



Prophylactic Removal and Microbiological Evaluation of Calcified Plaques After Pterygium Surgery

Hyuk Jin Choi, Mee Kum Kim, Won Ryang Wee

The authors have no financial interests to disclose.



Purpose



- ▶ To investigate
 - ▶ Microbiological characteristics of prophylactically removed calcified plaques developed after pterygium excision
- ▶ To evaluate
 - ▶ Clinical outcomes of surface reconstruction for underlying scleral defects



Methods

▶ Eligible patients

- ▶ Visit Seoul National University Hospital Between January 2010 and October 2011
- ▶ Present calcium plaques after pterygium surgery

▶ Removal of calcium plaques

- ▶ In patients who showed epithelial defect over the plaques
- ▶ Fourteen eyes of 13 patients

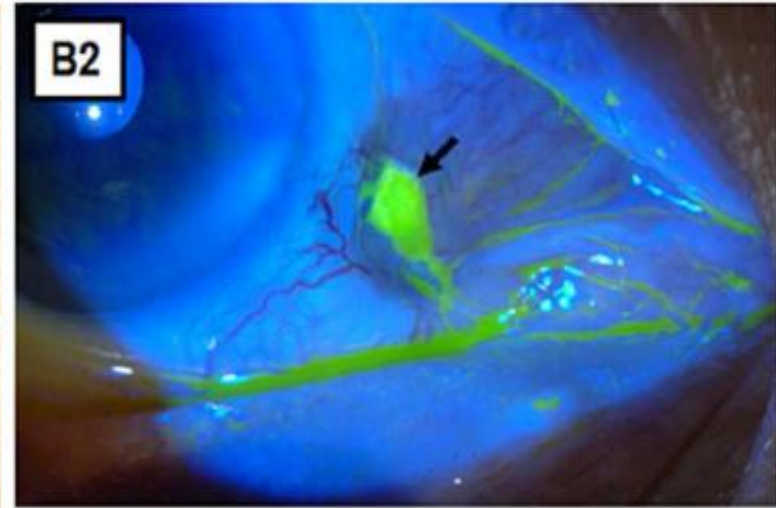
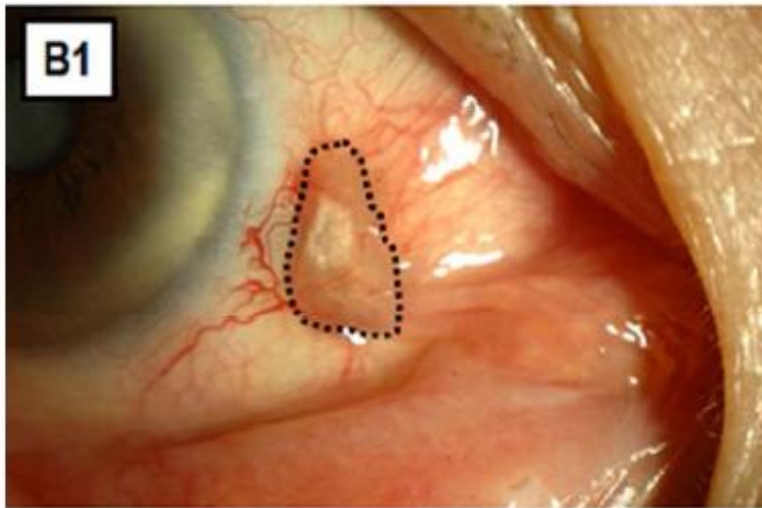
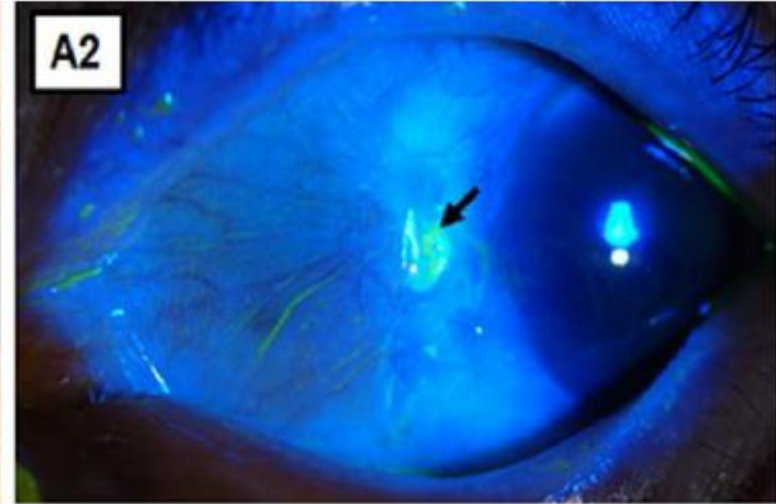
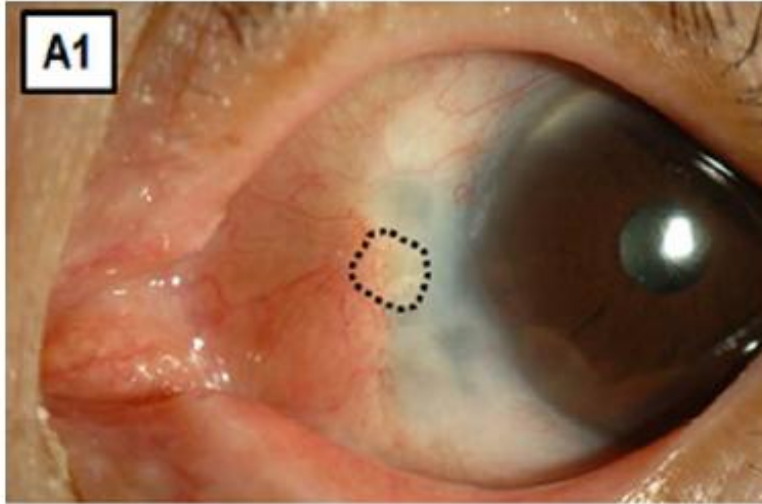
▶ Microbiologic examinations for removed calcified plaques

