ARTISAN IRIS CLAW POSTERIOR CHAMBER LENS IMPLANTATION IN PATIENTS WITHOUT CAPSULARSUPPORT

Purpose: To present our data for a consecutive series of 31 patients who had vitrectomy and implantation of Artisan lens either as a primary operation or as a secondary operation due to IOL subluxation. Methods: Analysis of 31 patients who underwent 23 gauge 3-port pars plana vitrectomy and posterior iris clipped Artisan lens implantation. The primary outcome of our study was ftnal best corrected visual acuity. Secondary outcomes included ftnal postoper- ative refraction and the incidence of complications such as postoperative cystoid macular oedema and ocular hypertension. All lenses were placed using a superior 6mm clear corneal incision which was always sutured closed with 5 10-0 nylon sutures.
Results: Mean pre-operative visual acuity was 6/120 Snellen (range 1/200 - 6/24) and intraocular pressure (IOP) was 16.8 7.7 mmHg. At the end of the follow-up period(13.5 8.7 months), visual acuity had improved to an average of 6/6 Snellen (range 6/12 -6/4) LogMAR and intraocular pressure was 15.8 4.4 mmHg. The average postoperative spherical equivalent was -0.16 0.24. The average postoperative cylinder was -2.25 (0.57). 2 patients developed postoperative cystoid macular oedema which resolved with topical therapy.
Conclusions: Posterior Artisan lens implantation in combination with 23 gauge pars plana vitrectomy provides reliable and durable visual improvement for patients with poor capsular support unable to receive in-the bag or sulcus placed intraocular lenses. A different surgical approach, such as scleral tunnel lens implantation, may result in less surgically induced astigmatism as that found in our study.