

Cataract Surgical Treatment in Patients with Chronic Uveitis



O.V. Shilovskikh
O.V. Safonova
Z.V. Kataeva



no financial interest



IRTC Eye Microsurgery Ekaterinburg Center, Russia

Purpose

To assess the results of cataract surgical treatment
in patients with chronic uveitis

Methods

- 75 patients (101 eyes), 41 men, 34 women
- Aged from 5 to 74 years (mean 36,6)
- BCVA from pr.l.certae to 0,7 (mean $0,15 \pm 0,11$)
- IOP from 6 to 50,5 mm.Hg (mean 17,2)



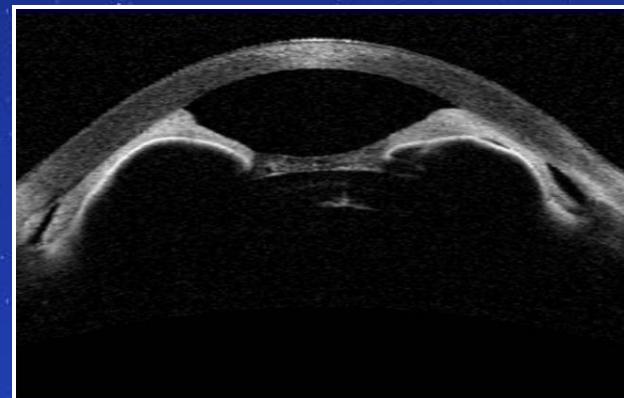
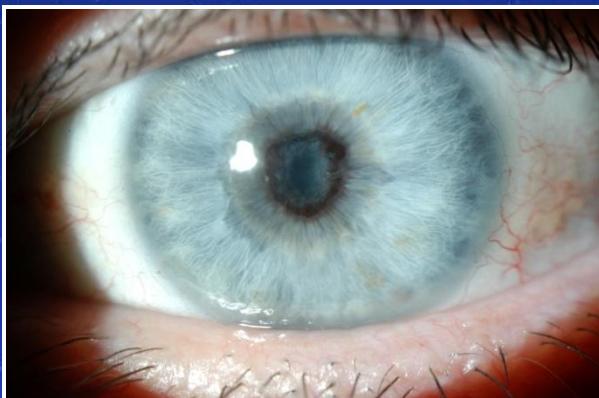
Etiology (eyes)

- Juvenile rheumatoid arthritis - 28
- Rheumatoid arthritis - 8
- Ankylosing spondylitis - 10
- Tuberculosis - 9
- Lyme disease - 2
- Psoriasis - 2
- Unknown etiology – 42

