

Valutazione della qualità e delle caratteristiche del lembo in rapporto allo spessore residuo in trapianti DSAEK

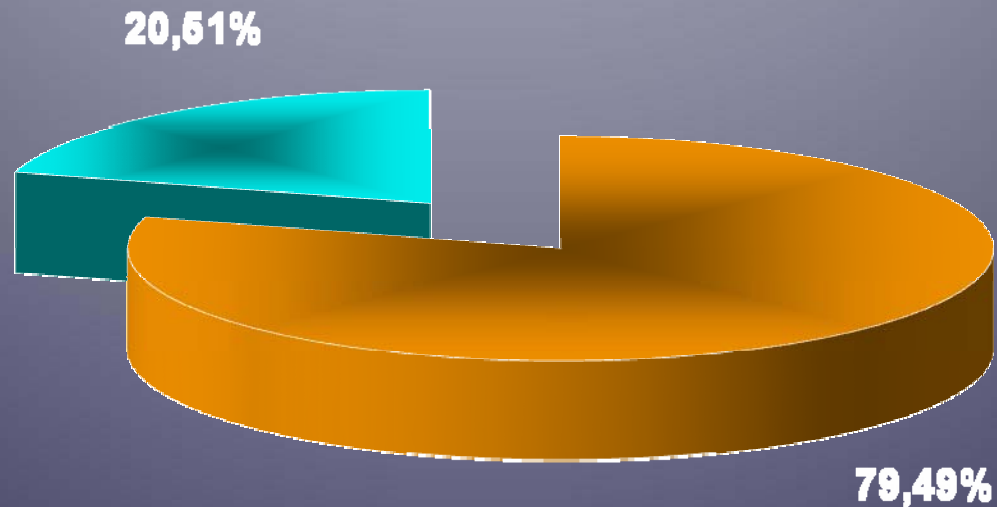
F. GENZANO BESSO, P. INDEMINI

Bologna

