

ILM Peeling Choice of dyes

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ILM Peeling Choice of dyes

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no financial interest in items discussed

Milestone

- ✓ Kelly and Wendel (Arch Ophthalmol 1991), landmark of vitreous surgery to close the hole (anatomic success) and improve visual acuity (functional success)
 - ✓ Additional report research and refinements
- ✓ The ILM is a very thin and semitransparent basement membrane of 2.5 micron in thickness.
- ✓ Such delicate structure may be difficult to identify during vitreoretinal surgery.

Milestone (contd)

- ✓ Successful ¹ILM peeling to treat idiopathic MH first ⁷was described in 1997

Eckardt C, Eckardt U, Groos S, Luciano L, Reale E.
Ophthalmologie 1997;94:545–551.

- ✓ After this, ⁴closure rates in MH surgeries ¹⁰of approximately 95% were reported, compared with lower closure rates in eyes without ILM peeling.

⁶Rodrigues EB, Meyer CH, Farah ME, Kroll P. ⁶Ophthalmologica 2005;219:251–262.

Mester V, Kuhn F. Am J Ophthalmol 2000;129:769–777.

Chromovitrectomy

- ✓ ~³ the use of vital dyes or crystals to improve the visualization of intraocular tissues during vitrectomy
- ✓ Arises from difficulty to remove thin transparent tissue (posterior hyaloid and ILM)
 - ✓ ILM is a very thin and semitransparent basement membrane of 25 μ in thickness.
 - ✓ To stain vitreous, ERM or ILM
 - ✓ Vital (staining living tissue or cells) and non-vital dyes
- ✓¹ The goal of staining is avoiding ocular complications related to ILM peeling, poor removal of the vitreous, and incomplete removal of the ERM.
- ✓ ILMP induce gliosis formation, iatrogenic chorioretinopathy, light toxicity

CONTROVERSIES

ILM Peeling

- ✓ To peel or not to peel
- ✓ When to peel

Dye

- ✓ ICG
- ✓ Trypan Blue
- ✓ Brilliant Blue
- ✓ Triamcinolone acetate

Safety

- ✓ Illumination

Important issues

- ✓ Complete removal of vitreous from posterior pole
 - ✓ Staining of the vitreous
- ✓ Complete removal of ILM from macular area
 - ✓ ?how large
- ✓ Less injury and to consider the size of lesion/hole

