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Service (sector) Retina and Vitreous N° CEP

Descriptive analysis of retinal surgeries performed in the ophthalmology department of UNIFESP Authors: Duprat, JPNC; Hagemann, LF; Morais, N; Sallum, JMF. Purpose: To describe the data from retinal surgeries performed in the last four months, analyzing techniques, materials, complications and results in a teaching hospital. Methods: In this research we reviewed the surgical procedures performed in the retina- vitreous service of the Ophthalmology department at the Federal University of São Paulo, and are presenting the retrospective descriptive analysis of the data from the charts of fifty-six patients. Results: Of the 56 patients analyzed, 37 were male and 19 were female. The age average was 53.5 years (15-85). The indications for surgery were retinal detachment in 37 cases; more than one break was present in seven cases; PVR in four and dialysis in one. Vitreous hemorrhage in 8 cases, IOL in the vitreous in one case, epiretinal membrane in two cases and lens in the vitreous were the indications in two cases. In two cases vitreal opacities impaired fundoscopy. The macula was considered detached in 33 and attached in 21 cases. In 2 cases macular position was not precise. Scleral buckle was performed in 21 cases and pars plana vitrectomy in 29 cases. Silicone oil was required in 11 cases. Other performed procedures were phacoemulsification (2), epiretinal membrane peeling (1), silicone oil removal (1), pneumatic retinopexy (2). Subretinal fluid was drained 28 times in the scleral buckling procedures (more than 1 drainage was necessary in some cases). Retinal breaks were the most common complication. In 18 cases there were no complications postoperatively. In the immediate postoperative period, the retina was attached in 37 cases, detached in two and partially detached in one. Final visual acuity was better or equal than 20/200 in eight cases, worse than 20/200 in 19 cases and unknown in the remainingcases. Conclusion: This data is still preliminary and needs a greater number of patients to be conclusive. We will be continually reviewing the indications, anatomic rate of success, complications, and final visual acuity of the patients already enrolled in this study and those who have yet to be enrolled.