



Case Report : EFFICACY OF INTRAVITREAL BEVACIZUMAB IN NEOVASCULAR GLAUCOMA AFTER VITRECTOMY PROCEDURE



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INTRODUCTION

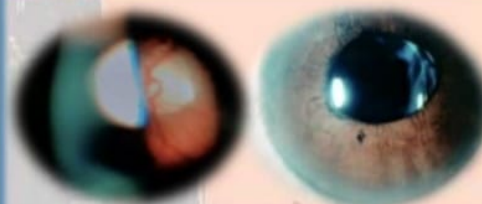
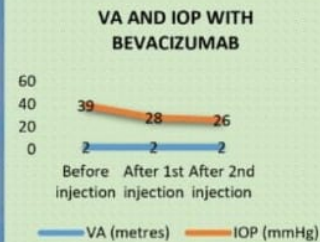
Neovascular glaucoma (NVG) is a secondary glaucoma with the development of new vessels over the iris and iridocorneal angle. Postoperative NVG is associated with vitrectomy and occurs at an incidence of 2%–18%.

PURPOSE

To inform the application and efficacy of intravitreal anti-VEGF (Bevacizumab) in NVG.

CASE REPORT

Our objective is to report a case of NVG in a 61 years old male, complained about blurry vision, with visual acuity (VA) 2/60 on right eye (RE) and 6/6 on left eye (LE). Intraocular pressure (IOP) was 15.6 on RE and 10.6 on LE. Patient with history of retinal detachment, undergone to vitrectomy pars plana (VPP) then silicone oil (SO) evacuation. Two months after surgery, the retinal redetach, vitreous hemorrhage, choroidal bleeding, and hyphema was happened. Patient undergone Re-VPP then SO evacuation. During the procedure, the lens was extracted and Intraocular Lens (IOL) implanted. After his second SO evacuation, neovascularization appeared on the iris and IOP increased until 39. Photocoagulation and bevacizumab injection was taken. One month later, patient undergone to second bevacizumab injection. Last VA was 2/60 and IOP was 26 on RE.



DISCUSSION

Previously identified risk factors for NVG after vitrectomy include preoperative iris neovascularization, preoperative angle neovascularization, male sex, postoperative retinal detachment, undergoing a combination vitrectomy/lens extraction, prolonged vitreous hemorrhage (VH), and the usage of retinal tamponade. Recently, several studies have investigated the application and efficacy of intravitreal anti-VEGF (Bevacizumab) in NVG.

CONCLUSION

Intravitreal bevacizumab was effective and safe in the short-term in a patient with neovascular glaucoma. It may be a useful adjunctive treatment.

KEYWORDS

Neovascular Glaucoma, Intravitreal Bevacizumab, Intraocular Pressure



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