

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 suited to review your abstract  
**RE**

3. PRESENTATION PREFERENCE (REQUIRED) Check one (1)  
**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 Helsinki and the "UNIFESP Ethical Committee"

**Bruno de Albuquerque Fur**  
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 / 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 Author s, 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  
( ) R1 ( ) R2 ( ) R3  
( ) PG0 ( ) PG1 (X) Estagiário ( ) Tecnólogo ( ) PIBIC  
\_Furlani\_ Bruno\_ Albuquerque\_  
Last Name First Middle  
\_Retina and Vitreous\_ \_\_\_\_\_  
Service (sector) N° 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 nonrandomized clinical study  
**Methods:** Eighty -eight eyes undergoing IVT -injection were allocated into four groups to compare the the vitreal r eflux after injection of 0.1 ml of triancinolone acetotide (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± 1.16 for TA; 1.13 mm SD± 1.39 for Avastin) than in eyes undergoing the straight scleral injection (3.00 mm SD ± 1.77 for TA; 3.18 mm SD± 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.