24-26 Febbraio 2011

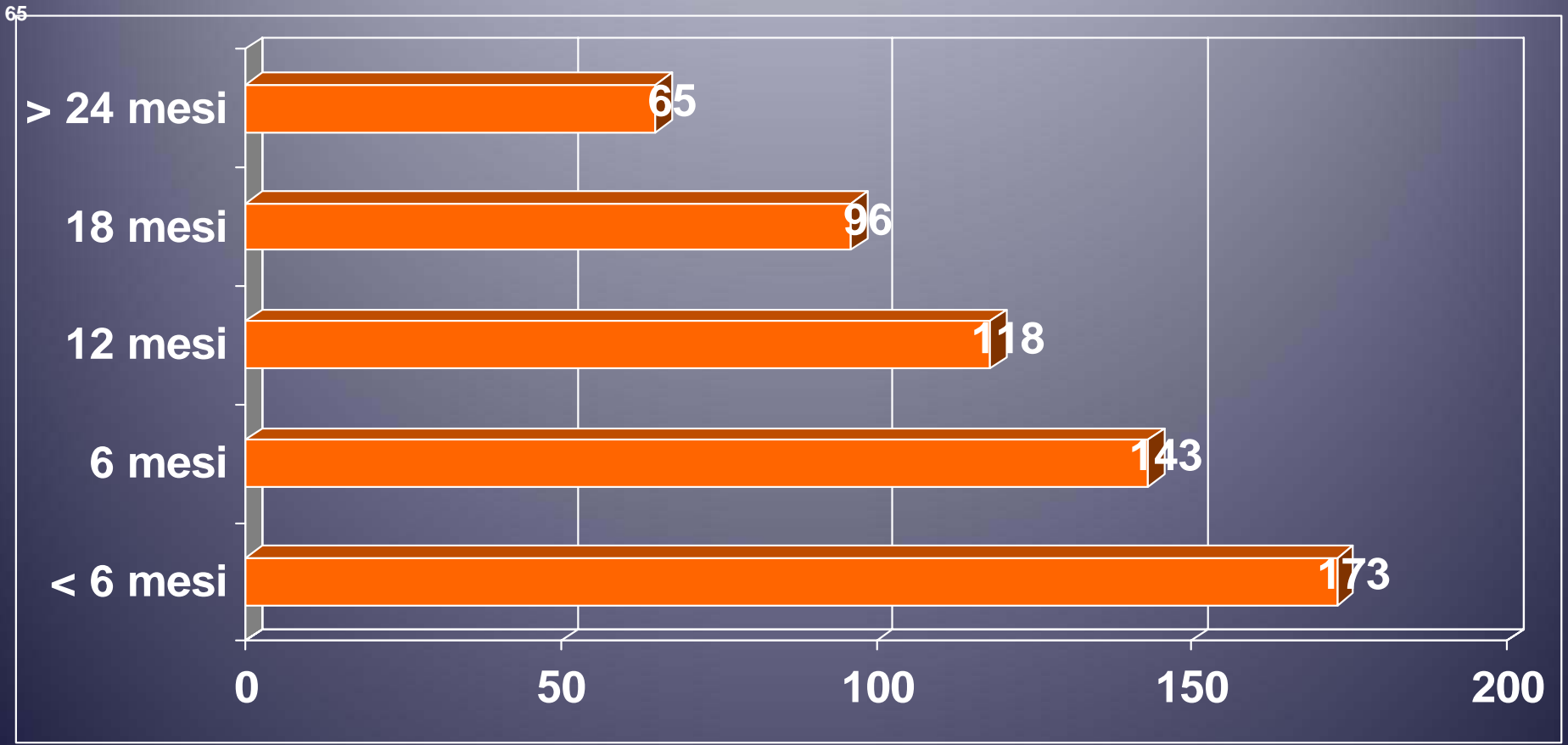
Casistica

Dal 2007 abbiamo eseguito 173 interventi



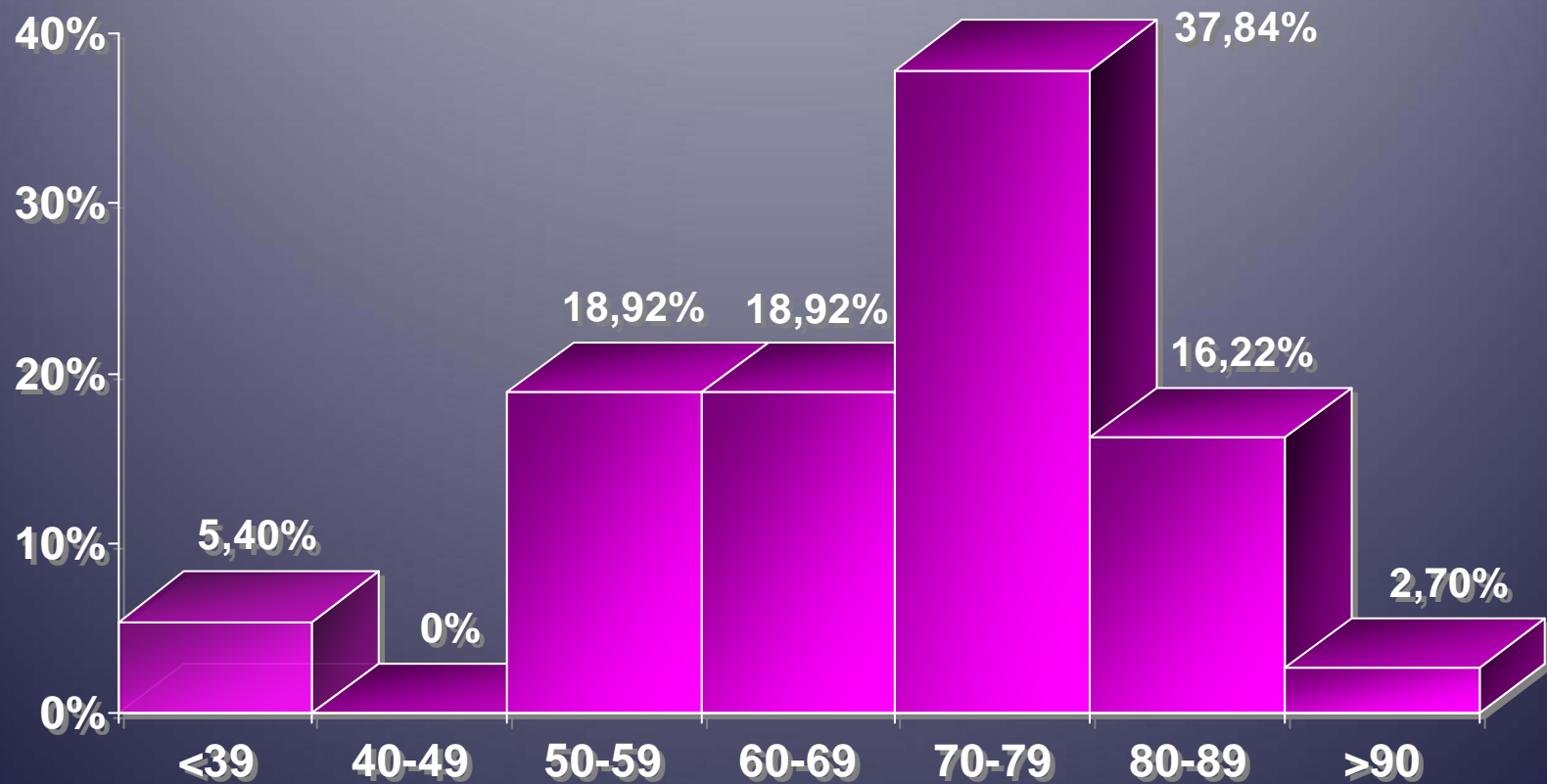
■ DSAEK ■ Tripla Procedura (DSAEK+phaco+IOL)