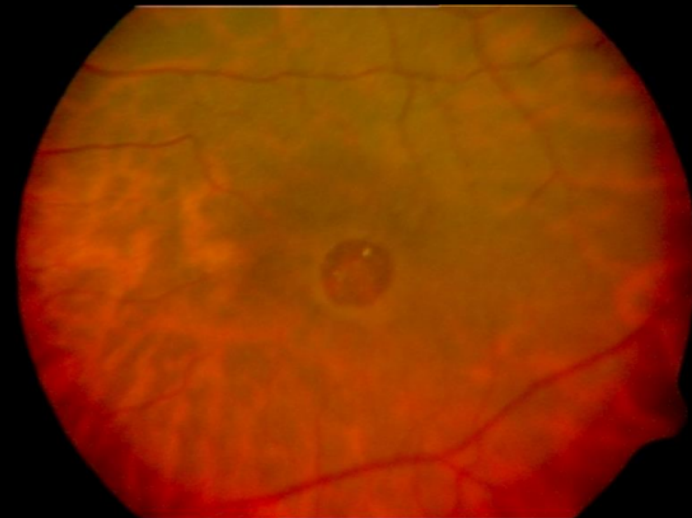


Table 1. Concentration and properties of dyes

Substance	Dilution/Osmolarity	Affinity for Intraocular Structures	Avoiding RPE/Retinal Toxicity	High Cost	Chemical Properties
Triamcinolone acetonide 40 mg/ml 4%	No dilution	Vitreous	Use a preservative-free solution	+	Triamcinolone is a synthetic nonsoluble steroid (C ₂₄ H ₃₁ FO ₆ ; 434 daltons)
Trypan blue 1.2 mg/ml 0.12%	No dilution or mix with glucose 1.2 mg/ml (0.12%)/310 mOsm	ERM	Use with no dilution or mix 0.3 ml with 0.1 ml glucose 5% for better ERM identification	+	Trypan blue is an anionic hydrophilic azo dye (C ₃₄ H ₂₄ N ₆ Na ₄ O ₁₄ S ₄ ; 960 daltons)
Patent blue 2.5 mg/ml 0.25%	No dilution or mix with glucose 2.5 mg/ml (0.25%)/290 mOsm	ERM	Use with no dilution or mix 0.3 ml with 0.1 ml glucose 5% for better ERM identification	++	Patent blue is a triarylmethane dye (C ₂₇ H ₃₁ N ₂ NaO ₆ S ₂ ; 582 daltons)
Brilliant blue 0.25 mg/ml 0.025%	No dilution/280 mOsm	ILM	Use with dilution	+++	Brilliant blue is a blue anionic aminotriarylmethane compound (C ₄₇ H ₄₈ N ₃ S ₂ O ₇ Na; 854 daltons)
Indocyanine green 5 mg, 0.5%; 25 mg, 2.5%; 50 mg, 5.0%	Less than 0.5 mg/ml (0.05%) Dissolve in small amount of distilled water. Dilution: use large amount of BSS	ILM	Add 1 ml distilled water to 1 vial 5 mg Take 0.1 ml of the solution and mix with 0.9 ml BSS	++++	Indocyanine green is a tricyanocyanine dye (C ₄₃ H ₄₇ N ₂ NaO ₆ S ₂ ; 775 daltons) and contains 3% to 5% iodine
Infracyanine green 5 mg, 0.5%, 25 mg, 2.5%	Less than 0.5 mg/ml (0.05%) Dissolve in glucose 5%/290 mOsm	ILM	Add 1 or 2 ml glucose 5% to 1 vial of 5 mg	+++++	Infracyanine green has the same chemical formula as ICG but contains no sodium iodine

BSS = balanced salt solution; ERM = epiretinal membrane; ICG = indocyanine green; ILM = internal limiting membrane; RPE = retinal pigment epithelium.

SURGICAL TECHNIQUE

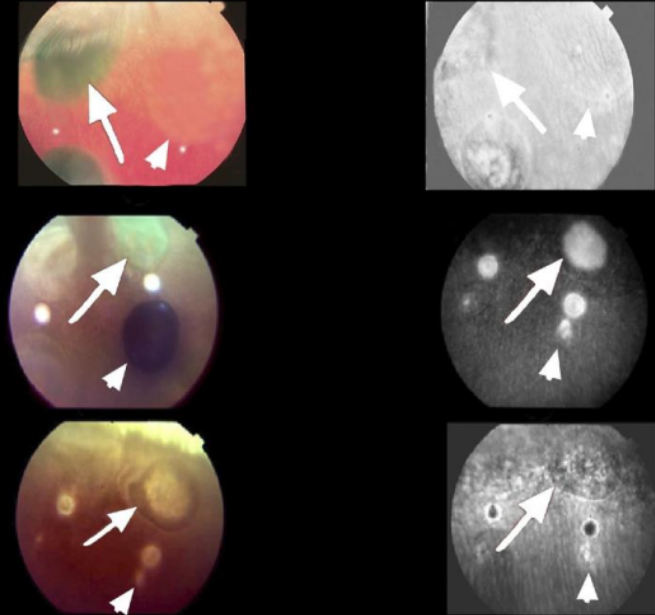
TA : The surgical technique reported so far² for TA application consists in a simple injection of 0.1 IN 0.5 ml BSS of the agent at a concentration of 10 OR 40 mg/ml (4%)² into the vitreous cavity directed toward the area to be visualized.

Alternative of vitreous staining : ICG, TB, and sodium fluorescein

Contd.

⁴ ICG with light exposure caused a significant increase in the biomechanical stiffness of the ILM, thereby facilitating its peeling. (+ TTT)

- can remain intravitreally or can deposit persistently on the optic disc after MH surgery.
- can diffuse to the ¹subretinal space through the MH, causing RPE damage



Ophthalmology 2007;114:899–908

the presumed safer infracyanine green ⁵ profile may represent an alternative for ICG use during ILM peeling in chromovitrectomy because of the lack of sodium iodine in its formulation and physiologic osmolarity.

