



Knjiga sažetaka

15. KONGRES HRVATSKOG
OFTALMOLOŠKOG
DRUŠTVA

14.-17. svibnja 2015., hotel Olympia, Vodice

1. Valentina Lacmanović Lončar

Naslov:

Evolucija revolucije u keratoplastici

Autori:

Valentina Lacmanović Lončar, Ivanka Petric Vicković

Ustanova:

Očna klinika KBC „Sestre milosrdnice“ Zagreb

Cilj:

prikazati promjene praktičnog obrazca liječenja u zbrinjavanju keratoplastika u državnim ustanovama u Hrvatskoj

Bolesnici i metode:

Analiza podataka prema podacima Ministarstva zdravljia o ukupnom broju učinjenih keratoplastika u RH, te odnos učinjenih perforativnih keratoplastika u odnosu na lamelarne keratoplastike.

Rezultati:

: Ukupan porast kornealnih transplantacija, od toga tek neznatan broj učinjenih lamelarnih transplantacija.

Zaključak:

Neznatan broj učinjenih lamelarnih keratoplastika govori u prilog krivulje učenja ili....

Title:

Evolution of a revolution in keratoplasty

Authors:

Valentina Lacmanović Lončar, Ivanka Petric Vicković

Institution:

Eye clinic, University clinical hospital „Sestre milosrdnice“ Zagreb

Aim:

to investigate changing patterns of practise of keratoplasty in state institutions in Croatia.

Patients and methods:

Analysis of the data according to the Ministry of Health on total number of keratoplasty committed in Croatia, and ratio incurred perforate keratoplasty compared to lamellar keratoplasty.

Results:

The total increase in corneal transplants , of which only a very small number of committed lamellar keratoplasty.

Conclusion:

Insignificant number of lamellar keratoplasty incurred supports the learning curve or

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

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Valentina

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Lacmanović Lončar

2. Renata Ivezkovic

Naslov:

Komparativna studija operacije pterigija: fiksacije transplantata limbalnih stanica i spojnice vlastitom krvlju s a standardnim šivanjem

Autori:

Ivezković R, Zrinščak O, Belovari Višnjić M, Mandić Z, Petric I, Lacmanović Lončar V, Vatavuk Z

Ustanova:

Klinika za očne bolesti KBC "Sestre milosrdnice"

Cilj:

Cilj ove studije je utvrditi učinkovitost dviju kirurških tehnika u fiksaciji transplantata limbalnih stanica i spojnice: fiksacija vlastitom krvlju u usporedbi sa standardnim šivanjem transplantata.

Bolesnici i metode:

U komparativnu studiju su bila uključena 53 bolesnika s pterigijem koji je prerastao na rožnicu između 2 i 4 mm . Rožnična površina pterigija je bila tretirana 20% etanolom kroz 30 sekundi prije uklanjanja s pripadajućom s pojnicom. Kod grupe bolesnika fiksacije vlastitom krvi tanki je sloj vlastite krvi ostavljen na mjestu ogoljene bj eločnice da se formira ugrušak, bilo kakvo aktivno krvarenje je zaustavljeno direktnom tamponadom. Autotransplantat limbalnih stanica sa pojnicom uzet je s gornjeg kvadranta te je prepariran da ne sadrži Tenonovu ovojnicu. Namještanjem je na ogoljenu bjeločnicu na mjesto uklonjenog pterigija, rubovi su pridržani forcepsima tijekom 5 minuta do postizanja fiksacije transplantata. Kod grupe bolesnika šivanja korištena je klasična kirurška tehniku šivanja transplantata. Izazvana mjerena su uključivala vrijeme trajanja operacije, postoperativne komplikacije, bolesnikovo zadovoljstvo nakon zahvata i stopu rekurencije. Svi bolesnici su pregledani preoperativno, te su praćeni na kontrolnim pregledima prvi dan, sedam dana, mjesec dana i tri, šest, dvanaest i dvadeseti četiri mjeseca nakon operacije.

Rezultati:

Trajanje operativnog zahvata je bilo kraće u grupi fiksacije transplantata vlastitom krvi nego u standardnoj grupi, s manjom postoperativnom boljom, nelagodom i boljim kozmetičkim efektom. Ova metoda fiksacije autotransplantata je također mnogo ekonomičnija od fiksacije fibrinskim ljepilom, uz jednaku prednost smanjene stope rekurenije te smanjene postoperativne fibroze.

Zaključak:

Fiksacija transplantata vlastitom krvlju predstavlja novi izazov za oftalmokirurge te bi mogla uskoro postati standard u liječenju primarnog i rekurirajućeg pterigija.

Title:

Comparative study of pterygium surgery : autoblood graft fixation vs suturing limbal stem cells conjunctival transplantation

Authors:

Iveković R, Zrinščak O, Belovari Višnjić M, Mandić Z, Petrić I, Lacmanović Lončar V, Vatavuk Z

Institution:

Klinika za očne bolesti KBC "Sestre milosrdnice"

Aim:

Aim of this study is to evaluate effectiveness of two surgical techniques for limbal stem cells – conjunctival graft fixation: autoblood vs. standard suturing procedure

Patients and methods:

A comparative study included 53 patients with pterygia whose preoperative growth over cornea was between 2 and 4 mm. Pterygial surface was treated with 20%-ethanol applied for the period of 30 seconds before being excised together with associated conjunctiva. In autoblood group a thin film of blood clot was formed over the bare area, any active bleeding was stopped by direct tamponade. A Tenon-free conjunctival autograft, including limbal stem cells, was created in superior quadrant. It was placed over the blood film in the bare area and the edges were held with forceps for 5 minutes to give adequate time for graft fixation to occur. In suturing group traditional suturing technique was used for limbal stem cells conjunctival fixation. Outcome measures included surgical time, postoperative complications, patients subjective satisfaction and rate of recurrence. All patients were examined preoperatively and during follow-up examinations after 1 day, 1 week, 1, 3 and 6 months, 12 months, 24 months.

Results:

Surgical time was shorter in autoblood group than the traditional sutured approach, with less postoperative pain, discomfort and better cosmetic results. Limbal stem cells – conjunctival autoblood graft fixation is more economic than fibrin glue, with same advantage of less recurrence rate and postoperative fibrosis.

Conclusion:

Autoblood graft fixation represents a new challenge for ophthalmic surgeons, and it might be considered as a standard procedure in pterygium surgery.

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15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Prof.dr.sc.

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Renata

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Ivekovic

3. Tea Caljkusic-Mance

Naslov:

Intravitrealne injekcije Bevacizumaba u lijecenju ROP-a- nasa iskustva

Autori:

Tea Caljkusic-Mance, Damir Kovacevic, Aldo Valkovic

Ustanova:

Klinika za oftalmologiju, KBC Rijeka

Cilj:

Ispitati rezultate davanja intravitrealnih injekcija Bevacizumaba kao primarne terapije kod pacijenata s dijagnozom ROP-a.

Bolesnici i metode:

Retrospektivno smo ispitivali podatke pacijenata s dijagnozom ROP-a lijecenih intravitrealnim bevacizumabom u primarnom terapijskom periodu u zadnje tri godine.

Rezultati:

Podaci su pohranjeni u bazi podataka Klinike za oftalmologiju i statistički obradjeni.

Zaključak:

Intravitrealne injekcije Bevacizumaba u lijecenju ROP-a pokazuju izvanrednu kratkotrajnu efikasnost i sigurnost.

Title:

Intravitreal Bevacizumab for ROP-our experiences

Authors:

Caljkusic-Mance T., Kovacevic D., Valkovic A.

Institution:

Eye clinic, University Hospital Rijeka

Aim:

Aim is to evaluate the outcomes of primary intravitreal Bevacizumab injection for ROP

Patients and methods:

We reviewed retrospectively the medical records of all patients diagnosed with ROP and treated with primary intravitreal Bevacizumab injection in our Clinic in last 3 years.

Results:

Data were collected in computer system of Eye Clinic , University Hospital Rijeka and statistically analysed.

Conclusion:

Primary intravitreal Bevacizumab injection shows great short-term efficacy and safety.

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Titula / Title:

Dr.sc.

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Caljkusic-Mance

4. Jelena Juri Mandić

Naslov:

"Face off, face on"

Autori:

Jelena Juri Mandić, Martin Jurlina, Josip Knežević

Ustanova:

KBC Zagreb, Klinika uza očne bolesti medicinskog fakulteta Sveučilišta u Zagrebu

Cilj:

Prikaz slučaja bolesnika sa tumorom suzne žljezde

Bolesnici i metode:

Bolesnik star 46 godina, unazad mjesec dana primjećuje da mu se lijevo oko "izbuljilo" i pomaknulo prema dolje te da slabije vidi.

Rezultati:

Učinjena je dekompresija lijeve orbite sa odstranjnjem tumora u cijelosti kroz bitemporalni-koronarni pristup, bez vidljivog reza na licu i periokularnom području. Prvi postoperativni dan bolesnik ima punu vidnu oštrinu, urednu bulbomotoriku i poziciju bulbusa.

Zaključak:

Bitemporalni ili koronarni pristup orbitalnim šupljinama poznat je kao jedan od najsigurnijih i najefikasnijih kirurških pristupa. Osigurava široko operativno područje, iznimno brzu postoperativnu rehabilitaciju, bez vidljivo g ožiljka na licu. Prema našim najboljim saznanjima ovo je prvi puta da je takav kirurški zahvat izveden na Klinici za oftalmologiju u Hrvatskoj.

Title:

"Face off, face on"

Authors:

Jelena Juri Mandić, Martin Jurlina, Josip Knežević

Institution:

KBC Zagreb, Department of ophtahlmology, Medical School University of Zagreb

Aim:

Case report of a patient with lacrimal gland tumor

Patients and methods:

The patient 46 years old, a month ago noticed that his left eye is "bulging out" and is dislocated downwards. He also had painless decreased visual acuity.

Results:

The patient underwent decompression of the left orbit with removal of the tumor in toto through bitemporal-coronary approach, with no visible scar on the face and periocular area. The first postoperative day the patient has full visual acuity, normal eye motility and eye position.

Conclusion:

Bitemporal or coronary approach is known as one of the safest and most effective surgical approaches to the orbits. It provides a broad operational area, extremely rapid postoperative rehabilitation, with no visible scar. According to the best of our knowledge this is the first time that such a surgical procedure was performed at the Department of Ophthalmology in Croatia.

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Titula / Title:

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Ime i prezime / First and Last Name:-Last

Juri Mandić

5. Nikolina Budimlija

Naslov:

Usporedba učinkovitosti fiksne kombinacije lijekova dorzolamid/timolol i bimatoprost/timolol u snižavanju očnog tlaka kod bolesnika sa očnom hipertenzijom nakon pars plana vitrektomije i tamponade silikonskim uljem

Autori:

Nikolina Budimlija¹, Mia Zorić Geber², Zoran Vatavuk²

Ustanova:

Dom zdravlja Zagreb¹; Klinika za očne bolesti, Klinički bolnički centar „Sestre milosrdnice“, Zagreb²

Cilj:

Usporediti učinak fiksne kombinacije lijekova dorzolamid/timolol i bimatoprost/timolol na visinu očnog tlaka kod bolesnika sa očnom hipertenzijom izazvanog silikonskim uljem nakon PPV-a.

Bolesnici i metode:

U istraživanje je uključeno 24 bolesnika kod kojih je došlo do povećanja očnog tlaka ($\leq 26 \text{ mmHg}$) nakon kirurške metode pars plana vitrektomije i privremene tamponade silikonskim uljem. Bolesnici su podijeljeni u dvije skupine te im je u terapiju uvedena fiksna kombinacija dorzolamid/timolol te bimatoprost/timolol, a vrijednosti IOT mjerene su na početku ispitivanja, nakon 7 dana te nakon 1 i 3 mjeseca.

Rezultati:

Fiksna kombinacija bimatoprost/timolol pokazala je bolje sniženje IOT u usporedbi s fiksnom kombinacijom dorzolamid/timolol. Prosječna vrijednost IOT na početku ispitivanja bila je 28.08 mmHg u skupini dorzolamid/timolol te 27.83 mmHg u skupini bimatoprost/timolol. Nakon 7 dana vrijednost IOT u skupini dorzolamid/timolol iznosila je 17.25 mmHg, te 16 mmHg u skupini bimatoprost/timolol. Nakon 1 mjeseca prosječna vrijednost IOT bila je jednaka u obje skupine, 16.41 mmHg. Nakon 3 mjeseca prosječna vrijednost IOT u skupini dorzolamid/timolol iznosila je 17 mmHg, te 15.25 mmHg u skupini bimatoprost/timolol.

Zaključak:

Obja fiksne kombinacije značajno su snizile IOT u bolesnika sa očnom hipertenzijom nakon PPV-a i tamponade silikonskim uljem, no nešto značajnije sniženje IOT pokazala je kombinacija bimatoprost/timolol.

Title:

Comparison of the effects of combined dorzolamide and timolol versus combined bimatoprost and timolol in patients with ocular hypertension after pars plana vitrectomy and silicon oil tamponade

Authors:

Nikolina Budimlija¹, Mia Zorić Geber², Zoran Vatavuk²

Institution:

Health Center Zagreb¹; Department of Ophthalmology, University Clinical Center „Sestre milosrdnice“, Zagreb²

Aim:

To evaluate the effect of a combined dorzolamide and timolol versus combined tomolol and bimatoprost in patients with ocular hypertension after PPV and silicon oil tamponade.

Patients and methods:

24 patients with diagnosis of ocular hypertension (≤ 26 mmHg) due to silicon oil tamponade after pars plana vitrectomy were divided in two groups and received combined dorzolamide and timolol versus combined bimatoprost and timolol over a 3-month period. Intraocular pressure was measured at baseline, week 1, and months 1 and 3.

Results:

Combined bimatoprost and timolol provided greater IOP lowering compared with combined dorzolamide and timolol. Mean baseline IOPs were 28.08 mmHg in the dorzolamide and timolol group and 27.83 mmHg in the bimatoprost and timolol group. At week 1, mean IOPs were 17.25 mmHg in the dorzolamide and timolol group and 16 mmHg in the bimatoprost and timolol group. At month 1, mean IOPs were identical in both groups (16.41 mmHg). At month 3, mean IOPs were 17 mmHg in the dorzolamide and timolol group and 15.25 mmHg in the bimatoprost and timolol group.

Conclusion:

Both fixed combinations were capable of significantly reducing the mean diurnal IOP in patients with ocular hypertension after PPV and silicon oil tamponade, but combined bimatoprost and timolol provided greater IOP lowering.

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Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

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Nikolina

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Budimlija

6. Vedran Markusic

Naslov:

Tehnika silikonskog sendviča

Autori:

Kovacevic D, Markusic V

Ustanova:

Klinički bolnički centar Rijeka

Cilj:

Prikazati naša iskustva sa tehnikom silikonksog sendviča za rješavanje odignuća mrežnice pod endotamponado m silikonskim uljem.

Bolesnici i metode:

Pacijenti operirani na našoj klinici zbog odignuća mrežnice.

Rezultati:

Silikonsko ulje se upotrebljava već dugi niz godina za dugoročnu endotamponadu nakon vitrektomije zbog odignuća mrežnice. Da bi moglo tamponirati donju periferiju neophodno je u potpunosti ispuniti vitrealni prostor silikonskim uljem. U većini slučajeva odignuća mrežnice pod silikonskim uljem vodeći uzrok perzistentnog odignuća donje periferije je nedovoljna ispunjenost vitrealnog prostora silikonskim uljem.

Zaključak:

Ovom tehnikom mogu se izbjegići uobičajene metode popravka odignuća mrežnice uključujući air-fluid zamjenu i upotrebu teške vode sa reinfuzijom silikonskog ulja što rezultira efikasnijim kirurškim zahvatom sa smanjenim morbiditetom i troškovima.

Title:

The Silicone Sandwich Technique

Authors:

Kovacevic D, Markusic V

Institution:

Clinical Hospital Center Rijeka

Aim:

We report our experience with the silicone sandwich technique for a successful retinal reattachment under silicone oil endotamponade.

Patients and methods:

Patients operated in our department for retinal detachment.

Results:

Silicone oil has been widely used for many years and is considered to be a safe long-term endotamponade in retinal detachment surgery. In order for it to act effectively on inferior retinal pathology it is necessary to ensure a silicone-oil fill that is as complete as possible. In the majority of cases of re-detachment under silicone oil an inadequately silicone filled vitreous cavity is the primary reason for persistent inferior retinal detachment.

Conclusion:

The usual means of retinal detachment repair including air-fluid exchange and the use of heavy liquids, followed by silicone re-infusion are avoided with this technique resulting in more efficient surgery with less morbidity and lower costs.

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Abstract category / Sažetak prijavljujem u:

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Vedran

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Markusic

7. Ana Pajtler Rošar

Naslov:

MORPHOLOGICAL PATTERNS OF TRAUMATIC CHOROIDAL RUPTURES ON SD-OCT

Autori:

Pajtler Rošar Ana, Haskaj Helena, Jaki Mekjavić Polona

Ustanova:

Eye Hospital of University Medical Center Ljubljana

Cilj:

To report morphological patterns seen on SD-OCT in patients with traumatic choroidal rupture.

Bolesnici i metode:

A retrospective review of patients who presented with a history of blunt ocular trauma resulting in choroidal rupture at the Eye Clinic Ljubljana, between January 2011 and February 2015.

Rezultati:

Patients underwent detailed ophthalmic evaluation, visual acuity (VA) assessment, colour fundus photography, fundus autofluorescence (FAF), SD-OCT examination and fluorescein angiography in case of clinical suspicion of choroidal neovascularisation (CNV) development.

Seven cases were identified and reviewed. Median age of the patients was 40 years (range from 16 to 72). Six were male and one female. Baseline best-corrected VA ranged from 0.05 to 0.8 (median 0.3) Snellen acuity. VA at the last evaluation ranged from 0.05 to 1.0 (median 0.45). The choroidal ruptures were evident in fundus examination and colour photography as irregular curvilinear breaks in the choroid with associated subretinal hemorrhage. Damaged RPE area was better delineated by FAF imaging, where it appeared as a reduced FAF with increased FAF rim after resolution of subretinal hemorrhage. SD-OCT demonstrated two types of choriocapillaris/retinal pigment epithelium (CC-RPE) complex disruption. One type as a forward dome shaped protrusion of the retinal CC-RPE complex and the second type with a posteriorly directed concave contour depression at that area and sliding of tissues into the defect. One patient was diagnosed with CNV using fluorescein angiography.

Zaključak:

Damaged RPE area was better delineated by FAF imaging compared with fundus examination and fundus photography. OCT added valuable morphologic information to the diagnosis, progression of choroidal rupture and development of complications such as CNV, where fluorescein angiography is needed to confirm diagnosis.

Title:

MORPHOLOGICAL PATTERNS OF TRAUMATIC CHOROIDAL RUPTURES ON SD-OCT

Authors:

Pajtler Rošar Ana, Haskaj Helena, Jaki Mekjavić Polona

Institution:

Eye Hospital of University Medical Center Ljubljana

Aim:

To report morphological patterns seen on SD-OCT in patients with traumatic choroidal rupture.

Patients and methods:

A retrospective review of patients who presented with a history of blunt ocular trauma resulting in choroidal rupture at the Eye Clinic Ljubljana, between January 2011 and February 2015.

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OCT examination and fluorescein angiography in case of clinical suspicion of choroidal neovascularisation (CNV) development.

Seven cases were identified and reviewed. Median age of the patients was 40 years (range from 16 to 72). Six were male and one female. Baseline best-

corrected VA ranged from 0.05 to 0.8 (median 0.3) Snellen acuity. VA at the last evaluation ranged from 0.05 to 1.0 (median 0.45). The choroidal ruptures were evident in fundus examination and colour photography as irregular curvilinear breaks in the choroid with associated subretinal hemorrhage. Damaged RPE area was better delineated by FAF imaging, where it appeared as a reduced FAF with increased FAF rim after resolution of subretinal hemorrhage. SD-OCT demonstrated two types of choriocapillaris/retinal pigment epithelium (CC-RPE) complex disruption. One type as a forward dome shaped protrusion of the retinal CC-RPE complex and the second type with a posteriorly directed concave contour depression at that area and sliding of tissues into the defect. One patient was diagnosed with CNV using fluorescein angiography.

Conclusion:

Damaged RPE area was better delineated by FAF imaging compared with fundus examination and fundus photography. OCT added valuable morphologic information to the diagnosis, progression of choroidal rupture and development of complications such as CNV, where fluorescein angiography is needed to confirm diagnosis.

Kongres / Congresse:

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Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

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Ana

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Pajtler Rošar

8. Zlatko Juratovac

Naslov:

Akutne dvoslike u dječjoj dobi kod konkomitantnog konvergentnog strabizma - prikaz slučaja

Autori:

Z. Juratovac , S. Perić , N Vukojević, B. Cerovski , M. Barišić , T. Vidović,

Ustanova:

Klinika za očne bolesti , zavod za dječju oftalmologiju KBC Zagreb

Cilj:

Prilaz bolesnika sa pojmom ranih dvoslika kod konvergentnog strabizma

Bolesnici i metode:

Oftalmološki, ortoptičko pleoptički, neuropedijatrijski pregled, VEP, UZV orbita i bulbusa ,

Rezultati:

Pregledom se kod bolesnika sa akutnim dvolsikama pronađe konvergentni prateći strabizam . Kako bi se sprijećile dvoslike poduzete su sve terapijske mjeru , uključujući operaciju strabizma . Time su se stvorili pred uvjeti za razvoj normalnih binokularnih odnosa.

Zaključak:

Operativno liječenje rijetke pojave ranih dvoslika kod pratećeg konvergentnog strabizma dovodi do izlječenja subjektivnih tegoba - dvoslika i rehabilitacije binokularnog vida .

Title:

Acute diplopia in children with concomitant convergent strabismus - a case report

Authors:

Z. Juratovac , S. Perić , N Vukojević, B. Cerovski , M. Barišić , T. Vidović,

Institution:

Department of Ophthalmology, Institute for Pediatric Ophthalmology , Clinical Hospital Centre Zagreb

Aim:

Showing patients with early appearance of diplopia with convergent strabismus

Patients and methods:

Ophthalmic, orthoptic - pleoptic, neuropediatrician examination, VEP, ultrasound orbit and eyeball,

Results:

Within the examination of a patients with acute diplopia a convergent strabismus appears. In order to prevent double vision we took all the therapeutic measures, including strabismus surgery. This has created the preconditions for the development of normal binocular vision.

Conclusion:

Operative treatment of the rare occurrence of early diplopia in convergent strabismus leads to healing of subjective symptoms - double vision and rehabilitation of binocular vision.

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Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

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Juratovac

9. Jelena Juri Mandić

Naslov:

„Suzno oko“ u ambulatni za okuloplastičnu kirurgiju

Autori:

Jelena Juri Mandić

Ustanova:

KBC Zagreb, Klinika za očne bolesti Medicinskog fakulteta Sveučilišta u Zagrebu

Cilj:

prikazati etiologiju „suznog oka“ kod bolesnika koji se javljaju na pregled u ambulatu za bolesti orbite i okuloplastičnu kirurgiju, te predstaviti novi mnemonički sustav za bolju dijagnostiku i klasifikaciju. Također, prikazati etiološke metode liječenja za svaki opisani entitet.

Bolesnici i metode:

321 bolesnik sa simptomima epifore različite etiologije pregledan u ambulanti za bolesti orbite i okuloplastičnu kirurgiju u periodu od 2104-2015, sa prikazom etiološkog kirurškog liječenja.

Rezultati:

Nakon etiološki usmjerenoj kirurškog liječenja kod svih bolesnika došlo je do poboljšanja simptoma "suznog oka".

Zaključak:

Adekvatna dijagnostička obrada i klasifikacija široke skupine bolesnika sa simptomom suznog oka osiguravaju točan odabir liječenja sa funkcionalno zadovoljavajućim ishodom.

Title:

"Watery eye" in oculoplastic unit

Authors:

Jelena Juri Mandić

Institution:

KBC Zagreb, Department of ophthalmology, Medical School University of Zagreb

Aim: to show etiology of "watery eye" in patients referring to oculoplastic unit and to present new mnemonic system for better diagnosis and classification. Also, to show the etiological treatment methods for each described entity.

Patients and methods:

321 patients with epiphora of different etiology referred to oculoplastic unit in the period from 2104 - 2015, with presentation of etiological surgical treatment.

Results: After etiological surgical treatment in all patients there was a significant improvement of "watery eye" symptoms.

Conclusion:

Adequate diagnostic evaluation and classification of broad group of patients with the "watery eye" symptom ensure the correct selection of treatment with satisfactory functional outcome.

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Titula / Title:

Dr.sc.

Ime i prezime / First and Last Name:-First

Jelena

Ime i prezime / First and Last Name:-Last

Juri Mandić

10. Andela Jukić

Naslov:

KID sindrom

Autori:

Jukić, Andela; Stanišić, Boško; Meter, Ana; Jukić, Tomislav

Ustanova:

KBC Zagreb, Rebro

Cilj:

prikazati slučaj

Bolesnici i metode:

prikaz slučaja

Rezultati:

11-

godišnji dječak prikazan od strane njegovog dermatologa zbog lošeg vida, subjektivnih simptoma koji uključuju svrbež, osjećaja stranog tijela i fotofobiju te prisutnost blefarospazma.

Pri ispitivanju oštirine vida dobivene su slijedeće vrijednosti: VOD:1/60

VOS:1/60

Vanjskim pregledom je utvrđena hiperkeratoza vijeda, s poliozom i madarozom trepavica i obrva.

Biomikroskopski pregled prednjeg očnog segmenta pokazuje hiperemiju spojnica i kroničnu keratopatiju s dubokim neovaskularizacijama rožnice.

*Bris spojnica oka bio je pozitivan na *Staphylococcus aureus*.*

Rezultati imunološkog i biokemijskog testiranja bili su normalni, osim AST koji je iznosio 625 IJ / ml.

(referentne vrij. AST 7-38 IJ/L

Koža mu je u cijelosti bila suha i hiperkeratotična s eritrokeratoznim plakovima lica, trupa, dlanova i stopala. Nokti su bili distrofični, a na zubima su nađene displastične promjene.

Rezultat biopsije kože pokazao je hiperkeratozu, nepravilnu akantozu s izduženim dermalnim papilama.

HLA tipizacijom je ustanovljena je prisutnost HLA B27. Kariotip je bio normalna.

Međutim, tonskim audiogramom dokazana je bilateralna perceptivna hipoakuzija.

Počeo tretman uključivao je primjenu umjetnih suza uz sistemsku terapiju antibioticima prema antibiogramu.

Nakon tretmana njegovi subjektivni simptomi su znatno smanjeni, ali je vidna oštirina ostala jednako loša.

Zaključak:

Keratitis - ihtioza - gluhoća sindrom (sindrom KID) je vrlo rijedak kongenitalni poremećaj karakteriziran ekto dermalnim keratitisom s neovaskularizacijama , difuznom hiperkeratotičnom eritrodermijom i teškim neurosenzornim gubitkom sluha.

Često udružena stanja uz KID sindrom su povećana osjetljivost na infekcije i neuromuskularne distrofije koji mogu biti korisni za dijagnosticiranje same bolesti. Većina slučajeva su sporadični , a ako se pojavljuju unutar obitelji , nije utvrđen točan način nasljeđivanja. Diferencijalna dijagnoza uključuje:Refsumova SY . , Savin SY ,

Jadassohn - Lewandowsky Sy , Nockemann Sy , Capdepont Sy . , Siemens Sy . , Spanlang - Tappeiner Sy . i Richner - HANHART Sy.

Sam oftalmološki tretman KID sindroma je razočaravajući . Vaskularizacije rožnice , osobito u dubljim slojevi ma , ne pokazuju poboljšanje na bilo koji oblik liječenja. Liječenje se prvenstveno oslanja na ranom otkrivanju komplikacija same bolesti.

Title:

KID syndrome

Authors:

Jukić, Andela; Stanišić, Boško; Meter, Ana; Jukić, Tomislav

Institution:

KBC Zagreb, Rebro

Aim:

case report

Patients and methods:

case report

Results:

A 11-year old boy was referred by his dermatologist because of poor vision and subjective symptoms-itching, foreign body sensation, photophobia and blepharospasm.

On examination, his visual acuity was 1/60 OD and 1/60 OS. External examination showed hyperkeratotic eyelids with polyosis and madarosis of eyelashes and eyebrows.

*Slitlamp examination demonstrated conjunctival hyperaemia and chronic keratopathy with neovascularization of deeper corneal layers. The culture of the conjunctival swabs yielded *Staphylococcus aureus*.*

He was referred for a systemic evaluation and appears to be the first case in his family. Findings from immunological and biochemical evaluation were normal except AST 625 IJ/mL. His skin in general was dry and hyperkeratotic with erythrokeratodermatosus plaques over the face, trunk, palms and foot. The nails were dystrophic and his teeth were dysplastic. Result of skin biopsy showed hyperkeratosis, irregular acanthosis with elongated dermal papilla. HLA typing revealed HLA B27. Karyotype was normal. However, tonal audiogram showed bilateral perceptive hypoacusis. He began treatment with artificial tears and topical antibiotics according to culture of conjunctival swabs. After treatment his subjective symptoms were significantly decreased but vision wasn't improved.

Conclusion:*Keratitis-Ichthyosis-*

Deafness syndrome (KID Syndrome) is very rare congenital disorder of the ectoderm characterised by keratitis with neovascularization, diffuse hyperkeratotic erythroderma and severe neurosensory hearing loss. Associated signs such as increased sensitivity to infections, neuromuscular dystrophies are useful for the diagnosis. Most cases are sporadic but familial cases have been described with unclear mode of inheritance. The differential diagnosis include Refsum Sy., Savin Sy., Jadassohn-

Lewandowsky Sy., Nockemann Sy., Capdepont Sy., Siemens Sy., Spanlang-Tappeiner Sy. and Richner-Hanhart Sy.

Ophthalmic treatment is disappointing. Vascularization of cornea, particularly when located in the deeper layers, is resistant to any form of treatment.⁹ Thus management mainly relies upon early detection of complication.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Andela

Ime i prezime / First and Last Name:-Last

Jukić

11. Jelena Juri Mandić

Naslov:

Nove alternative u medikamentoznom liječenju distiroidne orbitopatije

Autori:

Jelena Juri Mandić

Ustanova:

KBC Zagreb, Klinika za očne bolesti Medicinskog fakulteta Sveučilišta u Zagrebu

Cilj:

Prikazati nove modalitete medikamentoznog liječenja distiroidne orbitopatije

Bolesnici i metode:

Grupa bolesnika sa distiroidnom orbitopatijom, gradirani kao umjerena aktivna GO sa CAS indeksom većim od 3 liječeni su novom shemom - kombinacijom intravenskih kortikosteroda i orbitalnim zračenjem. Svi su uzimali Selen per os najmanje 6 mjeseci od početka liječenja.

Rezultati:

U periodu praćenja od 8 mjeseci došlo je do subjektivnog poboljšanja orbitalnog statusa kod svih bolesnika. Usrednjeno učinjene funkcionalno morfološke dijagnostike, sa istom vrstom obrade ponovljeno po za vrijednost terapije zabilježili smo u različitim postotcima poboljšani "orbital compliance", bulbomotoriku, vidnu funkciju te normalizaciju intraokularnog tlaka pri pogledu ravno.

Zaključak:

Ispitivanja novih modaliteta liječenja, kao i različite kombinacije poznatih vrsta liječenja u različito graduiranih bolesnika sa distiroidnom orbitopatijom te njihovi rezultati, temelj su stvaranja algoritama liječenja koji osiguravaju najbolji odgovor, najnižu incidenciju relapsa i nuspojava liječenja.

Title:

Newer Alternatives in Medical Management of thyroid eye disease

Authors:

Jelena Juri Mandić

Institution:

KBC Zagreb, Department of ophthalmology, Medical School University of Zagreb

Aim:

To present various newer alternatives in medical treatment thyroid eye disease

Patients and methods:

The group of patients with thyroid eye disease, graded as moderately active GO with CAS index greater than 3, were treated with a new scheme - a combination of intravenous corticosteroids and orbital radiation. All of them had selenium per os at least 6 months from the initial treatment

Results:

In the follow-up period of 8 months, there was a subjective improvement of orbital status in all patients. Comparing initially made functional and morphological diagnostics, with the same kind of treatment repeated after completion of treatment, we recorded in different percentages improved "orbital compliance", eye motility, visual function and normalization of intraocular pressure.

Conclusion:

Testing of new treatment modalities, as well as various combinations of known types of treatment in patients with differently graded thyroid eye disease, and its results, are the basis of the algorithmic treatment to ensure the best response, the lowest incidence of relapse and side effects of treatment.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

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Jelena

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Juri Mandić

12. Anita Matas

Naslov:

Promjene endotela rožnice i debljine makule nakon fakoemulzifikacije kod pacijenata sa pseudoeksfolijativnim sindromom

Autori:

Matas Anita, Marin Lovrić Josipa, Džaja Mirna, Matutinović Željana, Čapkun Vesna, Stanić Robert, Bućan Kajo

Ustanova:

Klinički bolnički centar Split

Cilj:

Analiza oštećenja endotelnih stanica rožnice i promjene centralne debljine makule nakon operacije katarakte kod pacijenata s i bez pseudoeksfolijativnog sindroma (PEX).

Bolesnici i metode:

Studija uključuje skupinu pacijenata s pseudofolijativnim sindromom (PEX skupina) i skupinu pacijenata iste dobi bez pseudoeksfolijativnog sindroma (kontrolna skupina) koji su podvrgnuti operaciji katarakte (fakoemulzifikaciji). Gustoća endotelnih stanica rožnice (CD) i središnja debljina rožnice (CCT) mjereni su pomoću spekularnog mikroskopa (Tomey EM - 3000) i to preoperativno te 7 dana, 1 i 3 mjeseca nakon operacije. Polimegatizam i pleomorfizam su prikazani koeficijentom varijacije (CV) i postotkom heksagonalnih stanica (6A). Središnja debljina makule mjerena je pomoću optičke koherentrene tomografije (Cirrus HD – OCT 5000, Zeiss).

Rezultati:

Svaka skupina imala je 30 očiju. Ispitanici su bili medijana dobi 79,5 godina (min-max 66-81). Nije bilo statistički značajne razlike u skupinama prema dobi, spolu, intraokularnom tlaku, omjeru lijevog i desnog oka, kao ni u intraoperacijskim parametrima. Preoperativno, medijan središnje debljine rožnice u skupini pacijenata s PEX-om iznosio je 486,5 μm (min-max 474-543), a u kontrolnoj skupini 560 μm (min-max 501-603). Također, medijan gustoće endotelnih stanica u PEX skupini iznosio je 2413/mm² (min-maks 2233-2646), a u kontrolnoj skupini 2361,5/mm² (min-max 1949-2818). Preoperativno, središnja debljina rožnice (CCT) se statistički značajno razlikovala između ispitivane i kontrolne skupine (Mann Whitney U test, Z=2,8; p=0,005) kao i postoperativno nakon 7 dana (Z=2,15; p=0,031). Gustoća endotelnih stanica rožnice (CD) i koeficijent varijacije (CV) nisu se razlikovali preoperativno, kao ni 7 dana postoperativno u obje skupine (Z=0,630, p=0,528; Z=0,892, p=0,372); podaci za ostalo razdoblje praćenja su u izradi. Međutim, preoperativno udio heksagonalnih stanica statistički se značajno razlikovao između skupina (Z=2,5, p=0,014). Gubitak endotelnih stanica nije se pokazao statistički značajnim u ispitivanoj grupi, kao ni ostali parametri rožnice (Z=0,683, p=0,495). Dubina prednje očne sobice (CA) nije bila statistički značajno povećana u PEX skupini (Z=-0,945, p=0,344). Postoperativna vidna oštrina (BCVA) izražena logMAR ljestvicom bila je statistički značajno manja u ispitivanoj skupini (Z=-1,94, p=0,052). Promjena u centralnoj debljini makule nije se značajno razlikovala između skupina tijekom razdoblja praćenja (Z=0,682, p=0,494).

Zaključak:

Rožnica kod pacijenata s pseudokfolijativnim sindromom preoperativno pokazuje povećanu sklonost potencijalnom oštećenju nakon fakoemulzifikacije, što ukazuje na potrebu opreznijeg operativnog pristupa.

Title:

Changes in corneal endothelial cells and macular thickness after phacoemulsification in patients with pseudoexfoliation syndrome

Authors:

Matas Anita, Marin Lovric Josipa, Dzaja Mirna, Matutinovic Zeljana, Capkun Vesna, Stanic Robert, Bucan Kajo

Institution:

Clinical Hospital Centre Split

Aim:

To compare corneal endothelial cell damage and change in central macular thickness after cataract surgery in patients with and without pseudoexfoliation syndrome (PXF).

Patients and methods:

This study comprised eyes with PXF (PXF group) and age-matched eyes without PXF (non-PXF group) scheduled for phacoemulsification. Corneal endothelial cell density (CD) and central corneal thickness (CCT) were measured using a specular microscope (Tomey EM - 3000) preoperatively, 7 days, 1 and 3 months postoperatively. Polymegathism and pleomorphism were assessed by coefficient of variance (CV) and percentage of hexagonal cells (6A). Central macular thickness was measured using optical coherence tomography (Cirrus HD - OCT 5000, Zeiss).

Results:

Each group had 30 eyes. Median age was 79.5 years (min-max 66-81). There were no statistically significant differences in the groups according to age, sex, intraocular pressure, the ratio of left and right eye, as well as intraoperative parameters. Median preoperative CCT in PXF group was 486.5 µm (min-max 474-543) and 560 µm (min-max 501-603) in the control group. Median preoperative CD in the PXF group was 2413/mm² (min-max 2233-2646) and 2361.5/mm² (min-max 1949-2818) in the control group. Preoperatively, CCT was significantly different between the study and control group (Mann-Whitney U test, Z=2.8; p=0.005) and after 7 days postoperatively (Z=2.15; p=0.031). CD and CV did not differ preoperatively, as well as 7 days postoperatively in both groups (Z=0.630, p=0.528; Z=0.892, p=0.372), data for further follow-up are in processing. However, preoperative percentage of 6A was significantly different between the groups (Z=2.5, p=0.014). The percentage of endothelial cell loss wasn't statistically significant in the study group, as well as other corneal parameters (Z=0.683, p=0.495). The depth of anterior chamber (CA) wasn't significantly different in the PXF group than in the control group (Z=0.945, p=0.344). Postoperative visual acuity (BCVA) expressed by logMAR scale was significantly higher in the control group (Z=-1.94, p=0.052). Changes in central macular thickness wasn't significantly different between the groups during follow-up period (Z=0.682, p=0.494).

Conclusion:

The cornea in patients with pseudoxfoliation syndrome preoperatively showed increased potential for damage after phacoemulsification, therefore cautious operational approach is needed.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Anita

Ime i prezime / First and Last Name:-Last

Matas

13. Neda Striber

Naslov:

Stomatološki zahvati i rizici za vid

Autori:

N.Striber,B.Dawidowsky,D.Franceschi-Fauta

Ustanova:

Klinika za dječje bolesti Zagreb

Cilj:

Ukazati na moguće rizike stomatoloških zahvata i sve komplikacije koje mogu nastati na oku. To su rijetki, neželjeni, ali mogući događaji. Pravodobnim prepoznavanjem simptoma, brzom intervencijom smanjuju se trajne posljedice.

Bolesnici i metode:

Pacijenti pregledani o obrađeni u našoj ambulanti i literaturni podaci iz dentalne prakse

Rezultati:

u ambulantom radu u dva slučaja imali smo ozljede prednjeg segmenta oka u tijeku stomatološke intervencije kada je djece. Radilo se o ozljedi rožnice i spojnica. Provedena je standardna procedura zbrinjavanja bez zaostalih oštećenja.

Zaključak:

Stomatološki zahvati mogu imati rizike za vid. U literaturi je opisano da se kod 1: 125 000 zahvata kao komplikacija javlja s sljepoća. U 0,1 % anestezije u stomatologiji dolazi do pojave dvoslike, ptoze spazma akomodacije, strabiza, oftalmoplegije, poremećaja osjeta na vanjskoj strani vjeđa, sljepoća. Važno je poznavati moguće rizike, mehanizme nastanka komplikacija zbog adekvatne intervencije i na taj način sprečavanje trajnih posljedica a po funkciju vida.

Title:

Dental procedures and risks for vision

Authors:

N.Striber,B.Dawidowsky,D.Franceschi-Fatuta

Institution:

Children 's Hospital Zagreb

Aim:

To show the potential risks of dental procedures and all the complications that may arise in the eye. These are rare, unwanted, but possible events. Timely recognition of symptoms, quick intervention reduces persistent consequences.

Patients and methods:

Patients examined the treated in our clinic and reference data from dental practice

Results:

In two cases in outpatient work we had injuries to the anterior segment of the eye during dental intervention by children. It was an injured cornea and conjunctiva. The standard procedure of care without residual damage was done.

Conclusion:

Dental procedures can have risks for vision. The literature has described that at 1: 125 000 operations blindness occurs as a complication In 0.1% of anesthesia in dentistry comes to the appearance of double vision, ptosis spasm of accommodation, strabismus, ophthalmoplegia, disturbances of sensation on the outside of the eyelids, blindness. It is important to know the possible risks, mechanisms of complications due to adequate intervention and thus preventing persistent consequences for the function of vision.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Neda

Ime i prezime / First and Last Name:-Last

Striber

14. Marin Belak

Naslov:

Liječenje makularnog edema žutim mikropulsnim laserom od 577nm (Iridex)

Autori:

M.Belak, B.Andrijević Derk, O. Zrinšćak, Z.Vatavuk

Ustanova:

Klinički bolnički centar "Sestre milosrdnice" Zagreb

Cilj:

Prikazati naša prva iskustva u liječenju makularnog edema, različitog uzroka, mikropulsnim laserom.

Bolesnici i metode:

Biti će prikazana serija slučajeva koja uključuje: dijabetički makularni edem, makularni edem nakon okluzije ogranka vene centralis retine, centralne venske okluzije, kronične centralne serozne korioretinopatije, te makularni edem kod postradijacijske retinopatije. Bolesnicima je apliciran žuti laser valne duljine 577nm u području makularne regije. Prije aplikacije učinjen je pregled vidne oštirine, biomikroskopski pregled, pregled fundusa, mjerjenje IOT-a, te OCT makule, autoflorescencija i FAG. Iste pretrage su ponovljene 1 i 2 mjeseca nakon tretmana.

Rezultati:

U svim slučajevima je došlo do smanjenja centralne foveolarne debljine. Poboljšanje vidne oštirine se kretalo prosečno za 1,2 reda. Na kontrolnim pregledima prvi i drugi mjesec nakon aplikacije na autoflorescenci, FAG, te OCT-u nije uočena progresija makularnog edema niti oštećenje anatomske strukture mrežnice.

Zaključak:

Mikropulsni laser se pokazao učinkovit i siguran u liječenju dijabetičkog makularnog edema, makularnog edema nakon okluzije ogrankova vene centralis retine, centralne venske okluzije, kronične centralne serozne korioretinopatije, te makularnog edema kod postradijacijske retinopatije. Međutim, potrebno je dulje vrijeme praćenja i kontrolirane randomizirane studije na većem broju ispitanika da bi se valorizirala dugotrajna učinkovitost i sigurnost.

Title:

Yellow 577nm micropulse laser in treatment of macular oedema

Authors:

M.Belak, B.Andrijević Derk, O. Zrinšćak, Z.Vatavuk

Institution:

Clinical hospital center "Sestre milosrdnice" Zagreb

Aim:

To show our first experience with micropulse laser in treatment of macular oedema from different cause.

Patients and methods:

We will show a case series of diabetic macular oedema, macular oedema in BRVO, CRVO, chronic CSCR, and macular oedema in postradiation retinopathy. All patients were treated with micropulse 577nm laser. Patients have undergone biomicroscopic exam and fundus exam, BCVA, IOP, macular OCT, autofluorescence and FAG before laser application and 1 and 2 months after application.

Results:

All cases have decrease in central foveolar retinal thickness after laser application. Improvement in BCVA is in average 1,2 lines of Snellen chart. No progresion of macular oedema nor any clinicly visible or invisible scars were noted on control visits.

Conclusion:

Yellow micropulse laser seems to be effective and safe in tretment of diabetic macular oedema, , macular oedem a in BRVO, CRVO, chronic CSCR, and macular oedema in postradiation retinopathy.However, prospective, ran domized, and comparative large-scale studies are needed to evaluate the efficacy and safety of this treatment.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Marin

Ime i prezime / First and Last Name:-Last

Belak

15. Nenad Vukojević

Naslov:

Ishod lječenja prematurityne retinopatije u zoni I prije i za vrijeme anti VEGF ere

Autori:

Nenad Vukojević, Tomislav Jukić, Damir Katušić, Sanja Perić, Marija Štanfel, Krešimir Mandić

Ustanova:

Klinika za očne bolesti Medicinskog fakulteta Sveučilišta u Zagrebu

Cilj:

Analizirati pojavnost i ishod lječenja prematurityne retinopatije u zoni I prije i za vrijeme anti VEGF ere

Bolesnici i metode:

Sedmogodišnja retrospektivna studija je uključila svu nedonošenu djecu rođenu od siječnja 2007. do prosinca 2013., koja su bila praćena zbog prematurityne retinopatije. Analizirane su oči s retinopatijom u zoni I. Lječenje fo tokoagulacijom diodnim laserom bilo je prva terapija. Kada laser fotokoagulacija nije bila dovoljna, proveden o je dodatno lječenje s 0.625 mg (0.025 ml) bevacizumaba intravitrealno. Period praćenja je bio najmanje 6 mjeseci.

