

## **PDR: triamcinolone assisted bimanual surgery and "Re-Flow" technique**

*Author: C. Forlini, MD, G. Giunchiglia, MD, G. Lorusso, MD, M. Ambesi, MD*

### **Purpose:**

To show the advantages of epiretinal membrane bimanual removal in diabetic proliferation.

### **Methods:**

Bimanual removal techniques with either variable angle "bullet" probes or new Eckardt's chandelier are presented. In addition to that we used the personal Re-Flow technique with anterior chamber infusion and injected triamcinolone during the various surgical steps (triamcinolone assisted vitrectomy). 7 patients with PDR and macular edema were treated with this technique.

### **Results:**

In treated eyes the incidence of the iatrogenic hole reduced by 30% in comparison with monomanual surgery if ERM were totally removed.

### **Conclusion:**

The bimanual technique guarantees a radical surgery reducing the risk of iatrogenic damages mainly in complex cases. The panoramic view with no contact systems together with slit lamp and contact lenses is the most suitable system to approach complex cases. The Re-Flow technique guarantees a better approach to the anterior vitreous with less risks of touching the lens and reduced vitreous turbulences. The endolaser with variable angle probe provides a complete photocoagulative treatment on all retinal areas.

### **Take home message:**

The association of different techniques and the use of new devices provide important advantages. "Give me a place to stand on, and I will move the Earth" - Archimedes.

