Incidence of Ocular Hypertension Post-Rhegmatogenous Retinal Detachment Repair

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Purpose

Retinal detachment surgery is reported to increase the risk of ocular hypertension and open angle glaucoma. In the literature, late onset ocular hypertension is reported between 4.2% to 20% in the post-PPV population.

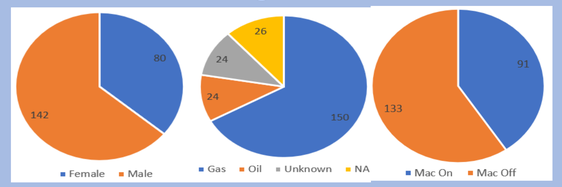
We investigated the incidence of ocular hypertension and referral to Glaucoma services after primary repair for Rhegmatogenous Retinal Detachment (RRD) in a large tertiary referral centre.

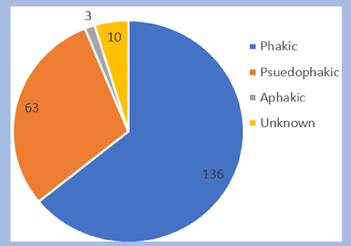
Methods

- Retrospective observational study at a tertiary referral centre.
- All RRD cases in 2014 were considered for the study. With a telephone questionnaire conducted at 5 year post-RRD repair to identify late ocular hypertension rate.
- Inclusion criteria: adult patients (≥18 years old) undergoing primary repair for RRD who lived within a Birmingham postcode.
- Patients who had previous retinal detachment surgeries were excluded.
- Post-operative electronic patient records were reviewed and any IOP pre-operatively and at 6 months post- RDD repair.
- Clinic outcome at 6 months post-RRD repair and the incidence of Glaucoma service referral was reported.
- A telephone patient questionnaire conducted 5 years post RRD repair. Questions asked:
    - Patient verbal consent and details confirmed
    - Date and site of operation confirmed
    - Since you were discharged, have you visited an optician?
    - Month and Year of Last optician visit – Any problems detected?
    - If patient is attending another eye unit for monitoring, what is the condition being monitored and what treatment is patient on?

Demographics

Mean age – 64



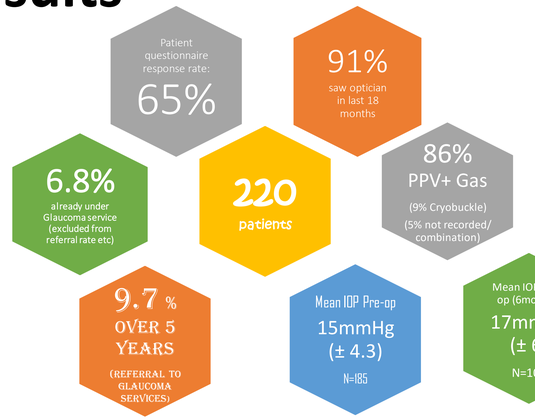


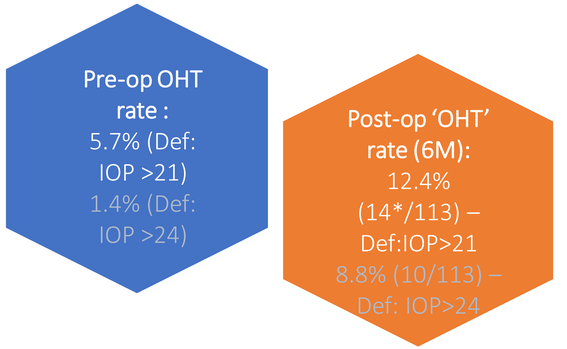
OHT Definition : IOP>21mmHg or IOP>24mmHg – reported pre-op and at 6 months

Study limitations Retrospective, Incomplete patient data, Potentially missed data of delayed raised IOP as some patients are discharged within 2-4 months after RRD repair.

14.6% no Pre-op IOP recorded

Results





**5/14 referred to Glaucoma service*
**1/14 already under Glaucoma pre-op*
Remaining cases – under VR or discharged after initial treatment and condition resolved.

Conclusions

- At 6 months, in our cohort, incidence of OHT post operatively was almost double compared to pre-op rate of OHT(if def that IOP >21= OHT was used).
- The 5 year incidence of glaucoma referral is low after RRD surgery in our population which may mean the rise in IOP may be transient .
- It is important to screen pre-op IOP to determine risk of Glaucoma progression post-operatively in this patient group (Myopes and existing or family history of Glaucoma)
- The engagement of post-RD patients with community eye services was excellent.

References:
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