- ▶ Smear: Gram and Gomorimethenamine silver stain
- ▶ Culture: sheep blood agar, chocolate agar, Sabouraud dextrose agar with chloramphenicol, and brain-heart infusion broth

▶ Surface reconstruction for scleral defect (scleromalacia)

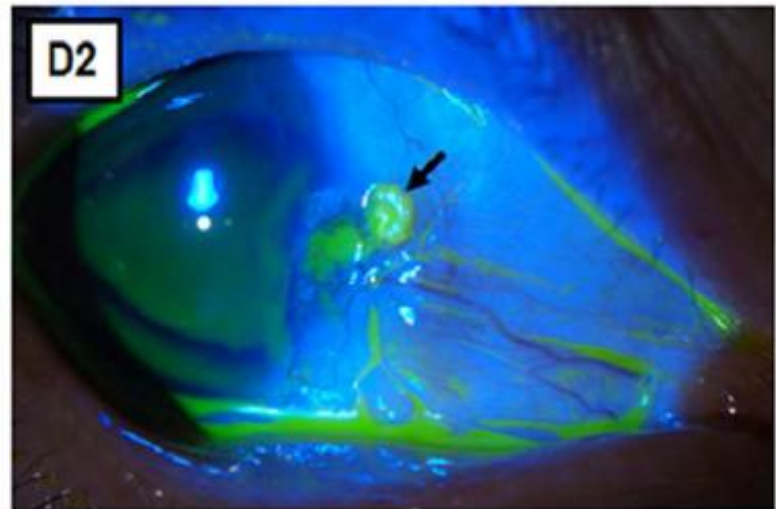
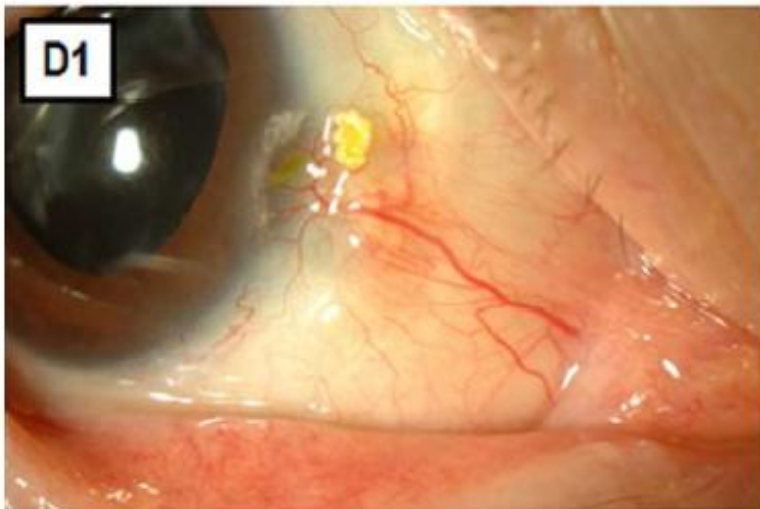
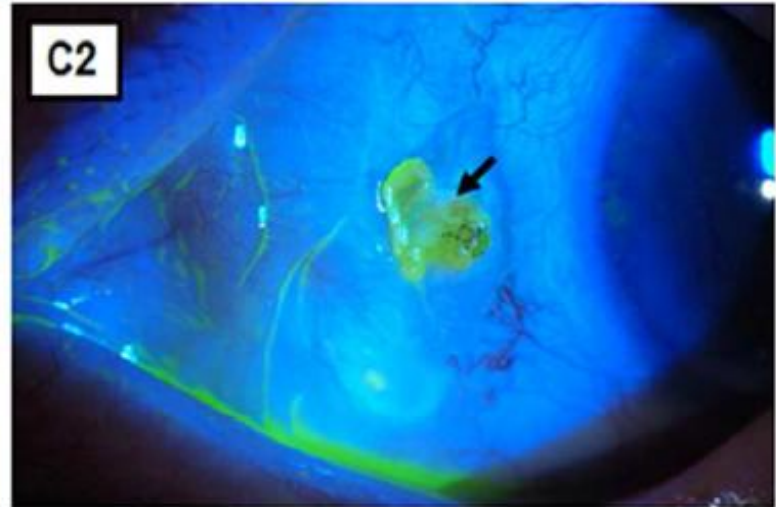
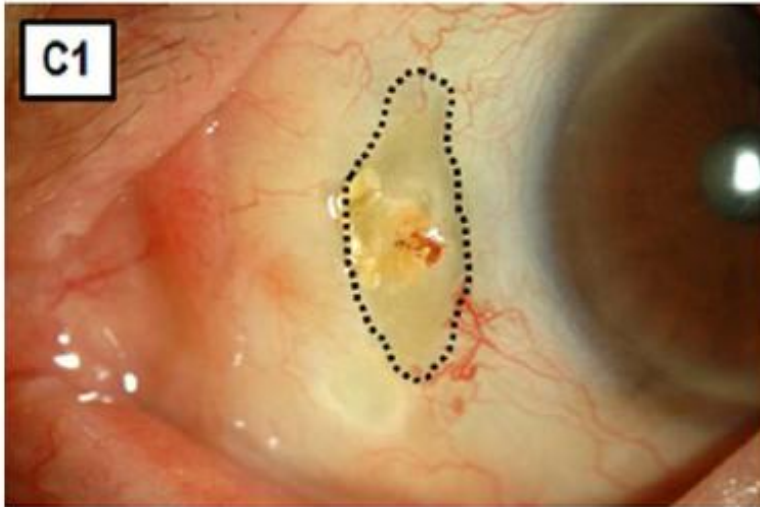
- ▶ Small & shallow scleral defects: conjunctival autograft or amniotic membrane transplantation (filling technique)
- ▶ Large & deep scleral defects: homologous scleral graft

