Last Name - Furlani First Name - Bruno Middle - Albuquerque

Service (sector) Retina and Vitreous

Nº CEP

Tunneled scleral incision to prevent vitreal reflux after intravitreal injection

Authors: Bruno de A. Furlani; Eduardo B. Rodrigues; Carsten H. Meyer; Astor Grumann Jr.; Helio Shiroma; Jonathan S. Aguni; Michel E. Farah.

Purpose: To investigate the efficacy of tunneled scleral incision compared with standard straight scleral incision to prevent vitreal reflux after intravitreal (IVT) injection.

Design: Prospective comparative controlled non-randomized clinical study Methods: Eighty-eight eyes undergoing IVT-injection were allocated into four groups to compare the the vitreal reflux after injection of 0.1 ml of triancinolone acetonide (TA) and Avastin using a tunneled versus straight injection technique. The amount of intra-operative drug reflux was estimated by measuring the width of the subconjunctival bleb.

Results: The mean measured reflux of volume was statistically less with the tunneled scleral incision (1.13 mm SD \pm 1.16 for TA; 1.13 mm SD \pm 1.39 for Avastin) than in eyes undergoing the straight scleral injection (3.00 mm SD \pm 1.77 for TA; 3.18 mm SD \pm 1.68 for Avastin) for both Avastin and TA IVT-injections groups (P < 0.001).

Conclusions: The tunneled scleral incision promotes statistically significant less vitreal reflux for IVT drug injection.