Rezultati:

Sedmogodišnja retrospektivna studija obuhvatila je 1348 prerano rođenje djece. 181 oko(12.27%) , od 91 nedonoščeta s prematuritynom retinopatijom u zoni I je bilo analizirano. 68 očiju (4.61%) je imalo AP-ROP. Prije anti VEGF ere laser fotokoagulacija nije bila dovoljna i 29.55% očiju s retinopatijom u zoni I je imalo nepovoljan ishod. Kasnije, laser fotokoagulacija i po potrebi 0.625 mg IVT bevacizumaba su bili uspješni kod 97.81% očiju. Najčešći nepovoljan ishod je bio kod očiju s AP-ROP-om. Samo tri oka su imala nepovoljan ishod nakon uvođenja dodatne intravitrealne anti VEGF terapije. Za vrijeme razdoblja praćenja nisu zabilježene sistemske nuspojave intravitrealne terapije bevacizumabom.

Zaključak:

Intravitrealni bevacizumab u pojedinačnoj dozi od 0.625 mg je bio dobro podnošen i pomogao je povoljnijem ishodu lječenja kada laser fotokoagulacija nije bila dovoljna.

Title:

Treatment outcomes zone I retinopathy of prematurity before and during anti VEGF era

Authors:

Nenad Vukojević, Tomislav Jukić, Damir Katušić, Sanja Perić, Marija Štanfel, Krešimir Mandić

Institution:

Department of Ophthalmology, Zagreb University Hospital Center

Aim:

To analyse the incidence and treatment outcomes zone I retinopathy of prematurity before and during anti-VEGF era

Patients and methods:

Seven-years, hospital-based, retrospective study included all premature infants born in January 2007 till December 2013, screened for retinopathy of prematurity. The eyes with zone I retinopathy of prematurity were analysed. Treatment with diode laser according to ETROP study was the first therapy. When the laser therapy failed, additional salvage therapy was 0.625 mg (0.025 ml) intravitreal bevacizumab. Follow-up period was at least 6 months.

Results:

Seven years retrospective study included 1348 screened premature infants. 181 eyes (12.27%) , of 91 neonates, with zone I retinopathy of prematurity were analysed. 68 eyes (4.61%) had APR-ROP. Diode laser treatment alone failed in 29.55% eyes with zone I ROP before anti VEGF era. Later, diode laser treatment and, if needed, additional 0.625 mg IVT bevacizumab therapy was successful in 97.81% eyes. The most common unfavourable outcome was in eyes with APR-ROP. There were only 3 eyes with unfavourable outcome after we started additional intravitreal anti-VEGF therapy. There were not notable systemic side effects of intravitreal bevacizumab therapy during follow-up period

Conclusion:

: Intravitreal bevacizumab in a single dose of 0.625 mg was well tolerated and help to achieve better favourable outcome when standard laser therapy failed

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Doc.dr.sc.

Ime i prezime / First and Last Name:-First

Nenad

Ime i prezime / First and Last Name:-Last

Vukojević

16. Ivanka Petric Vicković

Naslov:

Program donacija rožnice

Autori:

Petric Vicković I, Lacmanović Lončar V, Vatavuk Z, Krolo I, Bagatin F, Tadić R

Ustanova:

Klinika za očne bolesti KBC Sestre milosrdnice

Cilj:

Prikazati način rada i rezultate eksplantacijskog programa rožnica u KBC Sestre milosrdnice

Bolesnici i metode:

Prikupljeni su podaci doniranih rožnica od 2012 do 2015.godine. Bolnički koordinator na dnevnoj bazi prikuplja podatke o umrlima u KBC Sestre milosrdnice

Rezultati:

Pristanak za donaciju organa i tkiva dobiven je od svih obitelji nakon razgovora. Broj eksplantiranih rožnica kod multiorganskih eksplantacija bio je konstantan u tom razdoblju, dok je kod rožnica dobivenih nakon prestanka rada srca zabilježen pad u 2014.godini.

Zaključak:

Uspjeh rožničnog donacijskog programa ovisi o više čimbenika koji uključuju bolničkog koordinatora za tkiva i organe kao i dobro postavljenu strukturu bolnice.

Title:

The cornea donation program

Authors:

Petric Vicković I, Lacmanović Lončar V, Vatavuk Z, Krolo I, Bagatin F, Tadić R

Institution:

University Department of Ophthalmology University Hospital "Sestre milosrdnice"

Aim:

To describe design and outcomes of cornea donation program in University Hospital Sestre milosrdnice.

Patients and methods:

Donor data were obtained from 2012 to 2015. During this period the transplant coordination team recorded on a daily basis the circumstances of death, medical contraindications and logistic problems.

Results:

All families were contacted during a face to face interview. Number of heart beating donors was constant in this period. Number of non heart beating donors was constant during 2012 and 2013, while the decrease of cornea donors was found in 2014.

Conclusion:

: The success of cornea donation program is related to several factors including hospital organ and tissue coordinator and hospital network.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.sc.

Ime i prezime / First and Last Name:-First

Ivanka

Ime i prezime / First and Last Name:-Last

Petric Vicković

17. Darko Batistić

Naslov:

Efekt subtenonskog anestetskog bloka na pozitivni intraokularni tlak

Autori:

Batistić D., Vatavuk Z., Bućan K., Belak M.

Ustanova:

KBC SPLIT / KBC SESTRE MILOSRDNICE

Cilj:

Istražiti promjene intraokularnog tlaka nakon primjene subtenonskog anestetskog bloka u kirurgiji katarakte i kombiniranoj phaco/PPV.

Bolesnici i metode:

U ovu prospективnu kliničku studiju uključeno je 10 očiju koje su bile podvrgnute fakoemulzifikaciji sa sekundarnom implantacijom IOL ili kombiniranoj Phaco/PCIOL + PPV. Koristeći subtenonsku kaniku spojenu na špricu od 5ml 4ml anestetika injicirano je u subtenonski prostor. IOT je izmjerena u supinacijskom položaju neposredno prije, neposredno nakon te nakon 2 i 5 minuta koristeći ručni Perkinsov tonometar

Rezultati:

Provadena mjerena nisu pokaza klinički značajan porast u intraokularnom tlaku.

Zaključak:

Subtenonski blok ne dovodi do signifikantnog povišenja intraokularnog tlaka kada se u subtenonski prostor injicira 4ml anestetika. Ovo naglašava sigurnost subtenonskog bloka u smanjivanju komplikacija koje su povezane sa povišenim intraokularnim tlakom na početku operacije kao što su pozitivan vitrealni tlak, ruptura stražnje kapsule, prolaps staklovine i korioidalno krvarenje.

Title:

Effect of sub-Tenon's local anesthesia on positive intraocular pressure

Authors:

Batistić D., Vatavuk Z., Bućan K., Belak M.

Institution:

Clinical hospital centre Split / Clinical hospital centre Sisters of Charity, Zagreb

Aim:

To evaluate IOP following sub-Tenon's local anesthesia for cataract and combined phacovitrectomy surgery.

Patients and methods:

These case series included 10 eyes of 10 patients undergoing phacoemulsification with secondary IOL implantation or combined Phaco /PCIOL + PPV. Using a subtenon's cannula mounted on a 5 ml syring 4 ml anesthetic solution was injected into the sub Tenon's space . IOP measurements were carried out in supine position immediately prior and immediately after, then 2 and 5 minutes after subtenon's injection using a Perkins hand held tonometer.

Results:

Measurements that were carried out have shown no clinical significant rise in IOP.

Conclusion:

No significant rise in IOP occurs following injection of sub-Tenon's local anesthesia when 4 ml of anesthetic is injected. This points to safety of sub-Tenon's local anesthesia in reducing complications associated with high IOP at the start of the surgery, such as positive vitreous pressure, posterior capsule rupture, vitreous prolapse and suprachoroidal hemorrhage.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Darko

Ime i prezime / First and Last Name:-Last

Batistić

18. Krešimir Mandić

Naslov:

Dinamika promjena drusa kod suhe forme senilne makularne degeneracije kroz 2 godine

Autori:

Mandić Krešimir, Katušić Damir, Vukojević Nenad, Jukić Tomislav, Štanfel Marija, Cerovski Branimir

Ustanova:

KBC Zagreb

Cilj:

Ispitati morfološke karakteristike drusa kod senilne makularne degeneracije (SMD) uz pomoć optičke koherentne tomografije i dinamiku njihovih promjena kroz 2 godine

Bolesnici i metode:

U razmaku od dvije godine retrospektivno su analizirane OCT snimke drusa kod 15 pacijenata sa suhom formom SMD.

Rezultati:

Trenutno su podaci za istraživanje u obradi.

Zaključak:

Očekujemo da će evidentirati određene forme drusa koje će pokazati izrazitije stanje unutarnjih slojeva retine

Title:

Dinamics of drusen changes in dry form of senile macular degeneration through period of 2 years

Authors:

Mandić Krešimir, Katušić Damir, Vukojević Nenad, Jukić Tomislav, Štanfel Marija, Cerovski Branimir

Institution:

KBC Zagreb

Aim:

Analyze morphological characteristics of drusen in senile macular degeneration with help of optical coherence tomography and dynamics of their changes through period of 2 years

Patients and methods:

Drusen OCT scans of 15 patients with dry form of senile macular degeneration will be analyzed with 2 years interval.

Results:

In progress.

Conclusion:

It is expected to find that some forms of drusen will more intensely damage inner retinal layers.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Krešimir

Ime i prezime / First and Last Name:-Last

Mandić

19. Ivan Ćavar

Naslov:

Psihološki aspekt kvalitete života, suočavanje sa stresom i metabolički čimbenici rizika u oboljelih od senilne makularne degeneracije

Autori:

Ivan Ćavar, Antonio Sesar, Renato Pejić, Irena Sesar, Kristina Kevilj, Anita Pušić Sesar

Ustanova:

Klinika za očne bolesti, Sveučilišna klinička bolnica Mostar

Cilj:

Cilj ovoga istraživanja bio je utvrditi povezanost između psihološkog aspekta kvalitete života, suočavanja sa stresom i metaboličkih rizičnih čimbenika (dob, pretilost, hipertenzija, hiperlipidemija, pušenje, konzumacija alkohola i lijekova, pozitivna obiteljska anamneza, izloženost sunčevom zračenju) i senilne makularne degeneracije (SMD).

Bolesnici i metode:

U istraživanje su bili uključeni bolesnici oboljeli od SMD (n=40) koji su činili ispitivanu skupinu i prezbiopi (n=63) koji su činili kontrolnu skupinu. Podaci su se prikupili ispunjavanjem upitnika kojim su se dobili opći podaci i opisale navike bolesnika, upitnika COPE kojim su se ispitivali načini reagiranja na stres te upitnika GHQ kojim se analizirao psihološki aspekt kvalitete života. Navedeni upitnici bili su osobno uručeni ispitnicima prilikom oftalmološkog pregleda. U istraživanje je bilo uključeno 46 (44.66%) muškaraca i 57 (55.33%) žena.

Rezultati:

Statistička obradba pokazala je da najveći rizik za obolijevanje od SMD čine povišene razine kolesterola, triglicerida i LDL kolesterola u krvi. Značajno veći broj bolesnika u ispitivanoj skupini imao je pozitivnu obiteljsku anamnezu u odnosu na kontrolnu skupinu. Ovo istraživanje pokazalo je da prezbiopi značajno bolje reagiraju u osjećajima usmjerenom suočavanju te da imaju niži stupanj socijalne disfunkcije u odnosu na bolesnike oboljele od SMD.

Zaključak:

Potrebno je provesti daljnja istraživanja na velikom broju bolesnika kako bi se točnije utvrdili patofiziološki mehanizmi metaboličkih čimbenika, kao i utjecaj bolesti na kvalitetu života u bolesnika sa SMD.

Title:

Psychological aspects of life quality, dealing with stress and metabolic risk factors in patients with age-related macular degeneration

Authors:

Ivan Ćavar, Antonio Sesar, Renato Pejić, Irena Sesar, Kristina Kevilj, Anita Pušić Sesar

Institution:

Eye Clinic, University Clinical Hospital Mostar

Aim:

The aim of this study was to determine the relationship between psychological well-being, coping with stress, the risk factors (age, obesity, hypertension, hyperlipidemia, smoking, consumption of alcohol and drugs, positive family history, and exposure to sunlight) and age-related macular degeneration (ARMD).

Patients and methods:

40 patients with ARMD (case group) and 63 presbyopes (control group) participated in the study. Patient data were collected through general information questionnaire including patient habits, the COPE questionnaire that showed the way the patients handling stress, and the GHQ that analyzed the psychological aspects of their quality of life. These questionnaires were administered to the patients during ophthalmologic examination. The study involved 46 (44.66%) men and 57 (55.33%) women.

Results:

Statistical analysis showed that the major risks for the development of ARMD were elevated cholesterol, triglycerides and LDL cholesterol in plasma. A significantly higher number of ARMD patients had a positive family history when compared with presbyopes. This study showed presbyopes to cope with emotional problems significantly better and to have a lower level of social dysfunction when compared with ARMD patients.

Conclusion:

It is necessary to conduct further studies in a large number of patients to determine more accurately the pathophysiological mechanisms of metabolic factors as well as the impact of the disease on the quality of life in patients with ARMD.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Doc.dr.sc.

Ime i prezime / First and Last Name:-First

Ivan

Ime i prezime / First and Last Name:-Last

Ćavar

20. Kristina Lončarić

Naslov:

Evaluacija centralne debljine rožnice mjerene ultrazvučnom pahimetrijom u očiju s endotamponadom silikonskim uljem nakon pars plana vitrektomije

Autori:

Kristina Lončarić, dr.med.; doc.dr.sc. Mia Zorić Geber; prof.dr.sc. Zoran Vatavuk; prof.dr.sc. Renata Ivezković

Ustanova:

Klinički bolnički centar Sestre Milosrdnice

Cilj:

Procijeniti promjenu centralne debljine rožnice (CDR) u pacijenta s endotamponadom silikonskim uljem nakon uspješne pars plana vitrektomije.

Bolesnici i metode:

Istraživanje je uključilo 43 pacijenta s regmatogenom ablacijom mrežnice na jednom oku. Svim pacijentima učinjena je 23 G pars plana vitrektomija s tamponadom silikonskim uljem. CDR ispitivanog oka i zdravog oka koje je služilo kao kontrola je mjerena ultrazvučnom pahimetrijom preoperativno te 7., 30., 90., i 180. dan postoperativno. Ispitivane oči su podijeljene u dvije podgrupe ovisno o vrijednosti intraokularnog tlaka (IOT). Uspoređene su vrijednosti između CDR ispitivanih i kontrolnih očiju, između očiju dviju podgrupa, te vrijednosti CDR s vake grupe i podgrupe kroz vrijeme.

Rezultati:

Operirane oči imaju značajno manju CDR (-5.74μ) u usporedbi s kontrolnim očima 180. dan postoperativno. Također, operirane oči imaju statistički značajno smanjenje CDR kroz vrijeme od početnih 548.35μ do završnih 537.19μ (-11.16μ, -2.04%). Nije bilo statistički značajne razlike u CDR između normalni IOT i povišen IOT podgrupe preoperativno i 180. dan postoperativno.

Zaključak:

Centralna debljina rožnice mjerena ultrazvučnom pahimetrijom u očiju s endotamponadom silikonskim uljem pokazala je stanjenje debljine kroz 6 mjeseci praćenja.

Title:

Evaluation of the central corneal thickness by ultrasound pachymetry in silicone filled eyes following pars plana vitrectomy

Authors:

Kristina Lončarić, MD; Mia Zorić Geber, MD, PhD; Zoran Vatavuk, MD, PhD; Renata Ivezković, MD, PhD

Institution:

Clinical Hospital Centre Sestre Milosrdnice

Aim:

To study differences in central corneal thickness (CCT) in patients who underwent successful retinal detachment repair surgery with silicone oil endotamponade.

Patients and methods:

Forty-three eyes that underwent 23 G pars plana vitrectomy and silicone oil tamponade for primary rhegmatogenous retinal detachment were included in the study. CCT of study eye and healthy fellow eye that served as a control was measured by ultrasound pachymetry preoperatively and 7th, 30th, 90th and 180th day postoperatively. Study eyes were recruited into two subgroups according to intraocular pressure (IOP) value. CCT measurements were compared between study and control eyes, and between subgroups at each visit as well as CCT measurements for each group and subgroup through the course of the study.

Results:

CCT was significantly lower in silicone filled eyes compared to fellow eyes on 180th day postoperatively (-5.74 μ). Silicone filled eyes had a statistically significant CCT decrease throughout time from initial 548.35 μ to final 537.19 μ (-11.16 μ , -2.04%). No statistically significant difference in CCT was found between normal IOP and raised IOP subgroup preoperatively and on 180th day postoperatively.

Conclusion:

CCT measured by ultrasound pachymetry exhibits thinning in eyes under silicone oil endotamponade over a 6 month period.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Kristina

Ime i prezime / First and Last Name:-Last

Lončarić

21. Tina Runjić

Naslov:

Utjecaj oštećenja vida na kvalitetu života bolesnika s glaukomom

Autori:

Runjić T.², Novak-Lauš K.¹, Vatavuk Z.¹, Penava V.²

Ustanova:

Klinika za očne bolesti Sestre milosrdnice¹; Odsjek za oštećenja vida Edukacijsko-rehabilitacijskog fakulteta Sveučilišta u Zagrebu²

Cilj:

Istraživanjem se željelo utvrditi utječe li stupanj oštećenja vida na kvalitetu života bolesnika s glaukomom.

Bolesnici i metode:

Istraživanjem je obuhvaćeno stopenadeset osoba s glaukomom (N=150) koji su pacijenti Klinike za očne bolesti KBC-

a Sestre milosrdnice. Svim ispitanicima je utvrđen glaukom i izmjerena vidna oštrina $\leq 0,5$ na boljem oku. Tijekom ispitivanja korištena su dva upitnika: Impact of Vision Impairment Profile (IVI) i Opći upitnik vlastite izrade. Mjerni instrument IVI je standardizirani upitnik koji sadrži 32 čestice namijenjene mjerenuju utjecaja oštećenja vida na svakodnevno funkciranje u pet domena. Odgovori na svakoj čestici Likertovog su tipa s 4 kategorije, rangirani od "nemam teškoća" do "ne mogu raditi zbog oštećenja vida". Dodatno je korišten i Opći upitnik vlastite izrade pomoći kojeg su prikupljeni demografski podatci te podatci povezani sa zdravstvenim statusom. Oba instrumenta primjenjena su tijekom intervjua koji se provodio u prostorijama ambulante za glaukom. Prikupljeni podatci obrađeni su statističkim paketom SPSS 22.0.

Rezultati:

Rezultati pokazuju da je IVI pouzdan i valjan instrument za mjerjenje kvalitete života bolesnika s glaukomom jer su se računanjem metrijskih svojstava upitnika IVI dobili koeficijenti pouzdanosti; Cronbach Alpha = 0,857 i Guttmanova lambda 6 = 0,935, a primjenjenom faktorskom analizom dobiveno je pet značajnih prepoznatih faktora. Programom za diskriminacijsku analizu utvrđen je značajan utjecaj vidne oštine bolesnika s glaukomom na cijelokupnom prostoru kvalitete života. Rezultati ukazuju na to da oštećenje vida kod pacijenata s glaukomom utječe na svih pet domena, mjernih IVI profila. Prema subjektivnoj procjeni samih pacijenata utjecaj oštećenja vida najviše je iskazan u području Orientacije i kretanja, Emocionalnom području te području Dostupnosti informacija. Iako prisutan, znatno je manji utjecaj oštećenja vida iskazan u području varijabli Svakodnevnih aktivnosti te varijabli Slobodnog vremena.

Zaključak:

Vidna oštrina značajno utječe na kvalitetu života kod glaukomskih bolesnika.

Title:

The impact of visual impairment on quality of life of glaucoma patients

Authors:

Runjić T.², Novak-Lauš K.¹, Vatavuk Z.¹, Penava V.²

Institution:

Department of Ophthalmology at the Sisters of Charity Hospital¹; Department of Visual Impairments at the Faculty of Education and Rehabilitation Sciences²

Aim:

The aim of this research was to determine if the degree of visual impairment affects the quality of life of glaucoma patients.

Patients and methods:

The sample was consisted of hundred and fifty ($N=150$) glaucoma patients of the Department of Ophthalmology at the Sisters of Charity Hospital. Every patients was diagnosed with glaucoma and their visual acuity was $\leq 0,5$ on the better eye. During the research, two questionnaires were used: Impact of Vision Impairment Profile (IVI) and General questionnaire (built for the purpose of the research). The instrument IVI is standardized questionnaire consisted of 32 items which measure the impact of visual impairment on everyday functioning, divided into 5 domains. Possible answers on each of the Likert-type scale item were divided into 4 categories, ranged from „No difficulties“ to „Cannot perform because of the visual impairment“. Additionally, General questionnaire was used to collect the information about sociodemographic data and health-related data. Both questionnaires were applied during the interviews in Glaucoma Clinic. Collected data have been analysed with statistic software package SPSS 22.0.

Results:

The results of the research show that IVI questionnaire is a reliable and valid instrument for measuring quality of life of glaucoma patients. Calculating the metric characteristics of the questionnaire has shown that there are coefficients of reliability; Cronbach's Alpha =0,857 and Guttman-Nicewander's Lambda-6 = 0,935, and applying factor analysis has result in 5 significant factors. Discriminant analysis proved a significant impact of the visual acuity of glaucoma patients on the entire domain of quality of life. The results of the research show that visual impairment of glaucoma patients affects all five domains tested with IVI Profile. According to the subjective assessment of the patients, the influence of the visual impairment is highest in the Orientation and mobility domain, Emotional domain and the Information accessibility domain. Although present, the influence of the visual impairment is significantly lower in the Everyday activities domain and Leisure time domain.

Conclusion:

Based on the results of the research, it is justified to conclude that visual impairment has a significant impact on the quality of life of glaucoma patients.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Prof.dr.sc.

Ime i prezime / First and Last Name:-First

Tina

Ime i prezime / First and Last Name:-Last

Runjić

22. Roberta Šokac

Naslov:

Subkonjunktivalna dirofilarijaza

Autori:

dr.med.R.Šokac,doc.dr.sc.dr.med. S.Matić,doc.dr.sc.dr.med. D.Biuk

Ustanova:

KBC Osijek

Cilj:

prikaz slučaja bolesti koja do sada nije zabilježena u našoj ustanovi,a prvi je slučaj u nizu od šest slučajeva od sredine 12. mjeseca 2014. do kraja veljače 2015.

Bolesnici i metode:

I pacijent,prikaz slučaja

Rezultati:

Dirofilarijaza je zoonoza koju uzrokuje okrugli crv i koja rijetko zahvaća čovjeka.Najčešći domaćin su pas i mačka,a nužan vektor za prijenos bolesti su komarci,puno rjeđe muhe i krpelji.Čovjek je slučajni domaćin u kojem parazit ne doseže spolnu zrelost te se ne može razmožavati.Najčešće je riječ o solitarnoj infestaciji koja se manifestira sukutanim čvorom,subkonjunktivalnom ili plućnom lokalizacijom te koja ne mora uzrokovati eozinofiliju periferne krvi.

Terapija je ekstrakcija parazita.

Zaključak:

Dirofilarioza je bolest na koju treba misliti u oftalmološkoj diferencijalnoj dijagnostici.

Title:

Subconjunctival dirophilariosis

Authors:

MD R.Šokac,doc.dr.sc.MD S.Matić,doc.dr.sc.MD D.Biuk

Institution:

KBC Osijek

Aim:

case report of a disease which has not been noted in our institution, and which occurred as first of six cases from the middle of December of 2014.till the end of February of 2015.

Patients and methods:

1 patient, case report

Results:

Dirofilariasis is a zoonotic disease that is caused by round worm and rarely affects human. The most frequent hosts are dogs and cats, and an essential vector for the transmission of disease are mosquitoes, and a lot less flies and ticks. Human is an accidental host in which parasites do not reach sexual maturity and can not reproduce. Most commonly it is a solitary infestation that manifests itself with subcutaneous node, subconjunctival or pulmonary localization that does not have to cause peripheral blood eosinophilia.

The treatment is extraction of the parasite.

Conclusion:

Dirofilariasis is a disease that has to be considered in ophthalmological differential diagnosis.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Roberta

Ime i prezime / First and Last Name:-Last

Šokac

23. Kajo Bućan

Naslov:

Ima li dijabetična retinopatija prognostički značaj za razvoj dijabetične kardiompatije?

Autori:

Bućan Kajo, Fabijanić Damir, Bojić Lovro, Galetović Davor.

Ustanova:

KBC Split-Klinika za očne bolesti, Klinika za unutarnje bolesti

Cilj:

Ciljevi rada bili su odrediti u bolesnika sa šećernom bolesti tip 1 (ŠBT1) i klinički (ne)evidentnom dijabetičkom retinopatijom s ili bez mikroalbuminurije asimptomatsku sistoličku disfunkciju lijeve srčane klijetke te utvrditi povezanost trajanja ŠBT1 s pojmom dijabetičke retinopatije, mikroalbuminurije i asimptomatske sistoličke disfunkcije lijeve srčane klijetke.

Bolesnici i metode:

Ispitano je 120 odabranih bolesnika sa ŠBT1 (normotenzivni, bez dijabetičke neuropatije), koji su svrstani s obzirom na nalaz fundoskopije (oftalmoskopski, fundus fotografija i fluoresceinska angiografija) i mikroalbuminurije (turbodimetrijskom metodom), u tri skupine: a) bolesnici bez dijabetičke retinopatije i bez mikroalbuminurije (N=40); b) bolesnici s dijabetičkom retinopatijom bez mikroalbuminurije (N=40); c) bolesnici s dijabetičkom retinopatijom i mikroalbuminurijom (N=40). Kod svih bolesnika izvršeno je ergometrijsko testiranje i ehokardiografsko ispitivanje dvodimenzijском (2-D) i pulsnom Doppler-ehokardiografskom tehnikom.

Rezultati:

Kod sve tri skupine bolesnika sa ŠBT1 (niskog profila kardiovaskularnog rizika, uredne reguliranosti i bez dijabetičke neuropatije) srednje vrijednosti ehokardiografskih varijabli bile su unutar referentnih vrijednosti. Nismo utvrdili statistički značajnu povezanost između trajanja ŠBT1 i ispitivanih ehokardiografskih varijabli.

Zaključak:

1.

Kod sve tri skupine bolesnika sa ŠBT1 (s niskim profilom kardiovaskularnog rizika i bez dijabetičke neuropatije) (skupina 1 bez mikroangiopatskih komplikacija, skupina 2 s dijabetičkom retinopatijom, skupina 3 s dijabetičkom retinopatijom i mikroalbuminurijom) srednje vrijednosti svih ispitivanih ehokardiografskih varijabli su unutar referentnih vrijednosti.

2.

Između skupine bolesnika s dijabetičkom retinopatijom i skupine bolesnika s dijabetičkom retinopatijom i mikroalbuminurijom zajedno (skupina 2 i 3) utvrdili smo statistički značajnu razliku u vrijednostima ehokardiografskih varijabli prema skupini bolesnika bez komplikacija (skupina 1).

3.

Nismo našli statistički značajne razlike vrijednosti ehokardiografskih varijabli između skupine bolesnika sa ŠBT1 i dijabetičkom retinopatijom i skupine bolesnika sa ŠBT1 s dijabetičkom retinopatijom i mikroalbuminurijom.

4.

Utvrđena je statistički značajna povezanost između trajanja ŠBT1 i nazočnosti dijabetičke retinopatije i mikro-

lbuminurije.

5. Sistolička funkcija, iskazana kao EF lijeve klijetke, bila je unutar referentnih vrijednosti kod svih bolesnika.

6.

Rezultati ispitivanja pokazuju da nema statistički značajne povezanosti između dijabetičke retinopatije i EF <71% kao ni između dijabetičke retinopatije i mikroalbuminurije i EF <71%.

7. Utvrdili smo da nema povezanosti između EF <71% i trajanja bolesti.

Title:

Does diabetic retinopathy prognostic significance for the development of diabetic cardiomyopathy?

Authors:

Bućan Kajo, Fabijanić Damir, Bojić Lovro, Galetović Davor.

Institution:

Clinical Hospital C Splitentre- Department of Ophthalmology and Department of Internal Disease

Aim:

The aims of this study were to determine the prevalence of asymptomatic left ventricle systolic dysfunction in patients with diabetes mellitus type I and with or without diabetic retinopathy and microalbuminuria. Second aim was to correlate duration of the diabetes with the dynamics of diabetic retinopathy, microalbuminuria, and asymptomatic left ventricle dysfunction development in patients with diabetes mellitus type I.

Patients and methods:

One-

hundred and twenty chosen patients with diabetes type I were examined by ophthalmologist and cardiologist. All patients did ergometric testing and two-dimensional (2-D) echocardiography with pulsed Doppler. Patients were divided in three groups accordingly to their fundus findings and microalbuminuria: a) patients without diabetic retinopathy and without microalbuminuria (N=40); b) patients with diabetic retinopathy without microalbuminuria (N=40); c) patients with diabetic retinopathy and microalbuminuria (N=40). All three groups of patients with diabetes mellitus type I (with low cardiovascular risk, regulated blood sugar, and without diabetic neuropathy) had echocardiographic values in the normal range.

Results:

All three groups of patients with diabetes mellitus type I (with low cardiovascular risk, regulated blood sugar, and without diabetic neuropathy) had echocardiographic values in the normal range. We have not found statistically significant correlation between the duration of diabetes mellitus type I and echocardiographic values.

Conclusion:

1.

Mean values of all echocardiographic variables examined in this study were within normality range in every of three groups of examined patients with DM1 (with low cardiovascular risk, and without diabetic neuropathy).

2.

There were a significant differences in echocardiographic variables among group of patients without complications (group 1) when compared with group of patients with DR and microalbuminuria altogether (group 2 and 3).

3.

There was no significant difference in echocardiographic variables between the group of patients with DM1 and

DR and the group of patients with DM1, diabetic retinopathy, and microalbuminuria.

4. There was significant correlation between the duration of DM1, presence of DR, and microalbuminuria.

5. Systolic function, expressed as left ventricle EF, was normal in all patients.

6.

There was no significant correlation between DR and EF <71%, nor between DR, microalbuminuria, and EF < 71%.

7. We have found that there was not any correlation between EF <71% and the duration of the disease.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Prof.dr.sc.

Ime i prezime / First and Last Name:-First

Kajo

Ime i prezime / First and Last Name:-Last

Bućan

24. Renato Pejić

Naslov:

Desetogodišnja retrospektivna analiza ozljeda oka u SKB Mostar

Autori:

Renato Pejić, Antonio Sesar, Ivan Ćavar, Anita Pušić Sesar, Kristina Kevilj, Irena Sesar.

Ustanova:

Sveučilišna klinička bolnica Mostar

Cilj:

Prikazati vrstu i obilježja ozljeda oka u pacijenata liječenih u SKB Mostar u razdoblju od 2005. do 2015. godine.

Bolesnici i metode:

Obrađeni su svi slučajevi ozljeda oka primljeni i liječeni u SKB Mostar u razdoblju od 2005. do 2015. godine. Podaci su analizirani s obzirom na vrstu ozljede oka (otvorene i zatvorene), dob, spol i okolnosti nastanka ozljede (kod kuće, na radnom mjestu, promet, rekreacija, sport).

Rezultati:

U razdoblju od 2005. do 2015. godine hospitalizirana su ukupno 354 pacijenta zbog ozljeda oka. Udio zatvorenih ozljeda oka iznosio je 56.49%, dok su otvorene ozljede oka činile 43.51%. Većina ozlijedjenih bili su muškarci (82.48%) u dobi od 18 do 65 godina (66.68%), te se većina ozljeda dogodila kod kuće ili je bila povezana s radom.

Zaključak:

Ozljede oka su značajan uzrok oštećenja vida u pacijenata liječenih u SKB Mostar te imaju relativno visoku zastupljenost u usporedbi sa sličnim istraživanjima u svijetu.

Title:

A ten-year retrospective analysis of ocular trauma in University Clinical Hospital Mostar

Authors:

Renato Pejić, Antonio Sesar, Ivan Ćavar, Anita Pušić Sesar, Kristina Kevilj, Irena Sesar

Institution:

University Clinical Hospital Mostar

Aim:

To determine characteristics of ocular trauma in patients who were treated in University Clinical Hospital Mostar in the period from January 2005 to January 2015.

Patients and methods:

All cases of ocular trauma, who were admitted and treated in the University Clinical Hospital Mostar from 2005 to 2015, have been analysed for open or closed globe injury, age, sex and cause of injury (home-related, work-related, traffic, recreation, sport-related).

Results:

In the period from January 2005 to January 2015, totally 354 patients were hospitalized due to ocular trauma. Percent of closed globe injuries was 56.49% in comparison to 43.51% for opened globe injuries. Most of the injured were men (82.48%) in the age of 18-65 years (66.68%). Most injuries occurred at home or were work-related.

Conclusion:

According to our findings, ocular trauma is significant cause of visual impairment in patients treated in University Clinical Hospital Mostar. Compared to other similar studies, we noticed relatively higher incidence of ocular trauma in our population.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Renato

Ime i prezime / First and Last Name:-Last

Pejić

25. Antonio Sesar

Naslov:

Pseudo-Foster Kennedy sindrom: prikaz slučaja

Autori:

Antonio Sesar, Ivan Ćavar, Anita Pušić Sesar, Renato Pejić, Ivana Soldo, Irena Sesar

Ustanova:

Sveučilišna klinička bolnica Mostar

Cilj:

Prikaz slučaja četrnaestogodišnje djevojčice s Pseudo-Foster Kennedy sindromom.

Bolesnici i metode:

Prikazan je slučaj četrnaestogodišnje djevojčice s edemom papile vidnog živca i edemom makule na desnem oku uz atrofiju vidnog živca na lijevom oku. Provedena je standardna oftalmološka obrada, neuroradiološka snimka, pedijatrijski i otorinolaringološki pregledi te opsežna laboratorijska dijagnostika.

Rezultati:

Oftalmološkim pregledom utvrđeno je smanjenje najbolje korigirane vidne oštchine desnog oka (0.82 logMAR) i amauroza lijevog oka. Pregledom očne pozadine utvrđi se izražen edem papile vidnog živca i makule desnog oka, dok je na lijevom oku papila vidnog živca blijeda uz vidljivu atrofiju u makularnom području. Biokemijske i serološke pretrage krvi isključile su autoimuni proces i infektivne uzročnike. Neuroradiološka ispitivanja su pokazala odsustvo demijelinizacije i ekspanzivnog intrakranijskog procesa uz upalne promjene u paranasalnim sinusima.

Zaključak:

Provedena dijagnostička obrada upućuje na neuroretinitis desnog oka koji je nastao kao posljedica upalnih promjena u paranasalnim sinusima.

Title:

Pseudo-Foster Kennedy syndrome: a case report

Authors:

Antonio Sesar, Ivan Ćavar, Anita Pušić Sesar, Renato Pejić, Ivana Soldo, Irena Sesar

Institution:

University Clinical Hospital Mostar

Aim:

Case report of 14-year old girl with Pseudo-Foster Kennedy syndrome.

Patients and methods:

Case report presents 14-year old girl with papilledema and macular edema in the right eye and with atrophy of the optic nerve in the left eye. It was performed standard ophthalmologic examination, neuroradiological procedures, pediatric and otolaryngological examinations, and extensive laboratory diagnostics.

Results:

Ophthalmologic examination revealed decrease in best-corrected visual acuity of the right eye (0.82 logMAR) and blindness of the left eye. Fundus findings of the right eye indicated extensive papilledema and macular edema compared to pale optic disc and macular atrophy on the left eye. Biochemical and serological blood tests excluded the presence of autoimmune disorders or infectious agents. Neuroradiological examinations have shown the absence of demyelination and expansive intracranial process, and in addition showed inflammatory changes in paranasal sinuses.

Conclusion:

Conducted diagnostic procedures indicate that the neuroretinitis of the right eye was the result of inflammatory changes in the paranasal sinuses.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Doc.dr.sc.

Ime i prezime / First and Last Name:-First

Antonio

Ime i prezime / First and Last Name:-Last

Sesar

26. Mladen Lešin

Naslov:

Rekonstrukcija gornje vjeđe: prikaz dva slučaja

Autori:

Mladen Lešin

Ustanova:

KBC Split, Klinika za očne bolesti

Cilj:

Prikazati dva slučaja rekonstrukcije gornje vjeđe

Bolesnici i metode:

Slučaj 1. 35 godina star muškarac, ozlijeden staklenom čašom. Pri prijemu nađe se laceracija pune debljine i une širine gornje vjeđe lčijevog oka sa laceracijom rožnice pune debljine od 3-9 sati. Slučaj 2: 67 godišnji muškarac s tumorom gornje vjeđe desnog oka veličine 4x3 cm.

Rezultati:

Slučaj 1:Nakon šivanja rožnice i sklere pristupi se rekonstrukciji gornje vjeđe. Šivanje u slojevima s posebnom pažnjom na levator.

Slučaj 2: rekonstrukcija prednje lamele slobodnim tarzokonjunktivalnim režnjem uz potporu periostalnog režnja i rednje lamele transpozicijskim režnjem obrazu u dva akta.

Zaključak:

Rekonstrukcije gornje vjeđe predstavljaju izazov za operatera i mogu rezultirati zadovoljavajućim ishodom.

Title:

Upper eyelid reconstruction: report of two cases

Authors:

Mladen Lesin

Institution:

Department of ophthalmology, University hospital center Split

Aim:

To report two cases of different upper eyelid reconstruction.

Patients and methods:

Case 1: A 30-year-old man was hit with a broken glass. One hour after injury he presented with full thickness and whole length laceration of the left upper eyelid, located 10 mm above upper tarsal border. His cornea and sclera on the limbus were lacerated from 3 to 9 o'clock. Case 2: A 67 year old man with 4x3 cm large tumor of his right upper eyelid involving lateral canthus.

Results:

Case 1: Firstly, limbus, sclera and cornea were sutured. After that the eyelid was sutured. Special care was taken to the levator muscle. Orbicularis and skin were sutured in another two layers.

Case 2: Posterior lamellar reconstruction with tarsoconjunctival free graft and periostal graft support. Anterior lamellar reconstruction with transposed cheek graft.

Conclusion:

A large upper eyelid defects represent a challenge for operators and can result in satisfactory aesthetic and functional results.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Mladen

Ime i prezime / First and Last Name:-Last

Lešin

27. Mladen Lešin

Naslov:

Postoperativna bol kod složenih oftalmoloških operacija: usporedba prakse sa smjernicama

Autori:

Mladen Lešin 1, Željka Duplančić-Šundov 1, Marko Jukić 2, Livia Puljak 3

Ustanova:

1 KBC Split, Klinika za očne bolesti, 2 KBC Split, Klinika za anesteziju, reanimaciju i intenzivno liječenje, 3 Medicinski fakultet u Splitu, Laboratorij za istraživanje boli

Cilj:

Analizirati liječenje postoperativne boli nakon složenih očnih operacija i usporediti sa smjernicama.

Bolesnici i metode:

Bolesnici (N=447) podvrgnuti kompleksnim oftalmološkim operacijama u općoj anesteziji od 2008 do 2012. Slike deči podatci su izuzeti iz povijesti bolesti: dob, spol, tip i doza premedikacije, preoperativni fizički status, tip operacije, trajanje operacije – operacijsko i anesteziološko vrijem, tip i doza anestetika, tip i doza postoperativne analgezije za svaki postoperativni dan.

Rezultati:

Nitko od bolesnika nije imao podatke o boli u povijesti bolesti. Bilo je 90% bolesnika koji nisu primili medikaciju u noć prije operacije, 54% nije primilo premedikaciju neposredno pred operaciju, 19% nije primilo analgeziju u operacijskoj dvorani i 46% bolesnika nije primilo analgetik u bolesničkoj sobi. Između onih koji su primili analgeziju, 98% je primilo samo jednu dozu, i 93% su primili samo na dan operacije. Nije bilo intenzivnog monitoriranja bolesnika nakon operacije, i u promatranom razdoblju nije bilo provođenja ikakve edukacije o boli od strane anesteziologa prema medicinskom osoblju na Klinici.

Zaključak:

Liječenje postoperativne boli i perioperativna skrb za bolesnike podvrgnute težim oftalmološkim kirurškim zahvatima pokazuje manjkavosti prema problemu postoperativne boli i upotrebe analgetika. Neophodno je provesti odgovarajuće intervencije da bi se popravilo postoperativno liječenje boli i omogućio brži oporavak naših bolesnika.

Title:

Postoperative pain in complex ophthalmic surgical procedures: comparing practice with guidelines

Authors:

Mladen Lesin, MD, MSc¹, Zeljka Duplancic Sundov, MD¹, Marko Jukic, MD, PhD², Livia Puljak, MD, PhD^{3}*

Institution:

1Department of Ophthalmology, University Hospital Split, Split, Croatia 2Department of Anesthesiology, Reanimation and Intensive Care, University Hospital Split, University of Split School of Medicine, Split, Croatia 3Laboratory for Pain Research, University of Split School of Medicine, Split, Croatia

Aim:

To analyze management of postoperative pain after complex ophthalmic surgery and to compare it to the guidelines.

Patients and methods:

Patients (N=447) who underwent complex ophthalmic surgical procedures from 2008 to 2012. The following data were extracted from patient medical records: age, gender, type and dosage of premedication, preoperative patient's physical status, type of procedure, duration of procedure – operating and anesthesia time, type and dosage of anesthesia, type and dosage of postoperative analgesia for each postoperative day.

Results:

None of the patients had information about pain intensity in their records. There were 90% patients who did not receive any medication the night before surgery, 54% did not receive any premedication immediately before surgery, 19% did not receive any pain medication after the surgery in the operating room and 46% of patients did not receive any analgesics after being released to the ophthalmology department. Among those who received an analgesic after surgery, 98% received only one dose of an analgesic, and 93% of patients received analgesia only on the day of the surgery. Furthermore, patients were returned to the department immediately after surgery, without intensive monitoring, and during the analyzed five years there were no educational session organized by a anesthesiologist to the ophthalmic surgeons.

Conclusion:

Postoperative pain management and perioperative care of patients undergoing major ophthalmic surgery indicates lack of attention towards pain intensity and postoperative analgesia. Appropriate interventions should be employed to improve postoperative pain management, to facilitate patient recovery.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Mladen

Ime i prezime / First and Last Name:-Last

Lešin

28. Renata Ivezović

Naslov:

Zlatni implantati vjeda kod lagoftalmusa

Autori:

Ivezović R, Zrinščak O, Vatavuk Z

Ustanova:

Klinika za očne bolesti KBC "Sestre milosrdnice"

Cilj:

Prikazani su rezultati primarne ugradnje zlatnih implantata smještenih preseptalno i rezultati nakon korekcije lagoftalmusa.

Bolesnici i metode:

Retrospektivna studija 7 bolesnika sa 7 ugrađenih zlatnih implantata ugrađenih pretarsalno u gornje vjede. Revizija ugrađenih implantata izvršena je kod slučajeva kod kojih je bilo potrebno ponovno namještanje, odstranjen je ili izmjenjujući implantata. Ocjena rezultata, uključujući estetski dojam, proveo je nezavisni recenzent na slijepo fotografirajući vjede preoperativno i 6 mjeseci nakon operacije.

Rezultati:

Srednje razdoblje praćenja bilo je 2.5 godine.

Dvije vjede koje nisu operirane na našoj Klinici zahtjevale su revizije. Indikacije su bile ekstruzija i pomak implantata iz ležišta.

Kod 7 bolesnika operiranih na Klinici za očne bolesti samo jedna revizija bila je potrebna.

Zaključak:

Zlatni implantati vjeda su uspješna metoda terapije simptoma lagoftalmusa. Moguće komplikacije su loši izgled vjeda, micanje implantata, ekstruzija, alergija i astigmatizam.

Pretarsalni smještaj bio je uspješan u terapiji lagoftalmusa. Kod jednog bolesnika bila je potrebna revizija implantata. Glavne indikacije za reviziju implantata koji nisu ugrađeni na našoj Klinici bili su nezadovoljavajući izgled, protruzija implantata ili nepravilni rub vjeda.

Title:

Gold weight implants in upper eyelids in lagophthalmos

Authors:

Ivezović R, Zrinščak O, Vatavuk Z

Institution:

Klinika za očne bolesti KBC "Sestre milosrdnice"

Aim:

The authors looked at indications and results of primary gold weights inserted using a high pretarsal placement and outcomes following correction.

Patients and methods:

A retrospective review of 7 consecutive primary gold weight implants in 7 patients with lagophthalmos in a single centre over a 3-

year period. Implant placement utilised a combined high pretarsal placement. Revision surgery included repositioning, removal or exchange. Blinded assessment of eyelid parameters, including cosmesis, was performed by an independent reviewer using photographs from each revision case taken preoperatively and 6 months postoperatively.

Results:

Mean follow-

up 2.5 years. Two eyelids not operated on Eye Clinic required further revisions. Indications included prominent implants and extrusion. Revisions consisted of replacement or removal. Following final revision, eyelid contour returned to normal.

In 7 patients operated on Eye Clinic only one revision was performed.

Conclusion:

Gold weights are effective for upper eyelid loading in patients with lagophthalmos. Complications include poor cosmesis, migration, extrusion, allergy and astigmatism.

High pretarsal placement was successful in treating lagophthalmos, with a complication rate of 1 in 6 requiring a revision procedure, the majority within 12 months. Main indications were unsatisfactory cosmesis from prominence of implant and poor eyelid contour.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Prof.dr.sc.

Ime i prezime / First and Last Name:-First

Renata

Ime i prezime / First and Last Name:-Last

Iveković

29. Josipa Marin Lovrić

Naslov:

Utjecaj fakoemulzifikacije na endotel rožnice i centralnu debljinu makule u bolesnika sa šećernom bolesti tip 2

Autori:

Josipa Marin Lovrić, Anita Matas, Kristina Ivanišević, Ivana Džaja, Vesna Čapkun, Ljubo Znaor, Kajo Bućan

Ustanova:

KBC Split, Klinika za očne bolesti

Cilj:

Procjena učestalosti i/ili progresije makularnog edema i oštećenja endotela rožnice nakon operacije katarakte u bolesnika s i bez šećerne bolesti tip 2.