○ ○ ○ Preoperative manifestations: examples ○ ○ ○



Dotted line: outline of calcified plaques
Arrows: epithelial defects over the calcified plaques

○ ○ ○ Preoperative manifestations: examples ○ ○ ○



Dotted line: outline of calcified plaques
Arrows: epithelial defects over the calcified plaques

Results

► Demographics, surface reconstruction, and culture results

Culture positive rate: 35.7% (5/14)

Stenotrophomonas maltophilia: the most common

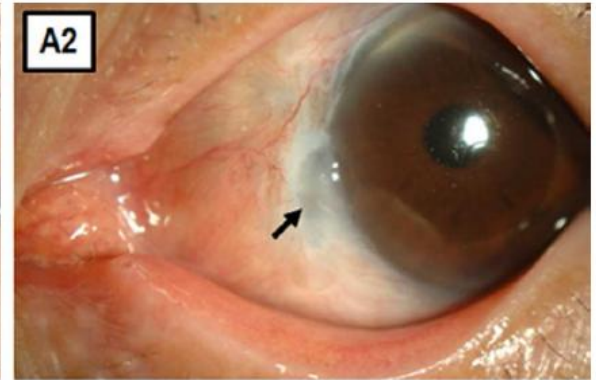
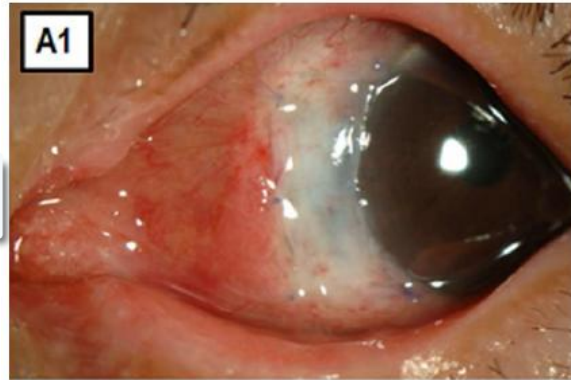
Case No	Sex	Age (yr)	Laterality	Latent period (yr)*	Scleral surface reconstruction	Pathogen	Size of epithelial defect (mm ²)	Size of calcified plaque (mm ²)	Postoperative complication
1	M	65	R	2	AMT	Gram-negative species (unidentified)	2	20	None
2	F	74	R	40	AMT	<i>S. maltophilia</i> <i>S. aureus</i>	2.4	3.75	None
3	F	79	L	4	AMT	None	5.1	11.25	None
4	F	78	R	10	Scleral patch graft	<i>Streptococcus</i> species, viridians group <i>S. maltophilia</i>	1.5	3.75	None
5	M	65	R	10	Scleral patch graft	<i>Corynebacterium</i> species	1.5	24	None
6	M	65	L	10	Scleral patch graft	None	3	6.6	None
7	F	72	R	40	None	<i>S. maltophilia</i>	0.96	4.5	None
8	F	70	R	10	AMT	None	0.75	3.36	None
9	F	71	L	27	Conjunctival autograft	None	0.7	2	Shrinkage of conjunctival autograft and small cyst formation
10	M	75	L	2	Scleral patch graft	None	0.4	5.04	None
11	M	67	R	40	AMT	None	0.3	2.2	None
12	F	58	R	23	AMT	None	0.5	7.5	None
13	F	74	L	20	AMT	None	3	12.5	None
14	F	74	R	31	AMT	None	1.5	12	None
Mean		70.9		19.9			1.69	8.46	

