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Двусторонняя одномоментная экстракция врожденной катаракты у ребенка

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Simultaneous cataract surgery in a child with bilateral congenital cataract

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РЕФЕРАТ

Цель. Выбрать тактику хирургического лечения двусторонней врожденной катаракты у детей: проведение операции на каждом глазу отдельно или на оба глаза в течение одной операции? Был выбран второй вариант в целях предотвращения проявления амблиопии.

Метод. На обычный офтальмологический прием обратилась мать ребенка (возраст 1 год 7 месяцев) с двусторонней врожденной ката-

рактой. Операция планировалась сразу на оба глаза под общей анестезией.

Заключение. Одномоментная операция по удалению двусторонней катаракты может быть безопасным и полезным подходом, альтернативной последовательной операции у отдельных пациентов, если строго соблюдаются оперативные указания и хирургическая асептика.

Ключевые слова: одномоментная экстракция врожденной катаракты. ■

Точка зрения. Восток – Запад. 2020;4:32-34.

ABSTRACT

Purpose. Choose the tactics of surgical treatment of bilateral congenital cataract in children: operation on each eye separately or both eyes in one operation? I have chosen the second option in order to prevent the manifestation of amblyopia.

Method. We were contacted by the mother of the child, age 1 year, 7 months with bilateral congenital cataract for a regular ophthalmological

appointment. The operation was planned in both eyes at once by general anesthesia.

Conclusion. Bilateral cataract surgery in a single session can be a safe and useful approach, an alternative to sequential surgery in individual patients, if operational guidelines and surgical asepsis are strictly followed.

Key words: simultaneous bilateral congenital cataract surgery, bilateral cataract surgery, immediately consecutive cataract surgery, same-day sequential cataract surgery. ■

Point of View. East – West. 2020;4:32-34.

INTRODUCTION

Sequential, immediate or simultaneous bilateral congenital cataract surgery with bilateral congenital cataracts on the same day is the procedure for performing cataract surgery on the same day.

An operation to remove cataracts with bilateral congenital cataracts has always been controversial and should be undertaken with great care, performed in complete aseptic technique, with strict separation of the right and left operations. Unilateral complica-

tion after cataract surgery with bilateral congenital cataract is comparable to those reported after unilateral cataract surgery. Bilateral complications are rare, with lateral endophthalmitis being the greatest fear.

Surgeons and their patients should be prepared to set aside the second eye for surgery if there is any complication with the first eye. Cataract surgery with bilateral congenital cataracts benefits patients by preventing re-anesthesia, unnecessary economic costs and amblyopia. Facilitates our goal of visual rehabilitation.

The history and prevalence of simultaneous bilateral cataract surgery: a sequential cataract surgery on the same day, was first performed in 1952 [1].

Historically, cataract surgery with bilateral congenital cataract was performed initially with extracapsular cataract extraction (ICCE), and then with extracapsular cataract extraction (ECCE), and phacoemulsification, with larger series originating from the UK [1, 3-6].

To our knowledge, countries where cataract surgery with bilateral congenital cataracts is usually performed with increasing interest and safety include:

Australia, Austria, Canada, China, Finland, Great Britain, Iran, Israel, Japan, Turkey, South Africa, Spain, Sweden, Poland and the United States of America and others [2].

Clinical case. The mother of the girl returned to us for an appointment 1 year 7 months. The family is the youngest and has 6 more brothers. Parents noticed a slight clouding in the pupil when she was 1 year old. Also, a father and 3 brothers were operated on for congenital cataracts.

Biomicroscopy: OU – From the cornea there is no pathology. The anterior chamber is of the correct shape and depth. In the area of the pupil, a turbidity is white. In both cases there is a symmetric nuclear cataract.

Fundus: no pathology.

Ultrasound examination without pathology (Fig. 1).

Light sensation is available on both sides. In tracking the object is difficult. Passed a consultation with a pediatrician and anesthetist. There are no systemic diseases. A simultaneous cataract surgery with bilateral congenital cataract under general anesthesia was planned.

Operation: It was carried out under general anesthesia from the beginning of the right and then the left eye. The anterior and posterior capsulorexis, the nucleus was taken with a vitreotome, then the cortex is aspirated further by the aspiration cannula. The artificial lens was not set. An antibiotic was injected into the anterior chamber. Side ports were not sewn up, only hydration was done. Both eyes were covered with a blindfold. The next day the bandage was removed (Fig. 2). During the operation, surgical asepsis was carefully observed.

CONCLUSION

Bilateral cataract surgery in a single session can be a safe and useful approach, an alternative to sequential surgery in individual patients, if operational guidelines and surgical asepsis are strictly followed.

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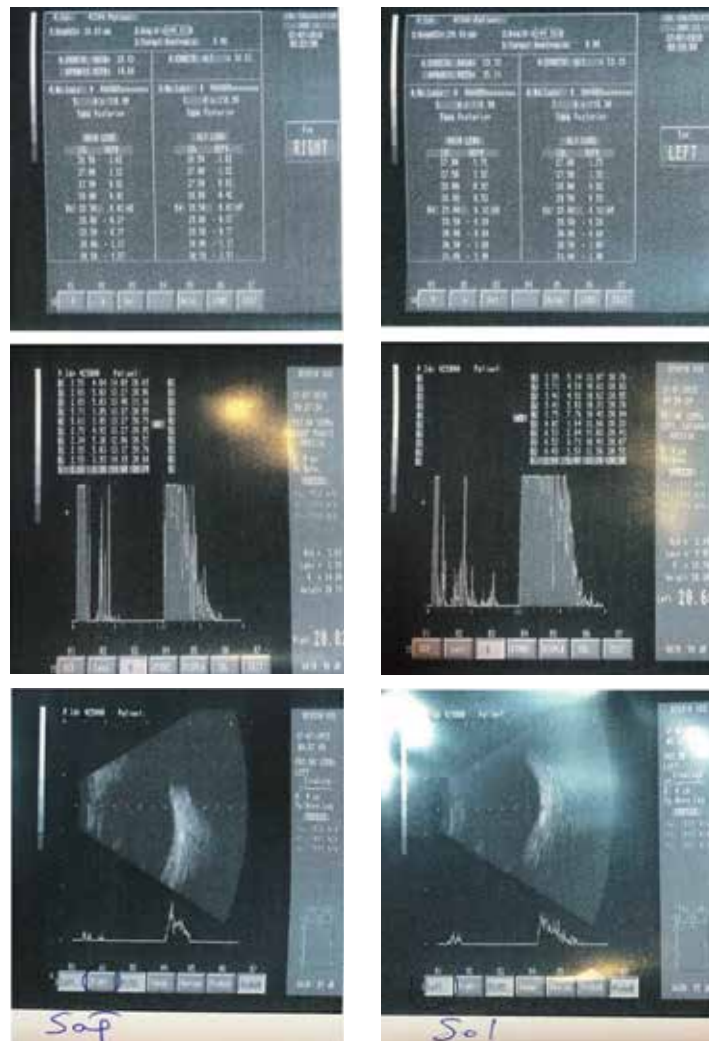


Fig. 1. A-scan and B-scan of the eye globe



Fig. 2. Patient: a) Pre-op; b) Post-op after bandage removal

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