastic placement into the anterior chamber.
- The cyst was opened with a cystotome.
- The cloudy fluid expelled from the cyst was sent for culture.
- Residual cortical material was removed with irrigation and aspiration.

Post-Operatively



- VA 20/25+
- Best vision patient had at any point in the 15 years post refractive lensectomy.
- Trace anterior chamber cells, resolved within 1 week
- The culture results of the cystic cloudy fluid were negative.
- Treated with topical moxifloxacin for one-week and underwent a 4-week taper of difluprednate and bromfenac

Conclusion

- This case suggests that a lens cyst can be successfully treated with surgical drainage using an anterior segment approach.