Follow-up



Età

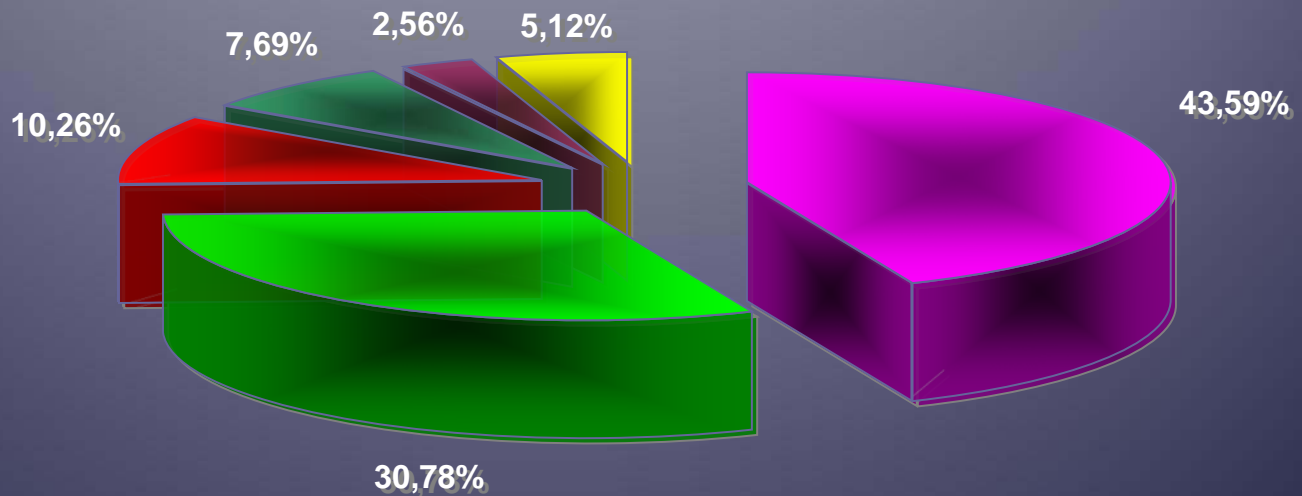
- Età media: $68,78 \pm 12,88$ anni (32 ÷ 92 anni)



Patologie

- Distrofia dello pseudofachico C.P.
- Scompenso endoteliale del lembo
- Distrofia dello pseudofachico C.A.
- Corpo estraneo stromale
- Distrofia dell'afachico

- Distrofia endoteliale primitiva di Fuchs

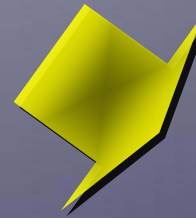
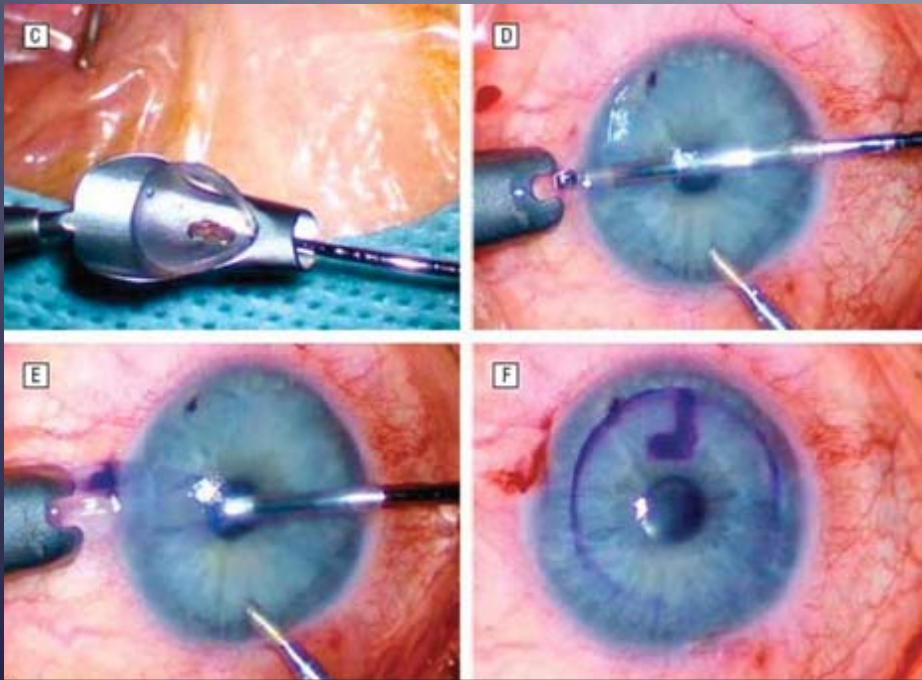