Bolesnici i metode:

Bolesnici s kataraktom podijeljeni su u tri skupine: bolesnici bez šećerne bolesti, bolesnici sa šećernom bolesti t ip 2 bez dijabetične retinopatije i bolesnici s neprroliferacijskom dijabetičnom retinopatijom. Potonji su bili podi jeljeni u skupine s ili bez klinički značajnog makularnog edema. Svi bolesnici su operirani tehnikom fakoemulzif ikacije od istog operatera. Svakom bolesniku je predoperativno napravljena fotografija fundusa te je izmjerena centralna debljina makule (optičkom koherentnom tomografijom -

Cirrus HD - OCT 5000, Zeiss). Osim toga, izmjerena je spekularnom mikroskopijom (Tomey EM-3000) gustoća endotelnih stanica rožnice (CD) i središnja debljina rožnice (CCT). Polimegatizam i polimorfiza m su prikazani koeficijentom varijacije (CV) i postotkom heksagonalnih stanica (HEXA). Bolesnici su poslijeoperacijski praćeni u tri navrata: sedam dana te jedan i tri mjeseca nakon operacije. Prilikom svakog posjeta određena je najbolja korigirana vidna oštrina (BCVA).

Rezultati:

U kontrolnoj i ispitivanoj skupini bilo je po 30 očiju. Medijan dobi u ispitivanoj skupini bio je 73 godine (min-max; 60-86), a trajanje dijabetesa 8,5 godina (4-40). Bilo je 50% očiju bez dijabetične retinopatije (DR), 44% sa DR, a učestalost makularnog edema bila je 6%. Preoperativno, u bolesnika sa šećernom bolesti, medijan centralne makularne debljine(CST) bio je 253 μ m (221-491), volumen makularnog područja(VC) 9,4mm³ (7-11,8), a prosječno zadebljanje makularnog područja (CAT) 277 μ m (221-329). Razlika u parametrima makule (CST, VC) pre- i postoperativno nakon 7 dana bila je statistički značajna (Wilcoxon test, Z=2,3 p=0,020; Z=3,0 p= 0,002), a podaci za ostalo razdoblje praćenja su u izradi. U svim skupinama bolesnika sa šećernom bolesti nije bilo statistički značajne razlike u promjeni parametara makule pre- i postoperativno (Z=0,521 p=0,602). Trajanje šećerne bolesti nije koreliralo s promjenom centralne debljine makule (Spearman test; ρ=0,306 p=0,205), volumenom makularnog područja(ρ=-0,236 p=0,436) kao ni s prosječnim zadebljanjem makularnog područja (ρ=-0,078 p=0,775). Potreba za inzulinskom terapijom nije se statistički značajno razlikovala između skupina (Fischer test, p=1,000) te nisu bili povezani s većim porastom makularnih parametara postoperativno(ρ=0,485 p=0,185). Postoperativna vidna oštrina (BCVA) u logMAR ljestvici nije se razlikovala između ispitivanih skupina (ρ=0,176 p=0,514). Promjene parametara rožnice (CCT, CD, CV, HEXA) bile su slične u svim skupinama tijekom razdoblja praćenja. Između skupina nije bilo statistički značajne razlike prema dobi, spolu, omjeru lijevog i desnog oka, kao i u intraoperacijskim parametrima.

Zaključak:

Suvremena metoda operacije katarakte nema utjecaja na progresiju dijabetične makulopatije tijekom prvi sедam dana nakon operacije. Bolesnici bi trebali upućeni da je konačni ishod vidne oštine ovisan i o samoj prirodi bolesti, pa je nužno redovito praćenje takvih bolesnika.

Title:

Effect of phacoemulsification on corneal endothelium and central macular thickness in patients with diabetes mellitus type 2

Authors:

Josipa Marin Lovrić, Anita Matas, Kristina Ivanišević, Ivana Džaja, Vesna Čapkun, Ljubo Znaor, Kajo Bućan

Institution:

KBC Split, Department of Ophthalmology

Aim:

To assess the incidence or progression of macular edema and corneal endothelial cell damage after cataract surgery in patients with and without diabetes mellitus type 2.

Patients and methods:

Patients undergoing cataract surgery were divided into following groups: age-matched non diabetics, diabetics without diabetic retinopathy and with nonproliferative diabetic retinopathy. Latter were divided into groups with or without clinically significant macular edema (CSME). All patients underwent surgery using phacoemulsification technique of the same operator. Each eye underwent fundus photography before surgery and central macular thickness was measured using optical coherence tomography (Cirrus HD – OCT 5000, Zeiss). Corneal endothelial cell density (CD) and central corneal thickness (CCT) were measured using a specular microscope (Tomey EM-3000). Also polymegathism and pleomorphism were assessed by coefficient of variance (CV) and percentage of hexagonal cells (6A). Patients were followed up postoperatively in three occasions: 7 days, 1 and 3 months after surgery. Best-corrected visual acuity (BCVA) was recorded at each visit.

Results:

In the control and study group was 30 eyes per group. The median age in the study group was 73 years (min-max; 60-86), and duration of diabetes was 8.5 years (4-40). There were 50% of eyes without diabetic retinopathy (DR), 44% with DR, and the frequency of macular edema (CSME) was 6%. Preoperatively, in diabetic patients, the median central macular thickness (CST) was 253 μ m (221-491); volume macular area (VC) 9,4mm³ (7 to 11.8), and the average thickness of macular area (CAT) 277 μ m (221-329). The difference in the parameters of the macula (CST, VC) pre- and postoperatively after 7 days was statistically significant (Wilcoxon test, Z = 2.3, p = 0.020; Z = 3.0, p = 0.002), data for further follow-up are in processing. In all diabetic groups, there was not statistically significant difference in the change of the parameters of the macula pre- and postoperatively (Z = 0.521, p = 0.602). Duration of diabetes was not correlated with the change in the central macular thickness (Spearman test; ρ = 0.306, p = 0.205), volume macular area (ρ = -0.236, p = 0.436) nor with the average thickening of the macular area (ρ = -0.078, p = 0.775). The need for insulin therapy was not significantly different between groups (Fischer test, p = 1.000) and were not associated with a greater increase in macular parameters postoperatively (ρ = 0.485, p = 0

.185). Postoperative visual acuity (BCVA) in logMAR scale did not differ between groups ($p = 0.176$, $p = 0.514$). Parameter changes of the cornea (CCT, CD, OR, HEXA) were similar in all groups during follow-up. Between the groups there were no statistically significant differences by age, sex, the ratio of the left and right eye, as well as intraoperative parameters.

Conclusion:

Modern cataract surgery has no effect on the progression of diabetic maculopathy in first seven days postoperatively. However, patients should be informed that the final outcome of visual acuity also depends on the nature of the disease so careful monitoring and regular check-ups are strongly recommended.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Josipa

Ime i prezime / First and Last Name:-Last

Marin Lovrić

30. Smiljka Popović Suić

Naslov:

Suvremeni koncept liječenja uznapredovalog glaukoma; trebamo li više operirati?

Autori:

Smiljka Popović Suić, Sonja Jandroković

Ustanova:

Klinika za očne bolesti KB Zagreb, Medicinski fakultet Sveučilišta u Zagrebu

Cilj:

predstaviti podatke iz dostupne literature o suvremenom terapijskom pristupu uznapredovalom glaukomu

Bolesnici i metode:

meta analiza

Rezultati:

Glaukom je drugi vodeći uzrok poremaćaja vidne funkcije i potencijalni uzrok njenog gubitka. Početak liječenja glaukoma koji je dijagnosticiran s već uznapredovalim gubitkom vidnog polja je značajan čimbenik rizika progresije bolesti prema sljepoći. Početno liječenje obično uključuje medikamente, primjenu lasera ili kirurško liječenje. Većina oftalmologa je sklona započeti liječenje uznapredovalog glaukoma medikamentnom monoterapijom, nakon koje slijedi uvođenje drugog i trećeg lijeka, do maksimalno podnošljive medikamentne terapije, nakon koje slijedi laserska terapija. Iako je kirurško liječenje glaukoma uglavnom uspješan i siguran zahvat, svejedno postoji rizik od pojave komplikacija koje potencijalno mogu prijetiti vidnoj funkciji, pa se oftalmolozi uglavnom u slučaju uznapredovalog glaukoma odlučuju na kirurško liječenje tek nakon neuspjeha medikamentoznog i laserskog liječenja. Novija stajališta smatraju da je primarno kirurško liječenje bolja opcija u bolesnika s uznapredovalim glaukomskim gubitkom vidnog polja. Rad donosi pregled podataka baziranih na istraživanjima ishoda liječenja uznapredovalog glaukoma medikamentima i kirurškim pristupom.

Zaključak:

Pregledom dostupne literature, utvrdili smo da ne postoje uvjerljive randomizirane studije koje bi komparirale liječenje uznapredovalog glaukoma modernim medikamentima i kirurškim pristupom, te dale prednost kirurškom pristupu. Dok se ne pojave, smatramo da dosadašnji koncept liječenja zadovoljava.

Title:

Current Concepts in the Management of Advanced Glaucoma; Should we Perform more Glaucoma Surgery?

Authors:

Smiljka Popović Suić, Sonja Jandroković

Institution:

Department of Ophthalmology, Clinical Hospital Center Zagreb, Zagreb Medical School

Aim:

to examin and present current available evidence underlying the management of presentation with advanced glaucoma

Patients and methods:

meta analysis

Results:

Glaucoma is the second most common cause of visual impairment and a potentially blinding condition. Presentation of glaucoma with advanced visual field loss is an important risk factor for progression to blindness. Primary treatment of this condition may involve medical, laser or surgical therapy. Most ophthalmologists treat patients medically starting with topical drop monotherapy followed by escalating drop therapy until maximum tolerated therapy is achieved or perform argon laser or selective laser trabeculoplasty. Although glaucoma surgery is generally a safe and successful procedure, it still carries a risk of severe complications that potentially could be a threat for visual acuity, and many ophthalmologists consider the glaucoma surgery as an intervention only to be used following failure of medical and laser treatment. Some new references bring the opposite opinion, that primary surgery should be performed in patients presenting with advanced glaucomatous visual field loss. In this review the current available evidence for better outcomes for surgical or medical treatments of advanced glaucoma patients is discussed.

Conclusion:

There are currently no randomized trials comparing modern medical against modern surgical interventions in patients presenting with advanced disease that would give advantage to surgical approach. We should continue to manage patients according to our current practice until more evidence becomes available.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Prof.dr.sc.

Ime i prezime / First and Last Name:-First

Smiljka

Ime i prezime / First and Last Name:-Last

Popović Suić

31. Smiljka Popović Suić

Naslov:

Hrvatska multicentrična opservacijska studija bimatoprosta 0.01%

Autori:

Smiljka Popović Suić, Katia Novak Lauš, Vukosava Maričić Došen, Sonja Jandroković, Mia Zorić Geber

Ustanova:

Klinika za očne bolesti Kliničkog Bolničkog Centra Zagreb, Medicinski fakultet Sveučilišta u Zagrebu, Klinika za očne bolesti Kliničkog Bolničkog Centra Sestre Milosrdnice Zagreb, Klinika za očne bolesti Kliničke bolnice Sveti Duh Zagreb

Cilj:

ova multicentrična, prospективna, otvorena i opservacijska studija ima za cilj ustanoviti učinkovitost i podnošljivost bimatoprosta 0.01% u rutinskoj kliničkoj praksi. Bimatoprost 0.01% je razvijen zbog bolje podnošljivosti od bimatoprosta 0,03%.

Bolesnici i metode:

: U ispitivanje je uključeno 91 bolesnik s glaukom otvorenog kuta iz 3 zagrebačka antiglaukomska kabineta, dosada neliječeni kao i prethodno liječeni bolesnici u kojih je vrijednost očnog tlaka bila iznad 20 mm Hg ili su razvili nuspojave na prethodnu lokalnu terapiju. Učinkovitost bimatoprosta 0,01% je prikazana promjenom u srednjoj vrijednosti očnog tlaka desnog i levog oka u svakog bolesnika nakon 7 dana, 4 tjedna i 12 tjedana od uvođenja bimatoprosta 0,01% u odnosu na početnu vrijednost. Očna hiperemija je procjenjena na početku, te nakon 7 dana, 4 tjedna i 12 tjedana uzimanja bimatoprosta 0,01% pomoću fotografске skale od 5 stupnjeva hipere mije. Bolesnici su sami procjenjivali podnošljivost i zadovoljstvo lokalnom terapiju na početku, te nakon 12 tjedana nakon uvođenja bimatoprosta 0,01% pomoću upitnika i visualne analogne milimetarske skale. Liječnici su nakon 12 tjedana terapije ocjenjivali status bolesnika (vrijednost očnog tlaka i hiperemiju) uz uporabu skale od 5 stupnjeva.

Rezultati:

Bimatoprost 0,01% značajno snižava srednju vrijednost očnog tlaka u usporedbi s početnom za prosječno 6,1 mm Hg u bolesnika koji nisu bili na terapiji. Također značajno snižava srednju vrijednost očnog tlaka u bolesniku koji su bili na monoterapiji betablokatorima, analogima prostaglandina, inhibitorima karboanhidraze ili fiksnim neprostaglandinskim kombinacijama. Liječnici i bolesnici su procijenili toleranciju i adherenciju boljom u odnosu na prethodno liječenje.

Zaključak:

U razdoblju praćenja od 12 tjedana bimatoprost 0,01% značajno snižava srednju vrijednost očnog tlaka u bolesnika koji nisu prethodno primali antiglaukomsku terapiju, a u bolesnika koji su prethodno liječeni dovodi do datnog sniženja srednje vrijednosti očnog tlaka. Podnošljivost bimatoprosta 0,01% je bila bolja u odnosu na prethodnu terapiju.

Title:

Croatian multicentric observational study of bimatoprost 0.01%

Authors:

Smiljka Popović Suić, Katia Novak Lauš, Vukosava Maričić Došen, Sonja Jandroković, Mia Zorić Gebe

Institution:

Department of Ophthalmology, Clinical Hospital Center, Zagreb, Croatia , Medical School, University of Zagreb, Zagreb, Croatia , Department of Ophthalmology, Clinical Hospital Sisters of Charity, Zagreb, Croatia , Department of Ophthalmology, University Hospital Holy Spirit, Zagreb

Aim:

This multicenter, prospective, open-label, observational study was designed to investigate the efficacy and tolerability of bimatoprost 0.01% in routine clinical practice. Bimatoprost 0.01% was developed for improved tolerability over bimatoprost 0.03%.

Patients and methods:

Data were collected from 91 patients with primary open-angle glaucoma or ocular hypertension attending 3 centers in Zagreb, who were either treatment naive or had IOP level of intraocular pressure above 20 with previous treatment, or patients who reported adverse effects during previous treatment. The primary efficacy outcome was change in the mean intraocular pressure value of right and left eye of each patient from baseline, after 7 days, 4 weeks to 12 weeks after initiation of bimatoprost 0.01%. Ocular hyperemia was graded by the investigator at presentation, after 7 days, 4 weeks and 12 weeks and using a photographic five-point grading scale. Patients rated tolerability and satisfaction with previous therapy at baseline and after 12 weeks of bimatoprost 0.01% therapy using questionnaire and visual analogue millimeter scale. Physicians rated after 12 weeks period status of the patient (intraocular pressure and hyperemia) using 5 grade scale in comparison with baseline.

Results:

Bimatoprost 0.01% significantly lowered mean IOP from baseline by 6.1 mmHg in all treatment naive patients after 12 weeks period. Bimatoprost 0.01% also significantly reduced IOP in patients previously treated with monotherapy of beta-blockers, prostaglandin analogs, carbonic anhydrase inhibitors, or fixed non prostaglandin combination therapy. Physicians and patients rated tolerability and adherence as better in comparison with previous therapy

Conclusion:

This observational study found that bimatoprost 0.01% lowers IOP in previously untreated patients and produces additional IOP-lowering effects in patients who have received prior therapy in 12 week period. Bimatoprost 0.01% was better tolerated among glaucoma subjects who switched from prior IOP-lowering medication

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Prof.dr.sc.

Ime i prezime / First and Last Name:-First

Smiljka

Ime i prezime / First and Last Name:-Last

Popović Suić

32. Ivna Pleština-Borjan

Naslov:

Povezanost senilne makularne degeneracije s aktivnošću enzimskih antioksidanta u eritrocitima i ukupnim serumskim antioksidacijskim statusom

Autori:

Ivana Pleština-Borjan, Damir Katušić, Maria Medvidović-Grubišić, Kajo Bućan, Daniela Šupe-Domić, Leida Tandara, Veljko Rogošić

Ustanova:

Klinika za očne bolesti, KBC Split

Cilj:

Istražiti povezanost oksidacijskog stresa s nastankom senilne makularne degeneracije (SMD) korišteći aktivnost antioksidacijskih enzima: superoksid dismutaze (SOD), glutation peroksidaze (GPx) i katalaze (CAT) u eritrocitima i ukupni antioksidacijski status u serumu kao pokazatelje razine oksidacijskog stresa. Procijeniti dijagnostičke vrijednosti pojedinih varijabli kao i njihovih kombinacija u predviđanju nastanka SMD.

Bolesnici i metode:

Ispitanjem je obuhvaćeno ukupno 107 ispitanika: 57 bolesnika sa SMD (32 s ranim, a 25 s kasnim oblikom SMD) i 50 zdravih ispitanika kontrolne skupine, komplementarnih eksperimentalnoj skupini po dobi i spolu. Mjerenje aktivnosti SOD-a, GPx-a i CAT-

a u eritrocitima i vrijednosti TAS- a u serumu i procjenjivana njihova povezanost sa SMD-om. Za utvrđivanje razlike istraživanih varijabli između ispitivanih skupina korišten je Mann-Whitney-uv test. Analizirana je interakcija između pojedinih antioksidacijskih enzima. U procjeni dijagnostičke vrijednosti ispitivanih varijabli kao nezavisnih prediktora u predviđanju nastanka SMD korištene su Receiver Operating Characteristic (ROC) analiza i multivarijantna logistička regresija.

Rezultati:

Aktivnost GPx-a u eritrocitima ($P<0.001$) i vrijednosti TAS-a u serumu ($P=0.015$) bile su značajno niže u skupini bolesnika sa SMD-a u usporedbi s kontrolnom skupinom. Nije bilo statistički značajne razlike u aktivnosti SOD-a ($P=0.984$) i CAT-a ($P=0.426$) između promatranih skupina ispitanika. Utvrđena je značajna interakcija između GPx-a i SOD-a ($P=0.003$). Pri visokim vrijednostima aktivnosti SOD-a (iznad 75 percentila) smanjenje aktivnosti GPx-a za jednu standardnu devijaciju povećava omjer izgleda za nastanak SMD za više od 6 puta ($OR=6.22$; $P<0.001$). ROC analiza je pokazala da su kombinirane vrijednosti GPx aktivnosti i TAS značajne odrednice SMD. Uku pna točnost, osjetljivost, specifičnost, pozitivne i negativne prediktivne vrijednosti ovog testa bili su: 75%, 95%, 52%, 69% i 90%.

Zaključak:

Istraživanje je pokazalo da su niske vrijednosti aktivnosti GPx u eritrocitima i TAS-a u serumu povezane sa nastankom SMD. SOD modulira povezanost GPx-a i SMD-

a. Rezultati upućuju na to da bi antioksidacijski enzimi u eritrocitima i TAS u serumu mogli biti obećavajući marker u predviđanju SMD.

Title:

Association of age-related macular degeneration with erythrocyte antioxidant enzymes activity and serum total antioxidant status

Authors:

Ivana Plestina-Borjan, Damir Katusic, Maria Medvidovic-Grubisic, Kajo Bucan, Daniela Supedomic, Leida Tandara, Veljko Rogosic

Institution:

Department of ophthalmology, Clinical Hospital Center Split

Aim:

To estimate association of the oxidative stress with the occurrence of age-related macular degeneration (AMD). The activities of erythrocyte antioxidant enzymes: superoxide dismutase (SOD), glutathione peroxidase (GPx) and catalase (CAT) and serum total antioxidant status (TAS) were used as indicators of the oxidative stress level. Furthermore, diagnostic value of individual and combined markers in determining AMD status was assessed.

Patients and methods:

57 AMD patients (32 with early and 25 with late form of AMD) and 50 healthy, age and gender matched controls were included. Erythrocyte SOD, GPx and CAT activity and serum TAS level were measured and their association with AMD was assessed. Mann-

Whitney U test was used to compare marker values between the studied groups. Analysis of interaction between each antioxidant enzymes was done. Receiver Operating Characteristic (ROC) analysis and multiple logistic regression model were used to estimate the diagnostic value of markers and their independent associations with AMD.

Results:

Erythrocyte GPx activity ($P<0.001$) and serum TAS ($P=0.015$) were significantly lower in AMD patients than in controls. The difference was not significant for SOD ($P=0.984$) or CAT activities ($P=0.426$). Significant interaction between GPx and SOD was detected ($P=0.003$). At high levels of SOD activity (over 75th percentile) one standard deviation decrease in GPx increases the odds for AMD for six times ($OR=6.22$; $p<0.001$). ROC analysis revealed that combined values of GPx activity and TAS were significant determinants of AMD status. Total accuracy, sensitivity, specificity, positive and negative predictive values of this test were: 75%, 95%, 52%, 69%, and 90%, respectively.

Conclusion:

The study showed that low GPx activity and TAS are associated with AMD. SOD modulates the association of GPx and AMD. The obtained results suggest that erythrocyte antioxidant enzymes activity and serum TAS could be promising markers for the prediction of AMD occurrence.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Ivana

Ime i prezime / First and Last Name:-Last

Pleština-Borjan

33. Vanda Gašpar Mitrečić

Naslov:

Maligne i benigne lezije očnih kapaka u KBC Sestre milosrdnice

Autori:

Vanda Gašpar Mitrečić, dr.med., prof.dr.sc. Renata Ivezović, prof.dr.sc. Z. Vatavuk

Ustanova:

KBC Sestre milosrdnice

Cilj:

Ova studija proučava relativnu učestalost benignih i malignih lezija očnih kapaka u razdoblju od 01.01.2010. do 31.12.2014.g. u KBC Sestre milosrdnice.

Bolesnici i metode:

Retrospektivni pregled podataka lezija očnih kapaka kod 723 bolesnika

Rezultati:

Ukupno je proučavano 723 pacijenata (muških 39 % i ženskih 61 %). Najčešća starosna dob je muškaraca bila je 57 godina za benigne lezije i 71 godina za maligne tumore. Najčešća starosna dob kod žena bila je 56 za benigne lezije i 73 za maligne tumore. Najčešći benigne promjene očnih kapaka su seboroična keratoza (12 %) i intradermalni nevus (12 %), a najčešći zločudni tumori je bazocelularni karcinom (37%).

Zaključak:

Benigne lezije čine većinu promjena očnih kapaka (56%). Među malignim lezijama, karcinom bazalnih stanica je najčešći tip.

Title:

Malignant and benign eyelid lesions in KBC Sestre milosrdnice

Authors:

Vanda Gašpar Mitrečić, dr.med., prof.dr.sc. Renata Ivezović

Institution:

KBC Sestre milosrdnice

Aim:

This study evaluates the relative frequency of benign and malignant eyelid lesions from 01.01.2010. - 31.12.2014. in KBC Sestre milosrdnice.

Patients and methods:

A computerised retrieval system was used to identify all patients who underwent eyelid excisions with histopathological diagnosis in the period from January 2004. till December 2007. in KBC Sestre milosrdnice. Age, gender and the histopathological diagnosis of each patient were documented.

Results:

A total of 723 patients were evaluated (male 39 % and female 61 %). Mean age for males was 57 years for benign lesions and 71 years for malignant ones. Mean age for females was 56 years for benign lesions and 73 years for malignant ones. The most common benign eyelid lesion was keratosis seboroica (12 %) and naevus intradermalis (12%), and the most common malignant tumor was basal cell carcinoma (37%).

Conclusion:

Benign lesions constituted the majority of these eyelid tumours (56 %). Among the malignant lesions, basal cell carcinoma was the commonest type.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Vanda

Ime i prezime / First and Last Name:-Last

Gašpar Mitrečić

34. Ana Koluder

Naslov:

Spada li diabetes mellitus tip 2 u rizične faktore za postoperativno skvrčavanje kapsule?

Autori:

A. Koluder, L. Knežević, R. Ivezović, I. Petric Vicković, Z. Vatavuk

Ustanova:

Klinika za očne bolesti, KBC Sestre milosrdnice

Cilj:

Utvrđiti da li je dijabetes melitus tip 2 jedan od rizičnih faktora za postoperativno skvrčavanje kapsule.

Bolesnici i metode:

U ovoj prospektivnoj studiji, mjerili smo veličinu kapsulorekse u bolesnika, kojima je operirana katarakta metodom fakoemulzifikacije, kroz postoperativni period od 3 mjeseca. U studiju su uključeni bolesnici operirani u sijecnju i veljači 2015., a podijeljeni su u dvije skupine. Prvu skupinu sačinjavali su bolesnici koji su uz imaturnu kataraktu imali i dijabetes tip 2, bez teške retinopatije, dok je druga skupina bila kontrolna te su ovdje uključen i bolesnici s imaturnom kataraktom bez drugih komorbiditeta. Isključni kriteriji bili su visoka miopija, retinitis pigmentosa, miotonička distrofija, trauma oka, prethodne operacije na oku i uveitisi, glaukom, pseudoeksfoliativni (PEX) sindrom, komplikirana katarakta, trauma oka, bolesti makule, intraoperativne komplikacije i postoperativna keratopatija. Bolesnike su operirala dva iskusna operatera. Svi bolesnici operirani su u lokalnoj anesteziji, metodom fakoemulzifikacije s kapsuloreksom promjera 5-

6mm, te im je ugrađena akrilična hidrofobna trodjelna intraokularna leća, promjera 6mm. Pregled je vršen prvi i sedmi postoperativni dan, mjesec dana i tri mjeseca nakon operacije, u midrijazi. Svjetlosnim milimetarskim romnjem je mjerena promjera kapsulorekse u periodu od tri postoperativna mjeseca. Rezultati mjeranja upisivani su u tablicu pod brojem skupine i bolesnika, te su na kraju evaluirani.

Rezultati:

Preliminarni rezultati pokazuju nešto veće rano postoperativno skvrčavanje kapsule u prvoj skupini bolesnika, ali za sada bez statistički značajne razlike.

Zaključak:

Iz preliminiranih rezultata možemo naslutiti da bi dijabetes tip 2 mogao biti jedan od rizičnih faktora za postoperativno skvrčavanje kapsule.

Title:

Diabetes mellitus type 2: risk factor for capsular shrinkage or not?

Authors:

A. Koluder, L. Knežević, R. Ivezović, I. Petric Vicković, Z. Vatavuk

Institution:

: University Department of Ophthalmology, University Clinical Centre " Sestre Milosrdnice "

Aim:

To analyze if diabetes mellitus typ 2 is one of the risk factors for postoperative capsular shrinkage, or not.

Patients and methods:

In this prospective study, we have measured the size of capsulorhexis, in postoperative period from 3 months, in patients who underwent cataract surgery by phacoemulsification. Study included 20 patients, operated in January and February 2015, who were divided in two groups. Group 1 included patients with immature cataract and diabetes mellitus (DM) type 2, without severe diabetic retinopathy. Group 2 was control group and it included patients without any comorbidity, only with immature cataract. Excluding criteria were high myopia, retinitis pigmentosa, myotonic dystrophy, complicated cataract, ocular trauma, previous pars plana vitrectomy and other ocular surgery, glaucoma, previous eye inflammation, pseudoexfoliative (PEX) syndrome, macular disease, intraoperative complications and postoperative keratopathy. Patients were operated by two experienced surgeons. Phacoemulsification with continuous curvilinear capsulorhexis (CCC), size 5-

6 mm, and three - piece intraocular lens implantation, size 6mm, was performed in local anesthesia. The examination was made on first and seventh postoperative day, a month and three months after the operation. We measured the size of capsulorhexis, its vertical and horizontal diameter, in full mydriasis, with a slit lamp millimetric ruler on biomicroscope. We have analyzed changes of the capsulorhexis size during the first three postoperative months. All results were enrolled in the table under groups and patients number.

Results:

Preliminary results are showing a little bigger capsular shrinkage in first postoperative week in group 1 but still without statistically significant differences.

Conclusion:

From the first results, we can see that it is very likely for DM type 2 to be one of the risk factors for postoperative capsular shrinkage.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Ana

Ime i prezime / First and Last Name:-Last

Koluder

35. Ivana Bednar Babić

Naslov:

Kvaliteta života vezana uz vid nakon intravitrealne injekcije bevacizumaba aplicirane zbog novo-otkrivene eksudativne forme senilne degeneracije žute pjege

Autori:

*Ivana Bednar Babić, Zoran Sipić, Mia Martinović Bošković, Damir Vukušić, Zoran Vatavuk**

Ustanova:

*Odjel za oftalmologiju i otorinolaringologiju, OB Karlovac, *Klinika za očne bolesti, Klinička bolnica "Sestre milosrdnice"*

Cilj:

Istražiti kvalitetu života vezanu uz vid (VR-QOL) u korelaciji sa vidnom funkcijom kod bolesnika koji su primili prvu intravitrealnu injekciju bevacizumaba (IVB) zbog novo-otkrivene eksudativne forme senilne degeneracije žute pjege.

Bolesnici i metode:

Naša pilot studija uključila je 23 bolesnika (23 oči) koji su primili 1.25 mg IVB zbog eksudativne forme senilne degeneracije žute pjege. Nitko od bolesnika nije prije podvrgnut nikakvom obliku liječenja. Vidna funkcija i VR-QOL su određivani prije, četiri i osam tjedana nakon IVB. Ispitivanja su uključivala određivanje najbolje korigirane vidne oštchine (BCVA), mjerjenje centralne debljine mrežnice (CRT) korištenjem optičke koherentne tomografije i ispunjavanje 25-djelnog upitnika o vidnoj funkciji Nacionalnog očnog instituta SAD-a (VFQ-25).

Rezultati:

Prosječna početna CRT je bila 378,16 +/- 105,08 µm, početna BCVA na Snellenovim tablicama je bila 0,25 +/- 0,09 i početni ukupni zbroj VFQ-25 je bio 71,81. Četiri tjedna nakon IVB uočena su poboljšanja u CRT (278,27 +/- 88,12 µm), BCVA (0,35 +/- 0,07) i nekoliko podgrupa u upitniku o vidnoj funkciji – opći vid, aktivnosti na blizinu, aktivnosti na daljinu i mentalno zdравlje. Osam tjedana nakon IVB nije bilo značajnog poboljšanja u ispitivanim parametrima u odnosu na početne vrijednosti.

Zaključak:

Intravitrealna injekcija bevacizumaba je prolazno poboljšala vidnu funkciju i kvalitetu života vezanu uz vid kod bolesnika sa eksudativnom formom senilne degeneracije žute pjege. Upitnik bi se mogao koristiti kao dodatni alat za procjenu stanja u pro re nata (po potrebi) protokolu liječenja bevacizumabom. Veći uzorak i duži period praćenja potrebni su za točnije rezultate.

Title:

Vision-related quality of life following intravitreal bevacizumab injection for newly diagnosed exudative age related macular degeneration

Authors:

Ivana Bednar Babić, Zoran Sipić, Mia Martinović Bošković, Damir Vukušić, Zoran Vatavuk*

Institution:

Department of phtalmology and otorhinolaringology, General hospital Karlovac; *University clinic of ophthalmology, University hospital "Sestre milosrdnice"

Aim:

To investigate the vision-related quality of life (VR-QOL) in correlation with visual function in patients undergoing first intravitreal injection of bevacizumab (IVB) for newly diagnosed exudative age related macular degeneration.

Patients and methods:

Our pilot study enrolled 23 patients (23 eyes) who had received 1.25 mg IVB for exudative age related macular degeneration. All of them had no previous treatment of the condition. Visual function and VR-QOL were measured before, four and eight weeks after IVB. Measurements included best corrected visual acuity (BCVA), central retinal thickness (CRT) using optical coherence tomography, and VR-QOL with the 25-item National Eye Institute Visual Function Questionnaire (VFQ-25).

Results:

Average baseline CRT was 378,16 +/- 105,08 µm, baseline BCVA on Snellen charts was 0,25+/- 0,09 and baseline composite score for VFQ-25 was 71,81. Four weeks after IVB improvements were observed in CRT (278,27+/- 88,12 µm), BCVA (0,35+/- 0,07) and several subscale scores – general vision, near activities, distance activities and mental health. Eight weeks after IVB, there were no significant improvements in any parameters examined compared to baseline.

Conclusion:

Intravitreal bevacizumab injection temporarily improved visual function and vision-related quality of life in patients with exudative age related macular degeneration. The questionnaire can be used as additional assessment tool in pro re nata protocol (as needed) of bevacizumab treatment. Bigger sample size and longer follow up are essential for more accurate data.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Ivana

Ime i prezime / First and Last Name:-Last

Bednar Babić

36. Petra Kristina Lozo

Naslov:

Akutni optički neuritis u trudnoći – liječiti kortikosterodima da ili ne? – prikaz slučaja

Autori:

Petra Kristina Lozo, Tomislav Vidović, Martina Galijot Delić, Danijela Mrazovac, Branimir Cerovski

Ustanova:

Klinika za očne bolesti Medicinskog fakulteta Sveučilišta u Zagrebu, Klinički bolnički centar Zagreb

Cilj:

Prezentirati trudnicu u 38. tjednu trudnoće s akutnim optičkim neuritism te prikazati dijagnostičke i terapijske dileme

Bolesnici i metode:

Bolesnica (1995.g.) u 38. tjednu trudnoće, koja se javlja u hitnu službu zbog zamućenja vida lijevo praćeno bolo vima iza oka koji se pojačavaju s pokretima bulbusa. Učini se kompletni oftalmološki i neurološki pregled te dij agnostičke pretrage koje uključuju VP Goldmann, VEP, MR mozga i orbita te laboratorijske pretrage. Temelje m kliničke slike postavila se dijagnoza akutnog optičkog neuritisa lijevog oka.

Rezultati:

Pri prvom pregledu vidna oštrina zahvaćenog oka iznosila je 0.01 uz relativni aferentni pupularni defekt i ureda n izgled glave vidnog živca. Perimetrijom se nađe cekocentralni skotom. MR orbita pokazuje povišeni intenzitet signala vidnog živca. Budući da je tijekom praćenja zamijećen spontani oporavak vidne funkcije kod bolesnice, t erapija se nije uvela.

Zaključak:

Akutni optički neuritis predstavlja ne samo diferencijalno dijagnostički, već i terapijski problem u trudnoći. Upi tno je uobičajeno liječenje pulsnim dozama kortikosteroida. S obzirom da je u trudnica povoljna prognoza za povratak vida zbog spontanog oporavka, ostaje otvoreno pitanje indikacije za kortikosteroidnu terapiju.

Title:

Acute optical neuritis in pregnancy - corticosteroids treatment yes or no?- case report

Authors:

Petra Kristina Lozo, Tomislav Vidović, Martina Galijot Delić, Danijela Mrazovac, Branimir Cerovski

Institution:

Department of Ophthalmology University Hospital Center Zagreb, School of medicine University of Zagreb

Aim:

To present a pregnant woman in the 38th week of pregnancy with acute optic neuritis and explain the diagnostic and therapeutic dilemma

Patients and methods:

19-years-

old woman in the 38th week of pregnancy, presented at the ophthalmology emergency department because of blurred vision on the left eye associated with pain behind the eye which worsens with eye movements.

Results:

Visual acuity upon arrival of the affected eye was 0.01 with a relative afferent pupillary defect and normal optic disc finding. Perimetry showed cecocentral scotoma. MRI of orbits showed enhancement of the affected optic nerve. During follow-up we noticed a spontaneous recovery of visual function in the patient, so the treatment was not needed.

Conclusion:

Acute optic neuritis is not only a differential diagnosis, but also a therapeutic problem in pregnancy. Conventional treatment with pulse doses of corticosteroids is questionable. Given that in pregnant women was favorable prognosis of vision due to spontaneous recovery, the question remains about the indications for therapy.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Petra Kristina

Ime i prezime / First and Last Name:-Last

Lozo

37. Sania Vidas

Naslov:

Mjerenje neinvazivnog testa pucanja suznog filma (Non- invasive tear break- up time- NIBUT) direktnom vizualizacijom površine suznog filma

Autori:

Vidas S, Petriček I, Jukić T, Kalauz M, Masnec S, Barišić Kutija M

Ustanova:

Klinika za očne bolesti, Klinički bolnički centar Zagreb

Cilj:

Stabilnost suznog filma je glavni pokazatelj njegove (dis)funkcije. Trenutno važeća, standardna metoda prihvata ena u procjeni njegove stabilnosti je invazivni test pucanja suznog filma (Tear film break-up time- TBUT) koja zahtijeva ukapavanje fluoresceinske otopine te time mijenja fiziologiju suznog filma u nativnom stanju. S druge strane, metoda kompatibilna TBUT- u je neinvazivni test pucanja suznog filma (Non- invasive tear break- up time- NIBUT). Njena prednost je neinvazivnost, tj. uvid u stvarno fiziološko stanje suznog filma i procijenu njegove funkcije. Ova metoda zahtijeva opremu (Tearscope, Keratograf), komplikiranu i često nedostupnu za svakodnevnu primjenu, radi čega nije našla mesta u rutinskom kliničkom radu. Brojna istraživanja su pokazala kako su vrijednosti TBUT- a značajno kraće od vrijednosti NIBUT- a, ali isto tako da se vrijednosti gotovo izjednačavaju ili su vrlo slične kod pacijenata sa niskom vrijednostima tj . suhim okom. Vizualizacijom površine suznog filma teoretski je moguće procijeniti pukotine u trenutku njegove destabilizacije i na taj način mjeriti NIBUT. Na površini suznog filma nalazi se njegov lipidni sloj. On se može vizualizirati Tearscopeom, ili jednostavnijim i dostupnijim ručnim instrumentom za procjenu debljine lipidnog sloja suznog filma. Pošto ručni instrument za procjenu debljine lipidnog sloja suza radi na istom fizikalnom principu kao Tearscope, možemo pretpostaviti da bi bilo moguće njegovim korištenjem vizualizirati i pucanje suznog filma, tj. NIBUT, i to na mnogo jednostavniji način. Cilj našeg istraživanja je ispitati mogućnost mjerenja NIBUT- a promatranjem površinskog lipidnog sloja suza ručnim instrumentom za procjenu debljine lipidnog sloja suznog filma, te dobijene vrijednosti usporediti sa vrijednostima standardnog rutinskog testa procijene stabilnosti suznog filma tj. TBUT, sa svrhom uvodenja ovako mjerene NIBUT-a u svakodnevnu kliničku praksu.

Bolesnici i metode:

Uzorak ispitanika je prigodni: svi punoljetni pacijenti koji dođu na standardni oftalmološki pregled a koji, po upoznavanju s načinom provedbe i ciljem istraživanja, potpisivanjem informiranog pristanka daju svoju pisanu suglasnost za sudjelovanjem u istraživanju. Pacijenti kod kojih bi sudjelovanje u istraživanju moglo dati neobjektivne rezultate zbog drugih oftalmoloških (očna trauma, akutne upale oka) ili neoftalmoloških razloga (loša su radnja) neće biti uključeni u israživanje. Istraživanje će se vršiti na način da se svakome ispitaniku prvo postavi baterija standardiziranih pitanja u cilju utvrđivanja simptomatologije suhog oka. Kao osnova upitnika koristit će se standardizirani Scheinov upitnik, modificiran dodatnim pitanjima relevantnim za ovo istraživanje . Potom će se svakom pacijentu prilikom pregleda na procijepnoj svjetiljki izvršiti neinvazivni test pucanja suznog filma (NIBUT) pomoću procijepne svjetiljke i izvora difuznog bijelog svjetla ručnog instrumenta koji sa strane osvjetljuje

ava lipidni sloj. Nakon toga se postupak ponavlja ukapavanjem 1 kapi 1% otopine flouresceina u jedno pa u drugo oko, te se na taj način mjeri TBUT.

Rezultati:

Na ovom kongresu biti će prezentirani preliminarni rezultati istraživanja.

Zaključak:

Mjerenje NIBUT-

a metodom direktne vizualizacije pucanja lipidnog sloja suznog filma ručnim instrumentom za procjenu debljine lipidnog sloja suza ne zahtjeva nikakvu prethodnu manipulaciju ili ukapavanje kapi u oko i omogućava pregled suznog filma u njegovom fiziološkom stanju na vrlo jednostavan, praktičan i dostupan način. Što bi, moglo učiniti ovaj test superiornijim, u odnosu na standardnu metodu, u dijagnostici suhog oka.

Title:

Direct tear film surface visualisation method for non- invasive tear break- up time (NIBUT) measurement

Authors:

Vidas S, Petriček I, Jukić T, Kalauz M, Masnec S, Barišić Kutija M

Institution:

Department of Ophthalmology, Zagreb University Hospital Centre, Zagreb, Croatia

Aim:

Basic indicator of tear film function is tear film stability. Standard method for tear film stability assessment is tear film break-up time (TBUT), an invasive method that requires instillation of fluorescein solution in eye, resulting in changes of tear film physiology. Compatible to TBUT, non-invasive tear break-up time (NIBUT), provides tear film stability assessment with no need for eye drops instillation, enabling native tear film function evaluation. NIBUT is usually performed by sophisticated and expensive instruments (Tearscope, Keratografs), what makes them unsuitable for routine clinical practice. In literature, in general population TBUT values are significantly shorter than the NIBUT, but almost equal or very similar in patients with dry eye. On the other hand, visualization of the tear film surface and appearance of its irregularities at the time of its destabilization, theoretically, could allow NIBUT assessment. It can be performed by Tearscope or by using more practical and accessible instrument, hand held instrument for lipid layer examination. At this moment Tearscope is the only standardized instrument for NIBUT measurement. Since hand held instrument for lipid layer examination works on the same physical principle, it might also be used for NIBUT assessment. The aim of this study is to determine the possibility of NIBUT assessment by visualization of tear film surface using hand held instrument for lipid layer examination, and to compare the values with those obtained by standard test for tear film stability, TBUT, in order to introduce this method in everyday clinical practice.

Patients and methods:

Random sample: Every adult patient attending the standard ophthalmic examination, who will, after being introduced to the aim of the research, sign the informed consent and give his/her written consent to participate in research. Patients with ocular trauma, acute inflammation of the eye and other ocular surface diseases, as well as patients who are unable to cooperate would not be included. First the battery of standardized questions will be used in order to determine the symptoms of dry eye. A standardized Schein questionnaire, modified for issues relevant to this research will be used. After that the standard slit lamp examination including NIBUT will be performed.

med, using slit lamp and handheld instrument for lipid layer examination that illuminates the surface of the tear film. After this, standard procedure for TBUT will be performed.

Results:

Preliminary results will be presented at the Meeting.

Conclusion:

NIBUT measurement using hand held instrument for lipid layer examination and visualization of the tear film surface provides tear film stability assessment with no need for eye drops instillation, enabling native tear film function evaluation on simple and accessible way. So, it might be preferable than standard TBUT test in diagnostics of dry eye.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Sania

Ime i prezime / First and Last Name:-Last

Vidas

38. Branimir Cerovski

Naslov:

Kliničke osobitosti bolesnika s prednjom ishemičkom optičkom neuropatijom

Autori:

Branimir Cerovski, Dora Fratrić, Tomislav Vidović, Danijela Mrazovac

Ustanova:

Klinika za očne bolesti Medicinskog fakulteta Sveučilišta u Zagrebu, Klinički bolnički centar Zagreb

Cilj:

Prikazati 34 bolesnika koji su lijечeni zbog prednje ishemičke optičke neuropatije na Zavodu za neurooftalmologiju Klinike za očne bolesti

Bolesnici i metode:

U istraživanje je uključeno 34 bolesnika s prednjom ishemičkom optičkom neuropatijom u dobi od 40 do 87 godina. U svakog bolesnika je učinjen kompletan oftalmološki pregled i oftalmološka dijagnostika.

Rezultati:

U 5 bolesnika nađena je arteritička forma, dok je neareritička forma nađena u 29 bolesnika od kojih je 4 bolesnika bilo mlade od 55 godina. Dijagnoza arteritičke prednje ishemičke optičke neuropatije postavljena je temeljem kliničke slike, nalaza ubrzane sedimentacije, povišenih vrijednosti C-reaktivnog proteina i pozitivnog nalaza bioptata temporalne arterije. Prosječna dob bolesnika s arteritičkim oblikom bila je 83,8, a u bolesnika s neareritičkim oblikom 64,1 godina. Najčešći oblici oštećenja vidnog polja su bili difuzna depresija mrežnične osjetljivosti i arkuatni defekt.

Zaključak:

Ovo istraživanje pokazalo je da je veća učestalost arteritičke optičke neuropatije u starijoj dobi, a neareritičke u mlađoj dobi. Najčešći oblici oštećenja vidnog polja su difuzna depresija i arkuatni skotomi.

Title:

Clinical features of patients with anterior ischaemic optic neuropathy

Authors:

Branimir Cerovski, Dora Fratrić, Tomislav Vidović, Danijela Mrazovac

Institution:

Department of Ophthalmology, University Hospital Center Zagreb, School of Medicine University of Zagreb

Aim:

To evaluate 34 patients treated for anterior ischaemic optic neuropathy at the Neuro-Ophthalmology division, Department of Ophthalmology

Patients and methods:

In this study we included 34 patients with anterior ischaemic optic neuropathy, age between 40 and 87 years. All patients underwent standard ophthalmological examination and ophthalmological diagnostics has been performed.

Results:

Arteritic form was found in 5 patients, 29 patients had non-arteritic form of which 4 patients were under 55 years. Arteritic anterior ischaemic optic neuropathy diagnosis was based on clinical features, accelerated erythrocyte sedimentation rate, raised C-reactive protein and positive temporal artery biopsy results. Average age of the patients diagnosed with arteritic form was 83,8 years and average age of the patients with non-arteritic form was 64,1 years. Most common visual field defects were diffuse depression of retinal sensitivity and arcuate defect.

