

NON-PENETRATING SURGERY IN THE TREATMENT OF NEOVASCULAR GLAUCOMA

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Introduction: Secondary neovascular glaucoma represents 3.2-4% of all glaucoma hospitalizations. Among the conditions that cause vascular glaucoma in order of frequency: occlusion of the central vein of the retina, diabetic retinopathy, carotid occlusions, chronic uveitis, tumors. In all cases, the condition was characterized by significant tissue destruction with evolution towards irreversible vision loss. We present the surgical intervention - resection of the non-penetrating sclera in patients with painful uncompensated neovascular secondary glaucoma.

Aim of the study consists in evaluating the effectiveness of the surgical intervention "Resection of the non-penetrating sclera", the performance of which is less traumatic and as a result complications such as uveitis, postoperative hypotony, hyphema, choroidal detachment, expulsive hemorrhage in terms of IOP compensation and reduction of the pain syndrome do not occur.

Methods and Materials: A retrospective study was during the last year of 12 patients over 50 years old, with uncompensated neovascular glaucoma.

In the late postoperative period in 3 patients Compensated IOP on the basis of monotherapy, in 5 patients on the basis of combined therapy (2 preparations), 2 patients IOP on the basis of undercompensated treatment, and in 2 patients IOP at high limits, but without painful syndrome.

Results:

-Resection of the non-penetrating sclera in neovascular glaucoma leads to an IOP compensation of 25-35% from the initial indicators.

- A decrease of IOP is a result of the activity of intraocular fluid drainage through the uveo-scleral pathway.

- The intervention is characterized by minimal trauma to the eye and intra- and post-operative complications.