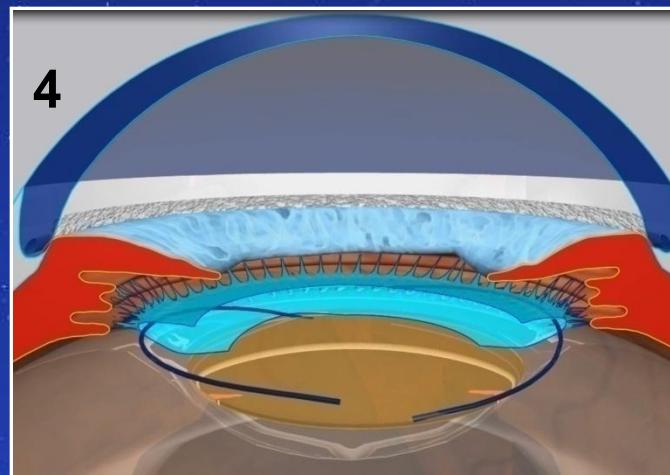
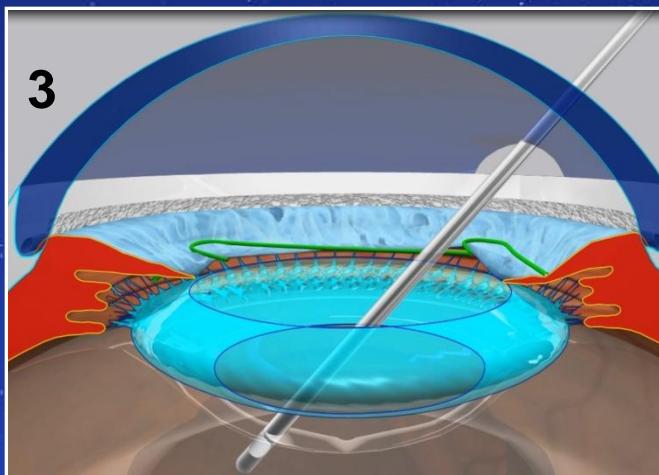
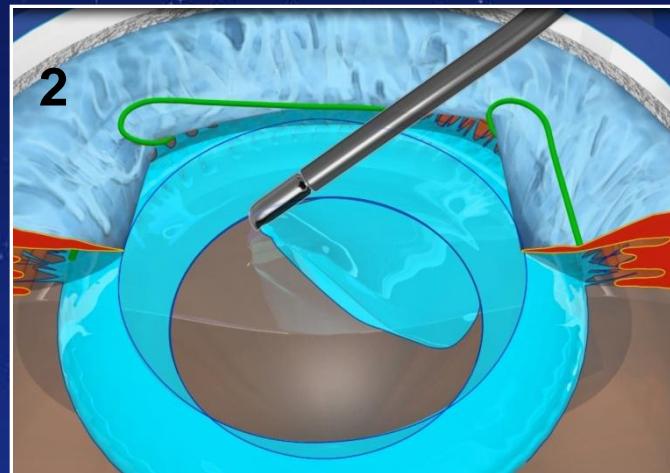
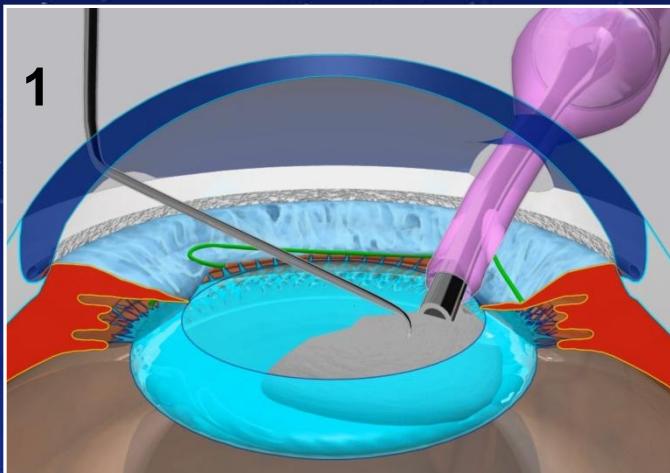


Clinical manifestations:

- Band keratopathy **25 eyes (24,7%)**
- Posterior synechiae **81 eyes (80,2%)**
- Anterior synechiae **11 eyes (10,9%)**
- Exudative membrane **35 eyes (34,6%)**
- Secondary glaucoma **17 eyes (16,9%)**



Surgical technique

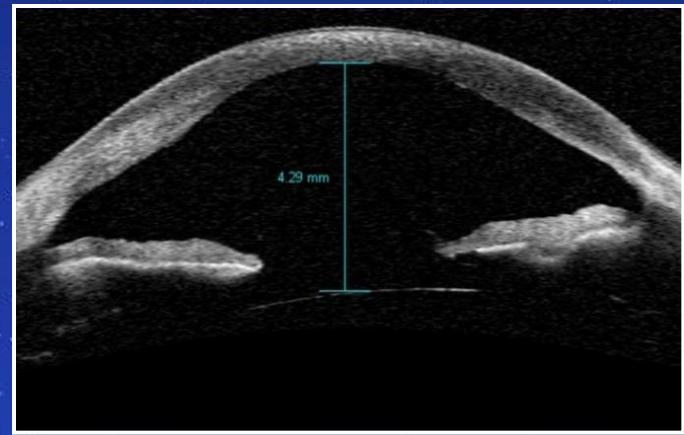
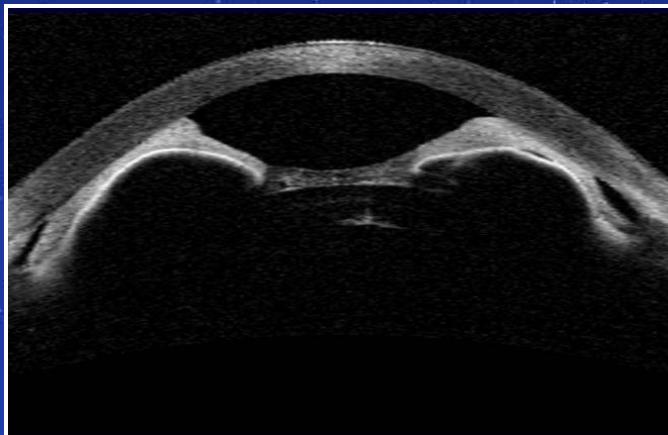
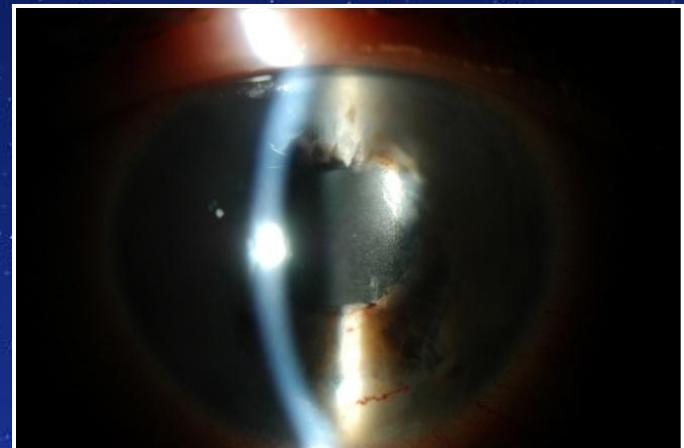