*Time interval between pterygium excision and calcified plaque removal

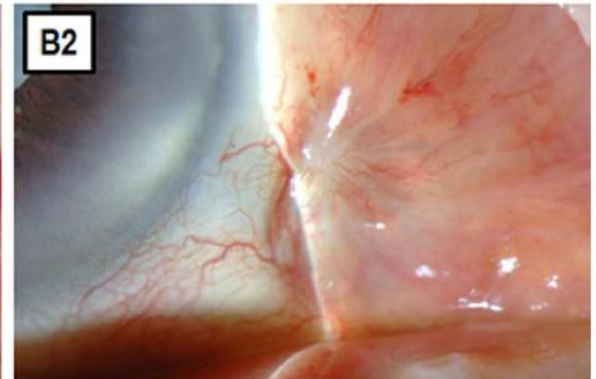
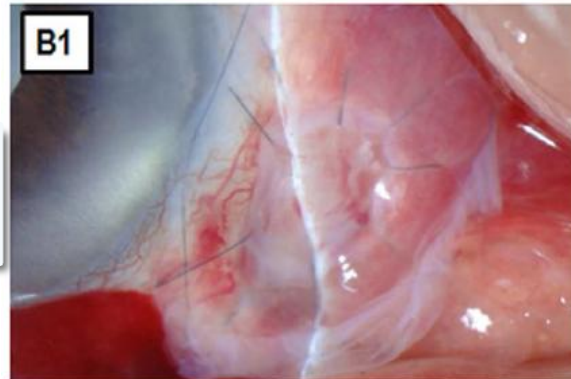
AMT = Amniotic membrane transplantation with filling technique; *S. maltophilia* = *Stenotrophomonas maltophilia*; *S. aureus* = *Staphylococcus aureus*

Surface reconstruction: examples

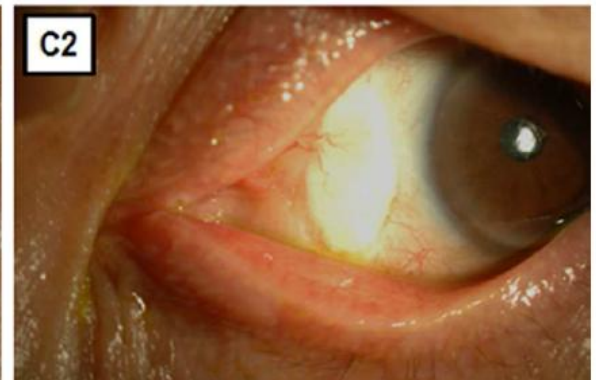
Conjunctival autograft



Amniotic membrane transplantation



Scleral patch graft



▶ Culture positive vs. Culture negative (Risk factor analysis)

Size of calcified plaque: the only significant risk factor for growth of microorganism

	Culture positive (n=5)	Culture negative (n=9)	P value
Age (yr) at time of surgery	70.8 ± 5.72	70.3 ± 6.28	0.958
Male : Female	2 : 3	3 : 6	0.679
Latent period (yr)*	20.4 ± 18.2	18.6 ± 12.9	0.255
Size of epithelial defect (ED, mm ²)	1.67 ± 0.55	1.69 ± 1.66	0.577
Size of calcified plaque (CP, mm ²)	11.2 ± 9.96	6.93 ± 4.17	0.001†
ED/CP	0.28 ± 0.24	0.24 ± 0.15	0.591

All data represent the mean ± SD

*Time interval between pterygium excision and calcified plaque removal

†Mann-Whitney U test



Conclusions



- ▶ Calcified plaques after pterygium surgery
 - ▶ May develop and cause persistent overlying epithelial defect after a long time interval (Mean 19.9 years in this series)
 - ▶ Could play a role as infection sources (35.7% positive culture rate of microorganisms in this series)

- ▶ Risk factor for culture positive results
 - ▶ Size of the calcified plaques

- ➔ Prophylactic removal of the plaques and tectonic graft procedure for the underlying scleral defects should be considered, especially in large plaques