

Flexible loop scraper for membrane peeling in macular hole repair during total traumatic hemorrhagic retinal detachment repair following perforating open-globe injury

Keywords: membrane peeling, retinectomy, subretinal clots removal

Short description

A 35 year-old male with history of open-globe repair from BB gun injury 3 weeks prior presented with light perception vision, vitreous hemorrhage and suspected retinal detachment. He underwent 23-gauge pars plana lensectomy, vitrectomy, membrane peeling, retinectomy, subretinal clots removal, endolaser and silicone oil tamponade (Video). Intraoperatively, a full thickness macular hole (MH), posterior strike site in temporal macula with overlying scar and hemorrhagic retinal detachment was seen. A pigmented preretinal membrane was covering the posterior pole and peripheral retina. The membrane was very friable and was successfully peeled with flexible loop membrane scraper from the macula and peripheral retina. Macula OCT 2 months later confirmed MH closure (Figure1). At 6 months,

Volume 4 Issue 5 - 2016

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Received: August 05, 2016 | **Published:** August 9, 2016

visual acuity was counting fingers, the retina was attached and the MH remained closed. Macular holes are found in just 0.15% of eyes with open-globe injury with reported a closure rate of 40%.^{1,2}

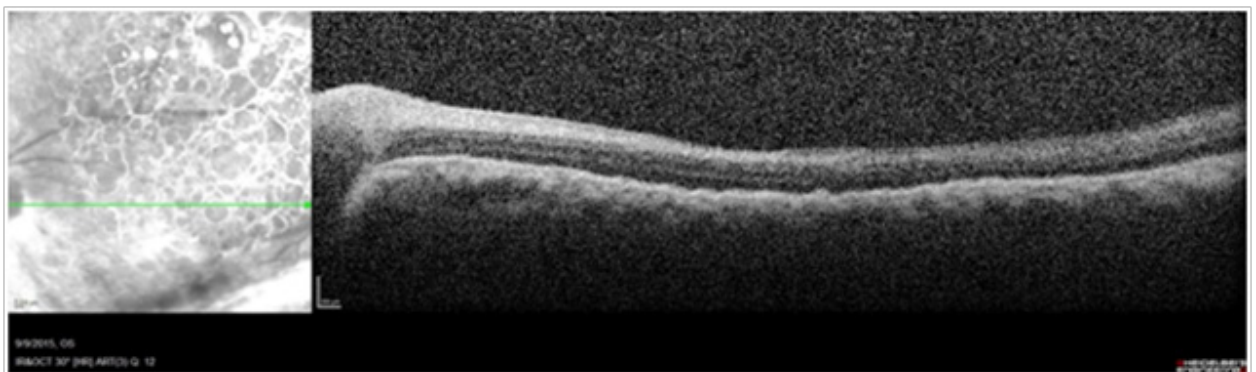


Figure Title: Post-operative macular OCT.

Figure 1 Macular spectral domain OCT taken 3 months postoperatively demonstrates completes closure of macular hole.

Acknowledgments

None.

Conflicts of interest

The authors declare there are no conflicts of interest.

Funding

None.

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