

Cataract surgery in patients with uveitis: A random retrospective 1-year review in Hospital Selayang

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ABSTRACT

Objective: To evaluate the efficacy of cataract surgery in uveitis. **Method:** A retrospective electronic data review of patients with uveitic cataract who has undergone cataract surgery from January until December 2017. **Results:** Ten eyes with uveitic cataract that had undergone phacoemulsification with intraocular lens implantation were included in this study. Pre-operative vision ranged from 6/18 to counting fingers at 2 feet. The aetiology of the uveitis varied from Behcet disease, ocular tuberculosis, cytomegalovirus, herpes zoster ophthalmicus and Idiopathic cause. Generally, all eyes were 'quiet' for a minimum of 3 months duration prior to surgery. All patients were started on oral prednisolone 0.5mg/kg daily for 2 weeks prior to surgery which was tapered gradually post operatively. Intra-operative anatomic challenges such as small pupil with posterior synechiae were managed meticulously and none had surgical complication. At 2 months post-operatively, 6 patients vision of 6/18, 3 patients with vision of 6/60 and 1 patient with Counting Finger 3 feet. Epiretinal membrane was the main reason of poor vision and none had cystoid macular oedema post operatively. **Conclusion:** Patients with uveitis will benefit from cataract surgery provided medical prophylaxis, intraoperative surgical technique and post-operative care were optimised.

KEY WORDS:

Uveitis, uveitic cataract, cataract surgery

Choice of IOL in poor capsular support, ARTISAN or ACIOL?

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ABSTRACT

Objective: To compare the outcomes and complications of ARTISAN (iris-claw anterior chamber intraocular lens) and anterior chamber intraocular lens (ACIOL) lens implantation. **Method:** A retrospective analysis was done in 42 patients; 29 eyes implanted with ARTISAN lens (58%) and 21 eyes with ACIOL (42%), in Melaka General Hospital from January 2014 till January 2018. **Results:** We found that the mean number of line improvement on Snellen acuity chart for ARTISAN lens was 3.13 ± 2.83 , while ACIOL showed a higher improvement at 5.57 ± 5.94 , however, this is not statistically significant ($p=0.93$). ARTISAN lens demonstrated a 68.9% improvement of best corrected visual acuity (BCVA) in ≥ 2 lines as compared to ACIOL 76.2%. Both achieved comparatively similar visual acuity at one week postoperatively (ARTISAN: 41.4%; ACIOL: 47.6%). Final BCVA equal to or better than 6/12 is 86.9% in the ARTISAN group and 71.42% in the ACIOL group. Additionally, ACIOL group also has a 9.5% incidence of post-operative epiretinal membrane (ERM). Both lenses showed post-operative increase in intraocular pressure (ARTISAN: 10.3%; ACIOL: 9.5%). Other complications include retinal detachment (3.44%) in ARTISAN group and one case of corneal decompensation (4.7%) in ACIOL group. **Conclusion:** Complicated cataract surgeries with poor capsular support would ideally benefit from sophisticated lenses such as ARTISAN and scleral-fixated lens. Still, ACIOL can be a considerable option due to it being readily available, easily implanted and shorter implantation time with a considerable good visual outcome.