

Glued intrascleral fixation of posterior chamber intraocular lens in children.

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Abstract:

PURPOSE: To evaluate the short-term results of glued intrascleral fixation of posterior chamber intraocular lens (glued IOL) in children without adequate capsular support.

DESIGN: Noncomparative retrospective observational case series.

PATIENTS:

SETTING: Institutional practice.

METHODS: Forty-one eyes of 33 children who underwent glued IOL implantation were retrospectively evaluated. The indications were postsurgical aphakia, subluxated cataract, ectopia lentis, traumatic subluxation, and decentered IOL.

MAIN OUTCOME MEASURES: Visual acuity (VA), endothelial cell changes, intraoperative and postoperative complications.

RESULTS: The mean age at the time of glued IOL was 10.7 \pm 3.6 years (range 5-15). The mean duration of follow-up after surgery was 17.5 \pm 8.5 months (range 12-36). The mean postoperative best spectacle-corrected visual acuity (BCVA in decimal equivalent) was 0.43 \pm 0.33 and there was

significant change noted ($P < 0.001$). Postoperatively, 20/20 and $>20/60$ BCVA was obtained in 17.1% and 46.3% of eyes respectively. BCVA improvement more than 1 line was seen in 22 eyes (53.6%). The mean postoperative refraction was myopic (-1.19 ± 0.7 diopters [D]) in 19 eyes and hyperopic ($+1.02 \pm 0.7$ D) in 22 eyes. The mean endothelial loss was 4.13% (range 1.3%-5.94%). The 3 causes of reduced BCVA were the preexisting corneal, retinal pathology, and amblyopia. Postoperative complications included optic capture in 1 eye (2.4%), macular edema in 2 eyes (4.8%), and clinical decentration in 2 eyes (4.8%). There was no postoperative retinal detachment, IOL dislocation, endophthalmitis, or glaucoma.

CONCLUSION: Short-term results in children after glued IOL were favorable, with a low rate of complications. However, regular follow-ups are required since long-term risks are unknown.

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