



Asociación para Evitar
la Ceguera en México I.A.P.
HOSPITAL "DR. LUIS SÁNCHEZ BULNES"



PHACOLYTIC GLAUCOMA

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The author have no financial interest in the subject matter of this e-poster.

PURPOSE

To describe the postoperative outcomes of a patient with phacolytic glaucoma treated with manual small incision cataract surgery.

METHODS

A 67-year-old man presented to our institution with sudden decrease in visual acuity as well as severe pain, redness, photophobia, tearing, and corneal opacity in the left eye for 3 days.

He underwent cataract extraction surgery with an IOL implant in the right eye 20 years ago but had no history of importance for the present condition.

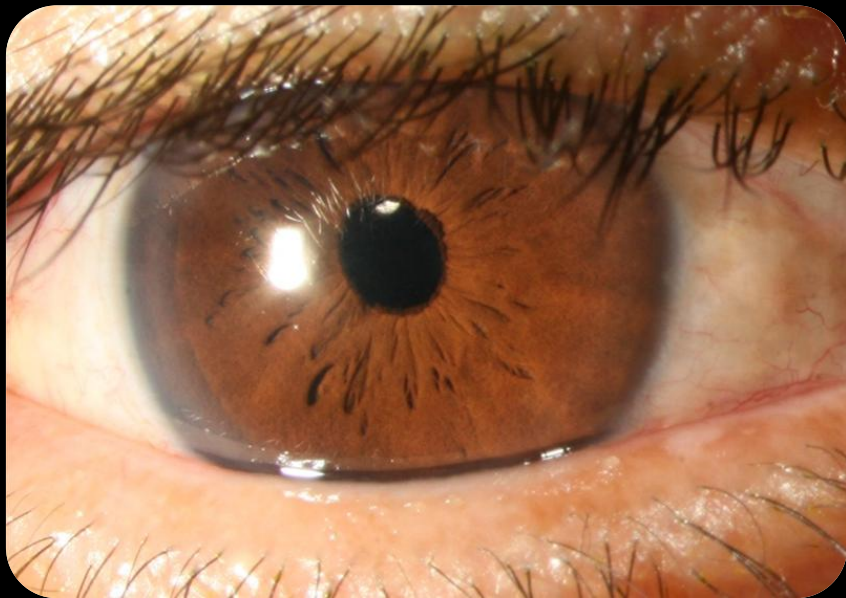
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RESULTS

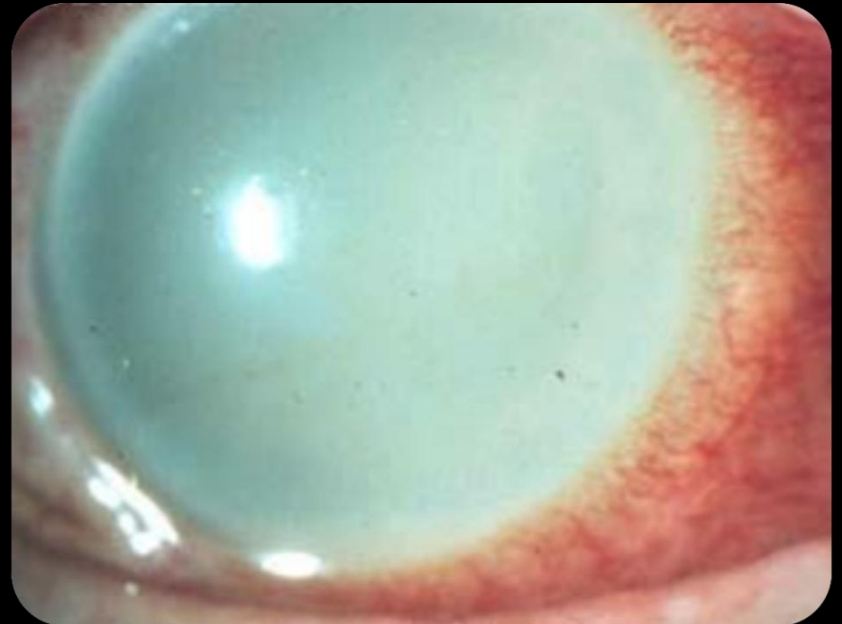
The patient's best-corrected visual acuity in the right eye was 20/70 and in the left eye was light perception. His IOP was 16 mm Hg in the right eye and 56 mm Hg in the left eye.

The slit-lamp examination revealed a normal right eye and the left eye with conjunctival hyperemia, ciliary reaction, corneal edema, intense flare with iridescent particles in the anterior chamber, and hipermature cataract.

