DEXAMETHASONE INTRAVITREAL IMPLANT FOR CYSTOID MACULAR EDEMA IN BIRDSHOT CHORIORETINOPATHY

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The aim was to present the outcomes after application of dexamethasone intravitreal implant for cystoid macular edema (CME) in birdshot chorioretinopathy (BSCR).

Patients and methods: BSCR was diagnosed in two HLA-A29 positive patients 5 and 2 years ago, respectively. Dexamethasone intravitreal implant was applied for CME last year. Changes in best corrected visual acuity (BCVA) on ETDRS chart, central retinal thickness (OCT) and ERG parameters (photopic, scotopic and 30Hz flicker ERG) were measured.

Results: One month after injection, BCVA improved by 10 and 25 letters, central foveal thickness prompt decreased by 100 and 150 µ, respectively and remained stable for 9 months. No improvement was detected in b wave. After a 10-month period, the edema exacerbated.

Conclusion: Dexamethasone intravitreal implant could be a useful tool in the management of CME in BSCR. It could effectively improve the visual acuity and decrease cystoid macular edema.