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ROLE OF TOPICAL CYCLOSPORINE 0.05% IN PREVENTION OF PTERYGIUM RECURRENCE, AFTER PRIMARY EXCISION

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Aim: To reduce the risk of pterygium recurrence after primary excision.

Design and place: Comparative study was conducted at Institute of Ophthalmology LUMHS (IOL) during 2015 -2017.

Methodology: 65 patients having bilateral pterygium, at least 2 mm encroaching on the cornea, were selected for study. After informed consent and explanation of research procedure patient was seen on slit lamp, the dimensions of pterygium was measured. Keratometry was done to assess astigmatism. The eye with more pterygium was selected for post operative cyclosporine and was named as cyclo- eye and fellow eye was selected for simple excision done by the same surgeon after one week interval and was named as simple eye. Immediate post operative treatment was tobramycine dexamethasone eye ointment twice and moxifloxacine three times daily until corneal epithelium was restored, followed by moxifloxacine and cyclosporine eye drops three times daily until complete healing of ocular surface occurred and then cyclosporine 0.05% alone twice daily up to three months. In the fellow eye only tobramycine dexamethazone eye ointment and moxifloxacine eye drops were used for complete healing time. Follow up was done after one week, one month, three months and six months.

Result: 53 patients completed 6 months follow up, remaining will not be discussed, astigmatism was reduced in 100% patients, No recurrence in 42(79.245%) cyclo-eyes however recurrent pterygium was observed in 11(20.754%) cyclo-eyes. Recurrence in fellow simple eyes occurred in 24(45.283%). Cyclosporine was able to reduce pterygium recurrence in 13(54.1666%) eyes. Recurrence rate can further be reduced if maintenance dose of cyclosporine once daily at bed time is used for longer time.

Conclusion: Cyclosporine is effective in reducing the recurrence rate pterygium.

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