

Macular translocation with 360-degree retinotomy for the management of retinal pigment epithelial tear: 3 years results

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To determine whether macular translocation with 360-degree retinotomy can stabilize and / or improve visual acuity in patients with retinal pigment epithelium (RPE) tear, given the increasing number of reports on this complication following vascular endothelial growth factor (VEGF)-modulating therapy.

Methods:

Prospective interventional case series of seven eyes with age related macular degeneration (ARMD) with an RPE tear. The RPE tear occurred after intravitreal triamcinolone in 3 cases, ranibizumab in 1 case and spontaneously in 3 cases. Patients were evaluated with ETDRS visual acuity, angiography and OCT. All eyes underwent full macular translocation within 3 months after the onset of the RPE tear. They all completed the follow up.

Effectiveness / Safety:

Mean ETDRS visual acuity was 20/200 preoperatively, 20/63 after 1 year and 20/50 after 3 years. Complications were limited and treatable. Macular translocation seems to be effective for RPE tears, a severe condition with unfavourable natural history and lack of treatment options.