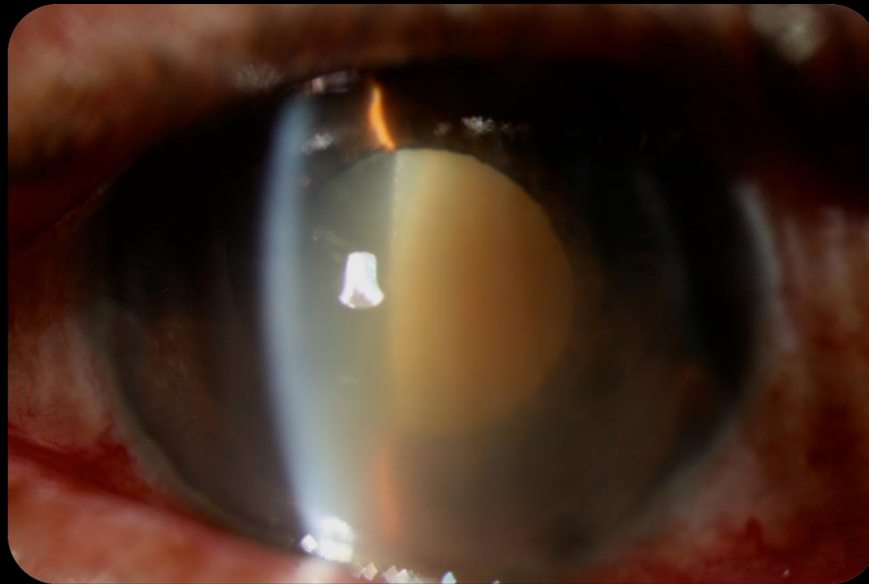
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OS

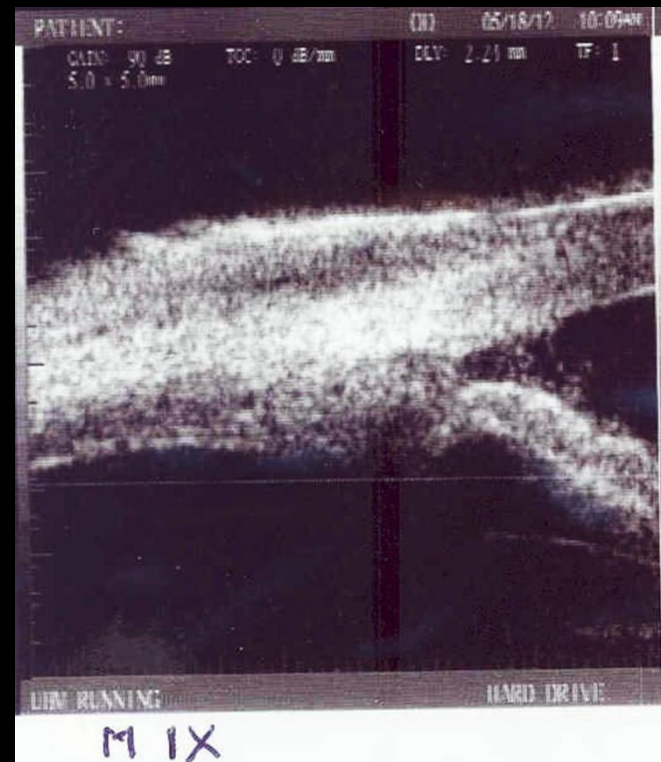
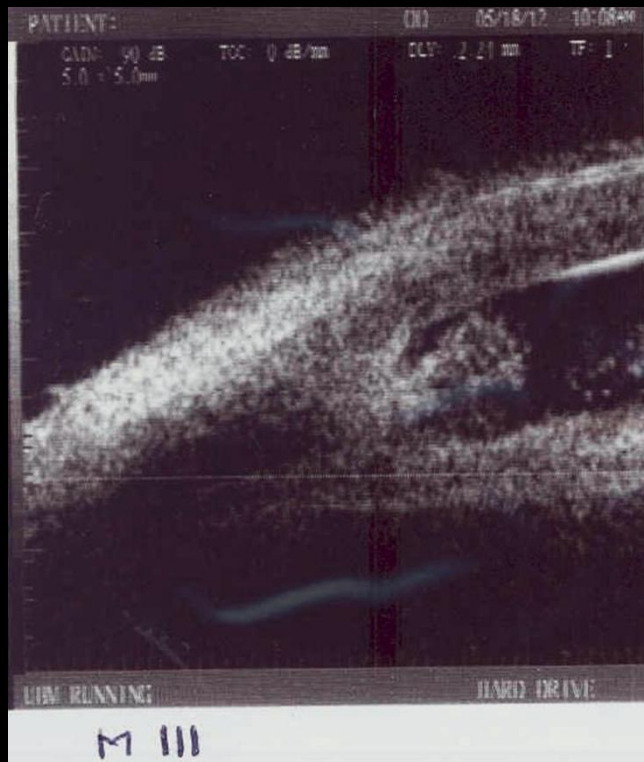


We diagnosed him with phacolytic glaucoma and started topical treatment with prednisolone, tropicamide with phenylephrine, and ocular antihypertensive treatment with timolol, dorzolamide, and brinzolamide. He also was prescribed acetazolamide orally. Three days after, IOP decreased to 32 mmHg.



ULTRABIOMICROSCOPY

Ultrabiomicroscopy revealed deposits of particles, possibly lens material at the angle.