² Penha FM, Maia M, Farah ME, et al.

² J Ocul Pharmacol Ther 2008;24:52– 61.



✓ Other dyes

Blood

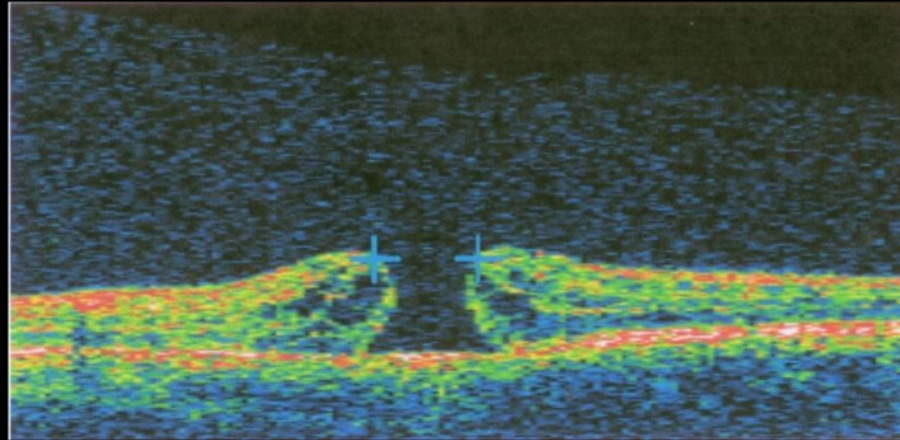
- Personal experience
- Genuine **vs** me-too