Anatomical results

Prior to surgery

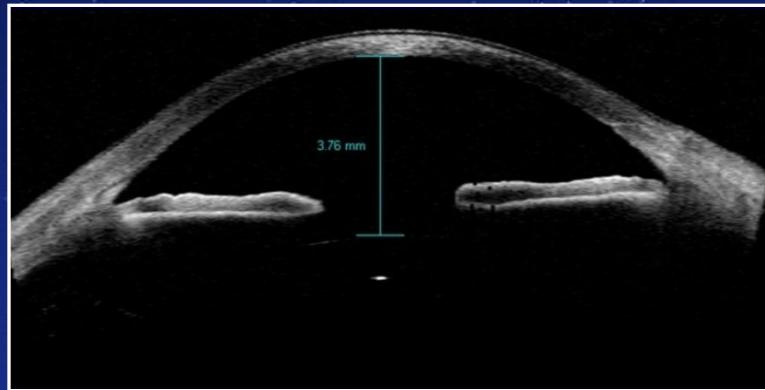


After surgery (day 2)

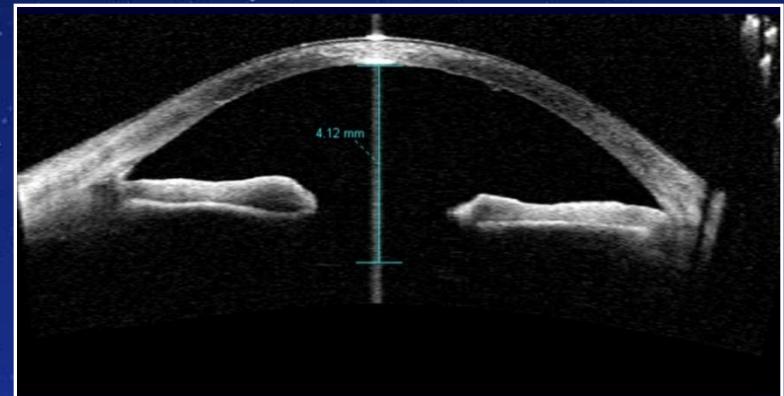


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Anatomical results



IOL in the capsular bag
MA60AC 24,0 D



IOL for posterior capsule
MA60AC 25,0 D

The difference in distance from the cornea to the IOL was 0,4 mm



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Results

	Day 1-2	Through 1 month	Through 1 year	Through 3 years	Through 5 years
number eye	101	101	77	50	45
BCVA <0,2	19 (18,8%)	16(15,9%)	15 (19,5%)	6 (12%)	8 (17,8%)
BCVA 0,2-0,5	40 (39,6%)	32 (31,7%)	19 (24,7%)	17 (34%)	14 (31,1%)
BCVA >0,5	42 (41,6%)	53 (52,5%)	43 (55,8%)	27(54%)	23 (51,1%)



Results

- Relapses of uveitis - **13,8%**
- Deposits on the IOL - **20,8%**
- Single posterior synechiae
(without bombazh iris!) - **3 eyes (2,9%)**
- Decompensation IOP
(required surgery) - **4 eyes (3,9%)**



Results

- Initial cystoid macular edema - 26 eyes (**25,7%**)
- Vitrectomy with intravitreal injection of kenalog - 14 eyes
- Normalization of macular profile and improvement of visual function



Conclusion

- The suggested method can achieve good anatomical and functional results
- Most of postoperative complications may be well treated
- To decrease the postoperative complications we need to continue our research

