

## SYMPOSIUM: PROLIFERATIVE DIABETIC RETINOPATHY

Moderators: Mahmoud Soliman, Khaled El-Rakhawy

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### SF6 in diabetic tractional retinal detachment

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#### **Purpose:**

The authors mean to evaluate the role of SF6 tamponade in eyes with diabetic tractional retinal detachment.

#### **Subjects and methods:**

Retrospective revision of the records of diabetic patients submitted to vitrectomy surgical treatment from July 2001 to December 2002, performed by two surgeons (AM and PQ). Preoperative evaluation included analysis of laser therapy records, visual acuity and fundus examination, or ultrasound when necessary. Complications are analyzed. Anatomical and functional outcomes are described.

#### **Results:**

SF6 was used in 22 surgeries of diabetic retinal tractional detachment, 8 males and 12 females, most of them with type one diabetes. Rebleeding (n=4), neovascular glaucoma (n=3) and cataract (n=3) were the most frequent complications. Improvement in visual acuity was observed in 72.7% of the eyes, stabilization was achieved in 18.2%, and regression was noted in 9.1%. Anatomical success was achieved in 95% of the patients, 82% with only one surgery.

#### **Conclusion:**

A high rate of anatomical reattachment and functional success can be achieved with the use of with SF6 in diabetic retinal tractional detachment.

#### **Take-home message:**

Air retinal tamponade with SF6 is an effective and safe vitrectomy technique in moderately severe diabetic retinal tractional detachment.

