Correlation

Commercial and financial relationships

AIM: to determine the prognostic factors for the
5 year - outcome of deep sclerectomy

Outcome measure: FINAL IOP

Correlation analyses were performed to assess the potential impact of several demographic and clinical variables on the long-term results of deep sclerectomy.

CASISTICS

Eyes / Patients (n) 147
Age (years) 70.30 ±0.83
Gender 87 M, 60 F
Type of glaucoma 47 XFG, 100 HTG
Duration of glaucoma (years) 7.43 ±0.35
Preoperative IOP (mmHg) 21.84 ±0.40
Preoperative MD 15.13 ±0.66
Preoperative CPSD 6.23 ±0.24
Preoperative antiglaucoma medications (n) 3.24 ±0.04
Cumulative years of topical therapy 11.52 ±0.46
Type of Implant 97 SKGel, 50 T-FLUX NV
Gonipuncture (n) 40

• Age and gender were not related to final IOP measures.

RESULTS

The final IOP was significantly lower in eyes treated with T-FLUX NV and in those with exfoliative glaucoma.

Conclusions

A better outcome of deep sclerectomy at 5 years was associated with:

• shorter duration of glaucoma
• shorter preoperative topical hypotensive therapy
• use of T-FLUX NV implant
• exfoliative glaucoma.

Commercial and financial relationships

• and funding: none.

RESULTS

• Shorter duration of glaucoma and
• lower number of cumulative years of topical hypotensive therapy were the most strong predictors of a better outcome of deep sclerectomy.

Unexpectedly, the number of antiglaucoma drugs used before surgery were not associated with lower final IOP readings.

Conclusions

A better outcome of deep sclerectomy at 5 years was associated with:

• shorter duration of glaucoma
• shorter preoperative topical hypotensive therapy
• use of T-FLUX NV implant
• exfoliative glaucoma.

Commercial and financial relationships

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