Conclusion:

This research showed increased rate of arteritic anterior ischaemic optic neuropathy in older patients and non-arteritic form in younger patients. Most common visual field defects were diffuse depression of retinal sensitivity and arcuate defect.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Prof.dr.sc.

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Branimir

Ime i prezime / First and Last Name:-Last

Cerovski

39. Tomislav Vidović

Naslov:

Klinička obilježja bolesnika s anizokorijom

Autori:

Tomislav Vidović, Danijela Mrazovac, Branimir Cerovski

Ustanova:

Klinika za očne bolesti KBC Zagreb Medicinskog fakulteta Sveučilišta u Zagrebu

Cilj:

Prikazati 59 pacijenata u kojih je nađena anizokorija

Bolesnici i metode:

Prikazano je 59 pacijenata koji su na Klinici za očne bolesti opservirani zbog anizokorije. Svakom pacijentu učinjen je standardni oftalmološki pregled, Octopus 900 perimetrija, mjerenje širine zjenice na svjetlu i u tamni, pilokarpinski i kokainski test, MR neurokranija, te po potrebi MR angiografija, Rtg srca i pluća, laboratorijska opservacija, pregled neurologa i interniste.

Rezultati:

U najvećeg broja pacijenata nađena je fiziološka anizokorija. Vrlo čest uzrok je bila idopatska tonička pupila. Drugi uzroci anizokorije su pareza n. okulomotoriusa i Hornerov sindrom.

Zaključak:

Anizokorija može biti benigna, međutim može biti znak vitalno-ugrožavajućeg stanja. Kokainski i pilokarpinski testovi su se dokazali kao važna dijagnostička metoda u evaluaciji anizokorije.

Title:

Clinical features of patients with anisocoria.

Authors:

Tomislav Vidović, Danijela Mrazovac, Branimir Cerovski

Institution:

Department of ophthalmology, Clinical Hospital Center Zagreb, Medical School University of Zagreb.

Aim:

To present clinical features in 59 patients with anisocoria.

Patients and methods:

59 patients with clinically present anisocoria were observed. Every patient underwent standard ophthalmologic examination, Octopus 900 perimetry. Pupil diameter in light and darkness has been measured. Cocaine and pilocarpine tests were also done. MRI of the brain and orbit was performed, as well MR angiography, chest X-ray, blood testing, neurological and internal medicine examination when necessary.

Results:

Most patients had physiological anisocoria. Most frequent cause was idiopathic tonic pupil. Other causes were oculomotor palsy and Horner's syndrome.

Conclusion:

Anisocoria could be harmless or sign of life threatening medical conditions. Cocaine and pilocarpine tests are important diagnostic tools, but comprehensive observation should be made.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.sc.

Ime i prezime / First and Last Name:-First

Tomislav

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Vidović

40. Martina Galiot Delić

Naslov:

Optički perineuritis - prikaz slučaja

Autori:

Martina Galiot Delić, Tomislav Vidović, Petra Kristina Lozo, Danijela Mrazovac, Branimir Cerovski

Ustanova:

Klinika za očne bolesti Medicinskog fakulteta u Zagrebu, Klinički bolnički centar Zagreb

Cilj:

Prikazati bolesnika s optičkim perineuritism, rijetkim oblikom optičkog neuritisa koji se prezentirao atipičnom simptomatologijom.

Bolesnici i metode:

Prikazuje se 60-

godišnji pacijent koji je zaprimljen na Specijalistički zavod za neurooftalmologiju zbog izrazite glavobolje, retrobulbarne boli i subjektivnog osjećaja zamućenja vida na oba oka. Po zanimanju veterinar. Observacija se sastoji od kliničkog pregleda, te uporabe strukturnih, funkcionalnih i elektrodijagnostičkih metoda pretraga vida, te MR mozga i orbita, laboratorijske i serološke dijagnostike. Bolesnik je lječen pulsnom steroidnom terapijom.

Rezultati:

U bolesnika je nađena netipična klinička slika uz urednu vidnu oštinu i obostrani edem glave vidnog živca. MR mozga i orbita pokazuje bilateralne upalne promjene, perineuralno. Na provedenu terapiju nastupa regresija subjektivnih simptoma.

Zaključak:

Optički perineuritis je rijetki oblik optičkog neuritisa koji se može manifestirati atipičnom simptomatologijom. Brza dijagnoza i uvođenje pulsne terapije kortikosteroidima dovodi do oporavka vida i regresije subjektivnih simptoma.

Title:

Optic perineuritis - case report

Authors:

Martina Galiot Delić, Tomislav Vidović, Petra Kristina Lozo, Danijela Mrazovac, Branimir Cerovski

Institution:

Department of Ophthalmology University Hospital Centre Zagreb, School of medicine

Aim:

To show patient with optic perineuritis, rare form of optic neuritis who presented with atypical symptoms.

Patients and methods:

60-year-

old male patient presented at the Department of neuroophthalmology because of severe headache, retrobulbar pain and blurred vision on both eyes. He is a veterinarian. Observation included full ophthalmology exam and structural, functional and electrodiagnostic tests as well as brain and orbit MRI, laboratory and serology diagnostics. A treatment with intravenous high-dose steroids was administered.

Results:

Patient presented with atypical symptoms with good visual acuity and bilateral optic disc edema. Brain and orbit MRI showed bilateral inflammatory changes, perineural. Administered therapy with high-dose steroids showed regression of symptoms.

Conclusion:

Optic perineuritis is a rare form of optic neuritis which can manifest with atypical symptomatology. Fast diagnosis and treatment with high-dose steroid is important and outcome is improvement of visual acuity and regression of symptoms.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

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Martina

Ime i prezime / First and Last Name:-Last

Galiot Delić

41. Danijela Mrazovac

Naslov:

Osobitosti funkcionalne, strukturne i elektrofiziološke dijagnostike u bolesnika s kroničnim optičkim neuritisom i mudiplom sklerozom

Autori:

Danijela Mrazovac, Martina Galijot, Petra Kristina Lozo, Tomislav Vidović, Branimir Cerovski

Ustanova:

Klinika za očne bolesti Medicinskog fakulteta Sveučilišta u Zagrebu, Klinički bolnički centar Zagreb

Cilj:

Prikazati 25 pacijenata s kroničnim optičkim neuritisom koji boluju od multiple skleroze.

Bolesnici i metode:

Kod 25 pacijenata s multiplom sklerozom i kroničnim optičkim neuritisom rađeni su standardni oftalmološki pregleđi, testiranje vidnog polja Octopus 900 perimetrijom u N1 programu, OCT makule i vidnog živca, te vidni evocirani potencijali. Svim pacijentima rađeni su kontrolni pregled u razdoblju nakon 6-12 mjeseci.

Rezultati:

Vecina pacijenata imala je zadovoljavajuću vidnu oštrinu s urednim nalazom očne pozadine. Testiranje vidnog polja pokazalo je depresiju mrežnične osjetljivosti u intermedijarnoj i perifernoj zoni, a OCT stanjenje sloja živčanih vlakana i smanjenje makularnog volumena. Rezultati vidnih evociranih potencijala pokazali su produljen u latenciju p100 vala, te snižene vrijednosti amplituda.

Zaključak:

Iako pacijenti s kroničnim oblikom optičkog neuritisa u sklopu osnovne bolesti, multiple skleroze, subjektivno i maju zadovoljavajuću vidnu oštrinu, oftalmološkim pretragama mogu se dokazati kronične promjene vidne funkcije.

Title:

Characteristics of functional, structural and electrophysiological diagnostics in patients with chronic optic neuritis and multiple sclerosis

Authors:

Danijela Mrazovac, Martina Galijot, Petra Kristina Lozo, Tomislav Vidović, Branimir Cerovski

Institution:

Department of Ophthalmology, University Hospital Centre Zagreb, School of Medicine University of Zagreb

Aim:

To present 25 patients with chronic optic neuritis and multiple sclerosis.

Patients and methods:

25 patients with chronic optic neuritis and multiple sclerosis have undergone standard ophthalmic examination, assessment of visual field function with Octopus 900/N1 perimetry, optical coherence tomography and visual evoked potentials were performed. All patients had follow-up examination after 6-12 months.

Results:

Most patients had satisfying visual acuity with normal fundus finding. Visual field assessment with Octopus perimetry showed depression in intermediate and peripheral zone. OCT showed retinal nerve fiber layer thinning and decreased macular volume. There was p100 wave latency prolongation with reduction of wave amplitude.

Conclusion:

Although patients who have chronic optic neuritis and multiple sclerosis have satisfying visual acuity, permanent structural and functional defects of visual function can be diagnosed.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

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Danijela

Ime i prezime / First and Last Name:-Last

Mrazovac

42. Andela Jukić

Naslov:

Prikaz slučaja- KID sindrom

Autori:

Andela Jukić, Ana Meter, Boško Stanišić

Ustanova:

KBC Zagreb

Cilj:

Prikaz slučaja

Bolesnici i metode:

Prikaz slučaja

Rezultati:

11-

godišnji dječak upućen od strane njegovog dermatologa zbog lošeg vida, subjektivnih simptoma koji uključuju s vrbež, osjećaju stranog tijela i fotosfobiju te prisutnost blefarospazma.

Pri ispitivanju oštchine vida dobivene su slijedeće vrijednosti: VOD:1/60

VOS:1/60

Vanjskim pregledom je utvrđena hiperkeratoza vijeđa, s poliozom i madarozom trepavica i obrva.

Biomikroskopski pregled prednjeg očnog segmenta pokazuje hiperemiju spojnica i kroničnu keratopatiju s dubokim neovaskularizacijama rožnice.

*Bris spojnica oka bio je pozitivan na *Staphylococcus aureus*.*

*Rezultati imunološkog i biokemijskog testiranja bili su normalni, osim AST koji je iznosio 625 IJ / ml.
(referentne vrij. AST 7-38 IJ/L)*

Koža je u cijelosti bila suha i hiperkeratotična s eritrokeratoznim plakovima lica, trupa, dlanova i stopala.

Nokti su bili distrofični, a na zubima su nađene displastične promjene.

Rezultat biopsije kože pokazao je hiperkeratozu, nepravilnu akantozu s izduženim dermalnim papilama.

HLA tipizacijom ustanovljena je prisutnost HLA B27. Kariotip je bio normalan.

Međutim, tonskim audiogramom dokazana je bilateralna perceptivna hipoakuzija.

Početni tretman uključivao je primjenu umjetnih suza uz sistemsku terapiju antibioticima prema antibiogramu.

Nakon tretmana njegovi subjektivni simptomi su znatno smanjeni, ali je vidna oština ostala jednako loša.

Zaključak:

Keratitis - ihtioza - gluhoća sindrom (sindrom KID) je vrlo rijedak kongenitalni poremećaj karakteriziran ekto dermalnim keratitisom s neovaskularizacijama , difuznom hiperkeratotičnom eritrodermijom i teškim neurosenzornim gubitkom slухa.

Često udružena stanja uz KID sindrom su povećana osjetljivost na infekcije i neuromuskularne distrofije koji mogu biti korisni za dijagnosticiranje same bolesti. Većina slučajeva su sporadični , a ako se pojavljuju unutar obitelji ,nije utvrđen točan način nasljeđivanja .

Diferencijalna dijagnoza uključuje:Refsumova SY . , Savin SY , Jadassohn - Lewandowsky Sy , Nockemann Sy , Capdepont Sy . , Siemens Sy . , Spanlang - Tappeiner Sy . i Richner - HANHART Sy.

Sam oftalmološki tretman KID sindroma je razočaravajući . Vaskularizacije rožnice , osobito u dubljim slojevima , ne pokazuju poboljšanje na bilo koji oblik liječenja. Liječenje se prvenstveno oslanja na ranom otkrivanju komplikacija same bolesti.

Title:

A case of Keratitis-Ichthyosis-Deafness Syndrome

Authors:

Andela Jukić, Ana Meter, Boško Stanišić

Institution:

KBC Zagreb

Aim:

Case report

Patients and methods:

Case report

Results:

A 11-year old boy was referred by his dermatologist because of poor vision and subjective symptoms-itching, foreign body sensation, photophobia and blepharospasm.

On examination, his visual acuity was 1/60 OD and 1/60 OS. External examination showed hyperkeratotic eyelids with polyosis and madarosis of eyelashes and eyebrows.

*Slitlamp examination demonstrated conjunctival hyperaemia and chronic keratopathy with neovascularization of deeper corneal layers. The culture of the conjunctival swabs yielded *Staphylococcus aureus*.*

He was referred for a systemic evaluation and appears to be the first case in his family. Findings from immunological and biochemical evaluation were normal except AST 625 IJ/mL. His skin in general was dry and hyperkeratotic with erythrokeratodermatos plaques over the face, trunk, palms and foot. The nails were dystrophic and his teeth were dysplastic. Result of skin biopsy showed hyperkeratosis, irregular acanthosis with elongated dermal papillae. HLA typing revealed HLA B27. Karyotype was normal. However, tonal audiogram showed bilateral perceptive hypoacusis. He began treatment with artificial tears and topical antibiotics according to culture of conjunctival swabs. After treatment his subjective symptoms were significantly decreased but vision wasn't improved.

Conclusion:

Keratitis-Ichthyosis-

Deafness syndrome (KID Syndrome) is very rare congenital disorder of the ectoderm characterised by keratitis with neovascularization, diffuse hyperkeratotic erythroderma and severe neurosensory hearing loss. Associated signs such as increased sensitivity to infections, neuromuscular dystrophies are useful for the diagnosis. Most c

ases are sporadic but familial cases have been described with unclear mode of inheritance. The differential diagnosis include Refsum Sy., Savin Sy., Jadassohn-

Lewandowsky Sy., Nockemann Sy., Capdepont Sy., Siemens Sy., Spanlang-Tappeiner Sy. and Richner-Hanhart Sy.

Ophthalmic treatment is disappointing. Vascularization of cornea, particularly when located in the deeper layers, is resistant to any form of treatment. Thus management mainly relies upon early detection of complication.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

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Ime i prezime / First and Last Name:-Last

Jukić

43. Vahid Jusufović

Naslov:

*HIRUŠKI TRETMAN POSTTRAUMATSKOG ENDOFTALMITISA KOD TRINAESTOGODIŠNJE DJEVOJČICE
E*

Autori:

Vahid Jusufović, Emir Čabrić, Zlatko Mušanović, Amra Nadarević Vodenčarević

Ustanova:

UKC TUZLA, Klinika za očne bolesti

Cilj:

Posttraumatski endoftalmits predstavlja tešku komplikaciju penetrantne povrede oka. Klinički se posttraumatski endoftalmits karakteriše bolovima, izraženom cilijarnom hiperemijom oka, pojavom hipopiona i zamućenjem u staklastom tijelu. Cilj našeg rada je prikazati naše iskustvo kao i nedoumice u hiruškom tretmanu posttrauma tskog endoftalmitisa.

Bolesnici i metode:

Rad predstavlja prikaz slučaja posttraumatskog endoftalmitisa kod trinaestogodišnje djevojčice, koja dolazi zbo g povrede desnog oka nekorištenom medicinskom iglom. Na prijemu se ustanovi manji hematom donjeg kapka, j ako izražena hiperemija veznice sa jakom eksudacijom u prednjoj sobici kao i početni hipopion. Naredna dva dana pokuša se sa medikamentoznom terapijom po smjernicama za liječenje endoftalmitisa, ali klinička slika se ne poboljšava. Potom se uradi kombinirani operativni zahvat u općoj anesteziji fakoemulzifikacija, vitrektomija, laser baraža probojne rane, intravitrealna aplikacija antibiotika i tamponada sa silikonskim uljem.

Rezultati:

Rani postoperativni rezultat hiruškog tretmana, posttraumatskog endoftalmitisa kod djevojčice je bio jako dobar. Vidna oštrina nakon primarnog kombiniranog operativnog zahvata je bila 0,7 bez korekcije. Do određenih problema u smislu retinalnih proliferacija dolazi nakon pet mjeseci. Tada nastupa ožiljanje mesta probajne rane i evidentira se početna ablacija retine, što nam odlaže mogućnost evakuacije silikonskog ulja. Šest mjeseci nakon prvog operativnog zahvata pokušano je izvršiti evakuaciju silikonskog ulja, ali zbog intraoperativnog nalaza i početne ablacije retine pristupili smo retamponadi sa silikonskim uljem.

Zaključak:

Način reagovanja kao i sama struktura oka u dječijoj dobi značajno se razlikuje od načina reagovanja kod odra slih osoba, tako da uvijek postoji mogućnost komplikacije u nekoj od faza postoperativnog liječenja. Ostali smo u nedoumici o načinu rješavanja probajne rane, da li uraditi samo laser barežu ili retinotomiju do same sklere.

Title:

SURGICAL TREATMENT OF POST-TRAUMATIC ENDOPHTHALMITIS AT 13 YEARS OLD GIRL

Authors:

Vahid Jusufović, Emir Čabrić, Zlatko Mušanović, Amra Nadarević Vodenčarević

Institution:

UKC TUZLA, Klinika za očne bolesti

Aim:

Post-traumatic endophthalmitis is a severe complication of penetrating injuries. Post-traumatic endophthalmitis is characterized by pain, expressed ciliary hyperemia of the eye, the appearance hyp opium and vitritis. The aim of this work was to present our experience and as well uncertainties in surgical treatment of post-traumatic endophthalmitis.

Patients and methods:

This is a case report of 13 years old girl, who was admitted to our hospital, due injury of right eye, with unused medical needle. At the moment of admission to our hospital we found small hematoma of the lower eyelid, very severe hyperemia of the conjunctiva with a strong exudation in the anterior chamber as well as the initial hypopion. She was started immediately with a medicament therapy according to guidelines for endophthalmitis, but as she wasn't getting any better we decided to perform a combined surgical procedure under general anesthesia.

Results:

Early postoperative result of surgical treatment in this case was very good. Visual acuity after first surgery was 0,7 without correction. Certain problems (retinal proliferations) were observed at a later postoperative ph5 months after initial surgery. There was some rooting of the location of wound and there was also initial retinal detachment. Because of that there we postpone evacuation of silicon oil. Six months after the first surgery, an attempt was made to evacuate the silicone oil, but due to intraoperative findings and initial retinal detachment we performed retamponade with silicone oil.

Conclusion:

Ways of reaction at children and as well as well the structure of children's eye differs significantly from the ways of reacting in adults, so there's always the possibility of complications in some stage of post-operative treatment. We remained in doubt on how to resolve a stab wound, whether to do only laser barrage or to perform retinotomy to the sclera.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

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Vahid

Ime i prezime / First and Last Name:-Last

Jusufović

44. Freja Bagatin

Naslov:

Pouzdanost mjerena očnog tlaka rebound tonometrom preko hidrogel i silikon hidrogel kontaktne leće

Autori:

Bagatin Freja, Krolo Iva, Škunca-Herman Jelena, Vidović Marta

Ustanova:

Klinički Bolnički Centar "Sestre milosrdnice", Zagreb, Hrvatska

Cilj:

Utvrđiti utječe li materijal mekih kontaktnih leća različitih dioptrijskih jakosti na vrijednosti intraokularnog tla ka (IOT) izmjerenoj rebound tonometrom.

Bolesnici i metode:

U ovo istraživanje uključeno je 100 ispitanika. Svi su nositelji hidrogel ili silicon hidrogel kontaktnih leća, bez glaukoma, očne hipertenzije i bolesti površine oka. Intraokularni tlak je izmјeren ICare tonometrom na oba oka preko meke kontaktnе leće i nakon skidanja kontaktnе leće. Izvršeno je pet mjerena na svakom oku. Dioptrijska jakost leća je u rasponu od -7.50D do +6.00D.

Rezultati:

Vrijednosti intraokularnog tlaka pokazuju dobru korelaciju kod mjerena sa i bez kontaktne leće. Srednja vrijednost IOT mjerenoj sa kontaktnom lećom (srednja vrijednost 16,00 +/- 1,60 mm Hg) i bez (srednja vrijednost 16,10 +/- -

1,80 mmHg) je +/- 0,87 mm Hg ($p > 0.05$). Za statističku analizu koristio se Studentov test za uzorke parova i izračunat je koeficijent korelaciјe

Zaključak:

Ova studija je pokazala dobru pouzdanost mjerena IOP preko mekih kontaktnih leća različitih materijala ICare tonometrom. Na temelju ove studije može se zaključiti da je mjerena rebound tonometrom preko mekih kontaktnih leća izvodivo i dovoljno precizno za kliničku primjenu.

Title:

Diagnostic accuracy of intraocular pressure measurement with rebound tonometry over hydrogel and silicone hydrogel contact lenses

Authors:

Bagatin Freja, Krolo Iva, Škunca-Herman Jelena, Vidović Marta

Institution:

Department of Ophthalmology, Clinical Hospital Centre „Sestre milosrdnice“, Zagreb, Croatia

Aim:

To assess the accuracy of intraocular pressure (IOP) measurements using rebound tonometry over hydrogel and silicone hydrogel contact lenses (CLs) of different powers.

Patients and methods:

100 patients were recruited for participation in this study. All were habitual wearers of hydrogel and silicone hydrogel contact lenses, and none had been diagnosed with glaucoma, ocular hypertension or anterior surface disease. IOP measurements were taken using a rebound tonometer (ICare). Five measurements were taken over each eye: with a soft contact lens in situ and then repeated without contact lens. Lens powers ranged from -7.50D to +6.00D.

Results:

A good correlation was found between IOP measurements with and without CLs. The mean difference (+/- SD) found between IOP measurement with (mean 16.00 +/- 1.60 mmHg) and without (mean 16.10 +/- 1.80 mmHg) contact lens was found to be +/- 0.87 mmHg ($p>0.05$). Statistical analysis was performed using the paired t-test and a correlation coefficient was calculated.

Conclusion:

This study showed good reliability of IOP measurements over CLs with a varying thickness profiles and different soft materials when using the rebound tonometry. We conclude that the use of rebound tonometry over a soft contact lens is feasible and accurate enough for clinical purposes.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

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Freja

Ime i prezime / First and Last Name:-Last

Bagatin

45. Marta Vidović

Naslov:

POVEZANOST STRUKTURALNIH I FUNKCIONALNIH PROMJENA KOD PSEUDOEOKSFOLIJATIVNOG SINDROMA

Autori:

Marta Vidović, Iva Krolo, Freja Bagatin, Katia Novak-Lauš

Ustanova:

Klinika za očne bolesti, Klinički bolnički centar „Sestre milosrdnice“, Zagreb

Cilj:

Usporediti strukturalne i funkcionalne promjene u grupama ispitanika sa jednostranim pseudoeksfolijativnim (PEX) sindromom, obostranim PEX sindromom i u skupini ispitanika sa PEX glaukomom

Bolesnici i metode:

Ova studija je uključila 114 ispitanika (228 očiju), podijeljenih u 4 grupe, ovisno o postojanju pseudoeksfolijacija: pacijenti sa jednostranim PEX sindromom, pacijenti sa obostranim PEX sindromom, pacijenti sa obostranim PEX glaukomom, te kontrolna skupina bez vidljivoga PEX-a ili glaukoma. Nakon kliničkog pregleda, učinjene su dijagnostičke pretrage: vidno polje koristeći G2 program automatizirane perimetrije (Octopus 900 Haag-Streit International) te optička koherentna tomografija (Cirrus Spectral-domain, High definiton) za mjerjenje prosječne debljine sloja živčanih vlakana optičkog živca, debljine vlakana u sva 4 kvadranta i prosječne makularne debljine.

Rezultati:

Analiza prosječne debljine RNFL-

a je pokazala da je najmanji dio ispitanih očiju unutar referentnih vrijednosti u skupini bolesnika s PEX glaukom (16,07%), pa u skupini s obostranim PEX sindromom (66,67%), zatim u skupini s jednostranim PEX sindromom (podjednaki broj kod manifestnog i pratećeg oka, 73,33%). Kada se analizirala debljina RNFL-a inferiornog kvadranta, najmanji je broj ispitanika unutar referentnih vrijednosti s PEX glaukom (12,5%), a 56,25% u skupini s obostranim PEX sindromom. Analiza superiornog kvadranta, također je pokazala najmanji broj ispitanika unutar referentnih vrijednosti u skupini s glaukom (35,71%), a slijede ga skupine s obostranim i jednostranim PEX sindromom. Analiza nazalnog i temporalnog kvadranta kod svih skupina ispitanika približno prati ovu zakonitost (ISNT pravilo).

Raspodjela očiju s obzirom na referentne vrijednosti prosječne makularne debljine između ispitanih skupina je statistički značajno različita. Najmanji udio referentnih vrijednosti nalazimo u skupini obostranog PEX glaukoma (28,57%), slijede skupine s jednostranim i obostranim PEX-om (66,67%) i skupini pratećih očiju kod jednostranog PEX-a (86,67%), a u kontrolnoj se skupini sve izmjerene vrijednosti nalaze unutar referentnih vrijednosti.

Stanjenje prosječne debljine sloja živčanih vlakana optičkog živca, osobito u inferiornom i superiornom kvadra-

ntu kao i promjene makularne debljine, nisu pokazali oštećenja vidnoga polja u grupi ispitanika sa unilateralnim i bilateralnim pseudoeksfolijativnim sindromom. U skupini ispitanika sa PEX glaukomom postoji statistički značajna povezanost strukturalnih i funkcionalnih promjena.

Zaključak:

Stanjenje prosječne debljine sloja živčanih vlakana, osobito u inferiornom i superiornom kvadrantu, kao i smanjenje prosječne makularne debljine, koje se javljaju prije oštećenja vidnog polja u osoba sa pseudoeksfolijativnim sindromom, imaju važnu ulogu u ranom otkrivanju glaukoma. Klinički vidljiv PEX sindrom predstavlja čimbenik rizika za nastanak glaukoma.

Title:

Correlation between structural and functional changes in pseudoexfoliation syndrome

Authors:

Marta Vidović, Iva Krolo, Freja Bagatin, Katia Novak-Lauš

Institution:

University Department of Ophthalmology, Clinical Hospital Center „Sestre milosrdnice“, Zagreb

Aim:

To determine correlation of structural and functional changes in groups of examinees with unilateral pseudoexfoliation (PEX) syndrome, bilateral PEX syndrome and PEX glaucoma.

Patients and methods:

This study included 114 examinees (228 eyes), divided in 4 groups according to presence of PEX: patients with unilateral syndrome, bilateral syndrome, bilateral PEX glaucoma and control group without presence of glaucoma or syndrome. After clinical examination visual field was performed using G2 programme in automated perimetry (Octopus 900 Haag-Streit International) and Optical coherent tomography (Cirrus Spectral-domain, High definition) for measuring average retinal nerve fiber layer (RNFL) and layer thickness in 4 quadrants, average macular thickness and macular volume.

Results:

Analysis of average thickness of RNFL has showed that the least part of examined eyes is within the referral values in the group of patients with PEX glaucoma (16,07%), then in the group with bilateral PEX syndrome (66,67%), and then in the group with unilateral PEX syndrome (equal number in manifested as well as felloweye, 73,33%). When RNFL inferior quadrant thickness was analysed the smallest number of examinees was in the referral value with PEX glaucoma (12,5%) and 56,25% was in the group with bilateral PEX syndrome. Analysis of superior quadrant also has showed that smallest number of examinees is in referral values in glaucoma group (35,71%), followed by the bilateral and unilateral PEX syndrome. Nasal and temporal quadrant analysis in every group of examinees roughly follows this rule (ISNT rule).

Distribution of eyes according to referral values of average macular thickness between the examined groups is statistically significant. We find the least amount of referral values in bilateral PEX glaucoma (28,57%) , followed by unilateral and bilateral PEX (66,67%) and group of eyes with unilateral PEX (86,67%). In the control group all the measured values are within the referent values.

Thinning of average RNFL specially in inferior and superior quadrant as well as changes in macular parameter

s haven't showed visual field defects in groups of examinees with unilateral and bilateral exfoliation syndrome. In a group of examinees with exfoliative glaucoma there is statistically significant correlation between examined structural and functional changes.

Conclusion:

Loss in average thickness of RNFL, especially in inferior and superior quadrants, as well as decrease in average macular thickness in eyes with PEX, have an important role in early glaucoma detection , prior the changes in visual field, and pseudoexfoliation syndrome was determined as a risk factor for glaucomatous defects development.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

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46. Sonja Jandroković

Naslov:

Vrijednost podataka dobivenih optičkom koherentnom tomografijom prednjeg segmenta oka u ispitanika sa suspendiranim zatvaranjem očnog kuta

Autori:

Sonja Jandroković, Smiljka Popović Suić, Marija Barišić Kutija, Ivan Škegro, Tomislav Kuzman

Ustanova:

KBC Zagreb

Cilj:

Cilj je usporediti podatke dobivene optičkom koherentnom tomografijom prednjeg segmenta oka (AS-OCT) kod ispitanika kojima je gonioskopski ustanovljen uski kut s kontrolnom skupinom. Ujedno se mjeri i procjenjuje izgled prednjeg segmenta oka kod pojedinaca s uskim kutom i sumnjom na zatvaranje očnog kuta.

Bolesnici i metode:

Prospektivno ispitivanje. Ispitanici će biti podijeljeni u dvije skupine: ispitanici s uskim kutem (gonioskopski potvrđen) i kontrolna skupina. Svi će ispitanici biti pregledani te potom snimljeni na uređaju Visante OCT model 1 000 (software ver.3.0). ACD dubina prednje očne kao i podaci o očnom kutu: AOD 750 i TISA 750 će biti snimljeni.

Rezultati:

Prvi podaci ukazuju da je dubina prednje očne sobice u ispitanika s gonioskopski užim kutem (ACD) manja te da podaci o očnom kutu ukazuju na niže vrijednosti u usporedbi s kontrolnom skupinom. Cilj je ustvrditi koji podatak ima najjače statističko uporište za procjenu i dijagnozu uskog kuta i potvrdu zatvaranja kuta.

Zaključak:

AC OCT je vrlo vrijedna dijagnostička pretraga i pomoći u razumijevanju bolesti uskog očnog kuta. Omogućava vizualizaciju, snimanje i mjerjenje struktura prednjeg segmenta oka. Nažalost, postoji velika mogućnost krive interpretacije numeričkih podataka i anatomskih različitosti te zahtjeva daljnja istraživanja.

Title:

Anterior segment optical coherence tomography parameters in primary angle closure suspect

Authors:

Sonja Jandroković, Smiljka Popović Suić, Marija Barišić Kutija, Ivan Škegro, Tomislav Kuzman

Institution:

KBC Zagreb

Aim:

To compare anterior segment parameters, assessed by anterior segment optical coherence tomography in patients with gonioscopic finding of narrow angle and control group. Also to measure and evaluate the appearance of the ocular anterior segment in primary angle closure suspect.

Patients and methods:

A prospective study. Subjects will be devided into two groups: narrow angle and control group. All subjects will be measured in qualified images using Visante OCT model 1000 customized software version 3.0. Anterior chamber depth (ACD) and angle parametres: angle opening distance (AOD750) , trabecular-iris space area (TISA750) and scleral spur angle will be measured and compared with the control group.

Results:

The first outcomes showed that ACD is smaller and the scleral spur angle is narrower in the primary angle closure suspect group than in the controul group. Still, the goal is to determine which parameters have the greatest statistical significance for the diagnosis of narrow angle and confirm primary angle closure suspect.

Conclusion:

Anterior segment optical coherence tomography is very helpfull for understanding of angle closure disease. There are great possibilities for misinterpretation of numerical data and anatomic changes asswell as nonanatomic factors so it require further investigation.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

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Sonja

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Jandroković

47. Vladimir Pfeifer

Naslov:

Lamellar Corneal Surgery

Autori:

Vladimir Pfeifer, Spela Stunf

Ustanova:

University Eye Hospital, Medical Center Ljubljana, Slovenia

Cilj:

To introduce and discuss new techniques in corneal lamellar surgery.

Bolesnici i metode:

In last decade there was trend into the lamellar keratoplasty. New techniques were developed. In direction of minimal invasive surgery the lamellar techniques induce less trauma and provide quicker rehabilitation. The surgical outcome of lamellar surgery is comparable to penetrating keratoplasty regarding visual acuity, the rehabilitation is quicker, and some of these surgeries can be repeated. Techniques like Deep Anterior Lamellar Keratoplasty (DALK) were introduced. Anwar's technique is named Big Bubble technique and will be shown. Also all kind of posterior lamellar surgeries will be mentioned and some of them will be shown (DLEK, DSEK, DSAEK). Mellers Descemet Membrane Endothelial Keratoplasty (DMEK) will be discussed also.

Rezultati:

New minimally invasive keratoplasty techniques provide good results. Visual acuity is comparable to PKP, there is less induced astigmatism. In lamellar keratoplasty the rehabilitation time is shorter, surgically induced astigmatism is lower, procedures can be repeated with less trauma and penetrating keratoplasty (PKP) is always possible.

Zaključak:

These new techniques of corneal transplantation are excellent alternative to PKP, provide shorter rehabilitation, less induced astigmatism and some of them are procedures that need to be performed only once in lifetime like DALK. In complicated cases with high risk for rejection artificial cornea can be used.

Title:

Lamellar Corneal Surgery

Authors:

Vladimir Pfeifer, Spela Stunf

Institution:

University Eye Hospital, Medical Center Ljubljana, Slovenia

Aim:

To introduce and discuss new techniques in corneal lamellar surgery.

Patients and methods:

In last decade there was trend into the lamellar keratoplasty. New techniques were developed. In direction of minimal invasive surgery the lamellar techniques induce less trauma and provide quicker rehabilitation. The surgical outcome of lamellar surgery is comparable to penetrating keratoplasty regarding visual acuity, the rehabilitation is quicker, and some of these surgeries can be repeated. Techniques like Deep Anterior Lamellar Keratoplasty (DALK) were introduced. Anwar's technique is named Big Bubble technique and will be shown. Also all kind of posterior lamellar surgeries will be mentioned and some of them will be shown (DLEK, DSEK, DSAEK). Mellers Descemet Membrane Endothelial Keratoplasty (DMEK) will be discussed also.

Results:

New minimally invasive keratoplasty techniques provide good results. Visual acuity is comparable to PKP, there is less induced astigmatism. In lamellar keratoplasty the rehabilitation time is shorter, surgically induced astigmatism is lower, procedures can be repeated with less trauma and penetrating keratoplasty (PKP) is always possible.

Conclusion:

These new techniques of corneal transplantation are excellent alternative to PKP, provide shorter rehabilitation, less induced astigmatism and some of them are procedures that need to be performed only once in lifetime like DALK. In complicated cases with high risk for rejection artificial cornea can be used.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Vladimir

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Pfeifer

48. Tvrta Benašić

Naslov:

Bilateralna donja alitudinalna hemianopsija - prikaz slučaja

Autori:

Benašić Tvrta, Vinković Maja, Bradvica Mario, Mirna Stapić, Vera Jelušić

Ustanova:

KBC Osijek, DZ Đakovo

Cilj:

Prikazati diferencijalnu dijagnostiku donje alitudinalne hemianopsije

Bolesnici i metode:

Prikaz slučaja pacijenta starog 85 god

Rezultati:

Prikaz kliničke slike i nalaza.

Zaključak:

Potrebno je napraviti detaljnu dijagnostiku kako bi se utvrdila dijagnoza i dala moguća terapija.

Title:

Bilateral inferior alitudinal defect - case report

Authors:

Benašić Tvrta, Vinković Maja, Bradvica Mario, Mirna Stapić, Vera Jelušić

Institution:

KBC Osijek, DZ Đakovo

Aim:

Differential diagnostics of bilateral inferior alitudinal defects

Patients and methods:

Case report of a male 85 years old

Results:

Clinical picture is presented.

Conclusion:

It's essential to make detailed diagnostics in order to give best possible therapy.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

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Tvrtka

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Benašić

49. Vladimir Pfeifer

Naslov:

Artificial Iris Implantation in Severe Iris Defects

Autori:

Vladimir Pfeifer, Marija Ana Schwarzbartl Pfeifer, Alja Črnej

Ustanova:

University Eye Hospital, Ljubljana, Slovenia

Cilj:

In patients implanted with artificial iris (AI) the chronic inflammation is common problem. The special suturing technique was developed to fixate AI to the sulcus. This technique can be used in aphakic as well as in pseudophakic eyes. The goal is to fixate AI to the sulcus in the way that it does not touch sulcus or posterior iris surface.

Bolesnici i metode:

Patients with posttraumatic aniridia or large iris defects were implanted with AI alone or in combination with IOL sutured to the AI. Special loop sutures were used. With lasso technique IOL was sutured to the AI and later to the sulcus using the same suture and zigzag suturing technique. Prior to implantation AI was trimmed or trephined to 10.5 mm. Before the end of the surgery the AI or AI IOL complex was centered to the anatomical axis of the globe by adjusting zigzag sutures.

Rezultati:

Good centration of the AI to the anatomical axis of the eye was achieved. Photophobia was not a problem any more. Also aphakia could be corrected. Visual acuity improved markedly, especially in bright light and sunshine. No clinically relevant anterior chamber inflammation was noticed. Longer followup and new cases are presented.

Zaključek:

AI implantation in aniridia, ocular trauma and in severe iris defects is safe and effective procedure in combination with floating suturing technique. The photophobia disappears, visual acuity is improved and there is a tremendous esthetic effect.

Title:

Artificial Iris Implantation in Severe Iris Defects

Authors:

Vladimir Pfeifer

Institution:

University Eye Hospital, Ljubljana, Slovenia

Aim:

In patients implanted with artificial iris (AI) the chronic inflammation is common problem. The special suturing technique was developed to fixate AI to the sulcus. This technique can be used in aphakic as well as in pseudophakic eyes. The goal is to fixate AI to the sulcus in the way that it does not touch sulcus or posterior iris surface.

Patients and methods:

Patients with posttraumatic aniridia or large iris defects were implanted with AI alone or in combination with IOL sutured to the AI. Special loop sutures were used. With lasso technique IOL was sutured to the AI and later to the sulcus using the same suture and zigzag suturing technique. Prior to implantation AI was trimmed or trephined to 10.5 mm. Before the end of the surgery the AI or AI IOL complex was centered to the anatomical axis of the globe by adjusting zigzag sutures.

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Conclusion:

AI implantation in aniridia, ocular trauma and in severe iris defects is safe and effective procedure in combination with floating suturing technique. The photophobia disappears, visual acuity is improved and there is a tremendous esthetic effect.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Vladimir

Ime i prezime / First and Last Name:-Last

Pfeifer

50. Antonio Kokot

Naslov:

Holistički pristup pacijentu s okluzijom centralne retinalne vene kao posljedicom hipertenzivne retinopatije - prikaz slučaja

Autori:

Kokot Antonio, Brzović Šarić Vlatka, Šarić Borna

Ustanova:

Medicinski fakultet Osijek, Sveučilište J.J.Strossmayera u Osijeku; Klinika za očne bolesti, Klinička bolnica „Sveti Duh“, Zagreb, Hrvatska

Cilj:

Opisati potrebu cjelovitog (holističkog) pristupa pacijentu s napadima povišenog krvnog tlaka praćenih hipertenzivnom retinopatijom i njenim komplikacijama.

Bolesnici i metode:

Prikaz slučaja 30-

godišnjeg muškarca koji se u našu Kliniku javio zbog potrebe za drugim liječničkim mišljenjem radi perzistirajuće oftalmološke problematike na lijevom oku te iznenadne pojave sličnih simptoma i na desnom oku. Pacijent je unazad godinu dana liječen intravitrealnim injekcijama anti-

VEGF u drugoj ustanovi zbog okluzije centralne retinalne vene lijevog oka te zbog sumnje na vaskulitis također primao i peroralnu terapiju kortikosteroidima.

Rezultati:

Pri našem prvom pregledu najbolje korigirana vidna oštrina obostrano je bila 1,0. Pregledom fundusa lijevog oka u midrijazi ustanovljena su brojna mrljasta krvarenja, „cotton wool“ i tvrdi lipidni eksudati uz edem makule te kongestiju papile vidnoga živca s krvarenjima oko diska uz značajnu izvijuganost vena. Na desnom oku registrirana je kongestija diska, diskalibracija u venskom bazenu te nekoliko „cotton wool“ eksudata i mrljastih krvarenja oko diska. Učinjeni su OCT, FAG i VP Octopus koji potvrđuju radnu dijagnozu maligne hipertenzivne retinopatije. Anamnestički te iz starih nalaza je vidljivo kako je pacijent liječen sa 6 intravitrealnih injekcija anti-VEGF u lijevo oko kroz 8 mjeseci. Pacijent je nakon svake intravitrealne injekcije osjetio kratkotrajno poboljšanje vida, međutim stanje bi se vrlo brzo ponovno pogoršalo i tako bi osciliralo iz mjeseca u mjesec. Unazad mjesec dana počeli su se pojavljivati simptomi i na desnom oku. Krvni testovi su pokazali normalne vrijednosti unutar fizioloških granica. Nalazi kardiologa ukazuju na „esencijalnu hipertenziju“ i „sindrom bijele kute“ te je ordinirana antihipertenzivna terapija koja nije dala značajne rezultate. Dolaskom pacijenta u našu Kliniku, pregledom i napose opširnijim razgovorom ustanovljava se kako pacijent ima vrlo nizak prag tolerancije na stres izazvan ili posredovan okolinom čega je i sam svjestan te je nakon pregleda preporučen pregled psihijatra. Psihijatar ordinira adekvatnu terapiju te kroz period od nekoliko mjeseci dolazi do normalizacije u osculatornoj sistemskoj hipertenziji i posredno poboljšanja stanja na očima.

Zaključak:

Djelomična okluzija centralne retinalne vene ili njenih ogranaka jedna je od komplikacija koje mogu pratiti hipertenzivnu retinopatiju. Hipertenzivna retinopatija nije uobičajeno stanje kod mlađih zdravih osoba stoga je pot

rebno cjelovito (holistički) pristupiti pacijentu kako ne bi posljedice sistemskog stanja pogrešno protumačili kao primarnu oftalmološku bolest i kao takvu je izolirano i neuspješno liječili.

Title:

A holistic approach to the patient with occlusion of the central retinal vein as a result of hypertensive retinopathy – case report

Authors:

Kokot Antonio, Brzović Šarić Vlatka, Šarić Borna

Institution:

Faculty of medicine Osijek, J.J.Strossmayer University of Osijek; University Eye Clinic, University Hospital „Sveti Duh“, Zagreb, Croatia

Aim: To describe the need for integrated (holistic) approach to the patient with attacks of high blood pressure followed by hypertensive retinopathy and its complications.

Patients and methods:

A case report of 30-year-old male patient who appeared in our clinic because of the need for second medical opinion in order to persistent ophthalmic problems in the left eye and the sudden appearance of similar symptoms in the right eye. In the past period in another institution the patient was treated with several intravitreal injections of anti-VEGF due to occlusion of the central retinal vein of left eye and also received oral corticosteroids because of suspected vasculitis.

Results:

During our first examination best corrected visual acuity on both eyes was 1.0. Fundus examination of left eye showed numerous blot hemorrhages, “cotton wool” and hard lipid exudates with macular edema and congestion of the optic nerve with hemorrhages around and significant tortuosity of veins. On the right eye was registered congestion of the optic disc, discalibration in the venous pool, a few “cotton wool” exudates and hemorrhages around optic disc. The performed OCT, FA and VF Octopus confirmed our preliminary diagnosis of malignant hypertension retinopathy. Patient history and older findings shows that he was treated with 6 intravitreal anti-VEGF injections during the period of 8 months. The patient showed short-term improvement in vision after each intravitreal injection, however, the situation have rapidly worsened again and so would fluctuate from month to month. The last month began to appear symptoms also in the right eye too. Blood test showed normal values within the physiological range. Findings of the cardiologist suggested “essential hypertension” and “white coat syndrome”, administered antihypertensive therapy did not provide significant results. With the arrival of the patient in our clinic we performed examination and in particular more extensive conversation from which we established that patient has very low tolerance to stress induced or mediated from environment. The patient claim he was aware of that so we recommended examination of the psychiatrist. The psychiatrist administered adequate treatment and over a period of several months oscillatory hypertension was normalized and indirectly improve situation in the eyes.

Conclusion:

Partly occlusion of the central retinal vein or its branches is one of the complications that can follow the hypertensive retinopathy. Hypertensive retinopathy is not a common condition in young healthy subjects, therefore, it is very important to take comprehensive (holistic) approach to the patient in order to avoid the consequences of system status misinterpreted as primary ophthalmic disease and as such isolated and unsuccessfully treated.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Antonio

Ime i prezime / First and Last Name:-Last

Kokot

51. Vlatka Brzović Šarić

Naslov:

Markeri oksidativnog stresa u staklastom tijelu i serumu pacijenata s proliferativnom dijabetičkom retinopatijom

Autori:

Vlatka Brzović Šarić, Domagoj Đikić, Borna Šarić

Ustanova:

Klinika za očne bolesti Medicinskog fakulteta Sveučilišta Josipa Jurja Strossmayera u Osijeku, Klinička bolница "Sveti Duh", Zagreb, Republika Hrvatska

Cilj:

Ključni parametri etiopatogeneze proliferativne dijabetičke retinopatije (PDR) su promjena oksidacijsko-reduksijske homeostaze i smanjenje atioksidativne obrane što rezultira nastankom oksidativnog stresa u uvjetim a unutarstanične hiperglikemije, a praćeno je stvaranjem vaskularnog endotelnog čimbenika rasta (VEGF). Cilj ove studije bio je pronaći korelacije između odabranih markera oksidativnog stresa u pacijenata s dijabetesom tipa 2, koji su razvili PDR i potom ih usporediti s vrijednostima istih markera u kontrolnoj skupini nedijabetičara. Prvo smo uspoređivali odabранe markere oksidativnog stresa unutar uzoraka staklastog tijela i seruma zasebno, a potom smo uspoređivali vrijednosti između uzoraka staklastog tijela i seruma međusobno.

Bolesnici i metode:

Studija je uključivala dvije grupe vitrektomiranih bolesnika; 37 dijabetičara tipa 2, s razvijenim PDRom i 50 bolesnika, nedijabetičara u kontrolnoj skupini. U obje grupe su mjereni i međusobno uspoređivani parametri unutar staklastog tijela i serumu: lipidna peroksidacija (LPO), malondialdehid (MDA), superoksid dismutaza (SOD), reducirani glutation (GSH) i vaskularni endotelni čimbenik rasta (VEGF).

