2007 Research Days Abstract Form – Department of Ophthalmology – UNIFESP/EPM

2. SCIENTIFIC SECTION PREFERENCE (REQUIRED): Review the Scientific section Descriptions. Select and enter the two -letter Code for the one (1) Section best sullied to review your abstract
GL

3. PRESENTATION PREFERENCE (REQUIRED) Check one (1)
(a) Paper
(b) Poster

4. The signature of the First (Presenting) Author, (REQUIRED) acting as the authorized agent for all authors, hereby certifies.
That any research reported was conducted in compliance with the Declaration of Heisinki and the 'UNIFESP Ethical Committee"

Signature of First

Scientific Section Descriptions

(OR) ORBIT
(PL) OCULAR PLASTIC SURGERY
(RE) RETINA AND VITREOUS
(RX) REFRACTION-CONTACT LENSES
(NO) NEURO-OPHTHALMOLOGY
(TU) TUMORS AND PATHOLOGY
(ST) STRABISMUS
(UV) UVEITIS
(LS) LACRIMAL SYSTEM
(LV) LOW VISION
(CO) CORNEA AND EXTERNAL DISEASE
(GL) GLAUCOMA
(RS) REFRACTIVE SURGERY
(CA) CATARACT
(US) OCULAR ULTRASOUND
(TR) TRAUMA
(LA) LABORATORY
(BE) OCULAR BIOENGINEERING
(EP) EPIDEMIOLOGY
(EF) ELECTROPHYSIOLOGY

Deadline: 29/10/2007

FORMAT:
Abstract should contain:
Title, Name of Auth ors, Name of other authors (maximum 6), Purpose, Methods, Results, Conclusions.
Example: ARVO (1.10 x 1.70)
Abstract Book

1. FIRST (PRESENTING) AUTHOR (REQUIRED)
Must be author listed first in body of abstract

(X) R1 ( ) R2 ( ) R3
( ) PG0 ( ) PG1 ( ) Estagiário ( ) Tecnólogo ( ) PIBIC

Miyamoto	Cristina	
Last Name	First Name	Middle

Glaucoma	1718/07
Service (sector)	Nº CEP (Comitê de Ética em Pesquisa da Universidade Federal de São Paulo– UNIFESP)

5. ABSTRACT (REQUIRED)

Changes in Visual Acuity after Cataract Surgery in Glaucoma Subjects

C. Miyamoto, T.S. Prata, L. A. S. Melo Jr.

Purpose: To evaluate the changes in visual acuity after cataract surgery in glaucoma patients.

Methods: A retrospective, chart -review study was performed. Glaucoma patients that underwent uneventful cataract surgery were included. Data on vis ual acuity before and after surgery as well as the sensitivity of the paracentral points in the preoperative standard automated perimetry were collected. The relative improvement in visual acuity was calculated as the change (before – after surgery) in the logarithm of minimum angle of resolution (logMAR) divided by the preoperative logMAR.

Results: A total of 29 patients (32 eyes) were included in the study. The median (range) visual acuity before and after surgery were 20/70 (20/30 to counting fin gers at 50 cm) and 20/30 (20/20 to 20/100), respectively. The median relative improvement in visual acuity was 62% ($P < 0.001$). There was no correlation between the relative improvement in visual acuity and the sensitivity of the paracentral points in the preoperative perimetry ($r = 0.18$; $P = 0.33$) .

Conclusions: Visual acuity improved moderately after cataract surgery in glaucoma patients. This improvement was not correlated with the preoperative paracentral sensitivity of the standard automated perimetry.