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# Insights into Management of chronic pseudophakic Cystoid macular oedema (pCMO): A retrospective multi center study

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## 1 Introduction

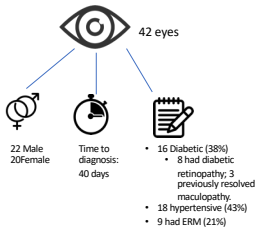
1. Post operative CMO (pCMO)is the most common post-operative complication of cataract surgery.
2. Poorly understood mechanism thought to be related to intraocular inflammation.
3. Persistent pCMO (pIGS) is poorly understood in aetiology.
4. No consensus for management yet.

## 2 Method

1. We defined pCMO as pseudophakic cystoid macular oedema identified on spectral-domain ocular coherence tomography (SD-OCT) which persists for ≥90 days.
2. Retrospective data was collected from the Greater Glasgow and Clyde (GGC) cataract audit sheet for 2021-2023.
3. Patients with active CMO of any aetiology prior to surgery or CMO attributable to other aetiology were excluded.
4. Patients with previously resolved CMO prior to surgery were included.

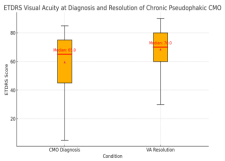
## 3 Results

### Demographics



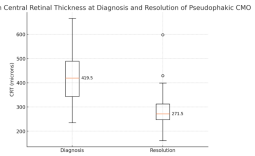

### ETDRS VA

Median ETDRS VA was 65 letters at diagnosis and 70 with resolution (p=0.000069)




### Central retinal Thickness

Median CRT was 420µm at diagnosis and 270µm at resolution (p<0.0000005).




### Treatment: Overall

T = 42 (days)

Time to initiate treatment from diagnosis – 26 +/- 27 SD (Days)

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Time to resolution = 106 +/- 54 SD (Days)

### Treatment: Topical therapy

N = 21
Time to initiate treatment from diagnosis – 15 +/- 17 SD (Days)
**Time to resolution = 134 +/- 102 SD (Days)**
Time between start of treatment to resolution = 124 +/- 102 SD (Days)

### Treatment: Topical + Anti VegF

N = 9
Time to initiate treatment from diagnosis – 23 +/- 20 SD (Days)
**Time to resolution = 264 +/- 123 SD (Days)**
Time between initial treatment and switch to Anti-VEGF: 115 +/- 99 SD (Days)
Time between start of Anti-VEGF to resolution = 124 +/- 102 SD (Days)

### Treatment: Topical + IVT ozurdex

N = 9

Time to initiate treatment from diagnosis – 24 +/- 48 SD (Days)

**Time to resolution = 151 +/- 107 SD (Days)**

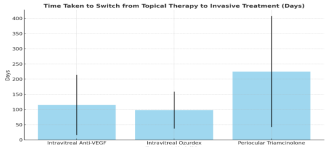
Time between initial treatment and switch to IVD: 98 +/- 61 SD (Days)

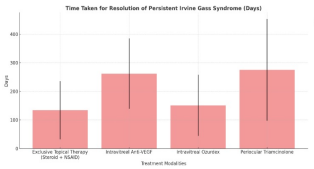
Time between start of IVD to resolution = 60 +/- 15 SD (Days)

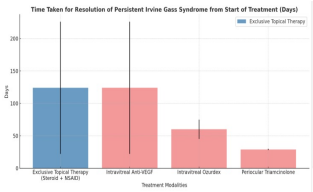
### Treatment: Topical + Periocular Triamcinolone

- N = 2
- Time to initiate treatment from diagnosis – 22 +/- 6.5 SD (Days)
- **Time to resolution = 275 +/- 178 SD (Days)**
- Time between initial treatment and switch to IVA: 225 +/- 183 SD (Days)
- Time between start of IVA to resolution = 29 +/- 1 SD (Days)

### Summary of treatment




## 4 Conclusion

Need for early initiation of treatment
Currently waiting > 3 weeks to start treatment
Need for early switch to Intravitreal Dexamethasone / Periocular Triamcinolone
Data Suggests Anti-VEGF ineffective
**Larger Multicenter Studies required to create consensus.**