

Surgical treatment of lamellar macular holes

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Advantages:

Vitrectomy and gas tamponade for macular lamellar holes improve the visual acuity.

Methods:

Retrospective study of 37 lamellar macular holes operated on between 2000 and 2008. The following parameters were studied: age, gender, preoperative visual acuity and hole diameter, attachment of the posterior hyaloid to the macula, preoperative removal or not of the internal limiting membrane, type of gas used, intraoperative complications, duration of prone-positioning, duration of follow-up, final visual acuity and hole closure.

Effectiveness / Safety:

After a mean follow-up of 21.5 months (1-73 mo), the hole was closed in all cases. The visual acuity remained unchanged in one case and increased in all other cases. The mean improvement was 2.9 ETDRS lines. Gas tamponade and prone positioning will be discussed.

Take home message:

Even if lamellar macular holes have a slow evolution, vitrectomy and gas tamponade should be considered to improve visual acuity.