# Vitrectomy in diabetics

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# Indications of vitrectomy

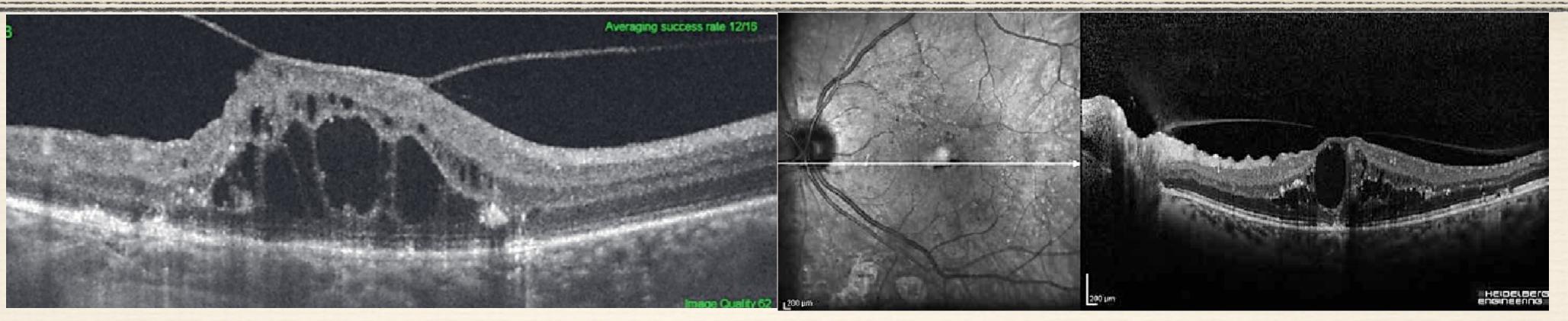
 Media opacity: non clearing vitreous hge(intragel,subhyaloid and premacular).

