

3 de Dezembro

14h30 | 16h00 – Sala 4

Moderadores | Chairs: Rita Gama (GamaEyecare), Melo Beirão (CHUPorto), José Pedro Silva (H. Lusíadas, Lisboa), Ricardo Bastos (H. Lusíadas, Porto), Ana Luisa Rebelo (H. Évora), Maria Lisboa (H. Cascais)

VD 23

RETROPUPILLARY IRIS-CLAW IOL IMPLANTATION AND SINGLE-PASS FOUR-THROW PUPILLOPLASTY IN A CASE OF IRIS RUPTURE AND APHAKIA FOLLOWING BLUNT TRAUMA

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Purpose: To present a video of a case of a single-pass four-throw pupilloplasty and retropupillary iris-claw IOL implantation following traumatic iris rupture and aphakia secondary to blunt trauma.

Introduction: Blunt eye trauma can cause a multiplicity of intrinsic eye injuries depending on the type of trauma caused to the eye. Lens dislocation can happen when zonular fibers are severely damaged following counter-coup-type eye trauma from direct injury, iris rupture can either occur with iridodialysis, with separation of iris root from the ciliary body or with stromal injury resulting in an aniridia-like damage.

Methods: Case report of a 70-year-old male who suffered blunt trauma to the right eye resulting in aphakia with lens dislocation to the vitreous body and iris rupture. This video illustrates an example of a single-pass four-throw pupilloplasty and retropupillary iris-claw IOL implantation.

Results: After 1 year of follow-up, the patient had achieved a BCVA of 8/10, with centered IOL and good anatomical and functional result of pupilloplasty.

Conclusion: Single-pass four-throw pupilloplasty is a safe and efficient method of resolution of iris trauma as there is need of only one suture and knot for a safely close the defect, reducing the iatrogenic trauma due to the excessive manipulation of the iris.

Retropupillary iris-claw IOL in aphakic patients is a technique with good optical results, when implanted along the iris stroma apposed by the single-pass four-throw pupilloplasty, it can act as a complementary reinforcement of the iris sutures.