Double staining in M Hole Surgery

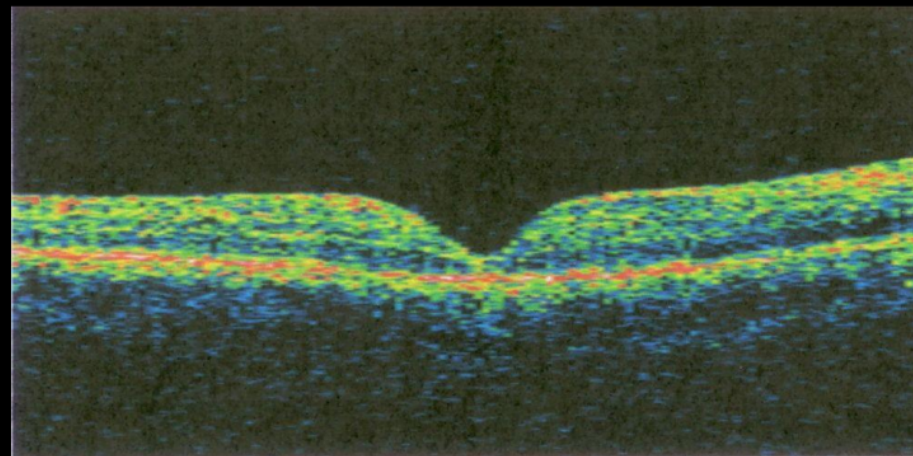
Sutureless 20-G and 26-G

H/O DOV 6
mos

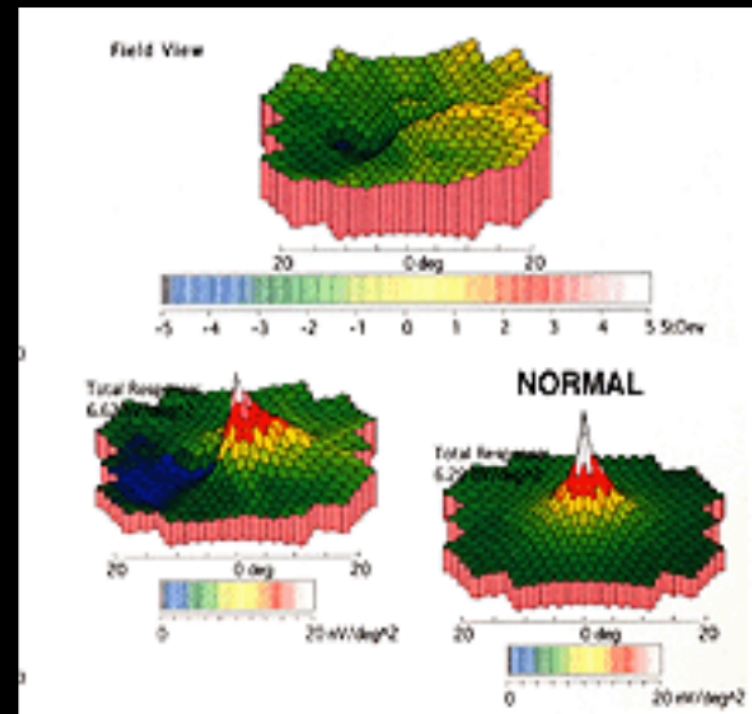
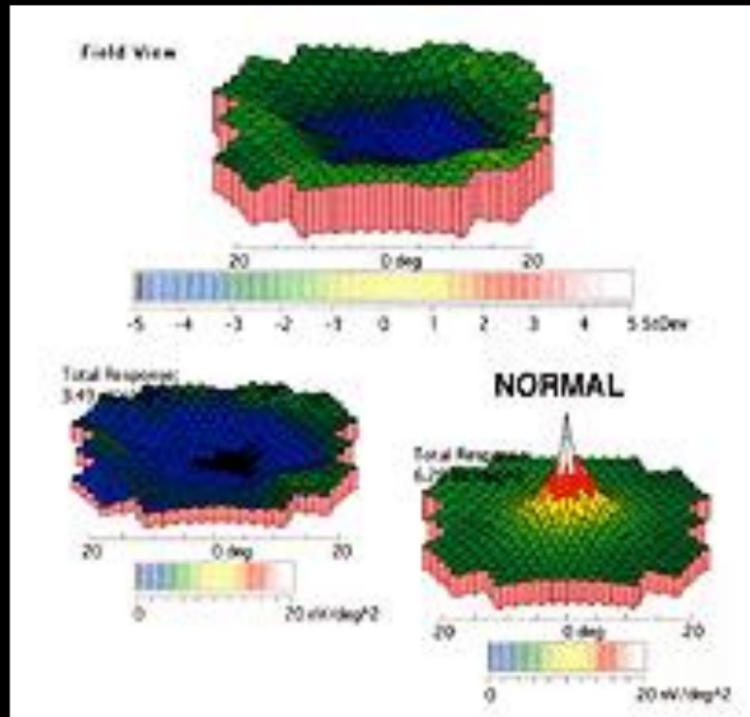
Preop-REVA
20/200



Postop-REVA
20/40



mfERG Findings



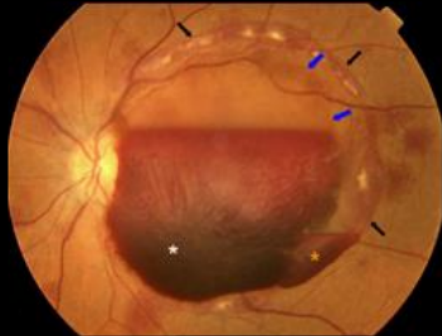
Anatomic and VA result

First author	M Hole closed (%)	VA change (line)	Better \geq 2 lines (%)
Kelly (1991)	30/52 (58)	+3.5	22/52 (42)
Wendel (1993)	125/127 (73%)	NR	95/170 (56)
Glaser (1992)	11/11 (100)	NR	10/11 (91)
Lansing (1993)	22/23 (95.7)	+3.8	19/23 (83)
Orrelana (1993)	7/12 (58)	NR	8/12 (67)
Smiddy (1993)	53/58 (91)	NR	NR
Thompson (1994)	85/90 (94)	+2.6	NR
Ryan (1994)	36/48 (75)	NR	25/46 (54)
Liggett (1995)	11/11 (100)	+4.7	11/11 (100)
Korobelnik (1996)	7/8 (88)	NR	4/8 (50)
Thompson (1996)	84/120 (70)	+1.5	53/120 (44)
<i>RS Cikini (2009,IMH)</i>	<i>10/10 (100)</i>	<i>NR</i>	<i>9/10 (90)</i>

