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Efficacy of Oral Prednisone in the Treatment of Choroidal Detachment after Filtering Surgery: A Randomized Clinical Trial

F.S. Higa, L.A.S.Melo Jr, A. Paranhos Jr, L.M.A.B. Cruz, D.S.V.Salles, M. S. A. Morales, P. A. A. Melo.

Purpose: To evaluate the efficacy of oral prednisone for choroidal detachment after filtering surgery. Methods: A randomized double-masked placebo-controlled trial was performed. Glaucomatous patients who developed choroidal detachment during the first two postoperative weeks of filtering surgery (trabeculectomy or drainage implant) were eligible for the study. Exclusion criteria were bleb leakage or systemic contraindications for steroid use. After inclusion in the study, patients were randomly allocated to prednisone or placebo groups. Patients in the prednisone group received capsules of prednisone in a dosage of 1 mg per each kg of weight body per day in the first week, and, thereafter, tapered off 10 mg a week. Patients in the placebo group received similar capsules containing starch during equivalent time of prednisone group. Indirect ophthalmoscopy and ocular ultrassonography (B-mode) were performed weekly to evaluate the choroidal detachment until total reattachment of the choroid. The main outcome measure was the time elapsed between the detection of detachment and total reattachment of the choroid. Results: Twenty patients were allocated to prednisone group and 25 patients to placebo group. The median (range) duration of the choroidal detachment were 21 (7-153) days for prednisone group and 14 (4-28) days for placebo group, which were statistically significant different ($p = 0.011$) by survival analysis.

Conclusions: Oral prednisone is not effective for treatment of choroidal detachment after filtration surgery and may enlarge the time for spontaneous resolution of the detachment in this situation.