Tecnica Chirurgica

A Modified Technique for Descemet Membrane Stripping Automated Endothelial Keratoplasty to Minimize Endothelial Cell Loss

Massimo Busin, MD; Priya R. Bhatt, MRCOphth; Vincenzo Scorcia, MD

Arch Ophthalmol. 2008;126(8):1133-1137

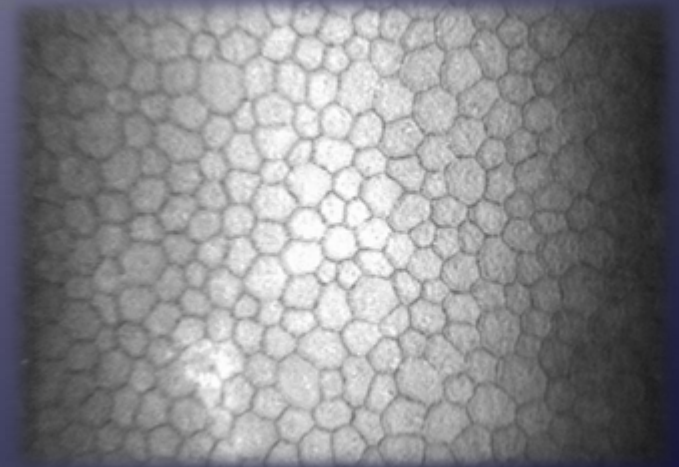


Glide di Busin



Materiali e Metodi

- Spessore corneale donatore
- Spessore corneale dopo disepitelizzazione
- Spessore del flap residuo a 6 mesi ed 1 aa
- diametro
- Conta endoteliale
- BCVA

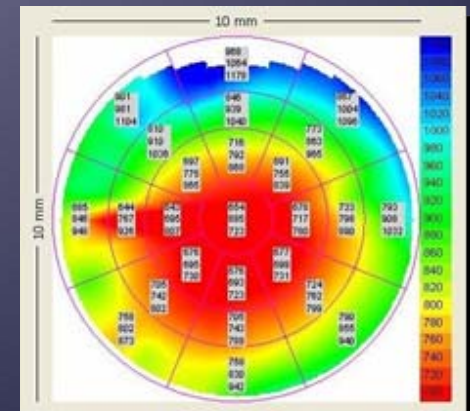
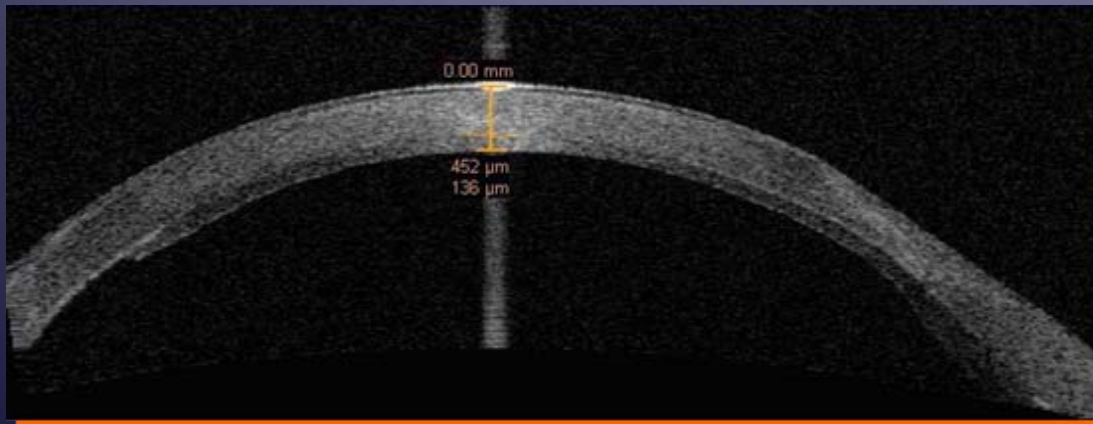


