COMBINED PNEUMATIC AND ENZYMATIC VITREOLYSIS FOR SEVERE CASES OF VITREOMACULAR TRACTION



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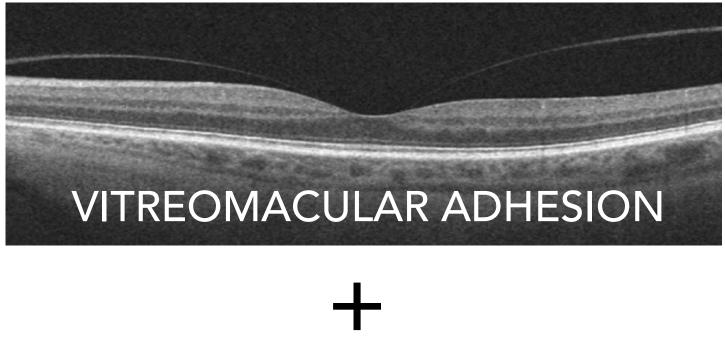
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No relevant financial interests to disclose

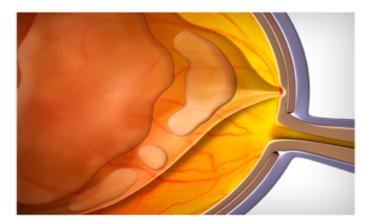
Summary Slide

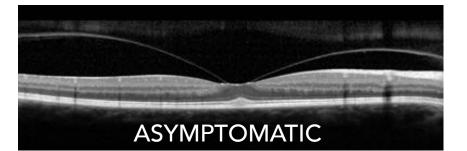
- 30% of VMT resistant to PV
- Addition of ocriplasmin within 1 month of PV resulted in release in 4/5 cases within 30 days.
- Combined PV and IVO may provide excellent non-surgical option for VMT



TRACTION

VITREOMACULAR TRACTION





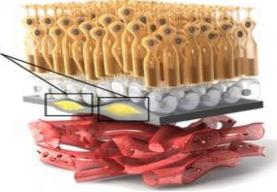


VASCULAR, RETINAL & RPE DISFUNCTION





Vitelliform Deposits



TREATMENTS

Observation

• Intravitreal ocriplasmin

• Pneumatic vitreolysis

Pars plana vitrectomy + membrane peeling

META-ANALYSIS: OUTCOMES

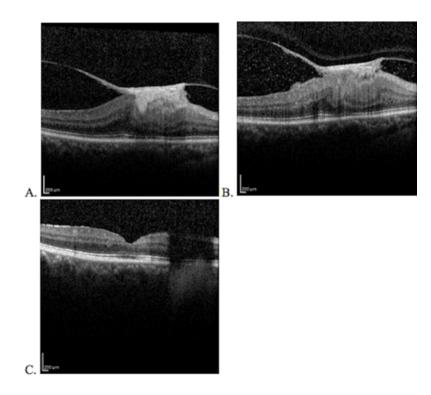
	Placebo	IVO	р	PV	р
VMTr Day 28	23/241 (9.5%)	176/644 (27.3%)	<0.01	46/63 (73.0%)	<0.01

PPV/MP 100%

WHICH OPTION WOULD YOU RECOMMEND?



$PV \rightarrow OCRIPLASMIN \rightarrow PVD$



METHODS

- Retrospective, consecutive series of five patients
- Between February 2015 to February 2019
- Diagnosed with severe VMT refractory to pneumatic vitreolysis (PV) who then received an additional ocriplasmin injection while their gas bubble was still present

Patient Demographics

	Patient 1	Patient 2	Patient 3	Patient 4	Patient 5
Age (years)	78	50	82	72	89
Еуе	OS	OD	OD	OS	OD
Sex	F	Μ	Μ	F	Μ
ERM	No	Moderate	No	Severe	No
Phakic Status	Phakic	Phakic	Phakic	Phakic	Pseudo-phakic
Adhesion Diameter (μm)	477	2013	880	269	575
Initial BCVA	CF	20/50	20/40	20/40	20/70

Treatment Outcomes

	Patient 1	Patient 2	Patient 3	Patient 4	Patient 5
Follow-Up Duration					
Time between PV and IVO (days)	28	12	8	19	33
Outcomes					
VMT Resolution at 28 Days (Days until Resolution)	Y (<20 days)	Y (<7 days)	Y (<13 days)	N (103-140 days)	Y (<7 days)
6 Month BCVA (Improve by at least 3 lines)	20/70 (Y)	20/60 (N)	20/40 (N)	20/50 (N)	20/30 (Y)

RESULTS

- None of the patients experienced any complications after receiving this combined treatment, such as retinal tears or detachments, decrease in visual acuity and ellipsoid zone changes.
- Vitreous floaters noted

CONCLUSION

Sequential, combined pneumatic and enzymatic vitreolysis resulted in VMT release in of all 5 cases (4 cases by 28 days) and may be a potentially useful alternative to surgical intervention for refractory VMT cases.

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