Rezultati:

Kod dijabetičara (PDR skupine) u staklastom tijelu je dokazan povećan oksidativni stres zbog registriranih viših razina parametara oksidativnog stresa: LPO i MDA u odnosu na kontrolnu ne dijabetičku skupinu ($p<0,001$ za LPO i $p=0,001$ za MDA). U serumu, također je potvrđen povišen oksidativni stres kod PDR skupine, uslijed izmjenjenih viših vrijednosti istih parametara: LPO i MDA ($p<0,001$ za LPO). Aktivnost LPO-a, u oba tjelesna humorala odjeljka, statistički je značajno veća kod dijabetičara u odnosu na kontrolnu skupinu. Uočena je statistički značajna pozitivna korelacija ($p<0,001$) mjerenoj LPO-u između staklastog tijela i serumu, kod PDR skupine. U bolesnika s dijabetesom statistički značajno je smanjena aktivnost antioksidativnogenzima SOD u staklastom tijelu ($p<0,001$), a povećana u serumu ($p<0,001$). GSH aktivnost u dijabetičara je bila održana, u oba tjelesna humorala odjeljka. U usporedbi s kontrolnom ne dijabetičkom skupinom, u PDR skupini značajno je viša razina mjerenoj VEGF-a lokalno u staklastom tijelu ($p<0,001$) u odnosu na serum ($p<0,001$). Analiza korelacija vrijednosti VEGFa u staklastom tijelu i serumu, u skupini dijabetičara imala je negativan predznak. Također u PDR skupini uočena je statistički značajna pozitivna korelacija VEGF-a i SOD-a u serumu ($p=0,042$).

Zaključak:

Utvrdjene korelacije bi mogle pridonijeti dalnjem istraživanju praćenja dijabetičke retinopatije. Između pet odabralih markera uočena su dva s najvišim korelativnim odnosima u staklastom tijelu i serumu te bi se isti mogli da se razmatrati prilikom evaluacije napredovanje bolesti.

Title:

Oxidative stress markers in the vitreous and serum of proliferative diabetic retinopathy patients

Authors:

Vlatka Brzović Šarić, Domagoj Đikić, Borna Šarić

Institution:

Ophthalmology Clinic, University Hospital Sveti Duh, Zagreb, Croatia

Aim:

Major parameters in etiopathogenesis of proliferative diabetic retinopathy (PDR) are changes in oxidation-reduction homeostasis and decrease of antioxidant defence which leads to occurrence of oxidative stress in the condition of intracellular hyperglycemia and is followed by production of vascular endothelial growth factor (VEGF). The aim of this study was to find correlations between selected oxidative stress markers in diabetes 2 patients who have developed proliferative diabetic retinopathy (PDR) and to compare them with same marker values in non-diabetic controls. We have first correlate selected oxidative stress markers within vitreous and serum specimens separately and latter correlated them between vitreous and serum specimens.

Patients and methods:

The study included two groups of patients who underwent a vitrectomy; 37 patients with type 2 diabetes with developed proliferative diabetic retinopathy (PDR) and 50 non-diabetic controls. Lipid peroxidation (LPO), malondialdehyde (MDA), superoxide dismutase (SOD), reduced glutathione (GSH) and vascular endothelial growth factor (VEGF), were measured in the vitreous and serum of both groups and correlated with each other.

Results:

In diabetic group (PDR) increased oxidative stress in vitreous is proven with higher values of measured oxidative stress parameters: LPO and MDA compared with non-diabetic controls ($p<0,001$ for LPO and $p=0,001$ for MDA). For serum in PDR group, increased oxidative stress is proven as well since the same measured parameters values were higher too: LPO and MDA ($p<0,001$ for LPO). LPO activity in both humoral compartments is significantly higher in diabetics compared to controls. We noticed significant positive correlation ($p<0,001$) of LPO between vitreous and serum in PDR group. In diabetics, antioxidant enzyme – SOD activity in vitreous is significantly reduced ($p<0,001$), but increased in serum ($p<0,001$). GSH activity was held in both humoral compartments in diabetics. Levels of measured vitreal VEGF were much higher compared to serum ($p<0,001$) in diabetic group than measured in non-diabetic controls. Correlated VEGF values for vitreous and serum in diabetic group had negative character. In PDR group statistically positive correlation is proven between VEGF and SOD values in serum ($p=0,042$).

Conclusion:

The established correlations might contribute to research on monitoring diabetic retinopathy. Among the five selected markers, two of the most prominent highly correlative ones in both vitreous and serum could be taken into consideration when evaluating disease progress.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.sc.

Ime i prezime / First and Last Name:-First

Vlatka

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Brzović Šarić

52. Petra Ćoza

Naslov:

Hornerov sindrom kao manifestacija non-Hodgkin limfoma

Autori:

Ćoza Petra, Mišlenović Tamara, Kovačević Damir

Ustanova:

Klinički bolnički centar Rijeka

Cilj:

Prikaz bolesnika sa Hornerovim sindromom kao manifestacijom non-Hodgkin limfoma

Bolesnici i metode:

prikaz slučaja

Rezultati:

Kod bolesnika sa klasičnom trijadom simptoma Hornerovog sindroma koji je dokazan farmakološkim testom daljnjom obradom utvrđena je cervikalna limfadenopatija. Punktijom uvećanog limfnog čvora postavljena je dijagnoza non-Hodgkin limfoma.

Zaključak:

Simpaticki sustav je na svom putu od hipotalamus do očnih struktura podložan brojnim patološkim procesima zbog čega je bitno pomno istražiti etiologiju koja stoji iza Hornerovog sindroma.

Title:

Horner's syndrome: an unusual presentation of non-Hodgkin lymphoma

Authors:

Ćoza Petra, Mišlenović Tamara, Kovačević Damir

Institution:

Clinical medical center Rijeka

Aim:

Case report on a patient with Horner's syndrome as an unusual manifestation of non-Hodgkin lymphoma

Patients and methods:

case report

Results:

In a patient with a typical triad of Horner syndrome symptoms that have been proven with pharmacological examination further study had shown cervical lymphadenopathy. Enlarged lymph node puncture lead to a non-Hodgkin lymphoma diagnosis.

Conclusion:

The sympathetic system is susceptible to various pathological processes on its way from hypothalamus to ocular structures, which is why it is exceptionally important to examine the etiology behind Horner syndrome.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

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Ćoza

53. Zdravko Mandić

Naslov:

Suvremenih pristup tretmanu primarnog angularnog blok glaukoma

Autori:

Zdravko Mandić

Ustanova:

Klinika za očne bolesti KB "Sestre milosrdnice" Zagreb

Cilj:

Na temelju relevantnih studija vidjeti koji je pristup liječenja ovog glaukoma najefikasniji

Bolesnici i metode:

Analizirane su sve relevantne studije zadnjih 5 godina koje su se bavile ovim problemom

Rezultati:

Može se ustvrditi da još uvjek nije jasno kada pristupiti profilaktičkom tretmanu. Čini nse da je ekstrakcija katarakte više efektnija nego tradicionalna terapija

Zaključak:

Tretmanangularnog-blok glaukoma ovisi o oštećenju kuta odnosno o glaukomatoznoj optičkoj neuropatiji. Međutim najnoviji pš odaci govore da ekstrakcija katarakte je efektnija u kontroli očnog tlaka nego različite glaukomske proced ure

Title:

Current surgery for management primary angle closure glaucoma

Authors:

Zdravko Mandic

Institution:

Eye department KBC "Sestre milosrdnice" Zagreb

Aim:

To review the evidence based management of each type

Patients and methods:

Discuss the evidence - based management

Results:

Treatment of angle closure depends on the signs of chronic angle damage and glaucomatous optic neuropathy. In the absence of such evidence serial gonioscopy may be preferred therapy

Conclusion:

Recent data suggest that cataract extraction may be more effective at controlling the IOP than laser or incisional glaucoma procedure.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Prof.dr.sc.

Ime i prezime / First and Last Name:-First

Zdravko

Ime i prezime / First and Last Name:-Last

Mandic

54. Marija Škara Kolega

Naslov:

Diplopija i konvergentni strabizam

Autori:

Škara Kolega M, Kovačević S, Sessa Z, Čanović S, Didović Pavičić A, Oštrić Brnjac A, Jurin A

Ustanova:

Opća bolnica Zadar

Cilj:

Prikazati diferencijalno dijagnostički postupak kod diplopija i konvergentnog strabizma

Bolesnici i metode:

Prikazali smo dijete u dobi 6 godina sa jutarnjim diplopijama i konvergentnim strabizmom, te tijek postavljanja dijagnoze i liječenja.

Rezultati:

Obradom, praćenjem, ordiniranjem naočala sa punom korekcijom došlo je do nestanka diplopija.

Zaključak:

Djeca sa konvergentnim strabizmom prije maturacije binokularnog vida mogu razviti dvoslike. Dvoslike su zajednički simptom kod više tipova konvergentnog strabizma te je temeljiti pregled bitan za postavljanje konačne dijagnoze i liječenje.

Title:

Diplopia and convergent strabismus

Authors:

Škara Kolega M, Kovačević S, Sessa Z, Čanović S, Didović Pavičić A, Oštrić Brnjac A, Jurin A

Institution:

General hospital of Zadar

Aim:

To describe the differential diagnosis procedure in diplopia and convergent strabismus

Patients and methods:

We present a child, 6 years old, with morning diplopia and convergent strabismus, the course of diagnosis and treatment.

Results:

The analysis, monitoring, prescribing glasses with full correction, there was a disappearance of diplopia

Conclusion:

Children with convergent strabismus before maturation of binocular vision may develop diplopia. The double vision is a common symptom in multiple types of convergent strabismus and a thorough examination is essential for the diagnosis and treatment.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Marija

Ime i prezime / First and Last Name:-Last

Škara Kolega

55. Dean Šarić

Naslov:

Fotorefraktivna keratektomija nakon zahvata umrežavanja kolagena za korekciju refrakcijske greške u ranom stadiju keratokonusa

Autori:

D. Šarić, D. Grgić, Z. Vukas, Z. Mandić

Ustanova:

Poliklinika Optical Express

Cilj:

Evaluirati mogućnosti zahvata fotorefraktivne keratektomije nakon zahvata umrežavanja kolagena za korekciju refrakcijske greške u ranom stadiju keratokonusa

Bolesnici i metode:

Retrospektivna studija sa 26 pacijenata sa ranim stadijem keratokonusa (stadij 1) koji su učinili zahvat fotorefraktivne keratektomije šest mjeseci iza zahvata umrežavanja kolagena. Svi pacijenti praćeni su najmanje 2 godine. Rezultati su mjereni preoperativno, te postoperativno 6 mjeseci, jednu i dvije godine iza zahvata fotorefraktivne keratektomije. Kontrolna grupa je bila 50 pacijenata sa normalnim rožnicama koji su u fotorefraktivnom keratokomijom operirali kratkovidnost

Rezultati:

Pacijenti sa keratokonusom bili su približno 6% potkorigirani u odnosu na kontrolnu grupu. Drugih razlika među grupama nije bilo.

Zaključak:

Potrebna je izrada preciznih nomograma za operacije fotorefraktivne keratektomije kod pacijenata koji su prethodno bili podvrgnuti zahvatu umrežavanja kolagena

Title:

Photorefractive keratectomy combined with collagen cross-linking for the correction of refractive errors in patients with early stage keratoconus

Authors:

D. Šarić, D. Grgić, Z. Vukas, Z. Mandić

Institution:

Optical Express

Aim:

To evaluate clinical outcome of combined photorefractive keratectomy (PRK) and corneal collagen cross-linking (CXL) for the treatment of refractive errors in patients with early stage keratoconus

Patients and methods:

A retrospective study of 26 patients with early stage keratoconus (stage 1) who underwent sequential CXL followed by PRK after 6 months. All patients had at least 2 years of follow-up. Data were collected preoperatively and postoperatively at the 6-month, 1-year, and 2-year follow-up visit after PRK surgery. Control group were 50 patients without keratoconus that underwent PRK for myopia

Results:

Patients in keratoconus group were undercorrected in comparison with control group for approximately 6%. There was no difference in any other outcome in two groups.

Conclusion:

There is a need for different nomograms for patients that will be treated by photorefractive keratectomy if they had previous collagen cross-linking

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Doc.dr.sc.

Ime i prezime / First and Last Name:-First

Dean

Ime i prezime / First and Last Name:-Last

Šarić

56. Snježana Miljak

Naslov:

Određivanje maksimalno prilagodljivih tvrdih plinopropusnih kontaktnih leća za najzahtjevниje, irregularne rožnice

Autori:

Miljak S., Jelovac Gjeldum A., Markovic I.

Ustanova:

Klinički bolnički centar Split, Klinika za očne bolesti

Cilj:

.Prikazati klinička iskustva u određivanju kontaktnih leća kod vrlo zahtjevnih, nepravilnih rožnica.

Bolesnici i metode:

U retrospektivnoj studiji odredili smo kontaktne leće za 45 očiju od 37 pacijenata iz naše ambulante za kontaktne leće. Svima je ispitana objektivna i subjektivna refrakcija, određena najbolja korekcija u naočalama, pregle dani su na biomikroskopu s procjepnom svjetiljkom, manualnom keratometru i kornealnom topografu.

Rezultati:

U grupi od 37 pacijenata bilo je 25 muškaraca (68%) i 12 žena (32%). Prosječna životna dob je bila 23,03±6,23 godine (od 10-

52). Uzroci rožnične nepravilnosti u dva slučaja su bile ozljede, pelucidna marginalna degeneracija (PMD) u 4 pacijenta, kornealna keratoplastika u dva pacijenta, jedna pacijentica je dobila ektaziju obje rožnice nakon LAS IK-

a, ostali su imali uznapredovali keratokonus. Na četiri oka postavili smo Ultra Health Synergy Eyes hibridne kontaktne leće (CL), na jedno semiskleralnu Rose K2 XL CL, osam je riješeno sa post graft Rose K2 CL, na dva oka postavljene su IC Rose K2 CL, na četiri NC Rose K2 CL, a na ostale standardne Rose K2 CL, s različitim prilagodbama ruba. Jedna pacijentica nosi Rose K2 standardnu CL u sistemu s mekom kontaktnom lećom (piggyback). Svi pacijenti (100%) su imali poboljšanje vidne oštchine, od 20% do 90% u usporedbi s najboljom naočalnom korekcijom. Većina je i ranije nosila različite vrste konvencionalnih leća za keratokonus i svi su izrazili poboljšanje u vidu i ugodnosti nošenja, te produljenje vremena nošenja kontaktnih leća na 12 sati i više u odnosu na prosječnih 8 sati s prethodnim lećama.

Zaključak:

Zahvaljujući napretku tehnologije u materijalima i izradi kontaktnih leća, te inovativnim dizajnima koji se teže maksimalno prilagoditi svakoj rožnici, kontaktolozi sada mogu odrediti kontaktne leće za gotovo svaku i najnepravilniju rožnicu i na taj način izbjegći ili odgoditi potrebu za keratoplastikom

Title:

Fitting of the most challenging, irregular corneas with high sophistic RGP contact lenses

Authors:

Miljak S., Jelovac Gjeldum A., Markovic I.

Institution:

Clinical University Centre Split, Department of Ophthalmology

Aim:

To present clinical experience in fitting very demanding, irregular corneas with special kind of contact lenses..

Patients and methods:

45 eyes of 37 patients from our Clinic's database with extremely irregular corneas, predominantly keratoconic, were included in this retrospective study. All patients were examined for objective and subjective refraction, best spectacle corrected visual acuity, best visual acuity with contact lenses, slit lamp biomicroscopy, manual keratometry and corneal topography.

Results:

In a group of 37 patients 25 were male (68%) and 12 were female (32%). Mean age was $23,03 \pm 6,23$ years ranged from 10 to 52 years. The cause of irregularity was corneal injury in two cases, pellucid marginal degeneration (PMD) in four patients, corneal keratoplasty in two patients, one patient with post-LASIK ectasia in both eyes, the other patients have had severe keratoconus. Four eyes were fitted with Ultra Health Synergy Eyes, hybrid contact lenses (CL), one with semiscleral XL Rose K2 CL, eight with post graft Rose K2 CL, two with IC Rose K2 CL, four with NC Rose K2 CL and the others were fitted with standard Rose K2 CL (one in piggyback system). All patients (100%) had improvement in visual acuity, ranged from 20% to 90% in comparison with best spectacle correction. Most of them wore different RGP lenses earlier and everyone reported improvement in comfort and vision and prolonged wearing time to twelve or more hours in a day in comparison with eight hours in day with earlier contact lenses.

Conclusion:

Owing to technological improvement in materials and manufacturing of the contact lenses, as well as innovative designs which are seeking to conform to the entire area of an irregular cornea, contactologists are able now to fit almost every keratoconic patient properly with contact lenses and avoid or postpone the necessity for penetrating keratoplasty .

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Snježana

Ime i prezime / First and Last Name:-Last

Miljak

57. Jelena Petrinović-Dorešić

Naslov:

Zašto Y rascjepljivanje?

Autori:

Jelena Petrinović-Dorešić, Mirjana Bjeloš, Ljubica Dorn

Ustanova:

Klinika za očne bolesti Klinička bolnica Sveti Duh

Cilj:

Predstaviti metodu kirurške korekcije neakomodativnog ekscesa konvergencije i njene rezultate u dva slučaja.

Bolesnici i metode:

U dvije pacijentice, dobi 26 i 9 godina, su bile praćene zbog konvergentnog strabizma s velikom razlikom u kutu na blizu i na daleko. Prva bolesnica je bila duboko ambliopna na strabičnom, desnom oku ($V=0,04$), zbog hipoplazije očnog živca. Nakon korekcije dioptrijske jakosti kontaktne leće, kut na daleko je bio samo 2 pd, no na blizu je varirao od 16 do 20 pd. Mjerenje udaljenosti od medijalnog kantusa do limbusa dalo je najbolju simetriju između dva oka s 20 pd u testu po Krimskom. Učinjeno je Y rascjepljivanje unutrašnjeg ravnog mišića, sa Ra 8,5 mm i Rb 8,0 mm. Druga pacijentica je bila praćena zbog refraktivne ezotropije s neakomodativnim ekscesom konvergencije. Na daleko je bila prisutna mikroezotropija od 2 pd, no na blizu kut je varirao od 30 do 40 pd. Učinjeno je Y rascjepljivanje na oba unutrašnja ravna mišića, sa Ra 8,5 mm i Rb 8,0 mm.

Rezultati:

U prve bolesnice, kut na blizu se smanjio na 6 pd u testu po Krimskom, s vrlo prihvatljivim estetskim poboljšanjem. Kod druge bolesnice postoperativni manifestni kut na daleko je bio 2 pd ezo a na blizu se smanjio na 4 pd ezo. U alternativnom prizma cover testu preostala je ezoforija na blizu u iznosu od 14 pd.

Zaključak:

Neakomodativni konvergens eksces se ranije operirao Faden procedurom. Rascjepljujući mišić u obliku slova Y, izbjegava se šivanje na postekvatorijalnoj skleri, sa sličnim kliničkim učinkom. Stoga ovaj zahvat pruža novu, jednostavniju alternativu za bolesnike s neakomodativnim konvergens ekscesom.

Title:

Why (Y) splitting?

Authors:

Jelena Petrinović-Dorešić, Mirjana Bjeloš, Ljubica Dorn

Institution:

University Eye Clinic, Clinical Hospital Sveti Duh, Zagreb, Croatia

Aim:

To present the method for surgical correction of non-accommodative convergens excess and its results in two cases.

Patients and methods:

Two female patients, age 26 and 9 years, were followed due to convergent strabismus with marked near and distance angle difference. The first patient was deeply amblyopic in the deviant, right eye (V 0,04), due to optic nerve hypoplasia. After correction of contact lens prescription the distance deviation was only 2 pd, but at near the deviation varied from 16 to 20 pd. Medial canthus-limbus distance gave the best right-left symmetry with 20 pd in Krimsky test. Y-splitting of the right medial rectus was performed, with Ra 8,5 mm and Rb 8,0 mm. The second patient was followed due to partial refractive esotropia with non-accommodative convergens excess. There was microesotropia at distance – 2pd, but at near there was variable deviation from 30-40 pd eso. Y-splitting on both medial recti was performed, with Ra 8,5 and Rb 8,0 mm.

Results:

In the first patient, the near angle reduced to 6 pd in Krimsky test, giving very acceptable esthetic improvement. The second patient postoperative manifest distance angle was 2 pd eso and at near in reduced to 4 pd eso. On alternate cover test there was near esophoria of 14 pd eso.

Conclusion:

Non-accommodative convergens excess was previously subjected to Faden procedure. By Y-splitting of the muscle, suturing on the postequatorial sclera is avoided, with similar clinical effect. Therefore, this procedure offers new, easier alternative for patients with non-accommodative convergens excess.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.sc.

Ime i prezime / First and Last Name:-First

Jelena

Ime i prezime / First and Last Name:-Last

Petrinović-Dorešić

58. Zdravko Mandić

Naslov:

Sekundarna implantacija i intrasklearna fiksacija intraokluarne leće : prikaz slučaja

Autori:

Zdravko Mandić, Rašeljka Tadić, Marta Vidović, Iva Krolo Ivanka Petric Vicković, Valentina Lacmanović Lončar

Ustanova:

Klinički Bolnički Centar Sestre milosrdnice, Klinika za oftalomologiju i optometriju, Zagreb

Cilj:

Prikazati rezultate intraskleralne fiksacije intraokularne leće prilikom implantacije u stražnju sobicu u očima s i nsuficijentnom stražnjom kapsulom

Bolesnici i metode:

U ovoj studiji praćeno je osam bolesnika koji su imali insuficijentnu stražnju kapsulu uslijed intraoperativnih komplikacija prilikom operacije mrene, postoperativnih subluksacija IOL i postraumatskih subluksiranih katarakti. Svi su bili podvrgnuti sekundarnoj ugradnji intraokularne leće u stražnju sobicu koja je intraskelrano fiksiran a trajnim fiksiranjem haptika u skleralne tunele paralelne s limbusom. Svim bolesnicima se pratilo pre - i postoperativni refraktivni status te intra – i postoperativne komplikacije.

Rezultati:

Od ukupno osam bolesnika četvero je imala sublukisiranu IOL ili postraumatsku leću, a četvero je imalo postoperativnu afakiju uslijed puknuća stražnje kapsule. Dvoje bolesnika je imalo očnu traumu, a petero bolesnika ko morbiditetne očne bolesti. Više od 2/3 bolesnika je imalo poboljšanje vidne oštirine za više od reda na Snellovim optotipovima, dok kod ostalih nije bilo poboljšanja vidne oštirine u odnosu na preoperativnu. Postoperativno, ne korigirana i korigirana vidna oštirina pokazuju zančajno poboljšanje u odnosu na preoperativne vrijednosti. Samo u jednog bolesnika došlo je do intraoperativnih komplikacija, dok rane postoperativne komplikacije nisu bile zabilježene u niti jednog bolesnika.

Zaključak:

Intraskleralna fiksacija IOL prilikom sekundarne ugradnje u stražnju sobicu se za sada pokazuje kao dobra kirurška metoda koja rezultira poboljšanjem vidne oštirine s minimalnim intropoperativnim i postoperativnim komplikacijama premda su potrebna i dodatna istraživanja na većem broju ispitanika.

Title:

Secondary intrascleral posterior chamber intraocular lens implantation : report of eight cases

Authors:

Zdravko Mandić, Rašeljka Tadić, Marta Vidović, Iva Krolo Ivanka Petric Vicković, Valentina Lacmanović Lončar

Institution:

Clinical Hospital Center Sestre milosrdnice, Department of Ophthalmology, Zagreb

Aim:

To report the results of a technique of intrascleral fixation of a posterior chamber intraocular lens (IOL) in the absence of capsular support.

Patients and methods:

This study reports a retrospective series of eight patients with deficient posterior capsular support who underwent IOL implantation by intrascleral fixation using permanent incarceration of the haptics in scleral tunnels parallel to the limbus. All patients were evaluated for surgical indications, pre- and postoperative refractive status, and intra- and postoperative complications.

Results:

We reviewed a total of eight eyes with subluxated IOL's or lens in four cases and postoperative aphakia with lack of capsular support in four cases. Two patients had eye trauma, five patients had co-morbid eye disease. More than 2/3 patients eyes had a gain of one or more lines while others had no gain. Post operatively, there was a significant improvement in UCVA and in the BCVA. Intraoperative complications included haptic rupture in one case.

Conclusion:

Intrascleral posterior chamber IOL implantation technique provides good IOL fixation with good visual outcomes and minimal complications and it is recommendable method for the eyes with deficient capsular support.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Prof.dr.sc.

Ime i prezime / First and Last Name:-First

Zdravko

Ime i prezime / First and Last Name:-Last

Mandić

59. Davor Galetović

Naslov:

Bilateralna kortikalna sljepoća - ista posljedica različitih uzroka

Autori:

Davor Galetović, Kajo Bućan, Marina Titlić, Mario Mihalj, Dobrila Karlica-Utrobičić, Krešimir Kolić

Ustanova:

Klinika za očne bolesti, KBC Split

Cilj:

Prikazati rijetku kliničku sliku obostrane kortikalne sljepoće različitih uzroka

Bolesnici i metode:

Bolesnik 1 70-

godиšnji muškarac, obostrana sljepoća. Fundoskopski nalaz neupadan. Očuvani pupilarni refeleksi na svjetlo. Uredna pokretljivost bulbusa. MSCT mozga: obostrani okcipitalni infarkti: stari i novi Kontrolni pregled: obost rana amauroza Bolesnik 2 63-

godиšnji muškarac sa glavoboljom i akutnom sljepoćom. Fundoskopski nalaz neupadan. Obostrana amauroza. Uredna pokretljivost bulbusa. Desna zjenica proširena bez reakcije(stara trauma) Lijevo očuvani pupilarni refl eks na svjetlo. MSCT mozga : obostrano okcipitalno hipodenzno područje u smislu ishemiske lezije u irrigacijskom području arterije cerebri posterior obostrano. MR mozga: Supratentorijalno, obostrano paramedijalno okcipitalno, u irrigacijskom području arterije cerebri posterior, vidi se lezija koja odgovara subakutnoj ishemiskoj leziji s hemoraškom tranzicijom. MSCT angiografija karotidnih i vertebralnih arterija u intrakranijalnom dijelu : moždane arterije su urednog izgleda i ramifikacije. Nema znakova aneurizmi, kao ni drugih žilnih malformacija. Kontrolni pregled nakon 2 mjeseca: osjet svijetla desno nazalno i lijevo temporalno, desnostrana homonimna hemianopsija – lezija oba vidna centra : desno kortikalna fereamauroza lijevo amauroza.

Rezultati:

Oba ispitanika boluju od obostrane kortikalne sljepoće. Etiologija prvog ispitanika: lezije u kori okcipitalnih režnja kao posljedice dvaju vremenski odvojenih inzulta (2 godine). Etiologija drugog ispitanika: istovremene lezije kore okcipitalnog režnja kao posljedica okluzije arterije basilaris – posljedične lezije u području obe aretrij e cerebri posterior.

Zaključak:

Bilateralna kortikalna sljepoća je rijetka klinička pojavnost. Dijagnoza se temelji na eliminaciji bolesti prednjeg dijela vidnog puta anamnezom i cjelovitim neurooftalmološkim pregledom. U dijagnostici kortikalne sljepoće neizostavni su MSCT, MR i VEP.

Title:

Billateral cortical blindness - the same consequences of different cause Introduction

Authors:

Davor Galetović, Kajo Bućan, Marina Titlić, Mario Mihalj, Dobrila Karlica-Utrobicić, Krešimir Kolić-

Institution:

Department of Ophthalmology, Universiti Hospital Center Split

Aim:

To show rare clinical cases of bilateral cortical blindness by different cause.

Patients and methods:

Patient 1: A 70 year-old man with total bilateral blindness. Fudoscopy was normal. perserved pupillary light reflexes. Normal extraocular movements. Brain MSCT: bilateral occipital infarcts, old end new one. Patient 2 a 63 year-old man with headache and total bilateral blindness. Fudoscopy was normal. Normal extraocular movements. Right pupil extended (old traumas), and left pupil tidy light reaction. Brain MSCT: mutually occipital hypodense area in terms of ischemic lesions in the irrigation area of the posterior cerebral artery on both sides. MRI: supratentorial, mutuay paramedijal, occipital, in the irrigation area of the posterior cerebral artery, see the lesion corresponding to the subacute ischemic lesion with hemorrhagic transition. MSCT angiography of the carotid and vertebral arteries in intracranial part: the cerebral arteries are orderly appearance and ramifications. No signs of aneurysms, or other vascular malformation.. Check up after 2 months: the nasal sensation of light to the right and temporal to the left eye left - right-sided hemianopia - both lesions visible center: right cortical fereamaurosis left amaurosis.

Results:

Both patients suffering from bilateral cortical blindness. The etiology of the first subjects: lesion in the occipital lobe cortex as a result of two separate stroke time (two years). The etiology of other subjects: simultaneous lesions occipital lobe cortex as a result of basilar artery occlusion - a consequence of both the posterior cerebral artery.

Conclusion:

Bilateral cortical blindness is a rare clinical appearance. Diagnosis is based on the lesion elimination of anterior visual pathways by history and complete neuroophthalmological examination. For the diagnosis of cortical blindness, MSCT, MRI and VEP are indispensable .

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Doc.dr.sc.

Ime i prezime / First and Last Name:-First

Davor

Ime i prezime / First and Last Name:-Last

Galetović

60. Rašeljka Tadić

Naslov:

*THE RESIDENT SURGEON PHACOEMULSIFICATION LEARNING CURVE AT DEPARTMENT OF OPHTHALMOLOGY AT CLINICAL HOSPITAL CENTER
ICE
SESTRE MIOSRDN*

Autori:

Rašeljka Tadić, Valentina Lacmanović Lončar, Ivanka Petric Vicković, Renata Ivezović, Lana Dujmović, Lana Knežević, Ana Koluder, Marta Vidović, Iva Krolo, Željko Kaurić, Vanda Gašpar Mitrečić, Zoran Vatavuk

Ustanova:

Klinički bolnički centar Sestre milosrdnice, Klinika za Oftalmologiju i optometriju, Zagreb

Cilj:

Cilj ove studije je prikazati krivulju učenja specijalizanata oftalmologije operaciji katarakte metodom fakoemulzifikacijom te definirati najčešće komplikacije i poteškoće u tom procesu.

Bolesnici i metode:

Ovom prospektivnom studijom praćene su 86 uzastopne operacije katarakte metodom fakoemulzifikacije koju su, u periodu od godinu dana na Klinici za oftalmologiju KBC Sestre milosrdnice, učili specijalizanati oftalmolog ije uz nadzor iskusnih operatera. Korištena je standardna tehnika operacije u lokalnoj anesteziji. Preoperativni podaci su uključili dob, spol, oko za operaciju, vidnu oštrinu te vrstu katarakte, specijalizanta operatera te mera. Tijekom 6 mjeseci postoperativno, pratila se najbolja postignuta korigirana vidna oštrina operiranih te razvoj postoperativnih komplikacija.

Rezultati:

Ukupno 8 specijalizanta je operiralo 86 bolesnika s mrenom metodom fakoemulzifikacije tijekom godinu dana. Najbolje korigirana vidna oštrina operiranih se poboljšala sa $0,47 \pm 0,25$ ili bolje na $0,8 \pm 0,25$ postoperativno. Intraoperativne komplikacije su se dogodile u 19 operacija, ali se njihova učestalost (ruptura stražnje kapsule) tijekom vremena smanjivala povećanjem broja operacija svakog pojedinog specijalizanta. Prosječan broj samosta lno učinjenih koraka po pojedinoj operaciji za svakog specijalizanta se povećao tokom procesa učenja (prosječno od 7,6 do 9,0 koraka po operaciji.) Postoperativno, u jednog bolesnika se razvio endoftalmitis 7 dana nakon operacije, dok druge postoperativne komplikacije nisu zabilježene.

Zaključak:

Proces učenja operacije katarakte metodom fakoemulzifikacije specijalizanata zahtjeva stalni nadzor iskusnog operatera te je praćen prihvatljivom sveukupnom stopom intraoperativnih komplikacija. Kirurške vještine specijalizanata se, kada se promatraju po stopi intraoperativnih komplikacija te broju samostalno izvedenih koraka, po boljavaju povećanjem broja učinjenih operacija tijekom vremena odnosno stjecanjem iskustva rada na mikroskopu, s mikrokirurškim instrumentima te s aparatom za fakoemulzifikaciju.

Title:

**THE RESIDENT SURGEON PHACOEMULSIFICATION LEARNING CURVE AT DEPARTMENT OF OPH
THALMOLOGY AT CLINICAL HOSPITAL CENTER
ICE**

SESTRE MIOSRDN

Authors:

Rašeljka Tadić, Valentina Lacmanović Lončar, Ivanka Petric Vicković, Renata Ivezović, Lana Dujmović, Lana Knežević, Ana Koluder, Marta Vidović, Iva Krolo, Željko Kaurić, Vanda Gašpar Mitrečić, Zoran Vatavuk

Institution:

Clinical Hospital Centre "Sestre milosrdnice", Department of Ophthalmology, Zagreb

Aim:

To analyze residents' learning process of phacoemulsification cataract surgery and to assess the resident phaco emulsification learning curve.

Patients and methods:

This prospective study comprised 86 consecutive cases of phacoemulsification performed by 8 residents over a period of one year on Department of Ophthalmology at Clinical hospital Center Sestre milosrdnice, Zagreb. All residents used standard technique for all cases under topical or local anesthesia. Preoperative collected data included patient age, sex, operative eye, best corrected visual acuity and type of cataract. Operative data obtained for each case included resident and attending surgeon, date of operation, step-by-step success questionnaire, and intraoperative complication. Postoperative data collected included visual acuity at the 1-month postoperative visit and postoperative complications.

Results:

A total of 8 residents performed 86 operations under the guidance of 3 attending surgeons. Mean best-corrected visual acuity (BCVA) improved from $0,47 \pm 0,25$ or better to $0,8 \pm 0,25$ postoperatively. Intraoperative complications occurred in 19 cases. Rate of complications continued to decrease throughout residency training. The mean number of individual performed steps per operation significantly increased throughout residency (from 7,6 to 9,0). There was one early postoperative complication, endophthalmitis that was successfully treated and no other postoperative complications as CME and keratopathy occurred.

Conclusion:

Residents performing phacoemulsification surgery achieved a low overall rate of major complications. Residents' surgical competency, measured by complication rates and number of individual performed steps continues to improve with increasing surgical experience.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Rašeljka

Ime i prezime / First and Last Name:-Last

Tadić

61. Kristina Ivanišević

Naslov:

Usporedba debljine RNFL mjerene OCT-om i indeksa vidnog polja u pacijenata s očnom hipertenzijom i glaukomom otvorenog kuta

Autori:

Kristina Ivanišević, Ivana Džaja, Veljko Rogošić

Ustanova:

Klinički bolnički centar Split

Cilj:

Usporediti funkcionalne promjene vidnog polja sa nalazom optičke koherentne tomografije (OCT) u pacijenata sa očnom hipertenzijom i glaukomom otvorenog kuta

Bolesnici i metode:

31 bolesnik (55 očiju) podijeljeni u dvije skupine. Grupa 1 se sastoji od 19 očiju sa očnom hipertenzijom i grupa 2 se sastoji od 36 očiju s glaukomom otvorenog kuta. Kod svih bolesnika proveden je oftalmološki pregled, OCT pregled (Cirrus HD-OCT 5000, Zeiss) za mjerjenje debljine RNFL i vidno polje s Octopus 101 perimetrom (G2 program). Korišteni su statistički testovi Pearsonov test korelacije i Student t-test za male i nezavisne uzorke.

Rezultati:

Kod svih očiju nađena je pozitivna korelacija između debljine RNFL i i indeksa Mean sensitivity (MS) vidnog polja ($r = 0,442, p < 0,001$), a negativna korelacija između debljine RNFL i indeksa Mean defect (MD) ($r = -0,398, p = 0,003$) i Loss variance (LV) vidnog polja ($r = -0,184, p = 0,178$). Kod očiju s očnom hipertenzijom postoji statistički značajna razlika između debljine RNFL sa i indeksima MD ($r = 0,518, p < 0,05$) i LV ($r = 0,533, p < 0,05$). Isti trendovi povezanosti pronađeni su kod očiju s glaukomom otvorenog kuta, pozitivna korelacija između debljine RNFL i i indeksa MS te negativna korelacija između debljine RNFL i indeksa MD i LV. Korelacija između debljine RNFL po segmentima i globalnih indeksa vidnog polja pronađena je statistički značajna u gornjem i donjem segmentu ($p < 0,05$).

Zaključak:

Prosječna debljina RNFL nije pouzdana u ranoj dijagnostici glaukoma i praćenju očne hipertenzije, dok promjene debljine RNFL po segmentima su pouzdanije. Opsežne promjene debljine RNFL mjerene OCT-om upućuju na funkcionalna oštećenja. U praćenju očne hipertenzije najpouzdaniji parametar je Mean defect (MD) indeks vidnog polja.

Title:

RNFL thickness measured by OCT compared to global index of visual fields in patients with ocular hypertension and open angle glaucoma

Authors:

Kristina Ivanisevic, Ivana Dzaja, Veljko Rogosic

Institution:

University Hospital Centre Split

Aim:

To compare the functional changes of the visual field findings with optical coherence tomography (OCT) in patients with ocular hypertension and open angle glaucoma.

Patients and methods:

31 patients (55 eyes) are divided into two groups. Group 1 consists of 19 eyes with ocular hypertension and group 2 consists of 36 eyes with open angle glaucoma. All patients performed the ophthalmic examination, OCT examination (Cirrus HD - OCT 5000 , Zeiss) to measure the thickness of RNFL and visual field with the Octopus 1 01 perimeter (G2 program). Pearson correlation test and Student t-test for small and independent samples were used.

Results:

In all eyes positive correlation was found between RNFL thickness and visual field index mean sensitivity (MS) ($r 0.442, p <0.001$), and negative correlation between RNFL thickness and visual field indices mean defect (MD) ($r -0.398, p = 0.003$) and loss of variance (LV) ($r -0.184, p = 0.178$). In eyes with ocular hypertension, significant difference was found between RNFL thickness with indices MD ($r 0.518, p <0.05$) and LV ($r 0.533, p <0.05$). The same trends were found in the patients with open angle glaucoma, positive correlation between RNFL thickness and MS indeks and negative correlation between RNFL thickness and indices of MD and LV. The correlation between RNFL thickness by segment and global index of the visual field was found statistically significant in the superior and inferior segment ($p<0,05$)

Conclusion:

The average RNFL thickness is not reliable in the early diagnosis of glaucoma and ocular hypertension monitoring, while changes in RNFL thickness by segment are more reliable. Extensive changes in RNFL thickness measured by OCT indicate functional impairment. In monitoring ocular hypertension the most reliable parameter is mean defect (MD) index of the visual field.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Kristina

Ime i prezime / First and Last Name:-Last

Ivanisević

62. Miroslav Bogdanović

Naslov:

ZNAČAJ IMPLANTACIJE SEKUNDARNOG ORBITALNOG IMPLANTA ZA MEDICINSKO PROTETSKI TRETMAN POSTENUKLEACIONOG SINDROMA - PESS

Autori:

Miroslav Bogdanović, Đoko Obućina, Lana Ilić, Milena Milovanović, Jelena Ljikar

Ustanova:

GAMMA MEDICINA-medicinska ocna protetika i okuloplastično-rekonstruktivna hirurgija

Cilj:

Pacijenti sa postenukleacionim sindromom - PESS predstavljaju veliki izazov i problem za medicinsko protetski tretman. Analizirali smo funkcionalno-estetske efekte implantacije sekundarnog intraorbitalnog implanta kod pacijenata kod kojih je izostala primarna intraorbitalna implantacija nakon enukleacije i evisceracije

Bolesnici i metode:

Retrospektivno su analizirani podaci 300 pacijenata bez primarne postoperativne orbitalne implantacije podeljenih u dve grupe, koji su imali medicinsko protetski tretman u našoj ustanovi u toku 2008 - 2014. god. Poredili smo funkcionalne i estetske rezultate medicinsko protetskog tretmana 150 pacijenata, kod kojih je načinjena sekundarna intraorbitalna implantacija, sa grupom od 150 pacijenata, kod kojih je ista izostala.

Rezultati:

: Kod ukupno 300 analiziranih pacijenata, oko je operativno odstranjivano bez primarne postoperativne nadoknade volumena orbitalnim implantom, što je sledstveno dovelo do razvoja postenukleacionog sindroma - PESS. U našoj ustanovi je kod 150 pacijenata načinjena sekundarna intraorbitalna implantacija orbitalnog implanata, sa operativnom korekcijom pozicije kapaka i konjunktivalnog sakusa. Poredjeni su funkcionalno estetski rezultati protetskog tretmana navedene grupe pacijenata sa funkcionalno estetskim rezultatima protetskog tretmana grupa od 150 pacijenata kod kojih nije bilo sekundarne implantacije orbitalnog implanata.

Zaključak:

Kod pacijenata kod kojih je izostala primena primarne orbitalne postoperativne implantacije u cilju nadoknade orbitalnog volumena kao i odgovarajućeg orbitalnog konformera, prisutni su znaci postenukleacionog sindroma - PESS i deformiteti orbitalnog sakusa, različitog stepena, što otežava ili onemogućava fitovanje okuloproteza korektnih funkcionalno estetskih karakteristika. Funkcionalno estetski rezultat medicinsko protetskog tretmana pacijenata sa već prisutnim znacima PESS, kod kojih je načinjena sekundarna intraorbitalna implantacija i korekcija pozicije kapaka i deformiteta konjunktivalnog sakusa, značajno je uspešniji i funkcionalno estetski korektniji i u odnosu na grupu pacijenata kod kojih je sekundarna implantacija izostala. Izostanak korektnog doktrinarno usaglašenog stava o neophodnosti tretmana PESS nadoknadom nedostajućeg volumena sekundarnom orbitalnom implantacijom i korekcijom prisutnih deformiteta ima za posledicu estetsku narušenost i problem socijalizacije pacijenata posebno u adolescentnom uzrastu.

Title:

THE SIGNIFICANCE OF SECONDARY ORBITAL IMPLANTATION FOR MEDICAL PROSTETIC TREATMENT OF POST-ENUCLEATION SOCKET SYNDROME - PESS

Authors:

Miroslav Bogdanović, Doko Obućina, Lana Ilić, Milena Milovanović, Jelena Ljikar

Institution:

GAMMA MEDICINA-medical ocular prosthetics and oculoplastic -reconstructive surgery

Aim:

Patients with post-enucleation socket syndrome – PESS represent a major challenge and a problem for medical prosthetic treatment. We analyzed functional and esthetic effects of secondary intraorbital implantation among patients left without primary intraorbital implantation after enucleation and evisceration

Patients and methods:

We retrospectively analyzed the data of 300 patients without primary postoperative orbital implantation, divided into two groups, who were given medical prosthetic treatment in our institution, in the period 2008.-2014. We compared functional and esthetic results of the medical prosthetic treatment of 150 patients who underwent secondary intraorbital implantation and 150 patients who did not.

Results:

In 300 reviewed cases of patients, the eye was surgically removed without primary postoperative replacement of lacking volume by an orbital implant, which, consequently led to PESS development. Secondary intraorbital implantation of the orbital implant, together with surgical correction of eye lids position and conjunctival sac, was performed in 150 patients in our institution. Functional and esthetic results of the prosthetic treatment of those patients was compared with functional and esthetic results of the prosthetic treatment of 150 patients left without secondary implantation of the orbital implant..

Conclusion:

Patients who were left without primary orbital postoperative implantation, with the purpose of replacement of the lacking orbital volume, and without adequate orbital conformer, show signs of post-enucleation socket syndrome – PESS and have deformities of orbital sac of various degree, which makes it very hard or impossible to fit an ocular prosthesis with right functional and esthetic features. Functional and esthetic result of the medical prosthetic treatment of the patients who already show signs of PESS and who underwent secondary intraorbital implantation and correction of eye lids position and conjunctival sac deformities, is significantly more successful and functionally and esthetically more adequate comparing to the group of patients left without secondary implantation. The lack of adequately harmonized position on the necessity of PESS treatment by replacing the lacking volume with secondary implantation and correcting the deformities, has as a result esthetic disfigurement and the problem of socialization of patients especially in adolescence.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.sc.

Ime i prezime / First and Last Name:-First

Mirosljub

Ime i prezime / First and Last Name:-Last

Bogdanovic

63. Katia Novak-Lauš

Naslov:

Implantacija Ahmedove valvule kod refraktornog dječjeg glaukoma

Autori:

Katia Novak-Lauš, Jelena Škunca Herman, Zdravko Mandić

Ustanova:

Klinika za očne bolesti, Klinički bolnički centar Sestre milosrdnice Zagreb

Cilj:

Ocijeniti učinkovitost implantacije Ahmedove valvule kod djece s refraktornim glaukomom.

Bolesnici i metode:

Retrospektivni izvještaj je proveden kod 8 očiju (7 pacijenata) koji su mlađi od 5 godina s refraktornim glaukomom kod kojih je implantrana Ahmedova valvula. Uspjeh operativnog zahvata definiran je kao vrijednost intraokularnog tlaka $\leq 21 \text{ mmHg}$ bez komplikacija koje su zahtijevale dodatni kirurški zahvat (revizija cjevčice). U ovoj grupi pacijenata prethodno je bila učinjena cikloablacija, trabekulektomija, trabekulotomija ili kombinirani operativni zahvat trabekulektomije s trabekulotomijom.