Spessori corneali

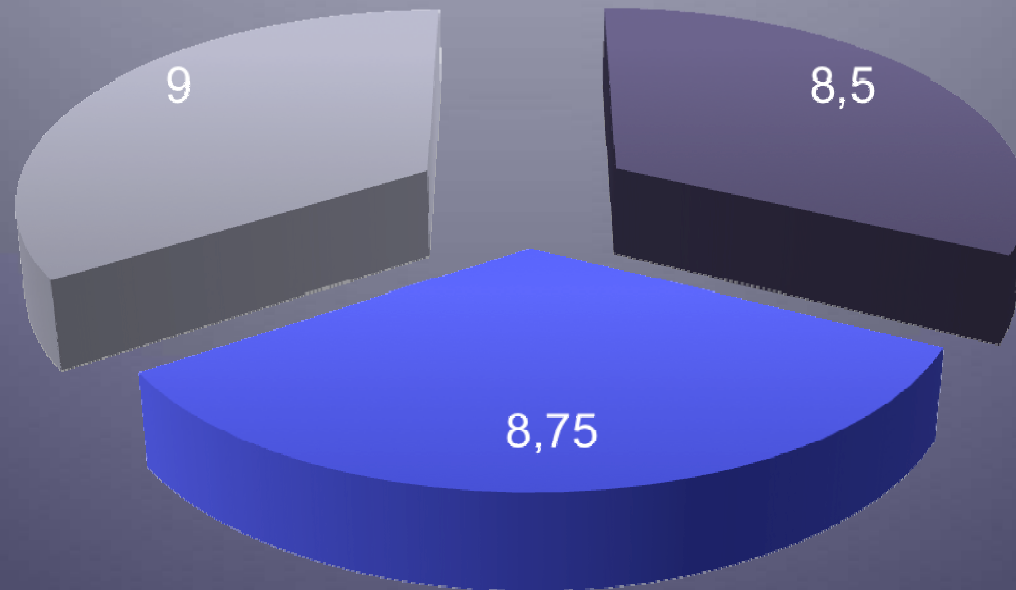
Spessore medio delle cornee da banca: $621.6 \pm 40.9 \mu\text{m}$

