

Visual Outcomes and Effecting Factors of 27-gauge Vitrectomy for Endophthalmitis following Cataract Surgery

Hyoung-Seok Kim

Department of Ophthalmology, Konyang Unieversity College of Medicine
Kim's Eye Hospital, Seoul, Korea

Financial interests: none

Background:

- To report the clinical outcomes and influencing factors of 27-gauge transconjunctival sutureless vitrectomy (TSV) in patients with postoperative endophthalmitis following cataract surgery.

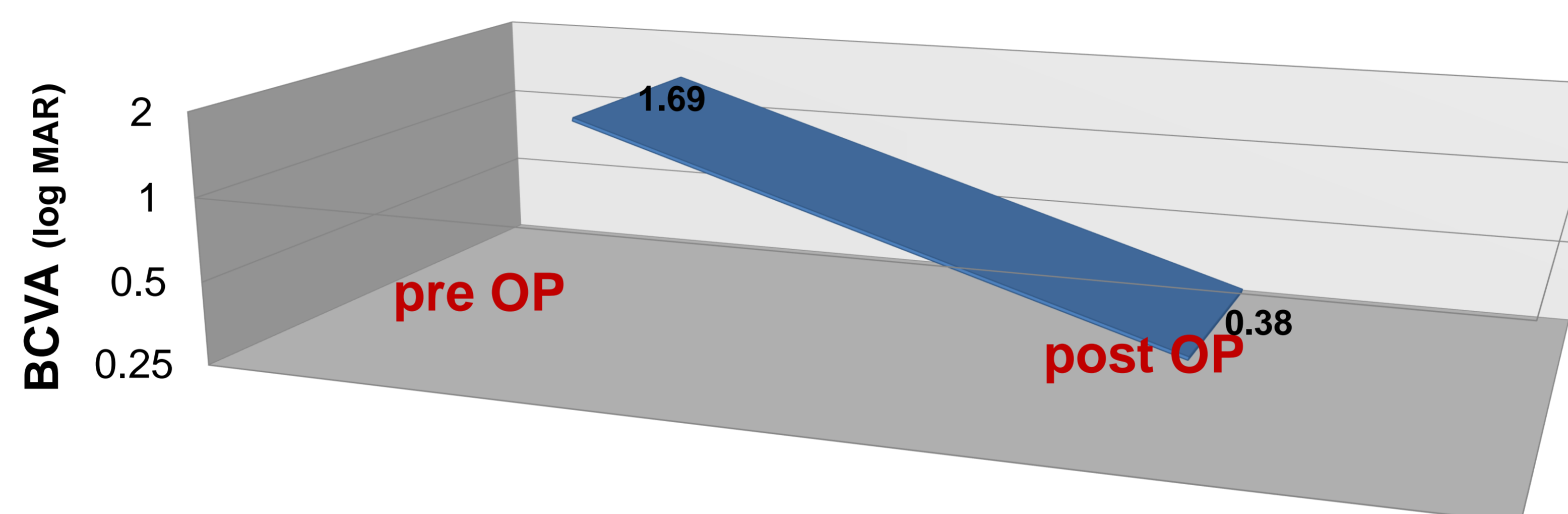
Methods:

- Medical records of 19 patients who underwent 27-gauge TSV due to postoperative endophthalmitis after cataract surgery were retrospectively reviewed.
- The following factors were analyzed: pre and postoperative best corrected visual acuities (BCVA), presence of posterior capsular rupture, induction of posterior vitreous detachment, results of bacterial culture, existence of systemic disease, and the interval between cataract surgery and TSV.

