

Role of Ologen in Previously Failed Trabeculectomy in Advanced Glaucoma

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Abstract : Purpose: Advanced Glaucoma with Failed trab is not an uncommon sight in glaucoma clinic, and such cases usually tend to present with high intraocular pressure (IOP) and advanced cupping, or even glaucomatous atrophy stage. Re-surgery is needed for such cases, and wound modulation poses a major challenge in these cases. We share our experience in this case series with the use of Ologen (collagen matrix implant) along with MMC 0.04% used in surgery. The purpose of the study was to evaluate the efficacy and outcome of collagen matrix implant in re-trabeculectomy in advanced glaucoma cases. Methodology: Eleven eyes of 11 patients (one eye of one patient) underwent re-trabeculectomy surgery with MMC and Ologen. Ologen implant was used in sub scleral and subconjunctival space, as a spacer and wound modulator. In five cases, triple modulation with implant soaked in anti-VEGF was used. Results: All patients had cupping more than 0.9, and one case was GOA. All cases were on maximal medication at presentation and majority were on systemic anti-glaucoma therapy also. Post-surgery, follow-up ranged from 13 - 34 months, and all cases had a follow longer than the gap between previous surgery (which was failed) and re-trab. One case needed AC reformation and one needling was done. Phaco was done at same sitting in four cases. All cases had their IOP lowered post surgery, and vision was maintained in all, however one case was considered as failed re-surgery case. Topical medication was needed in seven cases post-surgery also. Conclusion: Ologen as adjuvant should be considered in all re-trab cases and all high risk and advanced cases, and triple modulation can be next step in these cases. Aggressive IOP control and non- reluctance to continue topical medications post second surgery should be considered in such cases, to give them best possible vision.

Keywords : failed trabeculectomy, ologen, trabeculectomy, advanced glaucoma

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