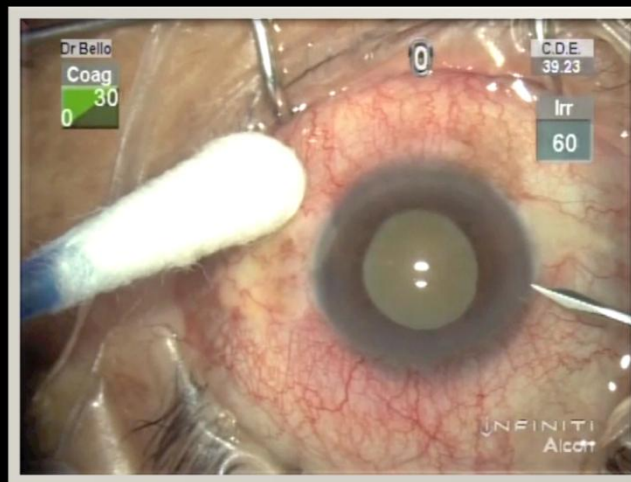
B-SCAN

B-scan showed an echo-free vitreous, posterior vitreous detachment and normal optic nerve head cupping.



SURGERY

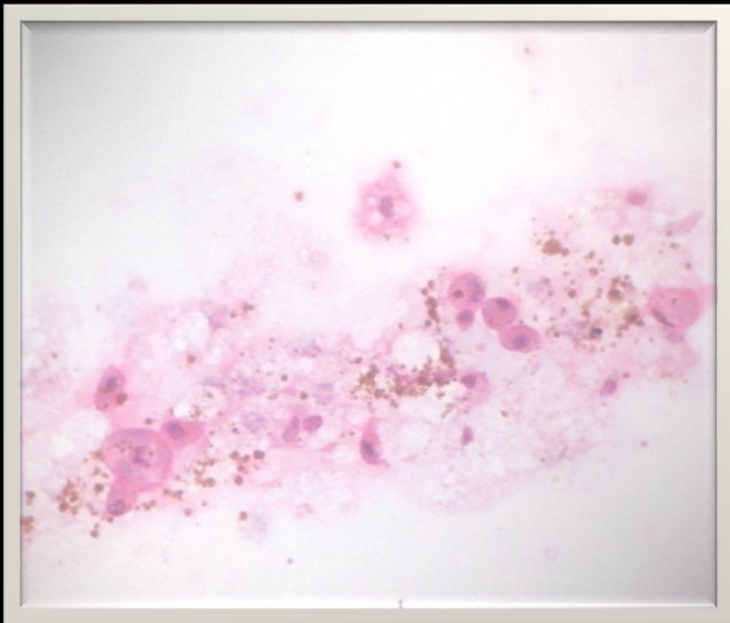
One week later we did a manual small incision cataract surgery with IOL implant.



Postoperatively topical gatifloxacin and tapering dose of prednisolone were started.

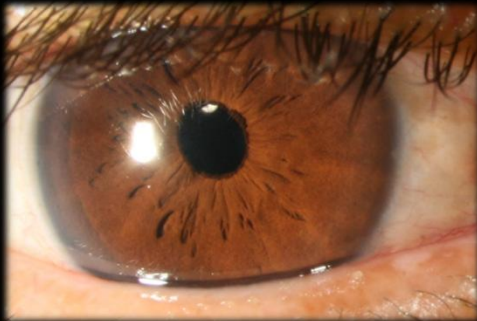
HISTOPATHOLOGIC EXAMINATION

The smear and culture of aqueous humor were negative for any organism. Histopathologic examination revealed the lens surrounded by inflammatory cells and multinucleated giant cells engulfing the lenticular fibre.

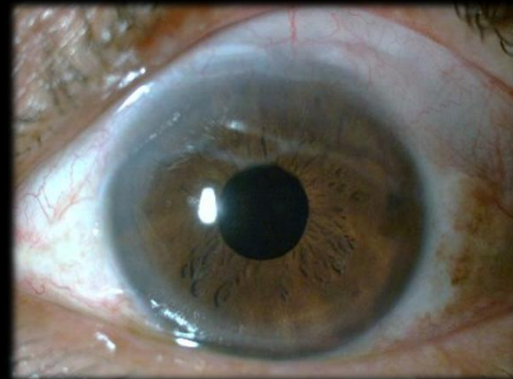


EVOLUTION

One month postoperatively his vision was 20/20, IOP of 16 mm Hg and normal optic nerve head cupping in both eyes



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CONCLUSIONS

- The incidence of phacolytic glaucoma is decreasing due to the awareness and availability of cataract surgery.
- It is caused by an obstruction of trabecular meshwork by lens proteins or protein-laden macrophages.
- There was presence of inflammation, histiocytic response, and giant cells seen around the lens material thus confirming the ongoing phacolytic process.
- Extraction of the lens with the manual small incision cataract surgery led to recovery of symptoms and vision gain of 20/20.