

Vitreotomy for vitreous haemorrhage in paediatric patients in Hospital Kuala Lumpur - A case series

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ABSTRACT

Objective: To describe clinical profiles, aetiologies and outcome of vitreous haemorrhage in children requiring vitreoretinal surgery. **Method:** A retrospective case review of 6 children aged below 12 years, who had undergone vitrectomy for vitreous haemorrhage of various aetiologies in Hospital Kuala Lumpur between January 2018 and June 2018. **Results:** Ten eyes (6 children) were diagnosed to have vitreous haemorrhage. Vitrectomies were performed on 7 eyes for non-resolving vitreous haemorrhage obscuring fovea for more than one month duration. The mean age of these patients was 4.4 years old (ranged from 4 months to 9 years). The underlying causes of vitreous haemorrhage in these eyes included non-accidental injuries (2 eyes), retinopathy of prematurity (2 eyes), Coat's disease (2 eyes), Tersons syndrome (2 eyes), retinitis (1 eye) and one post-trabeculectomy aniridic pseudophakic with rhegmatogenous retinal detachment. At presentation, four eyes had either perception of light or hand movement vision. We were unable to record visual acuity for 2 infants. Post-vitrectomy, the eye with Coat's disease had good visual outcome with his visual acuity improved to 6/20. However, five eyes had light perception vision and one complete blindness. None required a revision vitrectomy. **Conclusion:** Vitreous haemorrhage in children is unique in aetiology. Surgical removal of non-clearing vitreous haemorrhage in paediatric age group is crucial in establishing diagnosis, treatment of underlying cause and to allow early visual rehabilitation. Visual potential in these cases depends largely on the underlying aetiology. It is worth to preserve even light perception vision as it has significant impact on a child's development.

KEY WORDS:

Vitreous haemorrhage, paediatric, vitrectomy