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Ocular surface restoration in severe ocular burns: Two years in the life of a patient

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Severe ocular surface burns occur usually in young people during their work period. There are established protocols about emergency room treatment during the first hours (such as serum washing, steroids and antibiotic, which will be resumed during the oral presentation) but the long-term treatment to restore the cornea, conjunctiva and eyelids, and finally to recover the visual acuity, deserve an extra chapter not only talking about results, but also the schedule and the order of the procedures, which usually takes about 1.5 to 2 years to be completed. Cornea surgeon must be synchronized with eyelid specialist to complete the ocular surface restoration before approaching the project to improve the vision, and the patient must know that it is a long and tedious process. We present 5 cases followed during a period of 8 years, with a media of 18 months from the zero moment (traumatic burn). In severe cases the difference in the prognosis lies basically in the pH of the caustic agent (acid or base) and in whether the burn is bilateral or unilateral. Even in cases of good prognosis, it is essential to explain the patient that the recovery time will be prolonged and probably will require several surgical interventions before approaching visual acuity as therapeutic objective. The recommendation is to make close follow-up, with as many visits as required and to decide surgical indications guided by the medical evidence.

Recent Publications

1. Ozdemir O, Tekeli O, Ornek K, Arslanpençe A and Yalçındağ N F (2004) Limbal autograft and allograft transplantations in patients with corneal burns. *Eye (Lond)*. 18(3):241-8.
2. Baradaran-Rafii A, Eslani M, Haq Z, Shirzadeh E, Huvard M J and Djalilian A R (2017) Current and upcoming therapies for ocular surface chemical injuries. *Ocul Surf*. 15(1):48-64.
3. Wagoner M D (1997) Chemical injuries of the eye: current concepts in pathophysiology and therapy. *Surv Ophthalmol*. 41(4):275-313.
4. Dua H S, King A J and Joseph A (2001) A new classification of ocular surface burns. *Br J Ophthalmol*. 85(11):1379-83.
5. Lin A, Patel N, Yoo D, et al. (2011) Management of ocular conditions in the burn unit: thermal and chemical burns and Stevens-Johnson syndrome/toxic epidermal necrolysis. *J Burn Care Res*. 32(5):547-60.

Biography

Marta Calatayud-Pinuaga has expertise in Cornea and Ocular Surface Surgery. She has completed her Ophthalmology Residency in Vall d'Hebron Hospitals at Autònoma University, Barcelona. She has been practicing her profession in the public system for 22 years combining it with private practice. She currently works as Medical Director at Instituto Oftalmológico Quironsalud Barcelona, where she also practices Ophthalmology as Head of the Ocular Surface Section.

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