

Surgical Efficacy of Seprafilm® on Trabeculectomy in Glaucoma Patients

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Background: Glaucoma filter surgeries using mitomycin -C (MMC) have often associated with post-operative bleb infections. Thus, alternative method to prevent post-operative subconjunctival adhesion will be required for longer survival of the post-operative filtering blebs.

Purpose: To report surgical efficacy of Seprafilm®, which is widely used for prevention of postoperative abdominal adhesion, on glaucoma filter surgery, trabeculectomy using a Seprafilm® was performed in five glaucoma patients.

Subject and methods: 6 eyes of 5 patients (exfoliation glaucoma, primary open angle glaucoma, secondary glaucoma, chronic closed- angle glaucoma) who had histories of at least twice intraocular surgeries were treated by trabeculectomy using a Seprafilm®. During the trabeculectomy, a 4x4 mm Seprafilm® sheet was inserted under scleral flap.

Results: The postoperative intraocular pressures were significantly lower than the baseline. However, two eyes required further glaucoma surgeries. The rates of filtering bleb formation were 66.7% at six months postoperatively. In addition, there were no severe complications.

Conclusions: Trabeculectomy using a Seprafilm® is expected to be a safe and effective method. Thus, we need a further study for evaluation of this technique.