SINGLE-SUTURE SCLERAL FIXATION OF SUBLUXATED INTRAOCULAR LENSES: LONG TERM FOLLOW-UP

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Purpose: To present the long term results of single-suture scleral fixation of subluxated intraocular lenses (IOL) in eyes with sufficient residual capsular support. Methods: The results of IOL repositioning by single-suture scleral fixation in 8 eyes of 8 patients with IOL subluxation were included. Seven of the subluxated IOLs were foldable (6 hydrophilic acrylic, 1 hydrophobic acrylic), and one was a polymethylmethacrylate lens. Subluxation resulted from posterior capsule tears in 4 eyes, zonular dialyses in 3 eyes, and zonular dehiscence with a capsulorhexis tear in 1 eye. A similar technique was used in all eyes in which one haptic was externalized through a superior clear corneal incision and tied with a Pair-PAK 10-0 polypropylene suture, and was finally retracted and fixated behind the iris close to the ciliary sulcus at the 12:00 meridian. Results: All patients were followed-up for at least 18 months (mean 23.5±6.1 months). Best-corrected visual acuities ranged between finger counting and 20/70 (mean logMAR 1.09±0.52) preoperatively, and between 20/100 and 20/20 (mean logMAR 0.17±0.24) at the final postoperative visit. All IOLs remained centred and no significant postoperative complications were encountered except for the early intraocular pressure spikes in two eyes, and an IOL tilt which resulted in a considerable oblique astigmatism in one eye. Conclusions: Long term results reveal that subluxated IOLs may safely be repositioned and secured with a single scleral fixation suture in selected cases with adequate amount of capsular remnants. Financial Disclosure: No.