Tractional RD involving or threatening the fovea

\* Combined tractional and rhegmatogenous RD

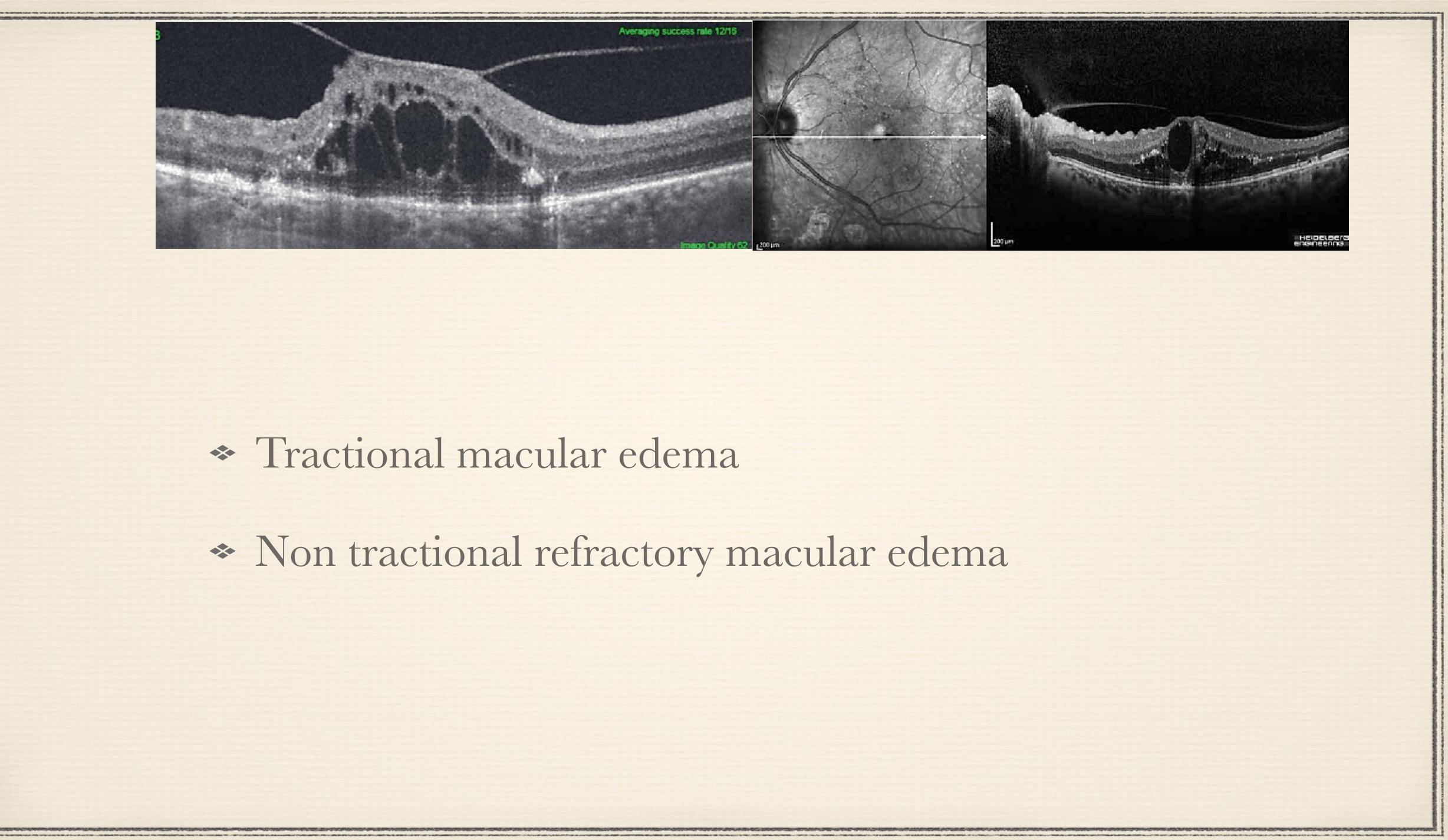






