CATARACT, ANGLE-CLOSURE GLAUCOMA (ACG) AND VITREOMACULAR TRACTION SYNDROME (VMTS): DOUBLE AND TRIPLE COMBINED SURGERY

A. Neves, J. Sousa, J. Campos, S. Mendes, D. Beselga, L. Violante
Ophthalmology Department, Santo André Hospital, Leiria Hospital Center, Portugal

Methods: Retrospective descriptive study of a case report based on clinical records information, patient observation, surgery record and complimentary diagnostic tests analysis.

Results: A 75-year-old male, previously diagnosed with ACG, presented with progressively bilateral decreased visual acuity. Best corrected visual acuity (BCVA) was 4/10 in right eye (RE) and 6/10 in left eye (LE). RE intraocular pressure (IOP) control was achieved by trabeculectomy. LE was on maximal medical therapy. Slit-lamp biomicroscopy showed bilateral cataract. Computerized automated visual perimetry showed generalized field loss in the RE and an inferior nasal step in the LE. Optical Coherence Tomography (OCT) showed decreased retinal nerve fiber layer (RNFL) thickness in RE and normal RNFL thickness in LE, with a slight decrease of the inferior RNFL, and bilateral VMTS. The patient was submitted to combined cataract surgery (phacoemulsification and intraocular lens implantation) and microincisional Pars Plana Vitrectomy (PPV) with posterior hyaloid membrane stripping and internal limiting membrane (ILM) peeling in RE. Three months later, LE had undergone combined cataract surgery (phacoemulsification and intraocular lens implantation), microincisional PPV with posterior hyaloid membrane stripping and ILM peeling and placement of a glaucoma filtration device (Ex-Press Shunt). After surgeries, there was improvement in BCVA, reduction of CMT and control of IOP was achieved, bilaterally.

Conclusions: Combined surgery for cataract, ACG and retinal disease may be a successful management option in selected patients. Proper surgical technique is necessary in order to avoid postoperative complications. Further studies are needed to guarantee the safety and efficacy of a triple surgical procedure.