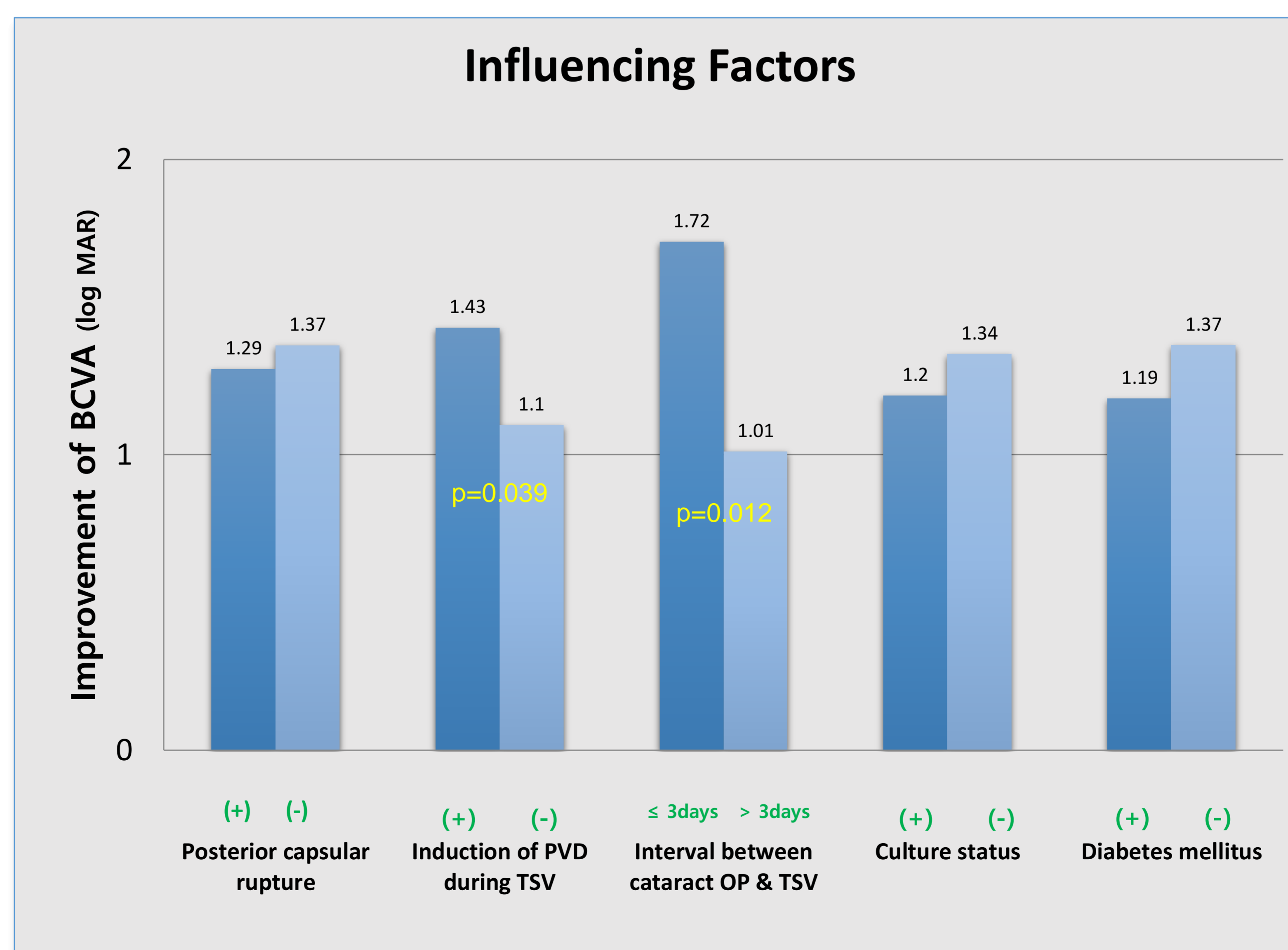
Results:

- The mean BCVA significantly improved from logMAR 1.69 ± 1.35 to logMAR 0.38 ± 0.97 ($p < 0.01$).
- Successful induction of posterior vitreous detachment during TSV and short interval between cataract surgery and TSV were related to better prognosis.

Improvement of visual acuity after TSV



Influencing Factors



Conclusions:

- Small gauge TSV is effective and should be performed as soon as possible when endophthalmitis is diagnosed after cataract surgery.
- We recommend posterior vitreous detachment induction if possible during vitrectomy.