#### Tractional macular edema

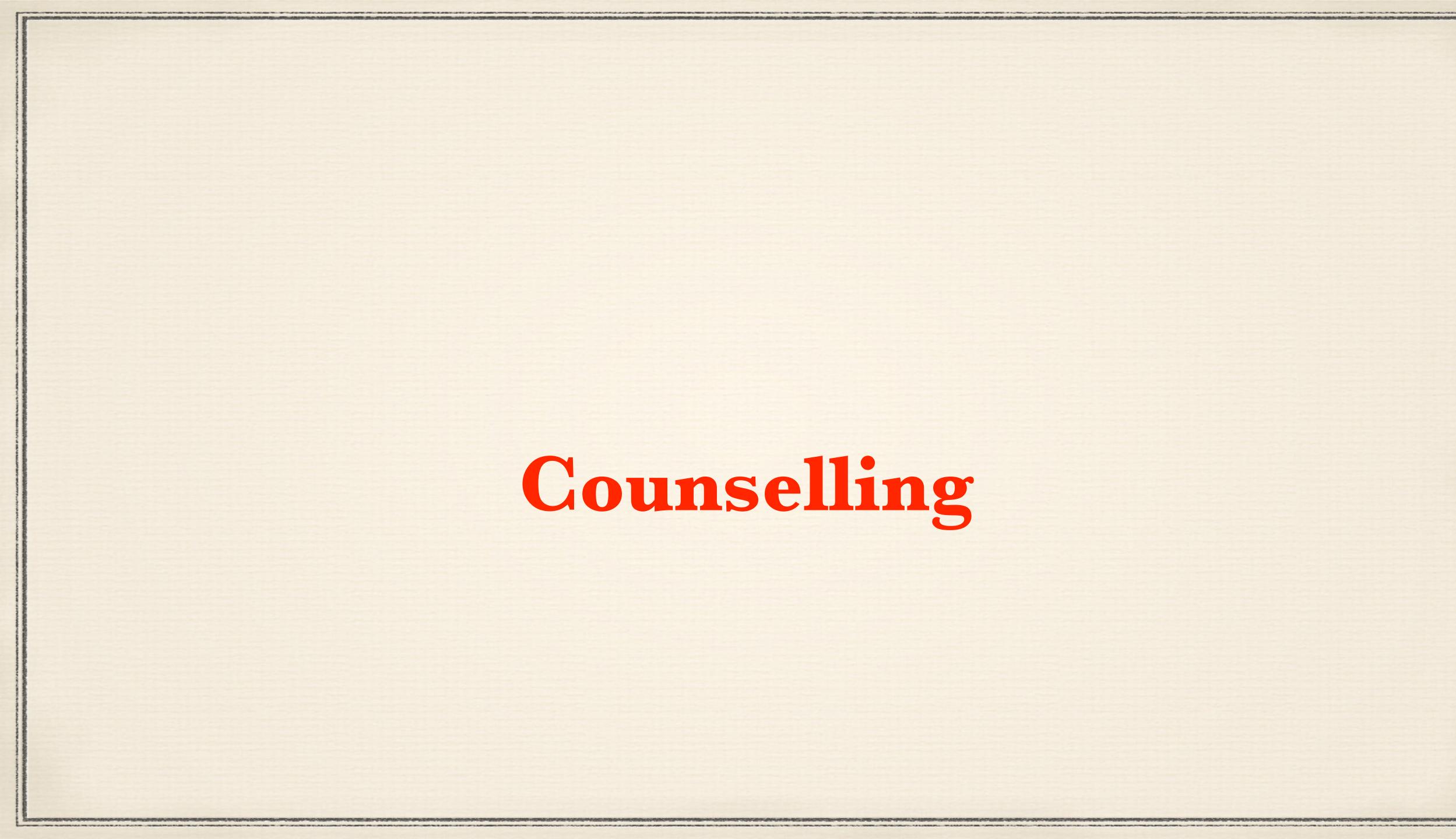
#### Non tractional refractory macular edema