Spessore medio dopo disepitelizzazione: $577.1 \pm 43.9 \mu\text{m}$

Spessore medio dei lembi innestati (OCT Visante): $169.1 \pm 45.3 \mu\text{m}$



Diametro del lembo



Conservazione della cornea

4°C = 34 CORNEE

31°C = 139 CORNEE

Conservazione della cornea

31°C = 139 CORNEE

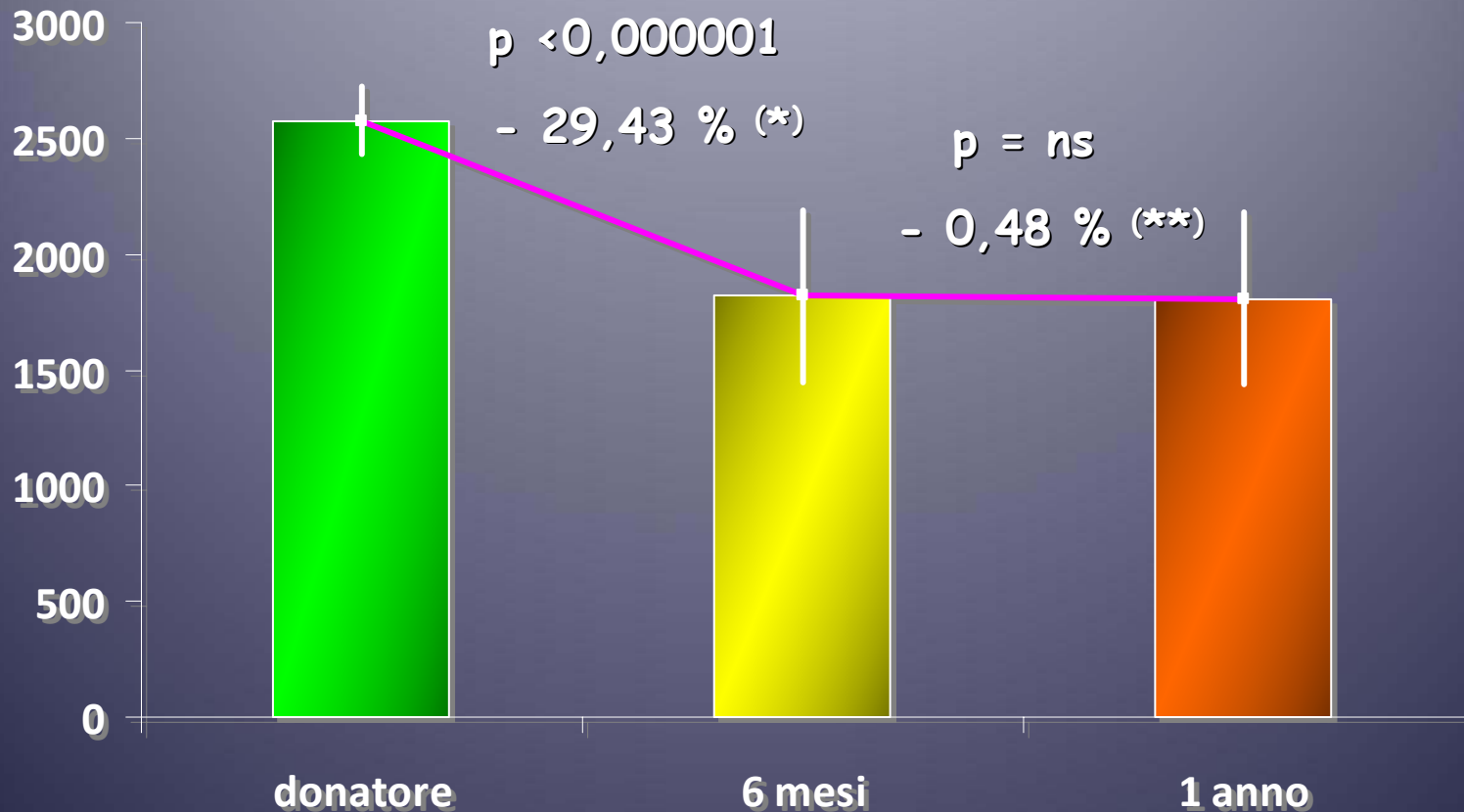
	pre disepitelizzazione	post disepitelizzazione	flap
μm	618	576	166
SD±	39	43	46

Conservazione della cornea

4°C = 34 CORNEE

	pre disepitelizzazione	post disepitelizzazione	flap
μm	659	587	177
SD±	53	55	42

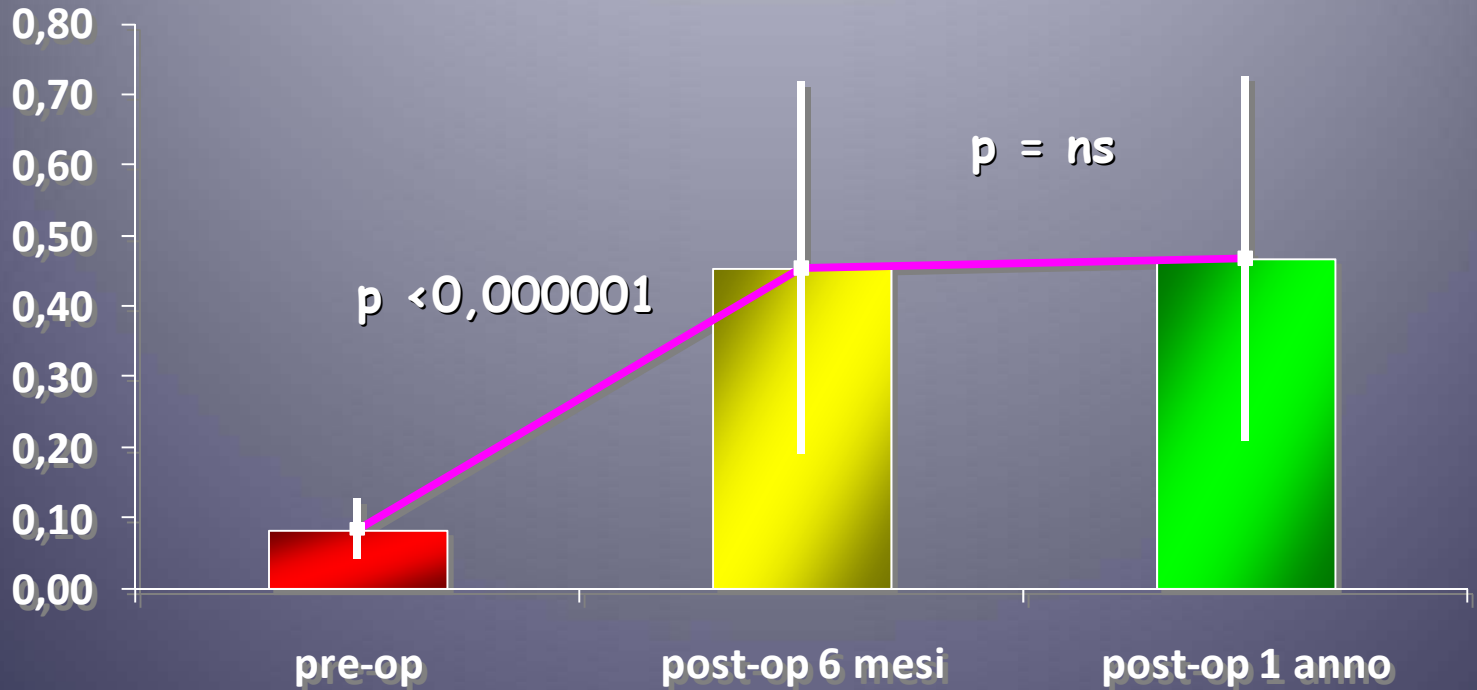
Densità endoteliale (cell/mm²)



