

# USE OF OZURDEX® IN THE TREATMENT OF MACULAR HOLE AND CYSTOID EDEMA SECONDARY TO POSTERIOR VITRECTOMY: A CASE REPORT

**Renata Pontes Duarte<sup>1</sup>, Isabela Mota<sup>1</sup>, Maria Luísa Dantas<sup>1</sup>, Juliana Souza Gomes<sup>1</sup>,  
José Flávio Martins Pereira<sup>1</sup>, Vasco Torres Fernandes Bravo Filho<sup>1</sup>**

E-mail: [renatapontesd@gmail.com](mailto:renatapontesd@gmail.com)

<sup>1</sup>Altino Ventura Foundation; <sup>2</sup>HOPE Eye Hospital

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## PURPOSE

To report the clinical outcomes of using Ozurdex® to treat macular hole and cystoid edema secondary to posterior vitrectomy.

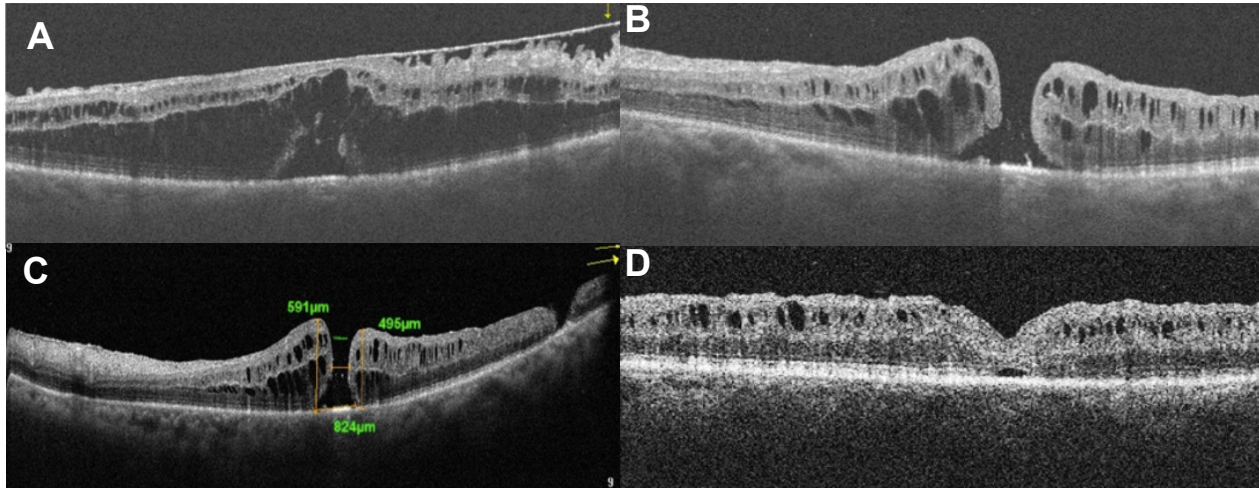
## CASE REPORT

- Male patient, 71 year old;
- Hypertensive;
- Low visual acuity (VA) and metamorphopsia in the left eye (OS) for about 6 months;
- Best correct visual acuity (BCVA ): OD: 20/30; OS: 20/150;
- Biomicroscopy exam : nuclear cataract +1-+2 in both eyes (OU);
- Fundoscopy: OU - narrowed vessels ; OS - macular brightness change

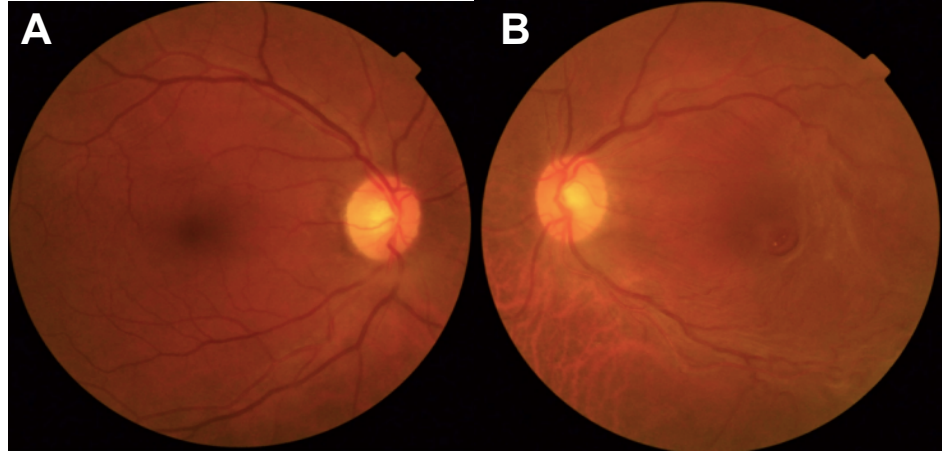
# CASE REPORT

- Optical coherence tomography (OCT) of the macula:
  - ✓ OS : ERM grade 3 and a pseudohole;
- Patient underwent phacoemulsification, vitrectomy, 20% SF6 gas infusion, and Ozurdex®;
- Immediate postoperative period:
  - ✓ macular hole and cystoid macular edema, which was initially treated with Cetrolac® and weaned from Ster®.
- The edema did not improve after 1 month of clinical treatment; a new Ozurdex® implant was performed;
- After 1 month, the patient evolved with a significant improvement in the edema and resolution of the hole;
- Final VA with a correction of 20/100;

# CASE REPORT



**OCT images of the left eye:**  
**A** - Epiretinal membrane grade 3; **B** - Macular hole after vitrectomy; **C** - Macular hole measures; **D** - After ozurdex treatment. BCVA final 20/100.



**Retinography: A** - Retinography of right eye; **B** - Retinography of left eye with macular brightness change

# DISCUSSION

- Macular hole is one of the complications that may occur in vitrectomy<sup>1-3</sup>. In the present case, the patient who developed a macular hole with cystoid edema after vitrectomy improved significantly with ozurdex®. Future studies should be encouraged to prove the use of Ozurdex as an alternative for treating edema and closure of the macular hole.

# REFERENCE

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