Rezultati:

Vrijeme praćenja pacijenta je od 3 do 32 mjeseca (12.6 ± 7.8 mjeseca). Intraokularni tlak je bio snižen od preoperativnih srednjih vrijednosti od $32.8 \pm 4.2 \text{ mmHg}$ na $18.7 \pm 5.7 \text{ mmHg}$ nakon 12 mjeseci postoperativnog praćenja. Za to vrijeme uspjeh se pratio Kaplan-Meierovom analizom i iznosio je 100%. 5 očiju (62,5%) zahtijevalo je dodatnu glaukomsku terapiju nakon operacije. Kontakt cjevčice Ahmedove valvule s endotelom rožnice pojavio se u 2 slučaja (25%). Suprahiriodalno krvarenje pojavilo se u jednom afakičnom oku intraoperativno.

Zaključak:

Iz navedenog iskustva, implantacija Ahmed valvule je korisna metoda liječenja refraktornog glaukoma dječje dobi i pokazuje uspjeh u kontroli intraokularnog tlaka. Međutim, postoji relativno visoka stopa komplikacija koje ograničavaju sveukupni uspjeh.

Title:

Ahmed Valve implantation in refractory pediatric glaucoma

Authors:

Katia Novak-Lauš, Jelena Škunca Herman, Zdravko Mandić

Institution:

University Department of Ophthalmology, Clinical Hospital Center „Sestre milosrdnice“, Zagreb

Aim:

To evaluate the efficacy of the Ahmed Glaucoma Valve implant in pediatric patients with refractory glaucoma.

Patients and methods:

A retrospective chart review was conducted of 8 eyes from 7 consecutive pediatric patients (younger than 5 years) with refractory glaucoma treated with Ahmed Glaucoma Valve implant placement. The main outcome measured was time after surgery without failure. Success was defined as an intraocular pressure of 21 mmHg or less without visually devastating complications or additional glaucoma surgery (tube revision). In a subset of eyes previous were performed cycloablation, trabeculectomy, trabeculotomy or combined trabeculectomy with trabeculotomy procedure.

Results:

Follow-

up of patients was 3 to 32 months (mean, 12,6±7,8 months). Intraocular pressure was reduced from a preoperative mean values of 32,8±4,2 mmHg to 18,7±5,6 mmHg at 12 months postoperatively. Cumulative probabilities of success by Kaplan-Meier analysis were 100% at the same time. Five eyes (62,5%) required glaucoma medication after surgery. Corneal-

tube contact as a complication occurred in two eyes (25%). There was not a case in which was required anterior chamber reformation. Suprachoroidal haemorrhage occurred in one aphakic eye intraoperatively.

Conclusion:

Based on our experiences Ahmed Glaucoma Valve implantation is useful therapy for the treatment of refractory pediatric glaucoma and shows success in intraocular pressure control. However there is relatively high complication rate which limits overall success.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Katia

Ime i prezime / First and Last Name:-Last

Novak-Lauš

64. Katia Novak Lauš

Naslov:

Ocjena zadovoljstva pacijenata s glaukomskom terapijom

Autori:

Katia Novak Lauš, Smiljka Popović Suić, Mia Zorić Geber, Sonja Jandroković, Vukosava Maričić Došen

Ustanova:

Klinika za očne bolesti, KBC Sestre milosrdnice, Klinika za očne bolesti, KBC Zagreb, Klinika za očne bolesti, KB Sveti Duh

Cilj:

Ocijeniti zadovoljstvo terapijom, te smetnje u svakodnevnom životu glaukomskog pacijenta uslijed primjene glaukomske terapije. Ocijeniti promjenu sveukupnog stanja pacijenta nakon 3-mjesečne primjene terapije bimatoprost 0.01%.

Bolesnici i metode:

Prospektivna, nerandomizirana studija u trajanju od 3 mjeseca. Dvadeset pacijenata s primarnim glaukomom otvorenog kuta upitano je o zadovoljstvu glaukomskom terapijom koristeći Likertovu skalu (1-5) na početku studije i kroz kontrolne preglede nakon jednog tjedna, jednog i tri mjeseca, slijedom promjene prethodne terapije na bimatoprost 0.01%. Pacijenti su također ispunili upitnik o utjecaju na svakodnevni život (Numerical Visual Analog Scale, VAS, 0-100 mm). Nakon 3 mjeseca korištenja bimatoprosta 0.01% liječnici su procijenili sveukupno stanje pacijenta koristeći Likertovu skalu (1-5).

Rezultati:

Na početku studije prosječna ocjena zadovoljstva terapijom bila je 3.12 (neutralan stav). Nakon promjene terapije, nakon 3 mjeseca, prosječna ocjena zadovoljstva pacijenata bila je 4,11 (zadovoljan). Devetnaest od 20 pacijenata (95%) prijavilo je nepromijenjeno ili poboljšano zadovoljstvo glaukomskom terapijom uslijed prelaska na bimatoprost 0,01%. Najviši prijavljeni VAS rezultat za smetnje u svakodnevnom životu bio je 72. Svi pacijenti od sim njih 3 (85%) imali su poboljšani VAS rezultat na kontrolnom pregledu (smanjenje smetnji), nakon zamjene na bimatoprost 0,01%. Srednja promjena bila je -28.73, a kretala se u rasponu -1 do -60. Jedan pacijent (5%) imao je tešku hiperemiju i velike smetnje u svakodnevnom životu poradi primjene terapije bimatoprosta 0,01%.

Zaključak:

Ova saznanja govore da primjena bimatoprost 0.01% kapi pacijentima donosi visok nivo zadovoljstva, te značajno smanjuje smetnje u svakodnevnom životu pacijenta s glaukom.

Title:

Evaluation of patient comfort with glaucoma therapy

Authors:

Katia Novak Lauš, Smiljka Popović Suić, Mia Zorić Geber, Sonja Jandroković, Vukosava Maričić Došen

Institution:

University Department of Ophthalmology, Clinical Hospital Center Sestre milosrdnice, University Department of Ophthalmology, Clinical Hospital Center Zagreb, University Department of Ophthalmology, Clinical Hospital Sveti Duh

Aim:

To evaluate patient's satisfaction and interferences in their everyday life due to the application of glaucoma therapy. To evaluate the change in overall condition/wellbeing of the patient following a switch to bimatoprost 0.01% therapy.

Patients and methods:

Prospective, non-randomized, 3-month study. Twenty patients with open angle glaucoma were asked to rate their satisfaction with glaucoma therapy (1-5 rating, Likert scale) at baseline, and at control visits (1 week, 1 month and 3 months), following the switch to bimatoprost 0.01% therapy. They were also asked to mark their level of discomfort/interference in everyday life on a numerical visual analogue scale (VAS scale, 0/100 mm). At 3 months, physicians rated the change in the overall condition/well-being of the patient, using 1-5 Likert scale.

Results:

The average patient satisfaction score at baseline was 3.12 (neutral), after three months 4.11 (satisfied). Nineteen out of 20 patients (95%) reported unchanged or improved satisfaction with glaucoma therapy following the switch to bimatoprost 0.01% therapy. The highest VAS score for discomfort/interferences in everyday life at any time was 72. All patients but 3 (85%) reported improved VAS scores from baseline to control visit, following a switch to bimatoprost 0.01% therapy, with the mean change 28.73, ranging from 1 to 60. One patient (5%) reported severe hyperemia and strong interferences in daily life due to application of bimatoprost 0.01% therapy.

Conclusion:

These findings suggest that bimatoprost 0.01% therapy delivers high level of patient satisfaction and significantly minimizes the discomfort/interferences in everyday life of a glaucoma patient.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Prof.dr.sc.

Ime i prezime / First and Last Name:-First

Katia

Ime i prezime / First and Last Name:-Last

Novak-Lauš

65. Mirna Belovari Višnjić

Naslov:

Transepitelni kolageni cross linking potpomognut kontaktnom lećom u liječenju progresivnog keratokonusa kod iznimno tankih rožnica

Autori:

Mirna Belovari Višnjić, Igor Knezović, Hrvoje Raguž

Ustanova:

Županijska bolnica Čakovec, Klinička bolnica Dubrava, Knezović Vision Group

Cilj:

Prikazati slučaj četrdesetosmogodišnje žene s progresivnim bilateralnim keratokonusom koja je podvrgnuta transepitelijalnom kolagenom cross linkingu potpomognutom kontaktnom lećom uz primjenu kombiniranih otopina riboflavina.

Bolesnici i metode:

Kod pacijentice je nastao značajan pad vidne oštchine uz povišenje keratometrijskih vrijednosti tijekom posljednjih tri mjeseca prije zahvata zbog brze progresije keratokonusa na oba oka. Optimalno korigirana vidna oština na daljinu (BCDVA) pomoći Rose K kontaktnih leća se smanjila s 0,8 na 0,3 (OD) te s 0,7 na 0,2 (OS), srednja keratometrijska vrijednost (mean K) se povećala od 62,7 na 68,3 D (OD) te od 61,4 na 67,0 D (OS). Scheimpflug tomografija je zabilježila keratokonus stadij III-

IV prema Krumeichovoj klasifikaciji i centralnu debeljinu rožnice 224/215 mikrona na najtanjem mjestu. Terapeutska meka kontaktna leća bez UV filtera je uronjena u hipoosmolarnu otopinu riboflavina (0,1% Riboflavin-5-fosfat u otopini 0,009% NaCl) četiri sata prije zahvata te je stavljena na rožnicu neposredno prije zahvata. Transepitelni kolageni cross linking (3 mW/cm^2) je proveden kroz trideset minuta uz primjenu 0,1% otopine riboflavina (Ricrolin TE svakih 5 minuta /sat vremena prije i tijekom samog zahvata). Lijevo oko je tretirano prvo, a je dan mjesec poslije i desno. Praćenje je trajalo deset mjeseci.

Rezultati:

Šest mjeseci nakon zahvata na oba oka je zabilježeno poboljšanje u kornealnoj topografiji te je nekorigirana vidna oština bila malo bolja. Osam mjeseci nakon zahvata optimalno korigirana vidna oština na daljinu se poboljšala na 0,6 obostrano uz primjenu Rose K2 kontaktnih leća i ostala stabilna.

Zaključak:

Prema našem kliničkom iskustvu stvaranje dodatnog prekornealnog sloja koji se sastoji od kontaktne leće natopljene u riboflavinu i tankog sloja riboflavina ispod kontaktne leće bi moglo biti obećavajuće rješenje za primjenu u cross linkinga u izrazito tankih rožnica.

Title:

Contact lens-assisted transepithelial corneal collagen cross linking for progressive keratoconus treatment in extremely thin corneas

Authors:

Mirna Belovari Višnjić, Igor Knezović, Hrvoje Raguž

Institution:

General hospital Čakovec, Clinic hospital Dubrava, Knezović vision group eye center

Aim:

To report a case of forty eight year old female with progressive bilateral keratoconus who had undergone contact lens-assisted transepithelial corneal collagen cross linking (TE-CXL) using combined riboflavin solution.

Patients and methods:

A 48 year old female had significantly decreased visual acuity and increased keratometric values in last 3 months prior to the treatment due to rapid progression of keratoconus on both eyes. BCDVA with RGP (Rose K) decreased from 0,8 to 0,3 (RE) and from 0,7 to 0,2 (LE), mean K increase from 62,7 to 68,3 D (RE), and from 61,4 to 67,0 D (LE). Sheimpflug tomography noted keratoconus stage III-IV in both eyes, according to Krumeich classification and CCT 224/215 microns at the thinnest location. UV barrier free soft contact lens was soaked in hypoosmolar riboflavin solution (0,1% Riboflavin-5-fosfat in the solution of 0,009% NaCl) four hours prior to surgery and placed over the cornea immediately before the CXL. TE-CXL (3 mW/cm²) was performed for 30 minutes using 0,1% topical riboflavin solution (Ricrolin-TE, every five minutes one hour prior and during the treatment). The left eye was treated first, and the right eye 1 month after. The follow up period was 10 months.

Results:

Six months after the treatment both eyes showed improvement in corneal topography and the UCDVA was better. Eight months after the treatment BCDVA improved to 0,6 in both eyes using Rose K2 contact lenses and remained stable.

Conclusion:

According to our clinical experience creation of an extra precorneal layer composed of a riboflavin-soaked contact lens and a thin subcontact lens riboflavin film could be promising to overcome the problems associated with performing collagen cross-linking in thin corneas.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Mirna

Ime i prezime / First and Last Name:-Last

Belovari Višnjić

66. Ana Bišćan Tvrđi

Naslov:

Utječe li bazocelularni karcinom donje vjeđe T2 stadija na debljinu podležećega tarzusa?

Autori:

Ana Bišćan Tvrđi, Biljana Kuzmanović Elabjer, Daliborka Miletić, Mladen Bušić, Damir Bosnar

Ustanova:

Klinika za očne bolesti, Klinička bolnica "Sveti Duh", Zagreb

Cilj:

utvrditi utječe li bazocelularni karcinom donje vjeđe T2 stadija na debljinu podležećega tarzusa.

Bolesnici i metode:

Od veljače 2015. god. na Klinici za očne bolesti i Zavodu za patologiju i citologiju Kliničke bolnice "Sveti Duh" provodi se prospektivna studija s ciljem utvrđivanja utjecaja lokaliziranoga bazocelularnog karcinoma (BCC) donje vjeđe T2 stadija na debljinu podležećega tarzusa. U studiju će se uključiti dvadeset ispitanika starijih od 60 godina, a odnos ženskoga i muškoga spola definirati će isti odnos među bolesnicima. Bolesnicima, s postavljenim kliničkom dijagnozom bazocelularnoga karcinoma pretarzalne regije donje vjeđe, tumor se odstranjuje u cijelosti s 2-

3 mm okolnoga klinički zdravoga tkiva pomoću pentagonalne eksicizije pune debljine vjeđe. U studiju će se uključiti samo uzorci s patohistološki potvrđenim slobodnim rubovima. Na patohistološkim preparatima će se pomoći u okularnoga mikrometra mjeriti debljina tarzusa ispod središnjega dijela tumora (TC) te na rubnim dijelovima slobodnima od tumora (TP1, TP2).

Rezultati:

Do sada su u studiju uključena tri bolesnika s bazocelularnim karcinomom pretarzalnog područja donje vjeđe. Kod 71-godišnjega muškarca izmjereni TC bio je 1,25 μm, a TP1 i TP2 1,25 μm i 1,28 μm. 66-godišnji muškarac imao je TC 1,5 μm, TC1 1,49 μm i TC2 1,46 μm. Treći bolesnik bila je 63-godinjska žena s TC od 1,25 μm, TC1 i TC2 od 1,24 μm. Nije bilo statistički značajne razlike između TC, TP1 i TP2 za svakog pojedinoga bolesnika.

Zaključak:

Pretraživanjem literature autori nisu pronašli podatke o utjecaju bazocelularnog karcinoma donje vjeđe na debljinu tarzusa. Do sada, u našem malom ispitivanom uzroku nije uočen nikakav značajan učinak, no daljnja istraživanja su nužna.

Title:

Does the lower eyelid T2 basal cell carcinoma affects the thickness of the underlying tarsus?

Authors:

Ana Bišćan Tvrđi, Biljana Kuzmanović Elabjer, Daliborka Miletić, Mladen Bušić, Damir Bosnar

Institution:

University Eye Clinic, University Hospital "Sveti Duh", Zagreb

Aim:

to evaluate an effect of the lower eyelid T2 basal cell carcinoma on the underlying tarsal thickness.

Patients and methods:

A prospective study at the University Eye Clinic and Department of Pathology and Cytology of University Hospital "Sveti Duh" started February 2015. Aim of the study is to evaluate an effect of the lower eyelid T2 basal cell carcinoma (BCC) on the underlying tarsal thickness. Twenty patients older than 60 years will be included in the study. The female/male ratio will be defined by the same relationship among patients. Clinically diagnosed BC located pretarsally at the lower eyelid is treated with pentagonal full thickness eyelid excision with 2-3 mm peripheral surgical margin. Only samples with pathohistologically cleared margins are included in the study. An ocular micrometer is used to measure tarsal thickness below the central part of the tumor (TC), as well as at surgically clear margins (TP1, TP2).

Results:

So far, three patients with lower eyelid basal cell carcinoma were included in the study. In a 71-year old man TC was 1.25 microns, while TP1 and TP2 were 1.25 and 1.28 microns, respectively. The measured TC of a 66-year old man was 1.5 microns, TP1 1.49 microns and TP2 1.46 microns. Third patient was a 63-year old woman with TC of 1.25 microns, TP1 and TP2 of 1.24 microns. There was no statistically significant difference between TC, TP1 and TP2 for each patient, respectively.

Conclusion:

The authors found no data of an effect of the lower eyelid T2 basal cell carcinoma on the thickness of the underlying tarsus in available literature. So far, no effects was proven in our limited studied group, however further investigation is mandatory.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Ana

Ime i prezime / First and Last Name:-Last

Bišćan Tvrđi

67. Igor Knezović

Naslov:

ICL i toric ICL fakične intraokularne leće za korekciju visoke kratkovidnosti i astigmatizma: šestomjesečni rezultati

Autori:

dr.sc.Igor Knezović,dr.med., Mirna Belovari Višnjić, dr.med.FEBO, Hrvoje Raguž, dr.med.

Ustanova:

Knezović Vision Group, Zagreb / Zavod za oftalmologiju, KB Dubrava, Zagreb

Cilj:

Procijeniti kliničke rezultate nakon implantacije ICL (implantable collamer lens) i toric ICL leća za korekciju visoke kratkovidnosti i astigmatizma

Bolesnici i metode:

Evaluirani su rezultati na 4 oka / 2 pacijenta nakon implantacije ICL leće sa centralnom perforacijom (Hole IC L, STAAR Surgical) za korekciju visoke kratkovidnosti i astigmatizma (kratkovidnost: -13,75 do -17,00 D, astigmatizam -

3,50 do 5,25 D). Ispitivani parametri (prije zahvata, postoperativno: 1 tjedan, 1,3,6 mjeseci): UCDVA, BCDVA, manifestna refrakcija, IOT (uključujući 1. postoperativni dan), gustoća endotelnih stanica, širina komornog kuta, dubina prednje očne sobice i udaljenost između stražnje površine ICL i prednje lećne kapsule (postoperativno).

Rezultati:

UCDVA se značajno popravila 7 dana nakon zahvata i ostala stabilna tijekom 6 mjeseci, dosežući vrijednosti pre edoperativne BSCDVA. Kod jednog oka primijećeno je poboljšanje vidne oštchine za jedan red na Snellenovom optotipu. Vrijednosti manifestne refrakcije postoperativno: 0.1 ± 0.36 D. Nije bilo trajnog povišenja IOT, gubitka endotelnih stanica kao niti razvoja sekundarne mrene tijekom šestomjesečnog perioda praćenja. Vrijednosti AC D, ACA i udaljenost između stražnje površine ICL i prednje lećne kapsule su bile u rasponu prihvatljivosti.

Zaključak:

Korekcija visoke kratkovidnosti i astigmatizma ICL lećama daje odlične refrakcijske rezultate, s mogućnošću poboljšanja BSCDVA tijekom šestomjesečnog perioda praćenja. Ovakav kirurški pristup koji ne zahtijeva dodatnu iridotomiju / keratotomiju je dobra alternativa postojićim refraktivnim zahvatima kod pacijenata sa visokom kratkovidnošću i astigmatizmom. Potrebna su dulja i redovita praćenja operiranih pacijenata kako bismo na vrije me otkrili moguće kasne komplikacije i na vrijeme ih liječili.

Title:

ICL (implantable collamer lens) and toric ICL phakic intraocular lens for correction of high myopia and astigmatism: 6 month results

Authors:

dr.sc.Igor Knezović,dr.med., Mirna Belovari Višnjić, dr.med.FEBO, Hrvoje Raguž, dr.med.

Institution:

Knezović Vision Group, Zagreb / Department of ophthalmology, KB Dubrava, Zagreb

Aim:

To evaluate the clinical outcomes of ICL and toric ICL implantation for the correction of high myopia and myopic astigmatism.

Patients and methods:

Four eyes of 2 male patients, who underwent implantation of the posterior chamber phakic ICL having a 0.36-mm artificial central hole (Hole ICL; STAAR Surgical) for the correction of high myopia and myopic astigmatism (myopia range: -13.75 to -17.00 D, astigmatism range: -3.50 to -

5.25 D) were included in this observational study. Before surgery and at 1 week, and at 1, 3 and 6 months after surgery, we determined the following: UCDVA, BSCDVA, manifest refraction, intraocular pressure (IOP - including 1 day postoperatively), endothelial cell density, anterior chamber angle (ACA), anterior chamber depth (ACD) and central vault of the ICL (distance between posterior surface of ICL and anterior surface of crystalline lens)

Results:

UCDVA improved one week after the surgery and remained stable during the six months follow up. reaching preoperative BSCDVA in all eyes. One eye gain one line on Snellen optotype. The change in manifest refraction from one week following surgery until six months was 0.1 ± 0.36 D. No significant rise in intraocular pressure, except transient early postoperative rise, a secondary cataract or endothelial cell loss occurred in any case during the period of observation. ACD, ACA and central vault were in acceptable ranges.

Conclusion:

ICL lenses for correction high myopia and astigmatism allows excellent refractive results, with possible gain in BSCDVA lines, throughout a 6-month observation period. This surgical approach, which does not require additional iridectomies or keratotomies, may be a good alternative to current refractive procedures for the treatment of such eyes. It is necessary a longer follow-up to assess the eventually onset of late complication.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.sc.

Ime i prezime / First and Last Name:-First

Igor

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Knezović

68. David Grašić

Naslov:

Rani oporavak vida nakon transplantacije rožnice na jedinom funkcionalnom oku korištenjem piggy-back metode nošenja kontaktnih leća

Autori:

David Grašić, Dean Šarić, Biljana Kuzmanović Elabjer, Mladen Bušić

Ustanova:

Klinika za očne bolesti, Klinička bolnica "Sveti Duh", Zagreb

Cilj:

Prikazati mogućnost ranog oporavka vida nakon perforativne keratoplastike na jedinom funkcionalnom oku koristeći piggy-back metodu nošenja kontaktnih leća

Bolesnici i metode:

Tri pacijenta operirana penetrantnom keratoplastikom na jedinom, funkcionalnom oku fitana su piggy-back sistemom kontaktnih leća deset dana iza zahvata.

Rezultati:

Kod 3 pacijenta iza transplantacije rožnice na jedinom funkcionalnom oku učinjeno je fitanje piggy-back metodom deset dana iza zahvata. Kod svih pacijenata postoperativno je vid na operiranom i jedino funkcionalnom oku bio manji od 0,5 uz korekciju naočalama ili mekim kontaktnim lećama. Nakon korekcije piggy back sistemom svi pacijenti su postigli vidnu oštrinu 1,0. Tijekom praćenja od šest mjeseci iza zahvata nisu imali znacičajnih nuspojava. Jedan pacijent je imao simptome suhog oka što je riješeno konzervativnom terapijom, a jedan pacijent je kod bavljenja sportom imao problema sa ispadanjem polutvrde leće

Zaključak:

Piggy-back metoda fitanja kontaktnih leća je metoda izbora kod pacijenata nakon penetrantne keratoplastike na jedinom funkcionalnom oku. Ova metoda omogućuje najbrži povratak pacijenata u normalan život i rad.

Title:

Early visual recovery after post-penetrating keratoplasty on one functional eye using piggyback contact lens system

Authors:

David Grasić, Dean Šarić, Biljana Kuzmanović Elabjer, Mladen Bušić

Institution:

University Eye Clinic, University Hospital "Sveti Duh", Zagreb

Aim:

To demonstrate early visual recovery after penetrating keratoplasty in patients with one functional eye using piggyback contact lens system

Patients and methods:

Three patients operated with penetrating keratoplasty were fitted with piggyback contact lenses on the one functional eye ten days after surgery.

Results:

In all patients post-operative best corrected visual acuity on the operated and only functional eye was less than 0,5. After correction with the piggy back method all three patients had a visual acuity of 1,0. Six-month follow up of the patients after the surgery showed no side-effects. One of the patients had symptoms of dry eye which was treated conservatively , and one patient during playing sports had a problem with the soft contact lenses falling out.

Conclusion:

Piggy back contact lenses is the method of choice after penetrating keratoplasty in patients with one functional eye. This method allows for the quickest possible recovery to restoring a normal life.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

David

Ime i prezime / First and Last Name:-Last

Grašić

69. Dean Šarić

Naslov:

Usporedba dviju metoda implantacije donorske lamele kod endotelne lamelarne keratoplastike

Autori:

D. Šarić, S. Ramić, F. Bišćan, M. Bušić

Ustanova:

Klinika za očne bolesti, Klinička bolnica "Sveti Duh", Zagreb

Cilj:

Usporediti razlike u propadanju stanica endotela i postoperativne komplikacije kod dviju metoda implantacije lamele kod endotelne lamelarne keratoplastike

Bolesnici i metode:

Kod 10 pacijenata učinjena je lamelarna keratoplastika (DSAEK-descemet stripping automated endothelial keratoplasty). Donorska lamela pripremljena je u Očnoj banci. Donorsko tkivo uvedeno je u prednju sobicu dvjema tehnikama: "glide" tehnikom ($n=5$) i "taco" metodom ($n=5$).

Rezultati:

Gubitak endotelnih stanica nije bio statistički značajno različit među dvjema grupama. U "glide" grupi gubitak stanica bio je 19,8%, dok je u "taco" metodi ovaj gubitak iznosio 20,2%. Ni u jednoj grupi nije bilo značajnih postoperativnih komplikacija.

Zaključak:

Gubitak endotelnih stanica bio je podjednak u obje grupe. Kirurg se treba odlučiti za onu metodu u kojoj je vještiji i uvježbaniji.

Title:

Comparison of two donor lenticule insertion techniques for descemet stripping automated endothelial keratoplasty

Authors:

D. Šarić, S. Ramić, F. Bišćan, M. Bušić

Institution:

University Eye Clinic, University Hospital "Sveti Duh", Zagreb

Aim:

To compare the difference in endothelial cell damage and postoperative complications between 2 donor insertion methods for Descemet stripping automated endothelial keratoplasty (DSAEK).

Patients and methods:

Ten patients underwent DSAEK for pseudophakic bullous keratopathy. Donor cornea lenticules were prepared at Eye Bank. Grafts were inserted either by “glide“ insertion ($n=5$), either by “taco“ method ($n=5$). Corneal endothelial cell loss and postoperative complications were compared

Results:

Endothelial cell loss was not significantly different in two groups. “Glide“ group had 19,8% cell loss vs 20,2% loss in the “taco“ DSAEK group three months after surgery. Neither group had serious postoperative complications.

Conclusion:

Endothelial cell damage was practically the same in “glide“ group and in the “taco“ group. Surgeon should use either method depending on his skills and previous training.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Doc.dr.sc.

Ime i prezime / First and Last Name:-First

Dean

Ime i prezime / First and Last Name:-Last

Šarić

70. Dean Šarić

Naslov:

Usporedba monovision metode nošenja kontaktnih leća i multifokala za korekciju prezbiopije

Autori:

D. Šarić, S. Ramić, M. Bušić

Ustanova:

Klinika za očne bolesti, Klinička bolnica "Sveti Duh", Zagreb

Cilj:

Evaluirati učinkovitost dvaju modela nošenja kontaktnih leća: monovision metoda i multifokalne kontaktne leće

Bolesnici i metode:

54 pacijenta fitano je multifokalnim lećama ili monovision metodom. Nakon mjesec dana pacijenti su prebačeni na drugu metodu. Trebali su ocijeniti subjektivno zadovoljstvo nakon pojedine probe (vid na blizu, vid na dalek o, noćna vožnja, rad na osobnom računalu i upotreba mobilnih telefona). Također su se trebali odlučiti za jednu od metoda.

Rezultati:

Subjektivno zadovoljstvo monovision metodom bilo je bolje u svim kategorijama. 92% ispitanika preferiraju monovision metodu, 2% multifokalnu, a 6% se odlučilo za povremeno nošenje monovision konceptom

Zaključak:

Monovision sistem nošenja kontaktnih leća je puno prihvativiji od multifokalnog. Ova saznanja trebala bi koristiti u usavršavanju koncepta multifokalnih kontaktnih leća za prezbiope.

Title:

Monovision contact lenses vs multifocals for presbyopia correction

Authors:

D. Šarić, S. Ramić, M. Bušić

Institution:

University Eye Clinic, University Hospital "Sveti Duh", Zagreb

Aim:

To evaluate the effectiveness of monovision concept against multifocal contact lenses

Patients and methods:

54 patients were fitted with either multifocal contact lenses or monofocals and after one month trial period with different system. They had to evaluate their subjective satisfaction after each trial (near vision, distance vision,

(night driving, working on personal computer, use of mobile phone). Also they had to choose between those two concepts which works better for them.

Results:

Subjective satisfaction with monovision was better in all subjective categories. 92% of the patients prefered monovision model, 2% choose multifocals and 6% would wear monovision model only occasionally.

Conclusion:

Monovision concept is fare better accepted compared with multifocal contact lenses. That should be used for improvement of multifocal contact lenses and/or finding better solutions for presbyopes.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Doc.dr.sc.

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Dean

Ime i prezime / First and Last Name:-Last

Šarić

71. Ivana Džaja

Naslov:

Ultrasonografija oka i orbite u diferencijalnoj dijagnozi zastojne papile

Autori:

Džaja I., Karaman K., Bućan K., Olujić I., Džaja M., Matutinović Ž.

Ustanova:

KBC Split

Cilj:

Ukazati na važnost ultrasonografije oka i orbite u diferencijalnoj dijagnozi zastojne papile

Bolesnici i metode:

51 godišnjak, zaprimljen je na Kliniku za očne bolesti KBC Split zbog slabljenja vida oba oka. Pacijent je operao melanom kože 2011. godine. Ustanovljene su metastaze na plućima i metastaze zdjelice te je pacijent podvragnut kemo i radio terapiji prema DBT protokolu. U obradu bolesnika uključena je između ostalih i ultrazvuk ok i orbite, vidno polje, optička koherentna tomografija (OCT), vidni evocirani potencijali (VEP), scintigrafijski eleta, magnetna rezonanca(MR) mozga, cervikalne i torakalne kralježnice.

Rezultati:

Fundoskopski pregled oba oka je otkrio edem papile vidnog živca s elevacijom. Najbolja vidna oštrina desnog oka bila je percepcija svjetla, a lijevog oka 0,5. Ultrazvuk oka i orbite: desno oko: prominencija PNO 2.0 mm, promjer NO 6.3 mm, nakon testa abdukcije 5.7 mm. lijevo oko: prominencija PNO 2.1 mm, promjer NO 6.5mm, nakon testa abdukcije 5.9 mm. Početni nalaz MR-a nije ukazivao na ekspanzivne procese.

Zaključak:

Ultrasonografija oka i orbite je dokazala povišen intrakranijalni tlak, dok nalaz MR mozga, cervikalne i torakalne kralježnice nije ukazivao na ekspanzivan proces.

Title:

Eye and orbit ultrasound in differential diagnosis of papilla stagnans

Authors:

Džaja I., Karaman K., Bućan K., Olujić I., Džaja M., Matutinović Ž.

Institution:

University Hospital Centre Split

Aim:

To show the importance of eye and orbit ultrasound in differential diagnosis of papilla stagnans

Patients and methods:

51 years-old man, was admitted to the Department of Ophthalmology, University Hospital Center Split, for gradual visual loss on his both eyes. The patient has operated melanoma skin cancer in 2011. Lung metastases and pelvic metastases were established and the patient was treated with chemo and radio therapy at DBDT protocol. Workup included, among other methods, also eye and orbit ultrasound (US), visual field, optical coherent tomography (OCT), visual evoked potential (VEP), skeletal scintigraphy, magnetic resonance imaging (MRI) of brain, cervical and thoracic spine.

Results:

The fundoscopic exam on the both eyes discovered oedema with elevation of optic disc. Best visual acuity of the right eye was light perception and of the left eye 0,5.

Eye and orbit ultrasound: Right eye: prominence of optic disc 2mm, radius NO 6.3 mm. After the abduction test 5.7 mm. Left eye: prominence of optic disc 2.1 mm, radius NO 6.5 mm. After the abduction test 5.9 mm. The first MRI hasn't implicated that there were expansive process.

Conclusion:

Ultrasound of the eye and orbit has detected elevated intracranial pressure, although brain MRI, cervical and thoracic spine MRI scans haven't indicating on an expansive process.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Ivana

Ime i prezime / First and Last Name:-Last

Džaja

72. Biljana Andrijević Derk

Naslov:

Subfoveolarna debljina žilnice i anti- VEGF terapija u bolesnika s dijabetičkim makularnim edemom.

Autori:

Andrijević Derk B, Belak M, Vatavuk Z.

Ustanova:

KBC "Sestre milosrdnice", Zagreb

Cilj:

ispitati povezanost bazalnih vrijednosti subfoveolarne debljine žilnice i učinka anti VEGF terapije u bolesnika s dijabetičkim makularnim edemom (DME).

Bolesnici i metode:

U istraživanje je uključeno 15 bolesnika s kliničkom slikom DME ($CFT \geq 300 \mu\text{m}$). Svim bolesnicima učinjen je kompletan oftalmološki pregled uz određivanje vidne oštirine(Snellen optotipi), OCT makule(Cirrus HD OCT, Zeiss) uz mjerjenje centralne foveolarne debljine mrežnice (CFT) i subfoveolarne debljine žilnice (SFDŽ). Bolesnici s DME apliciran je intravitrealno Bevacizumab 1,25 mg/0,05 ml. na bazalom pregledu i nakon 4 tjedna. Kontrolni pregled učinjen je nakon 8 tjedana, uz procijenu funkcionalnog (vidne oštirine) i anatomskega uspjeha primenjene anti VEGF terapije. U studiju nisu bili uključeni bolesnici s kardiovaskularnim incidentima unutar 6 mjeseci, s izraženom kataraktom, visokom miopijom ili prethodnim laserskim tretmanom makule i/ili periferne retine te s prethodnim drugim farmakološkim tretmanom

Rezultati:

: U ispitivanoj skupini bolesnika s DME , bazalne vrijednosti debljine žilnice bile su u rasponu od 180-240 μm . Nakon dvije aplikacije anti VEGF-a, na kontrolnom pregledu za 8 tjedana , u 9/15 bolesnika dolazi do smanjenja edema u rasponu od 100-230 μm uz posljedično poboljšanje vidne oštirine. U 4/6 bolesnika dolazi do minimalne redukcije edema ($\leq 100 \mu\text{m}$) dok u 2/6 bolesnika nije došlo do smanjenja edema. Skupina bolesnika kod kojih je došlo do redukcije edema i poboljšanja vidne oštirine(9/15) imala je prosječno veće vrijednosti debljine žilnice (SFDŽ 210-240 μm) u usporedbi sa skupinom bolesnika kod kojih nije bilo adekvatnog terapijskog učinka (SFDŽ 180-205 μm).

Zaključak:

Bolesnici s bazalno većim vrijednostima subfoveolarne debljine žilnice imali su u ovom istraživanju bolji anatomski i funkcionalni odgovor na anti VEGF terapiju dijabetičkog makularnog edema . Trajanje DM, reguliranost glikemije, tip dijabetesa kao i stupanj dijabetičke retinopatije ne pokazuju značajno statističko odstupanje između bolesnika s dobrim i bolesnika s lošim anatomskim i funkcionalnim odgovorom na primjenjenu terapiju.

Title:

Subfoveal choroidal thickness and anti VEGF therapy in patients with diabetic macular edema

Authors:

Andrijević Derk B, Belak M, Vatavuk Z.

Institution:

1. University Department of Ophthalmology, University Clinical Center „Sestre milosrdnice“, Zagreb,Croatia

Aim:

to asses the correlation between baseline choroidal thickness and short term effects of anti VEGF therapy in patients with diabetic macular edema (DME)

Patients and methods:

In study was involved 15 patients with DME (central foveolar thickness CFT $\geq 300 \mu\text{m}$). Baseline and control ophthalmological examination at 4 and 8 weeks included determination of best corrected visual acuity (BCVA) by Snellen optotypes, macular OCT with measurement of CFT and subfoveolar choroidal thickness (SFCT) by Cirrus HD OCT, Zeiss. All patients were treated at baseline and after 4 weeks with intravitreal Bevacizumab 1,25/0,05 ml. The assessment of the anatomic and functional effects of anti VEGF therapy is performed for 8 weeks. In study were not included patients with cardiovascular and trombotic events in past 6 months, severe cataract, high myopia or with previous laser focal or panretinal treatment and those treated with other previous intravitreal treatment of DME.

Results:

Baseline subfoveolar choroidal thickness in patients with DME ranged from 180-240 μm .

After two anti VEGF injections, at the control examination in 8 weeks, nine patients of fifteen had positive anatomical and functional response to therapy (reduction of edema from 100-230 μm and better BCVA). Four of six patients had minimal reduction of edema ($\leq 100 \mu\text{m}$) while in two of six patients the macular edema did'nt respond to therapy.

Patients with positive response to therapy had a greater baseline subfoveolar choroidal thickness (210-240 μm) than the non-responder patients (180-205 μm).

Conclusion:

Patients with greater baseline subfoveolar choroidal thickness had in this study better anatomical and functional response to anti VEGF therapy of DME.

Type and duration of diabetes mellitus, glycemic control and degree of diabetic retinopathy were not statistically significant difference between responder and non-responder patients.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Biljana

Ime i prezime / First and Last Name:-Last

Andrijević Derk

73. Vladimira Vučenik

Naslov:

Septo-optička displazija- prikaz slučaja

Autori:

Vladimira Vučenik, dr.med., Spomenka Videc-Križarić, dr.med., Dragutin Turk, dr.med

Ustanova:

Očni odjel Županijske bolnice Čakovec

Cilj:

Prikazati rijedak slučaj septo-optičke displazije te time proširiti znanje o diferencijalnoj dijagnozi kongentialnih bolesti vidnog živca

Bolesnici i metode:

Djevojka stara 20 godina se javlja s teškom slabovidnošću na oba oka- više lijevom, izraženim horizontalnim ni stagmusom te konvergentnim strabizmom lijevog oka koji su primjećeni već u ranoj dojenačkoj dobi.

Rezultati:

Kod bolesnice su bile prisutne pojedine kliničke manifestacije septo-optičke displazije.

Očnim pregledom utvrđena je najbolje korigirana VO 0,3 desno i osjet svjetla lijevo. Vidljiv je horizontalni pen dularni nistagmus i konvergentni strabizam lijevog oka. Tonus i biomikroskopski nalaz su uredni za dob. Pregledom vidnog živca vidljiva je mala, blijeda PNO okružena žučkastom peripapilarnom atrofijom okruženom pigmentnim prstenom- "znak dvostrukog prstena". Retinalne žile su izgledom normalne.

U ranoj dojenačkoj dobi hospitalizirana je zbog hiperbilirubinemije i anemije te se uočila hipoglikemija (1,2 mol/l). Uočeno je zaostajanje u psihomotornom razvoju u kasnoj dojenačkoj dobi, provedena je fizikalna terapija zbog generalizirane hipotonije.

S 5 godina života je hospitalizirana na Klinici za pedijatriju KBC Rebro kada je potvrđena hipotalamo-hipofizna disfunkcija (manjak STH, niski ACTH uz normalan kortizol, poremećaj TSH) i hipoplazija NO te se postavila dijagnoza septo-optičke displazije. Započeto je liječenje hormonom rasta do 14. godine života te hormonom štitnjače i hidrokortizonom koje traje još i danas.

Zaključak:

Septo-optička displazija je rijetka razvojna anomalija koja zahvaća razne strukture središnjeg dijela mozga te se očituje kao promjenjiv spektar poremećaja s hipoplazijom optičkog živca, disgenezom septuma peluciduma, hipotalamo-hipofiznom disfunkcijom i shizencefalijom (rascjepom moždanog parenhima kroz hemisferu), različitim stupnjevima psihomotorne retardacije, smetnjama termoregulacije, konjugiranom hiperbilirubinemijom te epileptičkim napadajima.

Važnost rane dijagnoze je u liječenju hormonalnog manjka da bi se izbjegao rizik od hipoglikemije, adrenalne krize i posljedične smrti te u što boljoj razvojnoj rehabilitaciji.

Klinički se mora posumnjati na SOD kod novorođenčeta s hipoglikemijom, žuticom i nistagmusom. U te djece se preporučuju učiniti osnovni endokrinološki testovi i oftalmološki pregled zajedno s neuroradiološkim snimanjem

m/ MRI mozga i dinamičkim testovima hipofizne funkcije da bi se potvrdila dijagnoza septo-optičke displazije. Naša bolesnica je završila srednju školu u Centru za odgoj i obrazovanje "Vinko Bek", Zagreb, ustanovi za odgoj, obrazovanje i rehabilitaciju slijepih i slabovidnih djece, mladeži i odraslih, za zvanje fizioterapeut.

Title:

Septo-optic dysplasia (case report)

Authors:

Vladimira Vučenik, MD, Spomenka Videc-Križarić, MD, Dragutin Turk, MD

Institution:

County hospital Čakovec

Aim:

To report a rare case of septo-optic dysplasia and make our differential diagnosis of congenital optic nerve disease easier.

Patients and methods:

A 20 year old girl was referred with severe amblyopia on both eyes- more left, horizontal, pendular nystagmus and left esotropia that were noticed during early childhood.

Results:

There were some clinical manifestations of septo-optic dysplasia in our case.

Ophthalmologic examinations revealed that the best corrected visual acuity was RE 0,3 and LE L+,P+. Ocular motility examination revealed a pendular nystagmus and esotropia of the left eye. Intraocular measurements and BMS examination were normal. Fundus examination revealed small, pale optic nerve head, surrounded by a yellowish peripapillary halo bordered by a dark ring of pigment- "double ring sign". The retinal vessels are generally normal.

During early childhood our patient was hospitalized due to hyperbilirubinemia, anemia and first time measured hypoglycemia (1,2 mmol/l). Also developmental delay was noticed. In the age of 5 she was hospitalized on Pediatric Clinic of KBC Rebro where hypothalamic-pituitary dysfunction was confirmed (growth hormone deficiency, low ACTH with normal cortisol) and with bilateral optic nerve hypoplasia and developmental delay the diagnose was completed.

Conclusion:

Septo-optic dysplasia is a rare developmental anomaly involving different structures of the midline brain and is phenotypically variable disorder including optic nerve hypoplasia, septum pellucidum dysgenesis, pituitary hormone abnormalities, schizencephaly (clefts in the cerebral hemispheres of the brain), varies in the level of developmental delay, thermoregulation disorder, hyperbilirubinemia and epileptic seizures.

The earlier the diagnosis is made the better the outcome, as untreated hormonal abnormalities place patient at risk of hypoglycaemia, adrenal crises and consequently death. Also the early referral to neurodevelopmental team and educational-rehabilitational program are essential.

Clinically the diagnosis should be suspected in newborns with hypoglycaemia, jaundice and nystagmus. In these infants, baseline endocrine tests should be performed and an ophthalmology referral made. MRI brain images and dynamic studies of pituitary function can then be used to confirm the diagnosis.

Our patient ended high school in the Centre for Education and rehabilitation «Vinko Bek», Zagreb for people with visual impairment and her occupation is physical therapist.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Vladimira

Ime i prezime / First and Last Name:-Last

Vučenik

74. Robert Stanić

Naslov:

Duboka sklerektomija i trabekulektomija kod operacija dječjih glaukoma

Autori:

R.Stanić, Lakoš V, Rogošić V, Sušac T

Ustanova:

KBC Split, Klinika za očne bolesti

Cilj:

Procjeniti vrijednost kombinirane procedure duboke sklerektomije sa trabekulektomijom kod liječenja dječjih glaukoma.

Bolesnici i metode:

U studiju je bilo uključeno 14 očiju, 8 djece, sa primarnim kongenitalnim glaukom. Preoperativni pregled po d anestezijom je predhodio kirurškoj intervenciji. Postoperativni pregled je rađen 1 i 7 dana nakon operacije te nakon 1, 3, 6, 12, 18 i 24 mjeseca, zatim svakih 6 mjeseci nadalje. Intraoperativne i postoperativne komplikacije su praćene kao i postoperativni intraokularni tlak, najbolja korigirana vidna oštRNA, prozirnost rožnice i njezin dijametar.

Rezultati:

Prosječna dob prije operacije bila je $16,14 \pm 17,1$ mjeseca, prosječno praćenje pacijenata je bilo $32,7 \pm 6,3$ mjeseca. Prosječni preoperativni intraokularni tlak je bio $28,57 \pm 10,58$ mmHg. Prosječni postoperativni intraokularni tlak nakon 24 mjeseca je bio $14,35 \pm 3,31$ mmHg.

Zaključak:

Kombinirani zahvat duboke sklerektomije i trabekulektomije je operativna tehnika sa dobrim rezultatom kod pacijenata sa dječjim glaukom. Niska stopa intraoperativnih i postoperativnih komplikacija ove tehnike stavlja je kao izbor nad predhodnim klasičnim filtracijskim operacijama.

Title:

Deep sclerectomy and trabeculectomy in pediatric glaucoma filtering surgery

Authors:

R.Stanić, Lakoš V, Rogošić V, Sušac T

Institution:

Clinical Hospital Center Split, Department of Ophthalmology

Aim:

To evaluate the value of combined procedure deep sclerectomy and trabeculectomy for the treatment of pediatric glaucoma.

Patients and methods:

This study enrolled 14 eyes, 8 children, with primary congenital glaucoma. Preoperative examination under anesthesia was followed by surgical intervention. Postoperative examinations were performed at 1 and 7 days, at 1,3, 6, 12,18 and 24 months and then every six months. Intraoperative and postoperative complications were recorded as well as postoperative intraocular pressure, best corrected visual acuity, and corneal clarity and diameters.

Results:

The mean age before surgery was 16,14 ±17,1 months, mean follow up was 32,7±6,3 months. The mean preoperative IOP was 28,57±10,58 mmHg. The mean IOP 24 months postoperative was 14,35±3,31 mmHg.

Conclusion:

Combined deep sclerectomy and trabeculectomy is an operative technique with good results in patients with pediatric glaucoma. Low rate of intraoperative and postoperative complications of this technique makes this technique as the choice over previous classic glaucoma surgeries.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Robert

Ime i prezime / First and Last Name:-Last

Stanić

75. Dunja Klepo

Naslov:

Mogu li se neselektivni beta blokatori koristiti jednom dnevno?

