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Comparison between trabeculectomy with mytomicin C and drainage implants in the treatment of primary congenital glaucoma. A prospective and randomized study

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Purpose: To compare the efficacy and safety of the drainage implants with trabeculectomy plus mytomicin C in primary congenital glaucoma cases. **Methods:** A prospective and randomized study was performed, including 20 eyes from 20 patients with primary congenital glaucoma. The patients were randomized in two treatment groups: 1) trabeculectomy with MMC and 2) Modified Molteno drainage implant. All the procedures were performed by the same surgeon. The follow-up was 33 months. The following parameters were analyzed: Intraocular pressure, axial diameter, optic disc status, visual acuity and complications. Patients were considered success when IOP was lower or equal to 21 mmHg, with the use of none or a single medication.

Results: Eleven patients underwent drainage implants surgery and 9 underwent trabeculectomy with mytomicin C. The comparison between the groups of patients showed age homogeneity ($p=0.802$) and did not demonstrate any difference in preoperative and postoperative axial length and fundoscopy ($p=0.756$ and $p=0.213$, $p=0.969$ and 0.554 respectively). There was no statistical difference in the IOP values between the two groups both preoperative and during follow-up. Success rates through time were not different between the groups ($p=0.617$). The complication rate was higher in the implant group with 2 cases of cataract, although the only severe complication present occurred in a patient from the TREC group (retinal detachment). Among the patients in the drainage implant group, pachimetry findings at the end of follow-up did not show statistical difference from that present before surgery.

Conclusions: The probability of success was similar between the patients treated with drainage implants and TREC with mytomicin C.