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Intraoperative complications during the phacoemulsification learning curve Lílian Emi Ohkawara, Fabio Casanova, Edurado Soriano Purpose: To evaluate retrospectively the intraoperative complication rate during the phacoemulsification learning curve of a single surgeon accustomed to using the extracapsular technique. Methods: A retrospective analysis of first 222 consecutive phacoemulsification surgeries from March 1999 to August 2002 of a single surgeon were reviewed. The surgeries were grouped in order of date and divided into four groups (2 groups of 55 eyes, groups 1 and 2; and 2 groups of 56 eyes, named groups 3 and 4) Results: Of the 222 eyes, 189 (85,1%) had no intraoperative complications. The main complication was posterior capsule rupture with vitreous loss in 15 surgeries (6,7%), followed by iris prolapse in 6 (2,7%) and Seidel test positivity in 5 (2,2%) eyes. The incidence of complications was higher in group 1 (29,10%) in relation to the subsequent surgeries (5,4%, 16,0%, and 5,3%, respectively). The incidence of posterior capsule rupture and vitreous loss was also higher in the first group (18,1%) versus 3,6%, 3,5%, and 1,7%, respectively in the other groups. Posterior dislocation of the nucleus found in 2 cases was present only in group 1. All cases of iris prolapse (6 eyes) were found in groups 3 and 4. Seidel positivity was found mainly in group 3 (3 cases of 5). There was a modification in the phacoemulsification technique with foldable intraocular lens implantation and topical anesthesia cases introduced during the period related to Group 3. Conclusion: Phacoemulsification, in the early stages of the learning curve, as with any modification in surgical technique, can be associated with a higher incidence of complications.