Autori:

D. Klepo, D. Biuk, D. Dobutović, I. Krković, J. Barać, V. Jelušić

Ustanova:

KBC Osijek, Odjel za oftalmologiju

Cilj:

Utvrđiti učinkovitost neselektivnog beta blokatora timolola kada se kapa 2x dnevno vs 1x dnevno.

Bolesnici i metode:

U istraživanje planiramo uključiti bolesnike oboljele od glaukoma otvorenog kuta bez progresije bolesti s posti gnutim cilnjim IOT na monoterapiji, kao i bolesnike koji kapaju timolol u kombinaciji s alfa-2 agonistom, lokalnim inhibitorom karboanhidraze ili analogom prostaglandina. Svi bolesnici su hospitalizirani i u kontroliranim uvjetima im je mjerena IOT kroz 2 dana u vidu dnevne krivulje. Na dan hospitalizacije izmjere ne je IOT prije jutarnje doze timolola te 1 sat nakon ukapavanja timolola. Učinjena je dnevna krivulja 1. i 2. dan a hospitalizacije. Večernja doza timolola je izostavljena oba dana hospitalizacije, dok je ostala antiglaukomska terapija kapana u uobičajeno vrijeme. Statističkim metodama usporediti ćemo vrijednosti IOT prvog i drugog dana hospitalizacije na mjerjenja. Prvi dan predstavlja rezultat kapanja timolola kao što je uobičajeno 2x na dan, dok drugi dan označava rezultat kapanja timolola 1x ujutro.

Rezultati:

Prikazat ćemo demografske osobitosti bolesnika (dob, spol, prisutnost ostalih oftalmoloških bolesti, duljina kapanja antiglaukomske terapije), karakteristike njihove glaukomske bolesti (VPG, OCT PNO i RNFL). Statističkim metodama usporediti ćemo njihove pahimetrijom korigirane vrijednosti IOT prvog i drugog dana hospitalizacije ($p < 0,05$). Do sada je obrađeno 12 bolesnika i za sada vrijednosti IOT prelaze normalne vrijednosti ($> 21 \text{ mmHg}$) kod samo jednog bolesnika kojem je kapan timolol + lokalni inhibitor karboanhidraze.

Zaključak:

Nema razlike između kapanja neselektivnog beta blokatora 2x dnevno ili 1x ujutro zbog djelovanja beta blokatora na simpatikus koji je suprimiran tijekom noći.

Title:

Could non selective beta blockers be used once daily?

Authors:

D. Klepo, D. Biuk, D. Dobutović, I. Krković, J. Barać, V. Jelušić

Institution:

Clinical Hospital Center Osijek, Department of Ophthalmology

Aim:

To determine the efficiency of non selective beta blocker timolol when using twice daily vs once daily.

Patients and methods:

We are planning to include patients treating open angle glaucoma without progression of disease and with achieved target IOP using monotherapy as well as patients using timolol in combination with an alpha-2 agonist, local carboanhydrase inhibitor or prostaglandin analog. All patients are hospitalized and their IOP is measured in controlled conditions during 2 days in the form of daily curve. On the day of hospitalization patient's IOP is measured before the morning dose of timolol and 2 hours after using timolol. Patient's IOP is measured in a form of daily curve during the first and second day of hospitalization. Evening dose of timolol is left out during both days of hospitalization, while other antiglaucoma therapy is used in their regular time. Statistical methods will be used to compare values of IOP during the first and the second day of hospitalization. The first day represents the result of using timolol twice daily, and the second day represents the result of using timolol once in the morning.

Results:

We will present demographic characteristics of patients participating in our study (age, gender, presence of other ophthalmologic diseases, number of years using antiglaucoma therapy), characteristics of their glaucoma disease (visual field Goldmann, OCT PNO et RNFL). Statistical methods will be used to compare their pachymetric corrected IOP values during the first and the second day of the hospitalization ($p<0,05$). So far 12 patients were processed. For now the values of IOP are higher than normal (>21 mmHg) in only one patient using timolol + local carboanhydrase inhibitor.

Conclusion:

There is no difference between using nonselective beta blocker twice daily vs once in the morning. We believe that is due to effect of beta blockers on the sympathetic nerve system which is suppressed during the night time.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Dunja

Ime i prezime / First and Last Name:-Last

Klepo

76. Jurica Predović

Naslov:

Dugoročni utjecaj endotamponade s C3F8 na očni tlak nakon vitrektomije zbog regmatogene ablacije retine

Autori:

Jurica Predović¹, Domagoj Ivastinović², Andreas Wedrich², Borna Šarić¹, Damir Bosnar¹, Vlatka Brzović Šarić¹

Ustanova:

1 Klinika za očne bolesti Medicinskog fakulteta Sveučilišta Josipa Jurja Strossmayera u Osijeku, Klinička bolnica "Sveti Duh", Zagreb, Republika Hrvatska; 2 Klinika za očne bolesti Medicinskog univerziteta Graz, Austrija

Cilj:

Ispitati dugoročni utjecaj endotamponade s C3F8 na očni tlak nakon vitrektomije zbog regmatogene ablacije retine.

Bolesnici i metode:

Retrospektivna studija provedena je na Klinici za očne bolesti Medicinskog fakulteta Sveučilišta Josipa Jurja Strossmayera u Osijeku, Klinička bolnica "Sveti Duh", Zagreb, Republika Hrvatska i Klinici za očne bolesti Medicinskog univerziteta Graz, Austrija. Uključeni su pacijenti kojima je u razdoblju od siječnja 2005. do prosinca 2013. godine zbog primarne regmetogene ablacije retine učinjena 20G ili 23G pars plana vitrektomija, endodre naža, endolaser i endotamponada s C3F8. Komparativnu skupinu čine pacijenti s perifernom regmatogenom ablacijom retine koji su u istom razdoblju operirani klasičnom metodom (serklaž ili plomba). Postoperativno je tijekom mjesec dana korištena lokalna terapija koja je uključivala antibiotik i kortikosteroid. Isključeni su pacijenti koji su prije operacije koristili antiglaukomsku terapiju. Mjerene su i uspoređivane vrijednosti intraokularnog tlaka (IOT) mjerene Goldmann aplanacijskom tonometrijom preoperativno te nakon minimalno 12 mjeseci postoperativno.

Rezultati:

U skupini pacijenata kojima je primarno učinjena vitrektomija s endotamponadom C3F8 je 21 pacijent odgovarao svim postavljenim kriterijima. Prosječni postoperativni period praćenja je 26,0 +/- 17,5 mjeseci (minimalno 12 mjeseci). Preoperativni IOT je $13,3 \pm 3,7$ mmHg, a postoperativni IOT na zadnjem pregledu $15,4 \pm 3,5$ mm Hg ($p=0,029$; paired samples t -test). U skupini pacijenata kojima je učinjen serklaž/plomba ($n=57$) preoperativni IOT je $14,2 \pm 2,8$ mmHg, a zadnji postoperativni $14,2 \pm 2,6$ mmHg nakon prosječnog perioda praćenja od $19,9 \pm 8,4$ mjeseci (minimalno 12 mjeseci).

Zaključak:

U pacijenata s primarnom regmetogenom ablacijom retine kojima je učinjena vitrektomija i apliciran ekspanzivni plin C3F8 su nakon dugoročnog praćenja zabilježene više vrijednosti IOT nego u skupini operiranih insercijom plomba/serklaža. Ovo opažanje sugerira da bi pacijenti koji su vitrektomirani zbog regmatogene ablacije i injicirani im je ekspanzivni plin C3F8 trebali biti dugoročno praćeni da bi se izbjegle moguće komplikacije vezane uz povišenje IOT.

Title:

Long term effect of C3F8 endotamponade on intraocular pressure after vitrectomy for rhegmatogenous retinal detachment

Authors:

Jurica Predović¹, Domagoj Ivastinović², Andreas Wedrich², Borna Šarić¹, Damir Bosnar¹, Vlatka Brzović Šarić¹

Institution:

1 Ophthalmology Clinic, University Hospital Sveti Duh, Zagreb, Croatia; 2 Department of Ophthalmology, Medical University Graz, Austria

Aim:

To evaluate the long term effect of C3F8 endotamponade on intraocular pressure in vitrectomized eyes due to rhegmatogenous retinal detachment (RRD)

Patients and methods:

Retrospective study was conducted in Ophthalmology Clinic, University Hospital Sveti Duh, Zagreb, Croatia and in Department of Ophthalmology, Medical University Graz, Austria. Patients who underwent primary 20G or 23G pars plana vitrectomy, endodrainage, endolaser and gas endotamponade using C3F8 for RRD between January 2005 and December 2013 were included in the study. Patients operated for peripheral RRD using cerclage or scleral buckling technique in the same time period are used for comparison. Patients with preoperative glaucoma were excluded from the study. Intraocular pressure (IOP) was measured preoperatively and after minimally 12 months postoperatively.

Results:

21 patient who underwent primary pars plana vitrectomy with C3F8 gas tamponade for RRD was included. Postoperative follow up period was 26,0 +/- 17,5 months (minimally 12 months). Preoperative IOP was 13,3 ± 3,7 mmHg and last postoperative IOP was 15,4 +/- 3,5 mmHg ($p=0,029$; paired samples t-test). In the scleral buckling/cerclage group ($n=57$) preoperative IOP was 14,2 +/- 2,8 mmHg and postoperative IOP at the end of follow up period of 19,9 +/- 8,4 months was 14,2 +/- 2,6 mmHg.

Conclusion:

Higher IOP values were recorded after long time follow up in patients that underwent primary pars plana vitrectomy with C3F8 gas endotamponade compared to patients that underwent scleral buckling/cerclage surgery for RRD. This observation suggests that long-term IOP monitoring should be performed in patients that underwent primary pars plana vitrectomy with C3F8 gas tamponade for RRD.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.sc.

Ime i prezime / First and Last Name:-First

Jurica

Ime i prezime / First and Last Name:-Last

Predović

77. Andrijana Kopić

Naslov:

Uloga bevacizumaba (anti-VEGF-

a) u razvoju makularnog edema nakon vađenja silikonskog ulja kod pacijenata s proliferativnom dijabetičkom retinopatijom

Autori:

Andrijana Kopić, Andela Jukić, Mirna Kliček Višnjić, Tomislav Jukić

Ustanova:

KBC Zagreb, Klinika za očne bolesti

Cilj:

Planirano istraživanje pokazalo bi da se u skupini pacijenata s proliferativnom dijabetičkom retinopatijom nakon vađenja silikonskog ulja nakon pars plana vitrektomije bevacizumab treba davati rutinski radi smanjenja učestalosti razvoja makularnog edema

Bolesnici i metode:

10-

ak pacijenata s proliferativnom dijabetičkom retinopatijom koji nakon pars plana vitrektomije imaju instilirano silikonsko ulje podijelit ćemo u dvije skupine, te nakon vađenja silikonskog ulja prvoj skupini pacijenata aplicirati bevacizumab, a drugoj placebo. Optička koherentna tomografija učinit će se u svih pacijenata 7 dana i mjesec dana nakon vađenja ulja, te će se na taj način pratiti razvoj makularnog edema u svih pacijenata. Također, s vima pacijentima će se se prije vađenja silikonskog ulja, 7 i mjesec dana nakon učiniti kompletan oftalmološki pregled s utvrđivanjem vidne oštrine, mjerenjem intraokularnog tlaka, pregledom biomikroskopom i pregledom fundusa. Svi rezultati će biti statistički obrađeni i prikazani adekvatnim grafovima.

Rezultati:

Rezultati pokazuju da se u skupini pacijenta kojima je dan bevacizumab makularni edem razvio u manjem opsegu.

Zaključak:

Pacijentima s proliferativnom dijabetičkom retinopatijom nakon pars plana vitrektomije i vađenja silikonskog ulja trebalo bi rutinski davati bevacizumab radi smanjenja razvoja makularnog edema i postizanja bolje vidne oštchine.

Title:

role of bevacizumab (anti-VEGF) on macular oedema development after silicone oil extraction in proliferative diabetic retinopathy patients

Authors:

Andrijana Kopić, Andela Jukić, Mirna Kliček Višnjić, Tomislav Jukić

Institution:

University Clinical Hospital Eye Department Zagreb, Croatia

Aim:

Our study is going to show that patients with proliferative diabetic retinopathy should be administered bevacizumab as a routine after extraction of silicone oil in prevention of development of macular oedema.

Patients and methods:

Ten proliferative diabetic retinopathy patients after pars plana vitrectomy and silicone oil instillation will be divided into two groups. After silicone oil extraction first group of patients will get intravitreal bevacizumab and the second group placebo. Optical coherence tomography will be performed to all patients 7 days and 1 month after the procedure. In that way we will follow development of macular oedema in both group of patients. All patients will also be performed complete ophthalmological examination: visual acuity examination, IOP measurement, slit lamp and fundus examination, before the procedure, 7 days and one month after the procedure. All results will be statistically processed and showed.

Results:

Our results show that group of patients that was treated with bevacizumab has developed less macular oedema than the second group.

Conclusion:

Proliferative diabetic retinopathy patients after pars plana vitrectomy and silicone oil extraction should be treated routinely with bevacizumab for increasing macular oedema development.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Andrijana

Ime i prezime / First and Last Name:-Last

Kopić

78. Damir Bosnar

Naslov:

Nova pars plana T-fiksacijska tehnika s intraskleralnom fiksacijom trodijelne intraokularne leće

Autori:

Bosnar D., Šarić B., Bušić M., Kuzmanović Elabjer B., Ramić S., Predović J., Bišćan Tvrđi A.

Ustanova:

Klinika za očne bolesti, Klinička bolnica „Sveti Duh“, Medicinski fakultet Sveučilišta Josipa Jurja Strossmayer a u Osijeku

Cilj:

Prikazati rezultate nove metode pars plana T-fiksacijske kirurške tehnike s intraskleralnom fiksacijom trodijelne savitljive akrilne leće za implantaciju u stražnju sobicu u očiju bez lećne kapsule.

Bolesnici i metode:

Retrospektiva studija je uključila 12 bolesnika bez lećne kapsule kojima je učinjena PPV vitrektomija i T-skleralna fiksacija trodijelne intraokularne leće. Skleralne incizije T-oblike učinjene su na pars plana području 3.5 mm udaljenom od limbusa. Nakon implantacije savinute IOL za stražnju sobicu haptici su izvađeni kroz sklerotomije i smješteni pralimbalno u intraskleralni tunel s krajem u obliku slova T. Svi bolesnici su praćeni najmanje 3 mjeseca postoperativno. Dobiveni podaci su skupljeni i statistički obrađeni.

Rezultati:

Retrospektiva studija je uključila 12 bolesnika prosječne dobi 65.25 ± 16.24 godina. Kratkotrajne komplikacije uključile su povиšeni očni trak ($n = 1$) i hipotoniju ($n = 1$) dok su među dugotraјnim komplikacijama bile dislokačija haptika s erozijom spojnica ($n = 1$) i cistoidni makularni edem ($n = 1$). Srednja najbolje korigirana vidna oštrina iznosila je 0.1 (Snellen) preoperativno dok je tri mjeseca nakon operacije njezina vrijednost iznosila 0.7 ($p < 0.0001$).

Zaključak:

Nova pars plana T-fiksacijska tehnika s intraskleralnom fiksacijom trodijelne savitljive intraokularne leće za implantaciju u stražnju sobicu je učinkovita kirurška metoda sa značajnim postoperativnim poboljšanjem vidne oštine i minimalnim postoperativnim komplikacijama u očiju s oštećenjem kapsule.

Title:

Novel Pars plana intrascleral haptic T-fixation technique of intraocular lens without capsular support

Authors:

Bosnar D., Šarić B., Bušić M., Kuzmanović Elabjer B., Ramić S., Predović J., Bišćan Tvrđi A.

Institution:

University Eye Clinic, University Hospital „Sveti Duh“, Faculty of Medicine Osijek, Josip Juraj Strossmayer University of Osijek

Aim:

To report results of novel pars plana intrascleral T-fixation of three-piece foldable acrylic posterior chamber intraocular lens in eyes without capsular support.

Patients and methods:

Retrospective study of 12 patients without capsular support who underwent T-scleral fixation of a three-piece IOL with concurrent pars plana vitrectomy was conducted. T-shaped scleral incisions were made on pars plana 3.5 mm away from limbus. After implantation of folded posterior chamber IOL, haptics were externalised through sclerotomies and placed in intrascleral T-end tunnel parallel to the limbus. All patients were required to have at least 3 months of follow-up to be included in the series. Outcomes data were obtained and statistically analysed.

Results:

Twelve eyes of twelve patients were included in the study. The average age was 65.25 ± 16.24 years. Short-term complications included elevated intraocular pressure ($n = 1$) and hypotony ($n = 1$) while long-term complication was haptic dislocation with erosion of the conjunctiva ($n = 1$) and cystoid macular edema ($n = 2$). Mean preoperative BCDVA was 0,1 (Snellen), and mean postoperative three month BCDVA was 0,7 (Snellen) ($p < 0,0001$).

Conclusion:

Novel Pars plana T-fixation technique with intrascleral haptic fixation of posterior chamber intraocular lenses is an effective surgical option with significant visual improvement and minimal postoperative complications in eyes with deficient capsular support.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Doc.dr.sc.

Ime i prezime / First and Last Name:-First

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Bosnar

79. Mirna Kliček Višnjić

Naslov:

Uloga nesteroidnih protupalnih lijekova u prevenciji razvoja makularnog edema nakon operacije mrene kod dijabetičara

Autori:

Mirna Kliček Višnjić, Vitomir Arsić, Andrijana Kopić, Tomislav Jukić

Ustanova:

KBC Zagreb, Klinika za očne bolesti

Cilj:

Cilj ove studije je procijeniti ulogu nesteroidnih protuupalnih lijekova, u ovom slučaju diklofenaka, u prevenciju razvoja makularnog edema nakon operacije mrene kod pacijenata sa šećernom bolesti.

Bolesnici i metode:

Pacijenti s neproliferativnom dijabetičkom retinopatijom podijeljeni su u dvije grupe: jedna grupa primala je kombinaciju kapi i masti deksametazona, neomicina i polimiksina B tri puta dnevno kroz tri tjedna i druga koja je uz prije spomenute kapi i mast primala kapi diklofenaka četiri puta dnevno prvi tjedan, tri puta dnevno drugi tjedan i treći postoperativni tjedan dva puta dnevno. Pacijenti su prošli potpuni oftalmološki pregled: procjenu vidne oštirine, pregled biomikroskopom, mjereno očnog tlaka, pregled fundusa i OCT prije operacije te 7 dana i mjesec dana nakon operacije.

Rezultati:

Svi rezultati obrađeni su statistički i prikazani.

Zaključak:

Procjenjuje se da je u svijetu u 2014. godini 382 milijuna ljudi bolovalo od šećerne bolesti, a da će do 2035. godine biti 592 milijuna oboljelih ili će jedna od deset osoba imati dijabetes. Taj izraziti porast broja oboljelih ima veliki utjecaj na prevalenciju komplikacija šećerne bolesti. Šećerna bolest može utjecati na sve dijelove okula, orbitu i vjede. Jedna od najčešćih komplikacija je mrena koja može biti posljedica samog dijabetesa ili se radi o senilnoj mreni koja se događa prije nego što se očekuje.

Makularni edem je bezbolno stanje koje se očituje zamućenom ili iskrivljenom slikom. Radi se oticanju ili zadebljanju makule što se može vidjeti indirektnom oftalmoskopijom ili OCT-om.

Cistoidni makularni edem je najčešći uzrok smanjene vidne oštirine nakon operacije mrene. Procjenjuje se da je incidencija klinički značajnog makularnog edema između 0% i 5,8%. Rizik je znatno veći kod oboljelih od šećerne bolesti, do 56% kod bolesnika s neproliferativnom dijabetičkom retinopatijom koji nisu imali edem makule prije operacije.

Nadamo se da će ova studija pokazati profilaktičku ulogu diklofenaka nakon operacije mrene u prevenciji učestalosti i težini makularnog edema u bolesnika sa šećernom bolesti.

Title:

The role of the postoperative use of non-steroidal anti-inflammatory drug in development of macular edema in diabetic patients after cataract surgery

Authors:

Mirna Kliček Višnjić, Vitomir Arsić, Andrijana Kopić, Tomislav Jukić

Institution:

University Clinical Hospital Eye Department Zagreb, Croatia

Aim:

The role of this study is to evaluate the prophylactic role of non-steroidal anti-inflammatory drug (NSAID), diklofenak, in a specific regimen of dosage, against development of CME in diabetic eyes post-cataract surgery.

Patients and methods:

Patients with nonproliferative diabetic retinopathy were divided in two groups: a control group given topical dexamethason, neomycin and polymyxin B eye drops and ointment three times/day for 3 weeks postoperatively and a study group given topical diklofenak four times/day for the first week postoperatively, than three times/day for the second week and two times/day in the third week in addition to topical dexamethason, neomycin and polymyxin B eye drops and ointment. Patients undergo complete ophtalmological examination: visual acuity examination, IOP measurement, slit lamp and fundus examination and OCT before operation, 7 days and one month after the procedure.

Results:

All results will be statistically processed and showed.

Conclusion:

The latest estimates from 2014 indicate that there are 382 million people living with diabetes worldwide. By 2035, 592 million people or one person in ten will have the disease. This global increase will have a tremendous impact on the prevalence of diabetic complications. Diabetes can affect virtually every part of the eye from the orbit, lids, anterior and posterior segment. One of the complications is cataract. Cataract occurring in diabetic patients can be due to the diabetes itself or due to an accelerated senile cataract in which case cataract occurs earlier than normal.

Central macular edema (CME) is a painless condition usually associated with blurred or distorted vision. There is swelling or thickening of the macula which can be seen with indirect ophthalmoscopy or on OCT.

Cystoid macular edema is the most frequent cause of decreased vision in patients following cataract surgery. The estimated incidence of clinically significant macular edema is between 0% and 5,8%. The risk of development of CME is higher in patients with diabetes; up to 56% of nonproliferative diabetic retinopathy patients without diabetic macular edema at baseline develop CME after cataract surgery.

We hope that our study will show that the prophylactic postoperative diklofenak may have a role in reducing the frequency and severity of CME in diabetic eyes post-cataract surgery.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

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Mirna

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Kliček Višnjić

80. Željana Matutinović

Naslov:

Protruzija očne jabučice uzrokovana parabulbarnim tumorom

Autori:

Matutinović Ž, Bućan K, Galetović D, Lešin M, Džaja I, Mišura- Jakobac K.

Ustanova:

Klinika za očne bolesti, KBC Split

Cilj:

Prikazati kliničke karakteristike i dijagnostičke mogućnosti rijetkih retrobulbarnih tumora.

Bolesnici i metode:

55-

godиšnji muškarac sa pozicijskom protruzijom očne jabučice lijevog oka uzrokovanim parabulbarnim tumorom.

Pri poziciji glave prema dolje protruzija se povećava. Pretrage su između ostalog uključivale, MRI angiografiju i MSCT orbita i UZ oka i orbita.

Rezultati:

Ultrazvuk lijevog oka i orbite je otkrio retrobulbarnu hipoehogenu tvorbu uz medijalni ravni mišić. MSCT oka i orbita sa kontrastom je prikazao zadebljanje medijalnog ravnog mišića. MRI angiografija nije pokazala patološku vaskularizaciju tumora. Pacijent je pregledan od strane maksilofacijalnog kirurga i hematologa koji su zaključili da se vjerojatno radi o limfatičnom tkivu.

Zaključak:

Diferencijalno dijagnostički uzrok pozicijske protruzije očne jabučice bi mogao biti retrobulbarni tumor.

Title:

Eye protrusion caused by parabulbar tumor

Authors:

Matutinovic Z, Bucan K, Galetovic D, Lesin M, Dzaja I, Misura-Jakobac K

Institution:

Eye clinic, KBC Split

Aim:

To show clinical presentation and diagnostic possibilities for rare retrobulbar tumors.

Patients and methods:

55 year old man with positional left eye protrusion caused by parabulbar tumor. The position of the head down ward protrusion increases. Workup included among other methods, MRI angiography, MSCT and orbital ultrasound.

Results:

Ultrasound of the left eye discovered retrobulbar hypoechogenic formation by the medial rectus muscle. Eye and orbital MSCT with contrast showed thickness of medial rectus muscle. MR angiography didn't discover any pathological vascularization of the tumor. Patient was referred by maxillofacial surgeon and hematologist with conclusion that the tumor was probably made of lymphatic tissue.

Conclusion:

Differential diagnostic cause positional protrusion of the eye could be retrobulbar tumor.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

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Željana

Ime i prezime / First and Last Name:-Last

Matutinović

81. Jasmina Salopek-Rabatić

Naslov:

Biomarkeri i glaukom

Autori:

Jasminka Salopek-Rabatić, Snježana Kaštelan, Igor Knezović

Ustanova:

Klinička bolnica Dubrava, Zavod za oftalmologiju

Cilj:

Biomarker je pokazatelj biološkog stanja koji, u nekim slučajevima, može pomći u dianognosi i terapiji bolesti. Molecularni biomarkeri se u glaukomu još uvijek istražuju. Trenutno, u liječenju glaukoma pratimo strukturu i funkciju živčanih vlakana na očnoj pozadini. U procjeni stanja retine ili optičkog živca pojedinog pacijenta, pratimo gubitak tkiva i da li postoji poveznica sa smanjenjem retinalne osjetljivosti - procjenom kroz vidno polje.

Bolesnici i metode:

Učinjen je pregled literature na Pubmedu da se filtriraju najnoviji podaci nakon ARVO Foundation for Eye research sastanka održanog 2011 godine – kad su postavljeni temelji za proučavanje teme.

Rezultati:

Povećana osjetljivost i vrijednost genomičkih, proteomičkih, imetabolomičkih tehnika stvorili su potencijal i mogućnost identificiranja molekularnih entiteta koji mogu biti potencijalno korisni markeri, uključujući: (1) markeri za rano otkrivanje bolesti; (2) markeri koji će dati procjenu progresije / težine bolesti; (3) markeri će predviđati brzinu progresije bolesti, i (4) markeri koji će poslužiti kao prediktori odgovora na liječenje. Identificirani su: genetički biomarkeri, proteomički biomarkeri, preimuni i imunološki događaji, svi jako izazovni zbog pojedinačne kompleksnosti. U ovom trenutku u Hrvatskoj, u svakodnevnoj se praksi moramo oslanjati na mjerenja intraokularnog tlaka/ učestale kontrolne pregledne kroz praćenje progresije defekata vidnog polja, poštujući EGS smjernice iz 2014. godine.

Zaključak:

The Glaucoma Research Foundation podržava istraživanja biomarkera za glaukom i stimulira aktivnosti u ovom području. Identifikacija metaboličkog markera koji pouzdano ukazuje na oštećenje tkiva potencijalno može pomoci u otkrivanju glaukoma kod pacijenta koji još nemaju evidentne simptome gubitka vida (tzv. preperimetrijski glaukom). Takav bi marker pomogao doktorima koji liječe glaukom u procjeni vjerovatnoći da će bolest kod pacijenta napredovati te je zato potrebno agresivnije liječiti bolest ili na primjer, liječenje kod nekih pacijenata uopće nije potrebno.

Title:

Biomarkers in glaucoma

Authors:

Jasminka Salopek-Rabatić, Snježana Kaštelan, Igor Knezović

Institution:

Clinical hospital Dubrava, Ophthalmology department

Aim:

A biomarker is an indicator of a biological condition that, in some cases, can assist in the diagnosis and management of disease. Molecular biomarkers have yet to be explored in glaucoma. Currently, in the management of glaucoma we look at structure and function of the nerve tissue at the back of the eye. We try to evaluate if the patient's retina or optic nerve is losing tissue and whether this is accompanied by diminished sensitivity to light across the visual fields.

Patients and methods:

A thorough PUBMED search for literature review was done in order to find up to date / newest data after the A RVO Foundation for Eye research meeting in 2011 – when the milestone was set for this topic.

Results:

The increased sensitivity and accuracy of genomic, proteomic, and metabolomic techniques have brought about the potential to identify molecular entities that may serve as potentially useful markers, including (1) markers for early detection of a disease; (2) markers that will predict severity of a disease; (3) markers that will predict the rate of disease progression, and (4) markers that will serve as predictors of response to treatment. We identified: genetic biomarkers, proteomic biomarkers, pre-immune and immune events, all of them challenging in complexity. At the moment in Croatia, in our everyday practice we must lean on IOP measurements / frequency of control visits and VF defects progression, according to EGS 2014. guidelines.

Conclusion:

The Glaucoma Research Foundation will be emphasizing research into biomarkers for glaucoma to stimulate activity in this area. The identification of a metabolic marker indicating tissue injury with accuracy could potentially help predict glaucoma in patients who do not yet show symptoms of vision loss (pre perimetric glaucoma). Such a marker could help doctors treating glaucoma know whether the patient is likely to progress and therefore treat the disease more aggressively or whether treatment is even required in certain patients.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Jasminka

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Salopek-Rabatić

82. Šarolta Pinter

Naslov:

Učinci anti-VEGF terapije na fiziološku funkciju oka

Autori:

Šarolta Pinter, Adrian Lukenda, Željka Karaman Martinović

Ustanova:

Očna poliklinika Opto centar, Zagreb

Cilj:

Prikazati moguće utjecaje kontinuirane primjene anti- VEGF na morfologiju i fiziološke funkcije oka.

Bolesnici i metode:

Pregled literature

Rezultati:

Od 1989.godine kada se otkrila ključna uloga VEGF (vascular endothelial growth factor) u normalnoj kao i u patološkoj angiogenezi, sva su istraživanja bila usmjereni u blokiranje njegove funkcije. Prvo se anti- VEGF terapija počela primjenjivati u liječenju malignih oboljenja da bi se nedugo nakon toga ta terapija pokazala efikasnom u liječenju neovaskularizacija i edema kod bolesti oka kao što su dijabetička retinopatija, vlažni oblik senilne makularne degeneracije, okluzija retinalnih krvnih žila i prematurna retinopatija. Tek 2006.godine počelo se temeljiti proučavati VEGF, ne samo kao ključan faktor u angiogenezi, već kao faktor koji sudjeluje u održavanju normalnog izgleda i funkcije brojnih organa, među kojima je i oko. Eksperimentalni modeli na miševima i u kulturi humanih stanica pokazali su da potpuna neutralizacija VEGF u oku dovodi do stanjenja svih slojeva mrežnice i žilnice, oštećenja cilijarnog tijela, leće i živčanih vlakana vidnog živca. To se potvrdilo i u kliničkim studijama u kojima se OCT-om uočilo statistički značajno stanjenje žilnice i živčanih vlakana vidnog živca kod pacijenata liječenih anti- VEGF kroz 12 mjeseci.

Zaključak:

Dobrobit anti- VEGF terapije u liječenju neovaskularizacija i edema je neosporna. Međutim zbog fiziološke uloge VEGF u održavanju integriteta i funkcije oka, njegova dugotrajna i potpuna neutralizacija može prouzročiti atrofiju mrežnice, žilnice i vidnog živca sa ozbiljnim posljedicama na vidnu funkciju.

Title:

Effects of the anti-VEGF therapy on physiological eye function

Authors:

Šarolta Pinter, Adrian Lukenda, Željka Karaman Martinović

Institution:

Eye center Opto centar, Zagreb

Aim:

To present the effects of continuous anti-VEGF therapy on eye morphology and its physiological function

Patients and methods:

systematic literature review

Results:

Since 1989, when the key role of vascular endothelial growth factor (VEGF) in normal as well as pathological angiogenesis was discovered, the researchs were focused on how to block its function. The anti-VEGF therapy was first used in treatment of malignat diseases, but shortly after it was found to be as effective i n treatment of neovascularizations and swellings in diseases such as diabetic retinopathy, wet form of age relate d macular degeneration, retinal vessels occlusions and retinopathy of prematurity. Only in year 2006, the focus of research shifted back to VEGF as a factor that is normally expressed in various adult tissues and organs such as the eye, and its original functions unrelated to angiogenesis. Experimental mouse models and human cell cul tures have demonstrated that complete VEGF neutralization within the eye can lead to the thinning of all layers of retina and choroid, also causing damage of the ciliary body, lens and nerve fiber layer. The results were confirmed in clinical trials where OCT analysis, performed 12 months after anti-VEGF treatment, revealed statistically significant thinning of the choroid and nerve fiber layer.

Conclusion:

Benefits of anti-VEGF therapy in the treatment of neovascularizations and edema in eye diseases are undisputable. However, be cause of the physiological role of VEGF in maintenance of eye functions and integrity, its total and continuous neutralization can cause atrophy of the retina, choroid and optical nerve with serious consequences on vision.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Šarolta

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Pinter

83. Davor Dobutović

Naslov:

SLT vs YAG laser trabeculotomy kod PEX glaukoma – prikaz slučaja

Autori:

D. Dobutović, D. Biuk

Ustanova:

KBC Osijek, Odjel za oftalmologiju

Cilj:

usporediti učinkovitost SLT u odnosu na YAG laser trabekulotomiju kod pacijentice oboljele od kapsularnog glaukoma

Bolesnici i metode:

Pacijentica stara 71 godinu lijeći se od kapsularnog glaukoma s uznapredovalom bolešću - C/D 0,85/0,75; IOT uz max. medikamentoznu terapiju 26/22 mm Hg – susp. Azarga 2x i sol Travatan 1x navečer. Budući da ciljne vrijednosti IOT-a nisu postignute učinjen joj SLT

Rezultati:

3 mjeseca nakon SLT tretmana IOT uz terapiju 24/19 mm Hg te joj se učini na oba oka YAG laser trabekulotomi ja. Mjesec dana nakon tretmana IOT je uz medikamentoznu terapiju bio 13/11 mm Hg.

Zaključak:

YAG laser trabekulotomija je učinkovita metoda snižavanja IOT kod pacijenata oboljelih od PEX glaukoma.

Title:

SLT vs YAG laser trabeculotomy in PEX glaucoma—case report

Authors:

D. Dobutović, D. Biuk

Institution:

Clinical Hospital Centre Osijek, Department of Ophthalmology

Aim:

to compare the efficiency of SLT versus YAG laser trabeculotomy in a patient treating capsular glaucoma.

Patients and methods:

Our patient is a 72 year old female treating capsular glaucoma with progression of disease- C/D 0,85/0,75. IOP using maximal antiglaucoma therapy- 26/22 mm Hg- susp. Azarga 2x and sol Travatan 1x in the evening. Considering that target values of IOP were not obtained, SLT was performed.

Results:

3 months after SLT treatment values of IOP while using antiglaucoma therapy were 24/19 mm Hg. Considering that, we decided to perform YAG laser trabeculotomy. One month after the treatment values of IOP while using antiglaucoma therapy were 13/11 mm Hg.

Conclusion:

YAG laser trabeculotomy is an efficient method in reducing IOP values in patients treating PEX glaucoma.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Davor

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Dobutović

84. Barbara Dawidowsky

Naslov:

Stenoze nazolakrimalnog kanalića – teorija i realnost – naša iskustva

Autori:

Barbara Dawidowsky, Neda Striber, Diana Franceschi, Irena Babić

Ustanova:

Klinika za dječje bolesti, Klaićeva, Odjel za oftalmologiju, neurokirurgiju i otorinolaringologiju Klinike za kirurgiju

Cilj:

Stenoza nazolakrimalnog kanalića je česti medicinski problem koji zahvaća oko 20% novorođene djece. Kada su simptomi perzisitiraju dulje od godine dana života djeteta te se na konzervativnu terapiju masažom ne uspijeva uspostaviti prohodnost kanalića odlučujemo se na dilataciju kanalića. Prikazujemo naša iskustva.

Bolesnici i metode:

Retrospektivno istraživanje od 2011 do 2015 godine. Obradeni su pregledani pacijenti u našoj ambulanti upućeni pod dijagnozom bolesti suznih puteva, stenoze, i insuficijencije DNL kao i konjunktiviti koji su imali uzrok u prirođenoj stenozi suznih puteva. Prikazat ćemo incidenciju stenoza nazolakrimalog kanalića u pacijenata pregledanih I obradjenih u našoj ustanovi, vrijeme prvog oftalmološkog pregleda, metode konzervativne terapije, postotak spontane rezolucije i vrijeme provođenja kirurške terapije, kombiniranje s endonazalnim pristupom, kao i uspješnost zahvata.

Rezultati:

Prikazat ćemo rezultate konzervativne i kirurške terapije. Prikazat ćemo postotak uspješno dilatiranih stenoza sa masažom i konzervativnom terapijom kao i vrijeme kada se odlučuje na operaciju, dob djeteta i rezultate operacije.

Zaključak:

Konzervativna terapija masažom te dilatacija nazolakrimalnog kanalića nakon prve godine života uz endonazalni pristup, kada za to postoji indikacija, uspješno riješava simptome kod oko 99 % pacijenata

Title:

Nasolacrimal duct obstruction - theory and reality - our experience

Authors:

Barbara Dawidowsky, Neda Striber, Diana Franceschi, Irena Babić

Institution:

Childrens Hospital Zagreb, Dpt of ophthalmology, neurosurgery and otorhinolaryngology

Aim:

Congenital stenosis of nasolacrimal duct is a common medical problem affecting up to 20% of newborn infants. When symptoms persist for more than 5 to 6 months, lacrimal ducts should be subjected to probing. Anterograde probing through inferior lacrimal punctum using a rigid Bowman probe is the standard approach to such cases. We will present our experience using standard approach and a retrograde endonasal probing of the lacrimal ducts.

Patients and methods:

a retrospective study from 2011 to 2015 of patients with the diagnosis of congenital NLDO. In our department we treated children diagnosed with congenital NLDO. After unsuccessful conservative therapy in some of the children, endonasal probing and retrograde irrigation of lacrimal ducts were performed, taking into consideration the individual peculiarities of the obstruction and the anatomical accessibility of the opening of ductus nasolacrimalis in the inferior nasal passageway.

Results:

We will show the results of conservative therapy and anterograde probing combined with endonasal approach when necessary. The repeated probing failed to ensure reliable establishment of lacrimal duct patency only in 1 % of the cases.

Conclusion:

In patients with congenital stenosis who failed to establish patency of lacrimal system after conservative therapy , endonasal probing and irrigation of lacrimal ducts used in the treatment is a highly effective (99%), physiologically consistent and nontraumatic method of reestablishing the patency of the tear draining system.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

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Barbara

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Dawidowsky

85. Filip Bišćan

Naslov:

Ealsova bolest - prikaz slučaja

Autori:

Bišćan F, Predović J, Šarić B

Ustanova:

Klinika za očne bolesti, Klinička bolnica „Sveti Duh“, Zagreb, Medicinski fakultet Osijek, Sveučilište Josipa Jurja Strossmayera u Osijeku

Cilj:

Prikazati slučaj Ealsove bolesti.

Bolesnici i metode:

Muškarac u dobi od 38 godina javlja se zbog mutnijeg vida na desnom oku koji primjećuje zadnjih mjesec dana. Pri dolasku, najbolje korigirana vidna oštrina oba oka iznosila je 1,0 uz mutniju sliku s lijeve strane, na desno m oku. Nalaz prednjeg segmenta oka bio je obostrano uredan. Pregledom očne pozadine desnog oka uočila se b ljeda papila vidnog živca (PNO) te skleroza donje temporalne grane središnje retinalne arterije (ACR). Na očnoj pozadini lijevog oka PNO je bila uredna, samo centralno ekskavirana. Obostrano je panretinalno vidljiv segmentni venski „sheating“ s okolnim točkastim i mrljastim hemoragijama, izraženije na perifernoj retini. Fluorescinska angiografija (FAG) desnog oka pokazala je subokluziju donje temporalne grane ACR, a na oba oka su vidljivi panretinalno, izraženije periferno, segmentalni ispadci punjenja retinalnih vena s elementima shunt cirkulacije i ispadima kapilarne retinalne mreže gdje se u kasnim fazama angiograma uočavala magličasta hiperfluorescencija uz retinalne vene. U sklopu dijagnostičke obrade napravljena je i optička koherentna tomografija (OCT). Učinjeni su HLA tipizacija, ACE, Quantiferonski test na M. tuberculosis, serologija na B. Burgdorferi, krioglobulini, C3, C4, CIC, RF, ANA, anti-dsDNA, p-ANCA, c-ANCA, C-peptid čime se nije dokazao specifičan uzročnik. Na osnovu kliničkog nalaza i učinjene obrade zaključili smo da se kod pacijenta radi o 2. stupnju Ealsove bolesti. Započeto je liječenje peroralnom primjenom kortikosteroida (metilprednizolon) 1 mg/kg/dan uz postupno smanjivanje doze. Tijekom hospitalizacije dijagnosticiran je o inzulinu ovisan dijabetes melitus te je uvedena terapija inzulinom. Zbog uočenog porasta intraokularnog tlaka, u 10. tjednu nakon početka liječenja sistemskim kortikosteoridima uvedena je lokalna antiglaukomska terapija.

Rezultati:

Nakon uvođenja kortikosteroidne terapije vidljiva je polagana regresija retinalnih krvarenja i perivaskularnih infiltrata na oba oka. Zbog okluzije donje grane ACR desnog oka na OCT-u su nakon 6 mjeseci od dolaska bile vidljive atrofične promjene u donjoj polovici makule.

Zaključak:

Ealsova bolest je rijetka, a budući da ne postoji specifičan dijagnostički test niti etiološka terapija, postavljanje dijagnoze ove bolesti i liječenje predstavlja pravi izazov. U prikazanom slučaju dugotrajnom terapijom sistemskim kortikosterozidima zaustavila se progresija bolesti te je došlo do poboljšanja lokalnog nalaza na oba oka.

Title:

Eales' disease - a case report

Authors:

Bišćan F, Predović J, Šarić B

Institution:

University Eye Clinic, University Hospital "Sveti Duh", Zagreb, Faculty of Medicine Osijek, Josip Juraj Strossmayer University of Osijek

Aim:

To present a case of an Eales' disease.

Patients and methods:

*A 38-year-old male is referred to our clinic with one month history of blurred vision in the right eye. At initial visit the best corrected visual acuity (BCVA) in both eyes was 1,0 with blurry vision on the left side of the right eye. Anterior segment examination was within normal limits in both eyes. Fundus examination of the right eye (RE) revealed pallor of the optic disc (OD) and sclerosis of the inferior temporal branch of the central retinal artery (CRA) while in the left eye OD was normal, centrally excavated. Segmental venous sheathing with surrounding dot and blot hemorrhages could be seen panretinally in both eyes, particularly in the peripheral retina. Fluorescein angiography (FA) of the RE showed subocclusion of the inferior temporal branch of CRA while in both eyes panretinally, particularly peripherally, segmental nonperfused portions of the retinal veins could be seen with elements of shunt circulation and nonperfused capillary retinal meshwork, where, in late phases of the angiogram hazy hyperfluorescence along veins appeared. Diagnostics also included optical coherent tomography (OCT). HLA typization, ACE, Quantiferon test, serological test for detecting *B. Burgdorferi*, cryoglobulins, C3, C4, CIC, RF, ANA, anti-dsDNA, p-ANCA, c-ANCA, C-peptide were performed but no specific causative agent was found. Based on clinical findings and diagnostic tests performed, we concluded that the patient is in the second stage of Eales' disease. The treatment was started with oral corticosteroids (methylprednisolone) 1 mg/kg/day followed by gradual dose tapering. During hospitalization patient was diagnosed with insulin-dependent diabetes mellitus and was put on insulin therapy. Ten weeks after beginning of the corticosteroid therapy an elevated intraocular pressure was noted, for that reason local antiglaucoma therapy was introduced.*

Results:

After the patient started with corticosteroid therapy, a slow regression of retinal hemorrhages and perivascular infiltrates was evident in both eyes. Due to the occlusion of the lower branch of CRA in the right eye, six months after initial visit, OCT showed atrophic changes in the lower half of the macula.

Conclusion:

Eales' disease is a rare condition, and since there is no specific diagnostic test nor etiological treatment, diagnostics and therapy of this disease represent a real challenge. In the presented case a long-term treatment with systemic corticosteroids stopped the disease progression and led to an improvement of the local findings in both eyes.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Filip

Ime i prezime / First and Last Name:-Last

Bišćan

86. Edi Ladavac

Naslov:

Idiopatska juxtapvealna teleangiektažija tip 2

Autori:

Edi Ladavac

Ustanova:

Ladavac Očna ambulanta

Cilj:

opis slučaja

Bolesnici i metode:

Prikaz pacijenata sa umjerenim padom vida te makularnim promjenama. Uz kliničku sliku pacijentima je zbog p otvrde dijagnoze učinjena fluoroscentna angiografija (FAG) i optička koherentna tomografija (OCT).

Rezultati:

Temeljem kliničke slike i dopunskih pretraga potvrđena je dijagnoza juxtapvealne teleangiektaže tip 2

Zaključak:

Idiopatska juxtapvealna teleangiektažija tip 2 je bilateralna bolest nepoznata uzroka sa karakterističnim pro mjenama u makularnoj kapilarnoj mreži i neurosenzornom atrofijom. Često se ne prepozna zbog suptilne prirod e ranih nalaza. Zbog toga je bitno podizati svijest o njenoj prisutnosti te usmjeriti napore prema boljem razumij evanju i pronalaženju odgovarajuće terapije.

Title:

Idiopathic Juxtapveal Telangiectasia Type II (IJFT- 2)

Authors:

Edi Ladavac

Institution:

Ladavac Očna ambulanta

Aim:

Case Report

Patients and methods:

Case presentations of patients with moderate drop of vision and retinal macular changes. To confirm the diagnosis fluorescein angiography (FAG) and optical coherence tomography (OCT) was performed.

Results:

Based on clinical presentation and ancillary testing, the diagnosis of IJFT-2 was confirmed.

Conclusion:

Idiopathic juxtapapillary telangiectasia type II is a bilateral disease of unknown cause with characteristic alterations of the macular capillary network and neurosensory atrophy.

