THE ONE-YEAR OBSERVATION OF PATIENT WITH CYSTOID MACULAR OEDEMA (CMO) SECONDARY TO TEMPORAL LOWER BRANCH RETINAL VEIN OCCLUSION (BRVO) BEING TREATED WITH INTRAVITREAL INJECTIONS OF DEXAMETHASONE IMPLANTS

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Purpose: Aim of this study is to analyze the results of reinjection of biodegradable intravitreal implant of dexamethasone (Ozurdex) of patient with chronic macular oedema (CMO) secondary to temporal lower branch retinal vein occlusion. Materials and methods: The patient with chronic macular oedema (CMO) secondary to temporal lower branch retinal vein occlusion. The diagnosis was based on examination of the eyes, extended by fluorescein angiography (AF) and optical coherence tomography (OCT). Injections of Ozurdex took place in the operating theatre, while respecting aseptic conditions and in accordance with the principles of intravitreal injections. From the onset of symptoms to the administration passed the time of 2 weeks. Patient controls were held on schedule: 2 weeks, 4 months, 7 months, 8 months and 10 months since the onset of symptoms and included measurements of visual acuity, intraocular pressure, OCT of the retina. Before implantation as well as in postoperative period patients used topical antibiotic with an extended spectrum of action (Vigamox). Results: In the presented patient with CMO secondary to BRVO, the use of an intravitreal biodegradable implant containing dexamethasone (Ozurdex) resulted in improved visual acuity and reduced retinal oedema. The first implantation of a biodegradable implant containing dexamethasone resulted in partial improvement of functional and morphological state of central retina. A six-month follow-up after reimplantation of Ozurdex showed functional and morphological stabilisation of central retina. Conclusions: Ozurdex is an effective drug in the treatment of chronic retinal edema resulting from retinal vein thrombosis.