(*) - 9,92 % ÷ - 48,22 %

(**) - 10,25 % ÷ - 49,13 %

BCVA



Con ES
(equivalente sferico)
media di $0,14 \pm 5,90 D$

Con ES
(equivalente sferico)
media di $0,12 \pm 5,85 D$

$p = ns$

Endothelial Cell Loss after Descemet's Stripping Endothelial Keratoplasty in a Large Prospective Series

Mark A. Terry, MD,^{1,2} Edwin S. Chen, MD,¹ Neda Shamie, MD,¹ Karen L. Hoar, MD, FRCSC,¹ Daniel J. Friend, MS²

Ophthalmology 2008;115:488–496

Table 2. Comparison Data of Descemet's Stripping Endothelial Keratoplasty/Descemet's Stripping Automated Endothelial Keratoplasty (DSEK/DSAEK) versus Deep Lamellar Endothelial Keratoplasty (DLEK): Endothelial Cell Density (Cells per Square Millimeter) Preoperatively and at 6 and 12 Months Performed by the Same Surgeon (Results by Surgery Type)

	n	Mean	Range	Mean Cell Loss	Cell Loss Range	P Value
DSEK*						
Preoperatively	19	2784	2267–3414			
6 mos	19	1828	1157–2371	34%	15%–59%	
12 mos	19	1694	1030–2305	39%	21%–61%	
DSAEK*						
Preoperatively	61	2931	2341–4209			
6 mos	61	19364	978–2634	34%	8%–69%	
12 mos	61	1906	774–2732	34%	9%–76%	

Endothelial Keratoplasty for Fuchs' Dystrophy with Cataract

Complications and Clinical Results with the New Triple Procedure

Mark A. Terry, MD,^{1,2} Neda Shamie, MD,¹ Edwin S. Chen, MD,¹ Paul M. Phillips, MD,¹
Anand K. Shah, MD,¹ Karen L. Hoar, MD, FRCSC,¹ Daniel J. Friend, MS²

Ophthalmology 2009;116:631–639

- Entire group (n = 173)
- DSAEK only (n = 48)
- DSAEK with concurrent phacoemulsification (n = 125)

