







Available Options

- Trabeculotomy
- Trabeculectomy with mitomycinC
- Valve surgery
- Cryo-cycloablation
- Diode-cyclophotocoagulation

ESG 2013 RIC

Patients

- 42 eyes of 37 infants and children, age range 9months-6years
 - Recurrent EODG (21eyes)
 - Pseudophakic glaucoma (14 eyes)
 - Advanced anterior segment dysgenesis (7 eyes)

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Postoperative Management Keep anti-glaucoma meds 1-7 days depending on IOP level Watchful antiinflammatory topical steroid-antibiotic Evaluation 2 days, 1 week, 3 months, 6 months post-op

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Outcome Parameters

- Course of 6 months
- IOP level
- C/D ratio evaluation
- Subjective evaluation of visual performance (parent comments on child activities pre- and postoperatively, visual acuity testing when applicable)
- Signs of ocular inflammation

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Results

 Marked IOP lowering/ hypotony (IOP<6) and associated inflammatory reaction in the form of severe tenderness, injection, tearing occurred in 24 eyes (57%) within 3 days postop with IOP building up afterwards to its plateau below 20 mmHg within 6 weeks

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Results

 Various degrees of transient extra/intraocular inflammation were observed in almost all eyes starting the second day postop, and disappeared 1-6 weeks postop. The severity of these episodes was clearly directly proportionate to the associated IOP lowering.

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Results

• Along the course of the study, IOP lowered below 20mmHg with no medications in 35 eyes (83%), the remaining eyes needed 1-2 medications to keep IOP at that level.

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Visual performance

- Significant temporary reduction of visual performance as commented by parents was observed in 7 eyes (24%)
- Noticeable visual improvement was commented by parents in 8 eyes (28%)
- Stable vision in rest of eyes (48%)
- No permanent loss of functioning vision was observed in all eyes

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Conclusion Trans-scleral Diode Cyclophotocoagualation is a viable method for managing refractory pediatric glaucoma cases

