Fibrin sealant in the management of complicated hypotony after

trabeculectomy.

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Abstract:

BACKGROUND AND OBJECTIVE: In the postoperative course of trabeculectomy, hypotony may

cause choroidal detachment with shallowing of the anterior chamber. If conservative medical

treatment fails, a surgical revision may become necessary. To achieve only a temporary seal of the

scleral flap, a subconjunctival tamponade with fibrin glue was performed.

PATIENTS AND METHODS: Two patients with corneal decompensation as a result of cornea-lens

contact complicating hypotony with massive choroidal detachment are described. Hypotony

occurred after trabeculectomy in one case and after combined cataract and glaucoma surgery in

another case, and was not correlated to a leaking bleb. Temporary tamponade of the scleral flap

was achieved by subconjunctival injection of fibrin sealant.

RESULTS: After the fibrin sealant was applied, the choroidal detachment resolved and intraocular

pressure increased to normal. During the follow-up period of 6 months, a functioning bleb

developed.

CONCLUSION: Subconjunctival application of fibrin sealant is effective for temporary closure of the

scleral flap after trabeculectomy in eyes with massive hypotony syndrome.