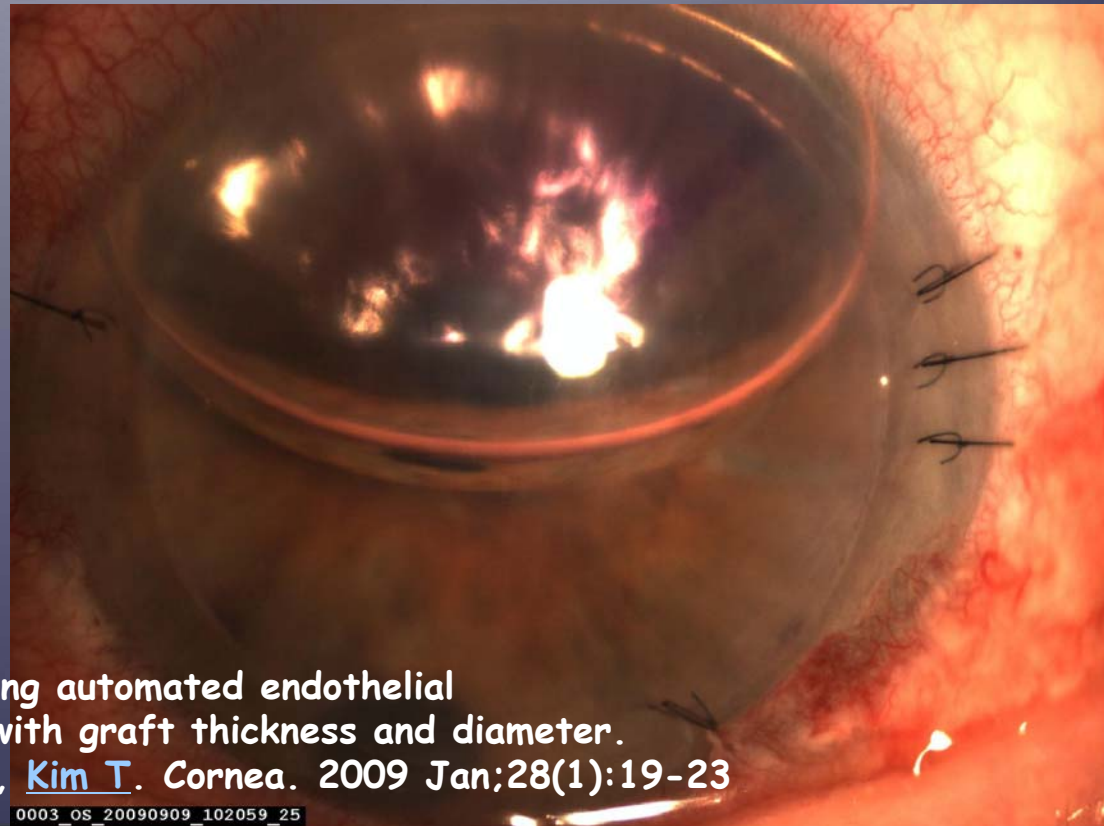
12-Month Endothelial Cell Density (cells/mm ²)	Percent of Cell Loss at 6 Months from before Surgery	Percent of Cell Loss at 12 Months from before Surgery
1969 ± 378 (range, 774–2732) ●	31 ± 14% (range, -12% to 70%) ●	32 ± 15% (range, 0%–76%) ●
1939 ± 356 (range, 774–2553) ●	28 ± 15% (range, -12% to 68%) ●	33 ± 15% (range, 9%–76%) ●
1979 ± 387 (range, 1020–2732) ●	32 ± 14% (range, 0%–70%) ●	32 ± 15% (range, 0%–76%) ●

Discussione

Densità endoteliale

Spessore e diametro del lembo innestato

- Shift ipermetropico
- Visus

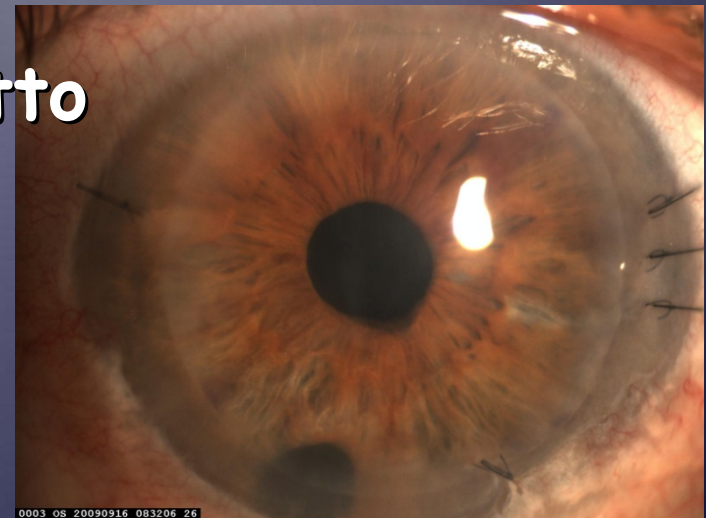


Refractive change after descemet stripping automated endothelial keratoplasty surgery and its correlation with graft thickness and diameter.

[Jun B](#), [Kuo AN](#), [Afshari NA](#), [Carlson AN](#), [Kim T](#). *Cornea*. 2009 Jan;28(1):19-23

Conclusioni

- Tecnica di prima scelta negli scompensi endoteliali
- Da preferire nello scompenso endoteliale dopo PK
- Recupero rapido
- Gestione ambulatoriale del paziente
- Assenza di astigmatismo indotto
- Ripetibilità della metodica



Grazie