# Preoperative evaluation

- \* Blood sugar
- Blood pressure
- \* Anticoagulants&Antiplatlets stopped
- \* Correlate vision with anatomy
- Neovessels on iris or angle
- \* B.Scan in hazy fundus view
- Preoperative laser or antivegf
- \* Issue of combined cataract extraction







Preoperative VA>5/200 Absence of NVI or NVG PRP of at least one fourth of the fundus

## Favourable prognostic criteria



 Predominantly active neovascularization No long-standinding macular detachment No extensive fibrovascular proliferations Intact ELM& ellipsoid zone

## Favourable prognostic criteria



3 forms of diabetic retinopathy will be faced during vitrectomy:

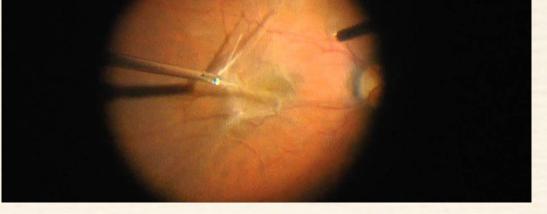
• PVD with vitreous hge

• Partial anterior PVD with taut posterior hyaloid with aggressive proliferations at posterior pole

• No PVD with aggressive proliferations allover the retina



# How to remove proliferations?



Oshima-sensei Combined Vitrectomy,PropVac

Infusion/IOP 35mmHg Flow 0.0 cc/min Irrigation 90cmH20 Illuminator1 80%





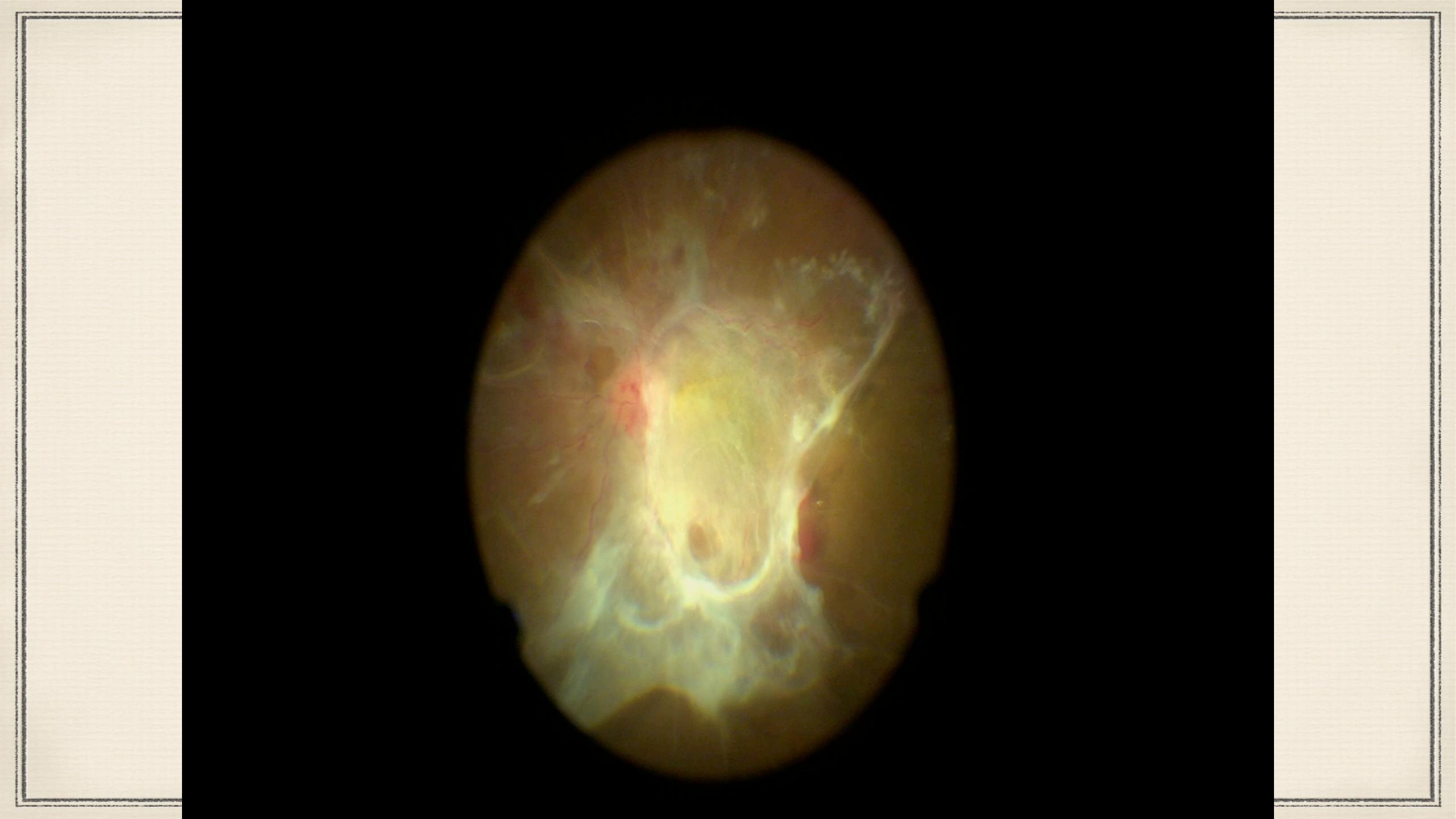
\* Peeling



#### **Epiretinal Membrane Peel**







#### VARIATION OF CHANDELIER FIBERS







PHOTON ITM (Xenon) PHOTON II<sup>TM</sup> (Mercury vapor) Sterallis PC (Xenon & Mercury vapor)



Accurus & Constellation HBI (Xenon)



BrightStar™ (Xenon)

