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Pars plicata versus pars plana application of micropulse transscleral cyclophotocoagulation

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Purpose

The aim of this study was to compare the efficacy and safety of transscleral micropulse cyclophotocoagulation (MPC) applied at the level of the pars plicata (PLI-MPC) versus at the pars plana (PLA-MPC).

Methods

In this prospective interventional case series, 45 eyes of 29 medically treated open-angle glaucoma patients scheduled for MPC (IRIDEX IQ810 Laser Systems, CA) for further IOP reduction were included. Twenty-seven eyes underwent PLI-MPC and 18 eyes PLA-MPC. Twenty-four hour mean intraocular pressure (IOP) reduction 3 months after the procedure, and complications were compared between both groups. Statistical analyses were performed with SPSS. Pre- and postoperative IOP differences between the two treatment groups were carried out using a linear mixed model.

Results

In the PLI-MPC group (mean age: 75.41 ± 5.92 years), 24 hour mean IOP was reduced from 15.8 ± 2.9 mmHg to 13.9 ± 2.9 mmHg at 3 months ($P=0.005$). In the PLA-MPC group (mean age: 75.17 ± 8.67 years), mean IOP decreased from 16.5 ± 3.3 mmHg to 14.0 ± 2.8 mmHg ($P=0.003$). No complications were reported in either group. There were no correlations between IOP reduction and age, gender, high or normal pressure glaucoma or the severity of the visual field.

Conclusions

PLI-MPC and PLA-MPC seem to be safe and effective in lowering the IOP of patients with treated open-angle glaucoma. Both modes of application showed a statistically significant IOP lowering.

Layman Abstract (optional): Provide a 50-200 word description of your work that non-scientists can understand. Describe the big picture and the implications of your findings, not the study itself and the associated details.