The diagnosis is often missed because of the subtle nature of early findings. There is much work to be done to understand the disease better, to raise its profile and to search for treatment.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Edi

Ime i prezime / First and Last Name:-Last

Ladavac

87. Dubravka Biuk

Naslov:

Učinkovitost revizije filtracijskog jastučića metodom subkonjunktivalnog "needlinga" sa 5FU godinu dana nakon trabekulektomije: naša iskustva

Autori:

Biuk D., Matić S, Dobutović D, Barać J, Benašić T, Vinković M.

Ustanova:

Odjel za oftalmologiju, KBC Osijek

Cilj:

Ispitati učinkovitost subkonjunktivalnog "needlinga" sa 5FU kod pacijenta sa nefiltrirajućim, aplaniranim ili enkapsuliranim filtracijskim jastučićem.

Bolesnici i metode:

Studija je uključila 19 pacijenata kojima je prethodno učinjena filtrirajuća glauomska operacija minimalno godinu dana ranije. Needling je rađen sa 30-gauge iglom i 0,1 ml od 50mg/ml 5FU.

Rezultati:

Intraokularni tlak se spustio u srednjoj vrijednosti na 8,88 mm Hg neposredno nakon zahvata a tjedan dana nakon zahvata na 16,25 mm Hg. Šest očiju (31,57%) smatramo absolutno uspješnim - bez potrebe za ponovnom needling procedurom ili drugom kirurškom intervencijom ili medikamentoznom terapijom u narednih šest mjeseci. 10 očiju (50%) smatramo djelimično uspješnom budući da je za kontrolu IOT-a bila potrebna medikamentozna terapija. Kod tri oka (15,78%) je procedura bila neuspješna budući da su bile potrebne dodatne kirurške procedure. Srednja vrijednost IOT-a u prvoj grupi bila je 13,78 mm hg, u drugoj grupi 17 mm Hg a u trećoj grupi 24 mm Hg na kraju praćenja.

Zaključak:

Kasni 5FU needling možemo smatrati efikasnom metodom kontrole IOT-a u pacijenata sa nekontroliranim tlakovima nakon fistulirajućih operacija.

Title:

The efficacy of 5-fluorouracil bleb needling performed 1 year or more posttrabeculectomy: our experience

Authors:

Biuk D., Matić S, Dobutović D, Barać J, Benašić T, Vinković M.

Institution:

Department of Ophthalmology, Clinical Hospital Centre Osijek

Aim:

To determine the efficacy of a subconjunctival needling revision using 5-fluorouracil (5FU) when administered to patients who have nonfiltering, flat, or encapsulated blebs over 1 year after the original surgery.

Patients and methods:

The study included of 19 glaucoma patients, who had undergone both a trabeculectomy filtering procedure and a subconjunctival 5FU needling revision, with a minimum interval of 1 year between these procedures. The needling was a clinic procedure using a 30-gauge needle and 0.1 mL of 50 mg/mL 5FU.

Results:

Intraocular pressure (IOP) decreased by an average of 8.88 mm Hg immediately after the needling procedure and one week after the needling procedures IOP decreased by an average of 16.25 mm Hg. Six eyes (31.57%) achieved absolute success, defined as IOP control with no further needling revision, surgical intervention, or anti-glaucoma medication in the 6-month follow-up period. Ten eyes (50 %) achieved a qualified success, defined as IOP control with resumed medication use. Three eyes (15.78 %) failed the procedure by requiring a repeat surgical intervention. The mean IOP was 13.78 mm Hg in the success group, 17 mm Hg in the qualified success group, and 24 mm Hg in the failure group at the end of follow-up.

Conclusion:

Late 5FU needling is an effective method to control IOP and avoid further surgery in a high proportion of patients with medically uncontrolled nonfiltering blebs

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Doc.dr.sc.

Ime i prezime / First and Last Name:-First

Dubravka

Ime i prezime / First and Last Name:-Last

Biuk

88. Daliborka Miletic

Naslov:

Dimenzije tarzusa kod involutivnoga entropija donje vjede

Autori:

Daliborka Miletic, Biljana Kuzmanovic Elabjer, Ana Bišćan Tvrđi, Mladen Bušić, Damir Bosnar

Ustanova:

Klinika za očne bolesti, Klinička bolnica "Sveti Duh", Zagreb

Cilj:

utvrditi postoje li promjene u visini i debljini tarzusa kod involutivnoga entropija donje vjede

Bolesnici i metode:

deset konsekutivnih bolesnika, 5 muškaraca i 5 žena, s involutivnim entropijem donje vjede starijih od 60 godina a kirurški je lječeno na Klinici za očne bolesti KB "Sveti Duh". Za korekciju entropija korištena je modificirana kirurška metoda po Quickert-u i Jones-

u koja uključuje pentagonalnu eksziziju pune debljine vjede. Na patohistološkim presjecima na ovaj način dobivenih uzoraka mjerena je visina i debljina tarzusa pomoći okularnoga mikrometra. Kontrolnu skupinu činilo je 10 bolesnika, 5 muškaraca i 5 žena odgovarajuće dobi, s patohistološki potvrđenim bazocelularnim karcinomom (BCC) donje vjede smještenim pretarzalno na lateralnoj polovici donje vjede. Pentagonalnom ekszizijom pune debljine vjede uklonjen je tumor s 3 mm okolnoga klinički zdravoga tkiva. Mikrometrijska mjerena tarzusa rađen a su upravo na tim, od tumora slobodnim, rubovima preparata.

Rezultati:

dob muškaraca s involutivnim entropijem donje vjede bila je $75 \pm 9,9$ godina (raspon 62 – 80 godina). Debljina tarzusa kod ovih ispitanika iznosila je $1,41 \pm 0,24 \mu\text{m}$ (raspon 1,25 – 1,65 μm), a visina $4,61 \pm 0,4 \mu\text{m}$ (raspon 4,1 – 5,2 μm). Žene iz ispitivane skupine bile su dobi $74,6 \pm 5,23$ godina (raspon 67 – 80 godina). Debljina tarzusa bila je $1,52 \pm 0,59 \mu\text{m}$ (raspon 1,1 – 2,5 μm), a visina $4,2 \pm 0,6 \mu\text{m}$ (raspon 3,25 – 4,75 μm).

Muškarci iz kontrolne skupine s BCC-

om bili su dobi $70,6 \pm 3,21$ godina (raspon 66 – 74 godina). Tarzus je kod njih bio debo $1,21 \pm 0,25 \mu\text{m}$ (raspon 0,8 – 1,5 μm) i visok $4,65 \pm 0,42 \mu\text{m}$ (raspon 4,0 – 5,0 μm). Žene su bile dobi $72,6 \pm 7,3$ godina (raspon 64 – 81 godina), debljina tarzusa iznosila je $0,98 \pm 0,19 \mu\text{m}$ (raspon 0,75 – 1,25 μm), a visina $3,6 \pm 0,89 \mu\text{m}$ (raspon 2,25 – 4,5 μm).

Zaključak:

u našoj ispitivanoj populaciji tarzus je kod involutivnoga entropija donje vjede dulji i deblji u odnosu na kontrolnu skupinu bez involutivnoga entropija. To je suprotno do sada uvriježenom mišljenu, za koje ionako nismo u literaturi našli potvrdu.

Title:

Dimensions of the tarsus in involutional lower eyelid entropion

Authors:

Daliborka Miletić, Biljana Kuzmanović Elabjer, Ana Bišćan Tvrđić, Mladen Bušić, Damir Bosnar

Institution:

University Eye Clinic, University Hospital "Sveti Duh", Zagreb

Aim:

to determine changes in the height and thickness of the tarsus in the lower eyelid with involutional entropion

Patients and methods:

ten consecutive patients, 5 men and 5 women older than 60 years, with involutional lower eyelid entropion were surgically treated at the University Eye Clinic, University Hospital "Sveti Duh". For correction the modified surgical method by Quickert and Jones, that includes a pentagonal full thickness eyelid excision, is used. On pathohistological sections height and thickness of the tarsus were measured with ocular micrometer. The control group consisted of 10 patients, 5 men and 5 women of matching age, with histologically confirmed basal cell carcinoma (BCC) located on the lateral half of the lower eyelid. It was treated with pentagonal full thickness eyelid excision with 3 mm peripheral surgical margins. Height and thickness of the tarsus at tumor free margins were measured with ocular micrometer.

Results:

age of men with involutional lower eyelid entropion was 75 ± 9.9 years (range 62 - 80 years). The thickness of the tarsus in these patients was 1.41 ± 0.24 microns (range 1.25 to 1.65 microns) and the height 4.61 ± 0.4 microns (range 4.1 to 5.2 microns). Women in this group were 74.6 ± 5.23 years old (range 67 to 80 years). Their thickness of the tarsus was 1.52 ± 0.59 microns (range 1.1 to 2.5 microns) and the height 4.2 ± 0.6 microns (range 3.25 to 4.75 microns). Men in the control group aged 70.6 ± 3.21 years (range 66 to 74 years). The tarsal thickness was 1.21 ± 0.25 microns (range 0.8 to 1.5 microns) and the height was 4.65 ± 0.42 microns (4.0 - 5.0 microns). Women were 72.6 ± 7.3 years old (range 64.81 years), the tarsus was 0.98 ± 0.19 microns thick (range 0.75 to 1.25 microns) with the height of 3.6 ± 0.89 microns (2.25 to 4.5 microns).

Conclusion:

in our studied population the tarsus in the involutional lower eyelid entropion was longer and thicker compared to the control group without the involutional entropion. This is in contrast to the general belief, for which we did not find confirmation in the literature.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Daliborka

Ime i prezime / First and Last Name:-Last

Miletić

89. Biljana Kuzmanović Elabjer

Naslov:

UBM u dijagnostici i praćenju solidnih tumora prednjega segmenta oka

Autori:

Kuzmanović Elabjer B, Bušić M, Miletić D, Bišćan Tvrđi A, Bosnar D

Ustanova:

Klinika za očne bolesti, KB „Sveti Duh“, Zagreb

Cilj:

prikazati ulogu UBM-a u dijagnostici i praćenju solidnih tumora prednjega segmenta oka

Bolesnici i metode:

u godini dana prvi UBM pregled učinjen je kod 87 bolesnika. U svrhu diferenciranja lezija UBM je kombiniran sa standardiziranim A-prikazom.

Rezultati:

u 27 (31,03%) pregledanih bolesnika otkrivena je solidna tumorska lezija irisa ili cilijarnoga tijela. U 12/27 (44,44%) bolesnika, 8 žena i 4 muškarca, u dobi od 12 do 85 godina ($61,33 \pm 20,28$ godina), utvrđene su ultrazvučne značajke nevusa irisa. Anteroposteriorni promjer nevusa bio je 0,55-

1,07 mm ($0,77 \pm 0,17$ mm). Ultrazvučne karakteristike malignoga melanoma irisa pronađene su kod dva muškarca (7,41%), u dobi od 60 i 68 godina. Anteroposteriorni promjer malignoga melanoma irisa bio je 2,13 i 2,02 mm. Pregledom cilijarnoga tijela detektirana je solidna lezija s ultrazvučnim karakteristikama malignoga melanoma u 11/27 (40,74%) bolesnika, 7 žena u dobi od $63,43 \pm 18,6$ godina i 4 muškarca u dobi od $56,25 \pm 8,9$ godina. U 6/11 bolesnika tumor je bio na lijevome i u 5/11 na desnome oku. Veličina je bila od 2,02 do 6,03 mm ($3,27 \pm 1,16$ mm), mjerena od površine sklere do posteriorne plohe tumora. Adenom je otkriven u 1/27 (3,7%) i metastatski tumor u 1/27 (3,7%) bolesnika. Kod svih bolesnika s ultrazvučnim značajkama malignoga melanoma irisa i cilijarnoga tijela učinjena je brahiterapija. Količina zračenja određena je prema veličini tumora izmjerenoj UBM

- om. Redovitim UBM praćenjem zabilježeno je smanjenje lezije uz porast unutarnje ehogenosti osim kod jedne bolesnice s melanomom cilijarnog tijela. Bolesnik s metastatskim tumorom cilijarnoga tijela upućen je onkologu, dok se bolesnici s nevusom irisa i adenomom cilijarnoga tijela dalje prate UBM-om.

Zaključak:

UBM je učinkovita metoda u otkrivanju, lokalizaciji i mjerenu solidnih tumora prednjega segmenta oka. Za njihovo diferenciranje nužno je UBM nadopuniti sa standardiziranim A-prikazom.

Title:

UBM in diagnosis and monitoring of solid tumors of the anterior segment of the eye

Authors:

Kuzmanović Elabjer B, Bušić M, Miletić D, Bišćan Tvrđi A, Bosnar D

Institution:

University Eye Clinic, University Hospital „Sveti Duh“, Zagreb

Aim:

to show the role of ultrasound biomicroscopy (UBM) in the diagnosis and monitoring of solid tumors of the anterior segment of the eye

Patients and methods:

based on clinical indications, initial UBM examination was performed in 87 patients over a period of one year. For the purpose of tissue differentiation UBM is combined with standardized echography

Results:

in 27 (31.03%) patients, solid tumor of the iris and the ciliary body was detected. In 12/27 (44.44%) patients, 8 women and 4 men, aged 12-85 years (61.33 ± 20.28 years), lesion of the iris had ultrasound characteristics of a nevus. Anteroposterior diameter of the nevi ranged from 0.55 to 1.07 mm (0.77 ± 0.17 mm). Ultrasound features of malignant melanoma of the iris were found in two men (7.41%), aged 60 and 68 years. Anteroposterior diameter of the melanoma of the iris was 2.13 and 2.02 mm, respectively. Malignant melanoma of the ciliary body was detected in 11/27 (40.74%) patients, seven women aged 63.43 ± 18.6 years and 4 men aged 56.25 ± 8.9 years. In 6/11 patients the tumor was in the left eye and in 5/11 in the right eye. The largest diameter of the tumor, measured from the surface of the sclera to the posterior surface of the tumor, ranged from 2.02 to 6.03 mm (3.27 ± 1.16 mm). Adenoma was detected in 1/27 (3.7%) and metastatic tumor in 1/27 (3.7%) patients. All patients meeting the ultrasound and clinical criteria for malignant melanoma of the iris and the ciliary body underwent brachytherapy. The amount of radiation is determined by the size of the tumor measured with UBM. Regular monitoring with UBM showed a decrease of lesion size and increase in internal reflectivity in all but one patient with ciliary body melanoma. One patient with metastatic ciliary body tumor was referred to an oncologist. Patients with nevus of the iris and adenoma of the ciliary body were followed up with UBM.

Conclusion:

UBM is an effective method for detection, localization and measurement of solid tumors of the anterior segment of the eye. Combining UBM with standardized echography is mandatory for tissue differentiation.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Prof.dr.sc.

Ime i prezime / First and Last Name:-First

Biljana

Ime i prezime / First and Last Name:-Last

Kuzmanović Elabjer

90. Alja Crnej

Naslov:

The role of inflammation in long-term complications after penetrating keratoplasty and KPro implantation

Autori:

Alja Crnej, Masahiro Omoto, Thomas H. Dohlman, Claes H. Dohlman, and Reza Dana

Ustanova:

Massachusetts Eye and Ear Infirmary and Schepens Eye Research Institute, Harvard Medical School

Cilj:

To compare the degree of inflammation after syngeneic and allogeneic penetrating keratoplasty (PK) with miniature Keratoprosthesis (m-KPro) implantation in mice.

Bolesnici i metode:

BALB/C (syngeneic) or C57BL/6 (allogeneic) corneas were transplanted onto BALB/C host beds as part of PK and m-

KPro implantation. Before euthanasation at 8 weeks, intraocular pressure (IOP) was measured with manometry. Then tissues were harvested and analysed. First, expression levels of the pro-inflammatory cytokines Tumor necrosis factor alpha (TNFa) and interleukin 1 beta (IL-1 β) in the retina were analyzed using Real-Time qPCR at 8 weeks post-transplantation. Second, the microglia activation was assessed quantitatively, using JImage..... Third, the degree of retinal ganglion cell (RGCs) loss was determined quantitatively using confocal microscopy. Lastly, optic nerve axon degeneration was assessed quantitatively in two different ways: semi-automated counting methodcircularity of optic nerve axons and their area were assessed quantitatively.

Rezultati:

Cell frequencies in the syngeneic (syn) and allogeneic (allo) m-KPro groups were higher compared with the syngeneic and allogeneic PK groups, respectively, at all time points. However, after week four, frequencies of all analyzed immune cells were higher in the alloPK group as compared with synKPro group. At eight weeks, the expression of TNFa was higher in synKPro, alloPK, and alloKPro groups compared to the naïve and synPK groups. The expression of IL-1 β was significantly higher in both KPro groups as compared to PK groups.

Zaključak:

Although the m-KPro device augments the inflammatory response in the cornea after its implantation, allogenicity (of the carrier tissue) is also a significant contributor to corneal inflammation. These data suggest that using syngeneic or decellularized corneal tissue as a Boston-KPro carrier could reduce the post-operative inflammation response.

Title:

The role of inflammation in long-term complications after penetrating keratoplasty and KPro implantation

Authors:

Alja Crnej, Masahiro Omoto, Thomas H. Dohlman, Claes H. Dohlman, and Reza Dana

Institution:

Massachusetts Eye and Ear Infirmary and Schepens Eye Research Institute, Harvard Medical School

Aim:

To compare corneal inflammation after syngeneic and allogeneic penetrating keratoplasty (PK) with miniature Keratoprosthesis (m-KPro) implantation in mice.

Patients and methods:

BALB/C (syngeneic) or C57BL/6 (allogeneic) corneas were transplanted onto BALB/C host beds as part of PK or m-

KPro implantation. Corneal inflammation was assessed by determining the frequencies of CD45+ leukocytes, CD4+ T cells, CD11b+ cells, and Gr-1+ granulocytes/monocytes by flow cytometry at 2, 4, and 8 weeks post-transplantation. In addition, expression levels of the pro-inflammatory cytokines Tumor necrosis factor alpha (TNFa) and interleukin 1 beta (IL-1 β) were analyzed using Real-Time qPCR at 8 weeks post-transplantation.

Results:

Cell frequencies in the syngeneic (syn) and allogeneic (allo) m-KPro groups were higher compared with the syngeneic and allogeneic PK groups, respectively, at all time points. However, after week four, frequencies of all analyzed immune cells were higher in the alloPK group as compared with synKPro group. At eight weeks, the expression of TNFa was higher in synKPro, alloPK, and alloKPro groups compared to the naïve and synPK groups. The expression of IL-1 β was significantly higher in both KPro groups as compared to PK groups.

Conclusion:

Although the m-KPro device augments the inflammatory response in the cornea after its implantation, allogenicity (of the carrier tissue) is also a significant contributor to corneal inflammation. These data suggest that using syngeneic or de-cellularized corneal tissue as a Boston-KPro carrier could reduce the post-operative inflammation response.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

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Alja

Ime i prezime / First and Last Name:-Last

Crnej

91. Adrian Lukenda

Naslov:

Kako staviti kratkovidnost pod kontrolu u 2015. godini?

Autori:

Adrian Lukenda, Željka Karaman Martinović, Šarolta Pinter

Ustanova:

Očna poliklinika Opto centar, Zagreb

Cilj:

Usporediti sigurnost i učinkovitost optičkih, okolišnih i farmakoloških pristupa u prevenciji i liječenju progresivne kratkovidnosti.

Bolesnici i metode:

Pregled literature i trenutna perspektiva.

Rezultati:

Kratkovidnost je postala globalni zdravstveni problem epidemijskih proporcija. Prevalencija kratkovidnosti kreće se između 70 i 90% u nekim azijskim zemljama te do 40% u Europi i SAD-u. Rizici od komplikacija koje ugrožavaju vid, poput odignuća mrežnice, makulopatije, razvoja očne mrene i glaukoma značajno su povišeni i kod pacijenata s niskom i srednjom kratkovidnošću. Iako kratkovidnost još uvijek nije moguće liječiti na genetskoj razini, sve je više dokaza kako optičke, okolišne i farmakološke intervencije mogu kod dijela pacijenata usporiti ili zaustaviti njeno napredovanje. Prikazat će se i usporediti tretmani koji prem a novijoj literaturi najviše obećavaju: ortokeratologija, multifokalne mekane kontaktne leće i naočale te aplikacija parasympatolitičkih kapi.

Zaključak:

Rastuća prevalencija krakovidnosti i njene potencijalno ozbiljne posljedice trebaju potaknuti kliničare da podrobnije istraže potencijalne koristi trenutno dostupnih intervencija usmjerenih ka kontroli kratkovidnosti u mlađim dobnim skupinama.

Title:

How can we control myopia in 2015?

Authors:

Adrian Lukenda, Željka Karaman Martinović, Šarolta Pinter

Institution:

Opto Centar Eye Center, Zagreb

Aim:

To compare the safety and efficacy of current optical, environmental, and pharmaceutical approaches to clinical management of progressive myopia.

Patients and methods:

Literature review and current perspective.

Results:

Myopia has become a global health problem of epidemic proportions. The prevalence of myopia is varying between 70 to 90% in some Asian countries and up to 40% in Europe and the United States. Risks for sight-threatening complications like retinal detachment, myopic maculopathy, cataracts and glaucoma are significantly elevated even in patients with low and moderate levels of myopia. While there is still no cure for myopia at the genetic level, a growing body of evidence suggests that optical, environmental and pharmaceutical interventions might slow or halt the progression of myopia in some patients. We are presenting and comparing the most promising treatments described in the recent literature, including orthokeratology, multifocal soft contact lenses and spectacles, and anti-muscarinic topical medications.

Conclusion:

The increasing prevalence of myopia and its potentially serious consequences should encourage clinicians to explore the potential benefits of currently available interventions aimed at controlling myopia in younger age groups.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Adrian

Ime i prezime / First and Last Name:-Last

Lukenda

92. Maja Vladisavljević

Naslov:

Spontana obliteracija retinalne makroaneurizme

Autori:

Maja Vladisavljević, Kristian Samardžić, Željka Janjetović

Ustanova:

Opća bolnica "dr.J.Benčević" Slavonski Brod

Cilj:

prikaz slučaja spontane obliteracije retinalne makroaneurizme

Bolesnici i metode:

83- godišnja žena sa retinalnom makroaneurizmom

Rezultati:

Prikaz slučaja 83- godišnje pacijentice sa spontanom obliteracijom retinalne makroaneurizme. Žena se javlja u oftalmološku ambulantu radi lošijeg vida na lijevom oku. Nakon oftalmološkog pregleda i detaljnje anamneze na fundusu se nađe paramakularno u području ogranka vene suspektna perivaskularna hemoragija. Učini se fluorescenska angiografija koja pokaže makroaneurizmu. Preporučeno praćenje. Na kontrolnom pregledu za dva mjeseca nađe se spontana obliteracija makroaneurizme sa ostatnom hemoragijom u resorpciji uz atenuirani protok kroz zahvaćenu arteriju.

Zaključak:

U ovom slučaju dva mjeseca kasnije dolazi do spontane obliteracije retinalne makroaneurizme

Title:

Spontaneous involution of retinal arterial macroaneurysm

Authors:

Maja Vladisavljević , Kristian Samardžić, Željka Janjetović

Institution:

General hospital "dr.J.Benčević" , Slavonski Brod

Aim:

Case report about spontaneous involution of retinal arterial macroaneurysm

Patients and methods:

83 year old woman with retinal macroaneurysm

Results:

A 83-year-old woman complained of a decrease of visual acuity in the left eye. Fundus examination of her left eye revealed a midlarge paramacular hemorrhage at the area of inferotemporal retinal artery. Preretinal vitreous bleeding were observed around the lesion. Fluorescein (FAG) angiography showed this mass to be continuous with the inferotemporal retinal artery and FAG dye leaked from the retinal artery into the lumen of the mass.

Conclusion:

In this patient two months later, the midlarge macroaneurysm underwent spontaneous involution.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Maja

Ime i prezime / First and Last Name:-Last

Vladislavljević

93. Tomislav Kuzman

Naslov:

Stražnja lamelarna keratoplastika (DSAEK) – krivulja učenja

Autori:

Tomislav Kuzman, Ivan Škegro, Sanja Masnec, Miro Kalauz, Rajko Kordić, Branimir Cerovski

Ustanova:

KBC Zagreb, Klinika za očne bolesti Medicinskog fakulteta u Zagrebu

Cilj:

Stražnja lamelarna keratoplastika (DSAEK) ima nekoliko prednosti nad konvencionalnom penetrantnom keratoplastikom (PK). No postupak ima značajnu krivulju učenja i nekoliko potencijalnih komplikacija koje su prepoznate tijekom vremena i stjecanja iskustva s navedenom metodom.

Bolesnici i metode:

Prikazan je video DSAEK procedure korak po korak.

Rezultati:

Prednosti nad penetrantnom keratoplastikom su kraće operativno vrijeme, brži oporavak vidne oštrine, manji intraoperativni rizik od komplikacija i manji postoperativni astigmatizam. DSAEK je intraoperativno sigurniji postupak od PK zato što se transplantat implantira u oko kroz mali rez na rožnici, dok se kod PK mijenja rožnica pune debljine te je oko određeno vrijeme potpuno otvoreno što je potencijalno opasna situacija. Glavni problemi kod DSAEK su dislokacija i propadanje presadka. Tijekom krivulje učenja posebnu pozornost treba обратити na veličinu presadka, implantaciju presadka, ljuštenje primateljeve rožnice i izbjegavanje pupilarnog bloka. Navedene teme će biti raspravljenе.

Zaključak:

Pažljivo planiranje operativnog zahvata uz izbjegavanje potencijalnih problema tijekom krivulje učenja, učiniti će DSAEK postupak sve prikladnijim za transplantaciju rožnice.

Title:

Descemet's stripping automated endothelial keratoplasty (DSAEK) – learning curve

Authors:

Tomislav Kuzman, Ivan Škegro, Sanja Masnec, Miro Kalauz, Rajko Kordić, Branimir Cerovski

Institution:

University Hospital Center Zagreb, Department of Ophthalmology

Aim:

DSAEK has several advantages over conventional penetrating keratoplasty (PK). But the procedure also has a significant learning curve and several potential complications that have come to light as more DSAEK transplants are being performed.

Patients and methods:

We present a step by step video of DSAEK corneal transplantation procedure.

Results:

Advantages over conventional penetrating keratoplasty are a faster surgery, quicker visual recovery, less intraoperative risk and less postoperative irritation and astigmatism. DSAEK is a safer procedure than PK because the eye remains essentially intact as the disc of donor tissue is inserted through a small incision, while in PK there is a period of “open sky” when the host cornea is removed and the eye is very vulnerable to severe complications. The major problems of DSAEK are graft dislocation and graft failure. During learning curve special attention must be focused on graft diameter sizing, graft insertion, stripping the recipients cornea, avoiding the pupillary block. These issues will be discussed.

Conclusion:

Careful planning of the surgical procedure and avoiding potential problems during the learning curve makes DSAEK procedure more and more suitable for corneal transplantations.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.sc.

Ime i prezime / First and Last Name:-First

Tomislav

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Kuzman

94. Nikola Sušić

Naslov:

SUBKONJUNKTIVALNA INFESTACIJA DIROFILARIOM REPENS – PRIKAZ SLUČAJA

Autori:

Nikola Sušić¹, Jasenka Brajković², Edita Sušićć³, Mario Sviben⁴, Relja Beck⁵, Jasna Duić¹, Ivana Kalauz Suráć¹, Marijana Bašić Halužan¹, Serđo Glavadanović¹, Ena Sušić⁶

Ustanova:

1 Odjel oftalmologije i optometrije OB Šibensko kninske županije 2 Opća Bolnica Hrvatski ponos Knin 3 ZZJZ Županije Šibensko kninske 4 Hrvatski zavod za javno zdravstvo Zagreb 5 Hrvatski veterinarski institut 6 Medicinski fakultet Sveučilišta u Zagrebu

Cilj:

Prikaz slučaja subkonjunktivalne infestacije Dirofilariom repens.

Bolesnici i metode:

Žena u dobi od 75 godina dolazi na pregled zbog višednevnih simptoma svrbeža i osjećaja stranog tijela u lijevom oku udruženih s edemom i crvenilom vjeđa i spojnice. Oftalmološkim pregledom, u nazalnom dijelu lijevog oka, uoči se subkonjunktivalno smješten, pokretni, končasti parazit. U topičkoj anesteziji napravi se incizija spojnice i odstrani se živi parazit dužine 10 cm koji se pošalje na mikrobiološku analizu.

Rezultati:

*Na temelju morfoloških karakteristika odstranjenog parazita utvrđeno je da pripada rodu *Dirofilaria*, a daljnje molekularnom dijagnostikom PCR (polymerase chain reaction) metodom potvrđena je *Dirofilaria repens*.*

Zaključak:

*Nakon kirurškog odstranjenja parazita došlo je do kompletног povlačenja simptoma i kliničkog nalaza. S obzirom da je čovjek slučajni domaćin u kojem *Dirofilaria* ostaje infertilna i ne uzrokuje mikrofilariemiju, kirurško odstranjenje parazita je jedina preporučena terapija. Stoga je potvrda *Dirofilarie* kao uzročnika metodama mikrobiološke analize od velike važnosti kako bi se izbjegla nepotrebna medikamentozna terapija antihelminticima.*

Title:

SUBCONJUNCTIVAL INFESTATION WITH DIROFILARIA REPENS – A CASE REPORT

Authors:

Nikola Sušić¹, Jasenka Brajković², Edita Sušićć³, Mario Sviben⁴, Relja Beck⁵, Jasna Duić¹, Ivana Kalauz Suráć¹, Marijana Bašić Halužan¹, Serđo Glavadanović¹, Ena Sušić⁶

Institution:

1 Odjel oftalmologije i optometrije OB Šibensko kninske županije 2 Opća Bolnica Hrvatski ponos Knin 3 ZZJZ Županije Šibensko kninske 4 Hrvatski zavod za javno zdravstvo Zagreb 5 Hrvatski veterinarski institut 6 Medicinski fakultet Sveučilišta u Zagrebu

Aim:

*To present a case of subconjunctival infestation with *Dirofilaria repens*.*

Patients and methods:

A 75-

year old woman presented with a few days history of itching and foreign body sensation in her left eye along with palpebral and conjunctival redness and oedema. Ophthalmologic examination revealed a subconjunctival, moving, threadlike parasite in the nasal part of her left eye. A conjunctival incision was made under the topical anaesthesia and a 10 cm long, living parasite was extracted and microbiological analysed.

Results:

*On the basis of the morphological characteristics, the extracted parasite was identified as *Dirofilaria* and the further molecular diagnostics with PCR (polymerase chain reaction) confirmed that it was *Dirofilaria repens*.*

Conclusion:

*: Complete resolution of the symptoms and clinical findings was achieved after the surgical removal of the parasite. *Dirofilaria* remains infertile and does not cause microfilariae in its accidental human host. The surgical extraction is the sole recommended treatment. Therefore, confirmation of *Dirofilaria* with histological and molecular diagnostics is of great importance to avoid unnecessary antihelminthic treatment.*

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Nikola

Ime i prezime / First and Last Name:-Last

Sušić

95. Željka Karaman Martinović

Naslov:

ROSE K2 XL semi-skleralne leće

Autori:

Karaman Martinović Željka, Lukenda Adrian, Pinter Šarolta

Ustanova:

Očna poliklinika Opto centar, Zagreb

Cilj:

Procjena učinkovitosti Rose K2 XL semi-skleralnih kontaktnih leća u fitanju iregularnih rožnica. Skleralne leće se dijele ovisno o dijametru leće na korneo-skleralne, semi-skleralne, mini-skleralne i skleralne leće.

Bolesnici i metode:

Autori će prikazati način „fitting-a“ i indikacije za upotrebu Rose K2 XL semi-skleralnih leća kod pacijenata s iregularnim rožnicama u slučajevima kada se uz pomoć drugih dizajna leća za iregularne rožnice, poput Rose K2, Rose K2 IC za iregularnu rožnicu, Rose K2 NC “nipple” konus, Rose K2 post graft i piggyback sustava leća, ne može postići dobar položaj ili udobnost. U procesu fittinga se koristio dijagnostički probni set. Rose K2 semi-skleralna leća ima raspon promjera od 13,6 do 16,0 mm (standardni promjer: 14,6 mm) i ima široki raspon parametra, uključujući baznu zakrivljenost od 5,8 mm do 8,4 mm. Postoji također 9 opcija odignuća ruba leće kako bi se precizno kontrolirala zona priljeganja na skleru. Nakon što se odredi optimalna probna leća, od proizvođača (Laboratorij Opto centar, Zagreb) se naručuje konačna leća, s potrebnim promjenama u dioptrijskoj snazi, odignuću ruba leće i promjeru.

Rezultati:

Primarne indikacije Rose K2 semi-skleralnih leće su keratokonus, pelucidna marginalna degeneracija (PMD), rožnica nakon presađivanja, rožnični prstenovi, ektazije nakon LASIK-a, visoko torične rožnice, uznapredovalo suho oko, kao i svaka nepravilna rožnica kod koje se ne mogu uspješno primjeniti leće s promjerom unutar limbusa. Uz pravilnu edukaciju, ove leće su i izbor za pacijente koju su intolerantni na RGP leće, za one koji rade u prašnjavim radnim uvjetima, za sportske i radne aktivnosti koje zahtjevaju stabilne leće, te kao zamjena za piggyback aplikaciju leće.

Zaključak:

Skleralne leće predstavljaju jedan od najvažnijih dostupnih alata koji su na raspolaganju za fitting pacijenata sa zahtjevnim bolestima rožnice. Budući da su veće od konvencionalnih RGP leća, skleralne leće su stabilnije na oku. Za očekivati je kako će se upotreba Rose K2 semi-skleralnih leća nastaviti povećavati jer one nude dobru vidnu oštrinu, dobru udobnost i one mogu otkloniti probleme vezane s centracijom leća koje se mogu pojaviti kod leća manjeg promjera.

Title:

ROSE K2 XL semi-scleral lenses

Authors:

Karaman Martinović Ž, Lukenda A, Pinter Šarolta

Institution:

Eye Polyclinic Opto Centar, Zagreb

Aim:

To evaluate the utility of the Rose K2 XL semi-scleral contact lens in the management of the irregular cornea. Scleral lenses are categorized by lens diameter: corneo-scleral, semi-scleral, mini-scleral and scleral lenses.

Patients and methods:

The principles of fitting Rose K2 XL semi-scleral lenses on patients with irregular corneas in cases where present contact lens designs for irregular corneas, like Rose K2, Rose K2 IC for irregular cornea, Rose K2 NC nipple cone, Rose K2 post graft or piggyback lens system cannot achieve good alignment or comfort will be presented. A diagnostic trial set was used in the fitting process. Rose K2 XL semi-scleral contact lens range in size from 13.6 mm to 16,0 mm (standard diameter: 14,6 mm) and have a wide range of parameters, including base curves from 5.8 mm to 8.4 mm. There are nine edge-lift options to precisely control the landing zone on the sclera. Once the trial lens fit is considered optimal, a final lens is ordered from the manufacturer (Opto centar laboratory, Zagreb) with the necessary adjustments in power, edge lift and diameter.

Results:

Primary indications for the Rose K2 XL semi-scleral lenses are keratoconus, pellucid marginal degeneration (PMD), post grafts, corneal rings, post-LASIK ectasia, highly toric corneas, advanced dry eye and any irregular corneal condition that cannot be successfully fitted within the limbus. With proper patient education, this lens is a great option for patients who are intolerant of corneal RGP lenses, those who work in polluted conditions, those who need more lens stability in their sport or work environments and as an alternative to piggyback lens systems.

Conclusion:

Scleral lenses represent one of the most important tools for fitting patients with challenging corneas today. Because they are larger than conventional RGP lenses, scleral lenses are more stable on the eye. The use of Rose K2 XL semi-scleral lenses is expected to increase due to good visual acuity, good comfort and elimination of the centration-related problems that can occur with smaller diameter lenses.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Željka

Ime i prezime / First and Last Name:-Last

Karaman Martinović

96. Barbara Dawidowsky

Naslov:

Insuficijencija konvergencije i sindrom poremećaja pažnje i hiperaktivnosti u djece (ADHD) - postoji li povezanost?

Autori:

Barbara Dawidowsky, Aleksandra Kolobučar

Ustanova:

Klinika za dječje bolesti, Klaićeva, Odjel za oftalmologiju, neurokirurgiju i otorinolaringologiju Klinike za kirurgiju

Cilj:

Ispitati povezanost insuficijencije konvergencije (CI) i sindrom poremećaja pažnje I hiperaktivnosti u djece (ADHD sy). Procijeniti poboljšanje CI i binokularnog vida nakon ortoptičke terapije., kao i promjene učestalosti simptoma koji se javljaju kod rada na blizinu I tipični su za djecu s ADHD-om.

Bolesnici i metode:

60 djece s dijagnozom ADHD-a (dijagnoza postavljena po DSM V klasifikaciji od strane dječjeg psihijatra) bilo je pregledano u našoj oftaloškoj ambulanti u sklopu kompletne obrade primarne dijagnoze. Ustanovili smo da djeca s ADHD-om imaju visoku incidenciju insuficijencije konvergencije te posljedično i problem uspostavljanja binokularnog vida. Simptomi oba navedena stanja (ADHD I CI) slični su i značajno pogoršavaju sposobnost rada na blizinu, čitanja I učenja. Javljuju se simptomi od kojih su najčešći: frontalna glavobolja, kratka pažnja, mutan vid, dvo slike, bol u periokularnoj regiji, crvenilo očiju, gubitak redova kod čitanja, brkanje slova.

Rezultati:

Skoro sva djeca s ADHD-om (86%) imala su insuficijenciju konvergencije i probleme uspostavljanja i održavanja binokularnog vida. Nakon ortoptičke terapije na synptophoru u ortoptičkoj ambulanti koja je kombinirana s vježbama konvergencije kod kuće primjetili smo signifikantno poboljšanje i konvergencije i stereovida. Istodobno je primjećeno poboljšanje kod rada na blizinu, te općenito smanjenje simptoma koje su procijenili roditelji s djecom ispunjavanjem u pitinika (izrađen za potrebe studije) prije i poslije terapije.

Zaključak:

Povezanost konvergencije insuficijencije (CI) i ADHD sindroma postoji, čak još više u skupini djece s izoliranim poremećajem pažnje (ADD sindrom). Poboljšanje simptoma ADHD-a nakon istodobnog mjerljivog poboljšanja konvergencije neupitno je no za procjenu poboljšanja pažnje u tih ispitnikima morat će se planirati daljnje studije.

Title:

Convergence insufficiency and ADHD (attention deficit/hyperactivity disorder) - does a connection really exist?

Authors:

Barbara Dawidowsky, Aleksandra Klobučar

Institution:

Childrens Hospital Zagreb

Aim:

to evaluate the relationship between CI (convergence insufficiency) and children diagnosed with ADHD. To estimate the improvement of convergence and binocular vision after orthoptic treatment as well as improvement of symptoms of ADHD.

Patients and methods:

60 children with ADHD (diagnosed by children psychiatrist with DSM V classification) underwent a detailed ophthalmologic exam as part of their evaluation. We noticed that children diagnosed with ADHD had a high incidence of convergence insufficiency and problems with maintaining binocular vision at near. The symptoms of these two conditions can overlap and both can interfere with reading and learning abilities. Children often suffer of disturbance in reading and writing, frontal headaches, short attention span, blurred and double vision, pain in periocular region, red eyes and double vision. Our main aim is to evaluate the relationship between ADHD and CI, measure CI and binocular vision before and after the treatment and state whether improving convergence in patients with ADHD simultaneously improves their symptoms in working at near.

Results:

Almost all of the ADHD patients (86%) had convergence insufficiency and troubles with maintaining binocular vision. After orthoptic therapy combined of home exercises and office based therapy at synoptophore, significant improvement in convergence and binocular vision has been noted, as well as improvement in working at near distance and reading abilities (estimated by questionnaire given to parents and children before and after the therapy).

Conclusion:

The connection certainly exists between ADHD and CI, even higher in the group of children with ADD (attention deficit disorder), but further studies must be performed to estimate the exact association. Clinical improvement of symptoms shows that treating one condition (CI) simultaneously improves the other too.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Barbara

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Dawidowsky

97. Barbara Dawidowsky

Naslov:

Dijagnostika i terapija V - egzotropije

Autori:

Barbara Dawidowsky, Neda Striber, Diana Franceschi

Ustanova:

Odjel za oftalmoogiju, otorinolaringologiju i neurokirurgiju Klinike za dječju kirurgiju, Klinika za dječje bolesti Klaićeva

Cilj:

prikaz slučaja

Bolesnici i metode:

na prikazu slučaja izražene V egzotropije prikazati dijagnostiku i terapiju alfabetkih sindroma - V egzotropija

Rezultati:

Prezentirati slučaj dječaka koji se javlja u oftalmološku obradu u dobi od 3 god s kompensatornim položajem glavne, i izraženim divergentnim strabizmom oba oka u pogledu prema gore. Prikazati metode dijagnoze vertikalnog strabizma kod tako malog djeteta, te mogućnosti konzervativne terapije prizmama i naponslijetu operativnog zahvata na četiri mišića, retropozicije ravnih očnih mišića i transpozicije donjih kosih mišića.

Zaključak:

Omogućiti djetetu postizanje binokularnog vida. U terapiji moguće nošenje prizama no trajno rješenje predstavlja operacija i to po mogućnosti u predškolskoj dobi zbog postizanja ortoforije i održavanja binokularnog vida.

Title:

Diagnosis and therapy of vertical strabismus (alphabet pattern) V exotropia

Authors:

Barbara Dawidowsky, Neda Striber, Diana Franceschi

Institution:

Childrens Hospital Zagreb

Aim:

a case report

Patients and methods:

A case of 3 year old boy with V pattern exotropia

Results:

To demonstrate the methods of diagnostic and therapeutic possibilities in children with V pattern exotropia. Initial therapy wearing prisms to maintain binocular vision followed with operation on four extraocular muscles to resolve the condition will be shown.

Conclusion:

In small children, with the difficulties in finding the diagnosis and measuring the exact angle of deviation, is extremely important to enable the possibility of gaining and maintaining binocular vision. Prescribing prisms until the diagnosis is made and decision when and what to operate is a good start. Tranposition of MIO and retroposition of MRL as final therapy will resolve the condition.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Dr.

Ime i prezime / First and Last Name:-First

Barbara

Ime i prezime / First and Last Name:-Last

Dawidowsky

98. Dobrila Karlica Utrobičić

Naslov:

Down sindrom specifičnosti nalaza VEP-a

Autori:

D.Karlica Utrobičić, D. Galetović, K. Bućan, Lj. Znaor

Ustanova:

KBC Split Klinika za očne bolesti

Cilj:

Cilj ovog rada bio je procijeniti retino - kortikalne funkcije u djece s Down sindromom snimanjem vidno evociranih potencijala (VEP-

a) kao odgovor na svjetlosne podražaje. Usporedili smo vrijednosti parametara VEP (amplituda i latencija) u djece s Down sindromom u odnosu na one snimljene kod zdave djece.

Bolesnici i metode:

U radu je obrađeno 74 djece podjeljene u 2 skupine. U 1. skupini su djeca sa sindromom Down (37djece 74 očij u), a druga skupina je kontrolna skupina zdrave djece (37djece 74 očiju). Snimanje se uradilo na aparatu Tome y EP-

1000 svjetlosnim uzorkom šahovske ploče veličine 1.0 o Elektrode su postavljene po ISCEV načelima Statistička obrada je urađena T testom. Usporedile su se vrijednosti amplituda P100 vala s dioptrijom i vrijednosti latencija P100 vala s dioptrijom.

Rezultati:

Statističkom obradom T test dobila se značajna razlika u vrijednostima latencija P100 vala u obje skupine, dok nema značajne razlike u vrijednostima amplituda u obje grupe.

Vrijednosti amplituda P 100 vala se ne razlikuju u djece s Down sindromu u odnosu na zdravu djecu (T test 0,1 3, df 142, p=0,9) i dpt (T test -0,8, df 142, p=0,42) a značajno se razlikuju po latenciji T test - 20,64, df 142, p < 0,001

Zaključak:

Produljene vrijednosti latencije P100 vala vidno evociranih potencijala u djece sa sindromom Down ne moraju uvijek značiti patološki nalaz.

Uzroci mogu biti u promjenjenom izgledu mozga, ali i u sniženim vrijednostima neurotransmitera u djece sa sindromom Down, što treba imati na umu kod interpretacije nalaza vidno evociranih potencijala.

Title:

Down syndrome specific VEP test results

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Aim:

The aim of this study was to evaluate retino- cortical function in children with Down syndrome by recording visual evoked potential (VEP) in response to light stimuli. We compared the values of VEP parameters (amplitude and latency) in children with Down syndrome compared to those recorded in zda ve children.

Patients and methods:

Materials and methods: The study included 74 children divided into two groups. The first group of children with Down syndrome (37djece 74 eyes), and the other group was a control group of healthy children (37djece 74 eyes). Recording is done on the machine Tomey EP-1000 light checkerboard pattern size of 1.0. Electrodes are placed on the principles ISCEV Statistical analysis was performed by T test. Compare the value of the amplitude of P100 wave with prescriptions and values of P100 wave latency with prescriptions.

Results:

Results: Statistical analysis of the T test gave a significant difference in latency of P100 wave in both groups, while no significant differences in amplitude in both groups. The values of the amplitude of the wave P 100 do not differ in children with Down syndrome than in healthy children (t test 0.13, df 142, p = 0.9) and DPT (T test -0.8, df 142, p = 0 , 42) and are significantly different by t test latency - 20.64, df 142, p <0.001

Conclusion:

Conclusion: Prolonged latency P100 wave visual evoked potentials in children with Down syndrome do not always have to mean pathological findings. The causes can be changed appearance of the brain, but in at reduced values of neurotransmitters in children with Down syndrome, which should be kept in mind when interpreting the findings clearly evoked potentials.

Kongres / Congresse:

15. Kongres

Abstract category / Sažetak prijavljujem u:

Titula / Title:

Doc.dr.sc.

Ime i prezime / First and Last Name:-First

Dobrila

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