

Pterygium surgery with conjunctival limbal autograft with fibrin glue under topical anaesthesia with lignocaine 2% jelly.

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Abstract:

To evaluate the efficacy of lignocaine 2 % jelly as topical anesthesia in pterygium surgery with conjunctival limbal autograft using fibrin glue. A non-randomized interventional study was carried out including twenty-one patients who presented with primary pterygium. Under 2% lignocaine jelly, surgical dissection of the pterygium, scraping of corneal bed with crescent blade, excision of Tenons capsule, harvesting conjunctival limbal autograft superiorly, and securing it with respect to limbus and stromal orientation with fibrin glue were done. Postoperatively, the patients discomfort and pain were evaluated by Wongs pain scoring system. The mean pain score was 0.70 +/- 0.97. Only one patient (4.76%) out of the whole series experienced pain who rated more than three on the visual analog scale of 5. Thirteen patients (61.9%) had pain score of zero, that is, no pain. The surgeons evaluation of the technique in terms of surgical ease and complications was favorable. There were no dislodged grafts and no cases required suturing. There were no cases of infection, significant inflammation, epithelial problems and reduction in visual acuity. There was a single case of recurrence (4.76%) five months postoperatively which was managed conservatively. Conclusions: Topical anesthesia with lignocaine 2% jelly using fibrin sealant is safe and effective in pterygium surgery allowing for short operative times. It results in low pain and good aesthetic and functional outcomes. © NEPjOPH.