

## Visual outcome and OCT features of patients with diabetic macular edema after internal limiting membrane peeling

Author: F. Patelli, P. Radice, G. Zumbo, F.M. Di Tizio, G. Fasolino, S. Marchi

### Purpose:

To evaluate visual outcome and retinal thickness of patients with diabetic macular edema (DME) refractory to laser treatment, after vitrectomy with internal limiting membrane (ILM) peeling.

### Methods:

10 eyes of 10 patients affected by DME refractory to laser treatment underwent a vitrectomy with ILM peeling and triamcinolone acetonide injection at the end of surgery. Visual acuity (VA) and quantitative change in OCT macular thickening were evaluated before surgery and at 1, 3, 6 months and 1 year follow-up. Potential complications were monitored including intraocular pressure response, retinal detachment, vitreous hemorrhage and endophthalmitis.

### Results:

5 patients completed the 1 year follow-up. 5 patients completed the 6 month follow-up. The reduction in macular edema detected by OCT is more significant after the 1 month follow-up. It continued to decrease slowly up to the 6 month follow-up in all the eyes. For those eyes that had the 1 year follow-up the retinal thickness was stable compared to the 6 month timepoint. The VA increased in all the eyes at the 6 months follow-up whereas for those that completed the 1 year follow-up the VA was stable. No complications occurred during and after surgery in all the eyes.

### Conclusion:

Vitrectomy with ILM peeling and triamcinolone injection for refractory DME is a safe procedure that can reduce DME and improve VA in all of our series of eyes. More comparative studies are necessary to better understand the efficacy of this procedure.