Bimanual vitrectomy

25- & 27-ga chandelier probe



23-& 25-ga cannulacompatible chandelier fiber



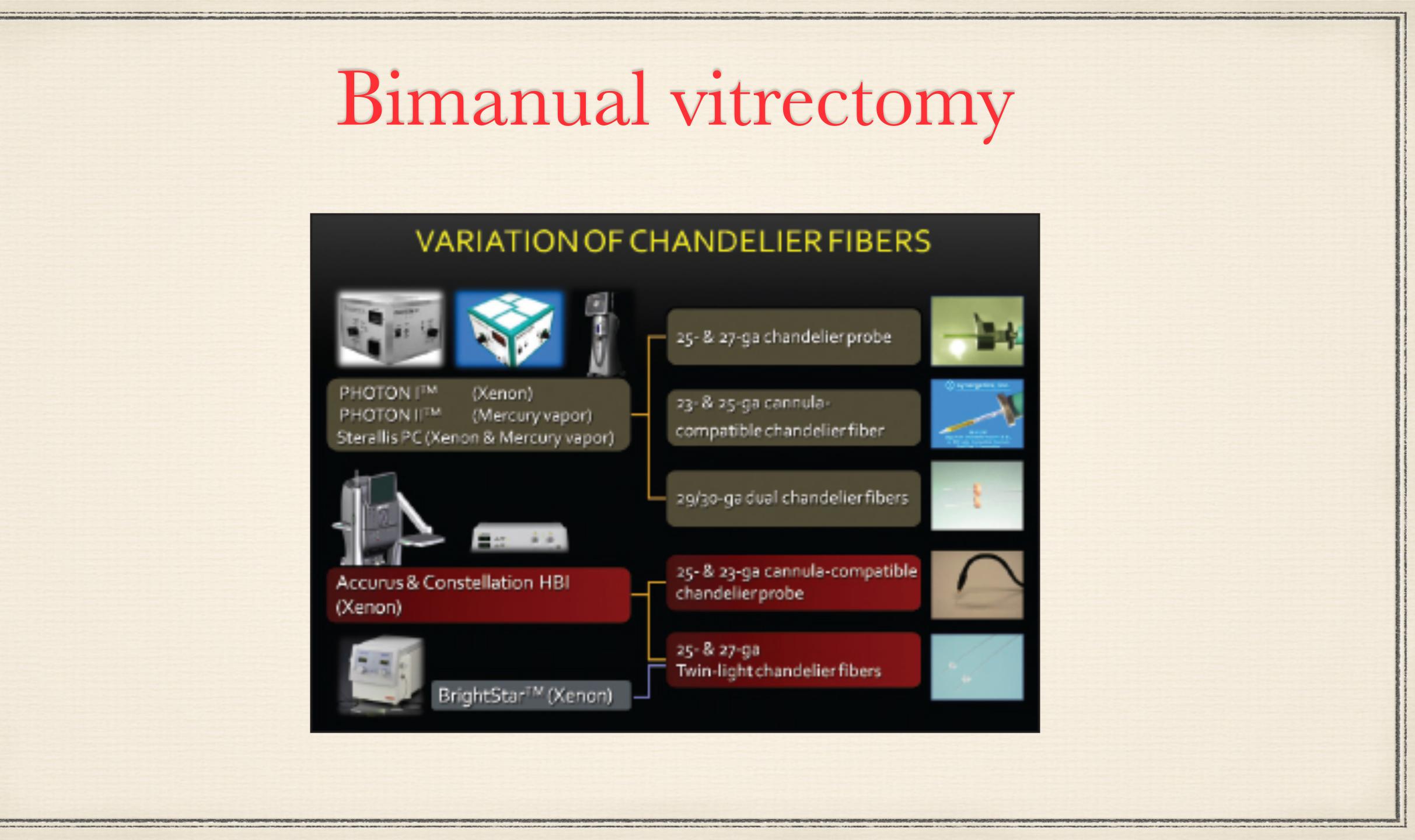
29/30-ga dual chandelier fibers

25- & 23-ga cannula-compatible chandelier probe

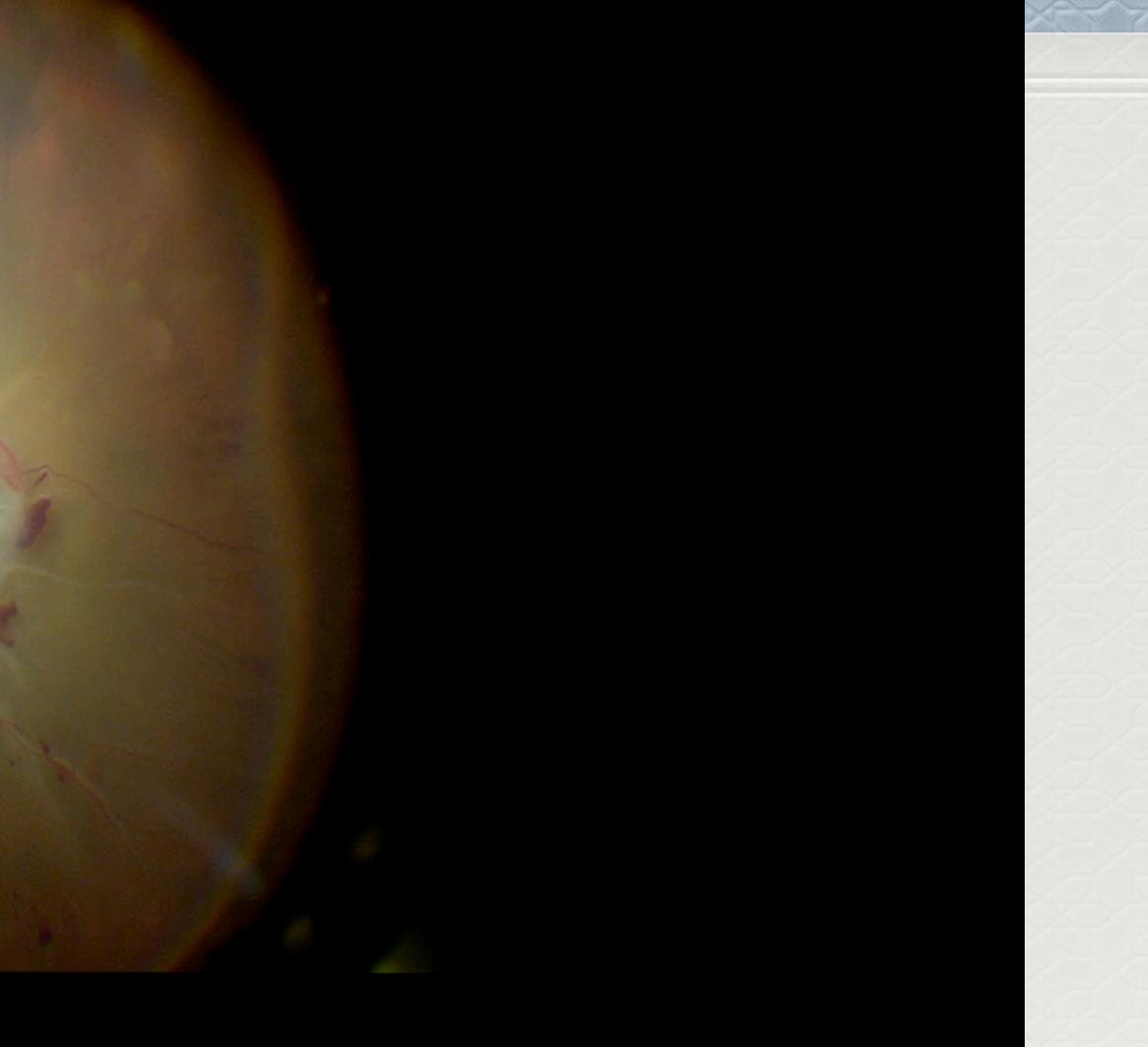


25- & 27-ga Twin-light chandelier fibers





Dr. Mahmoud Khalil



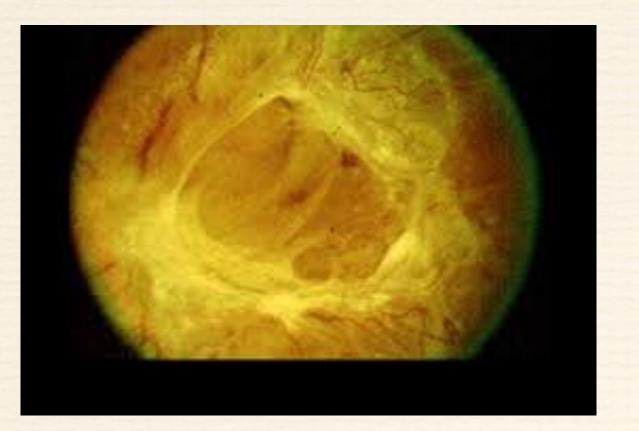




Tamponade







### when vitrectomy is done in the right time in diabetics, It can return their eyes to life.

# Conclusion