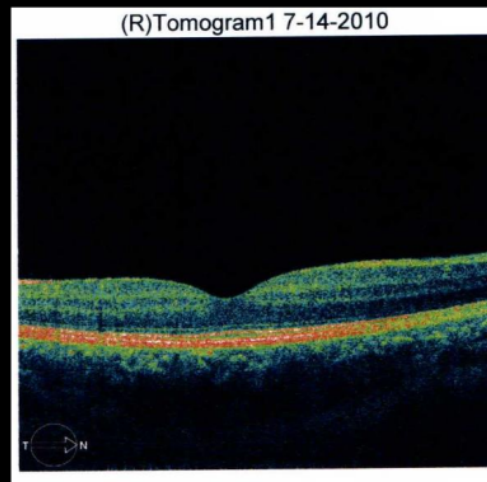
Unclear questions

- ✓ ?Is it due to toxicity
- ✓ ?What is the result of peeling without any dye(s)

OCT after ILMP without dye



LEVA FC 1m

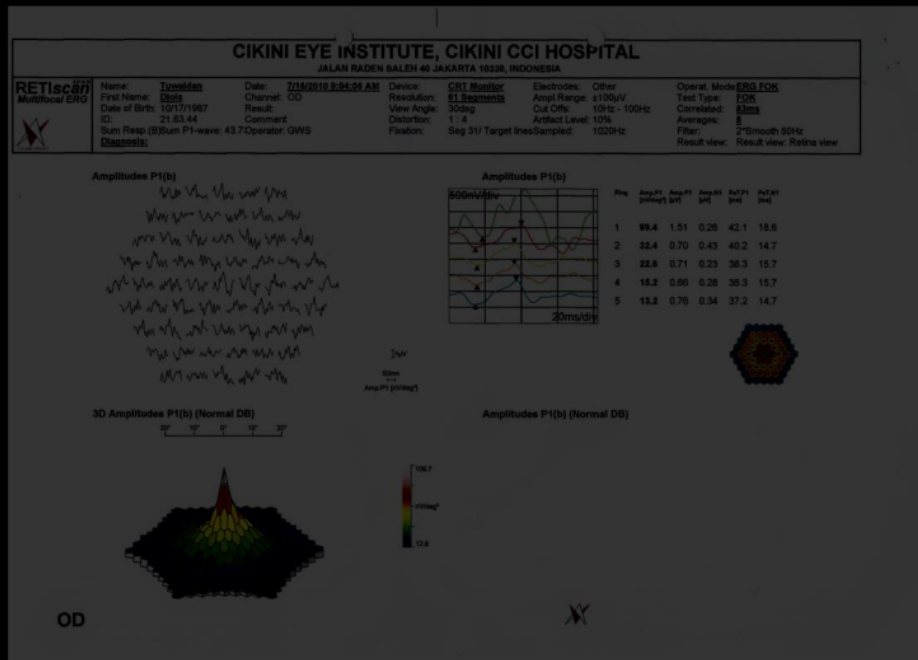


REVA 1.0

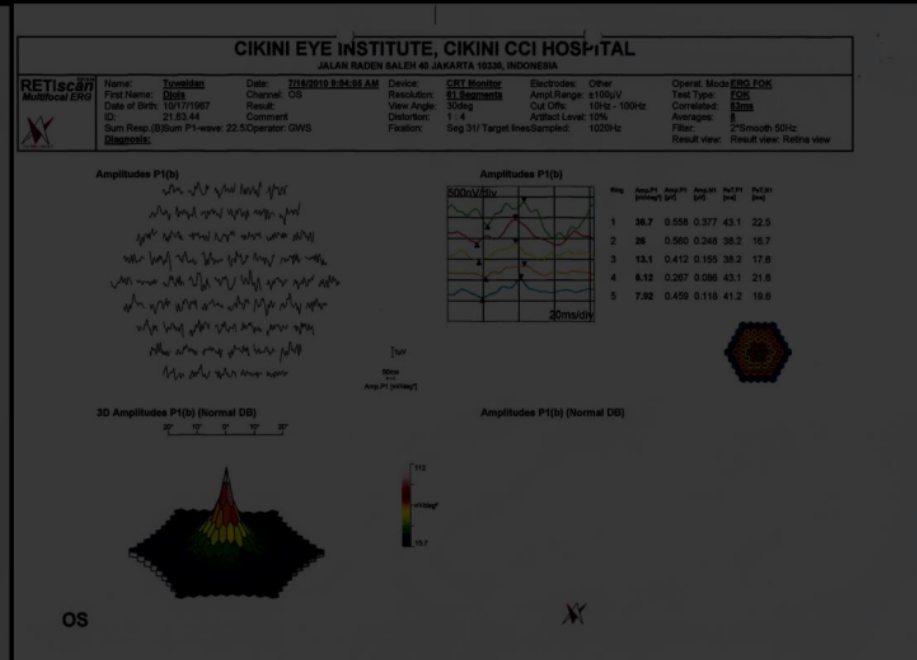


LEVA 1.0
After 2 wks

ERG after ILM without dyes



REVA 1.0



LEVA 1.0

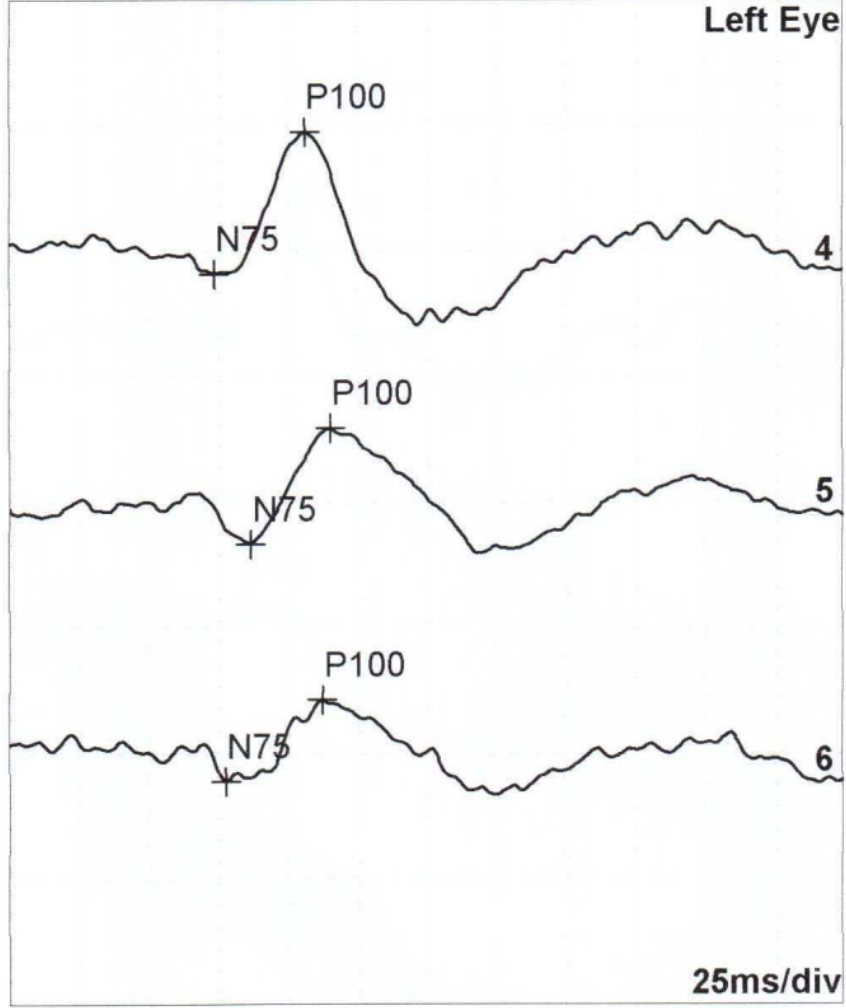
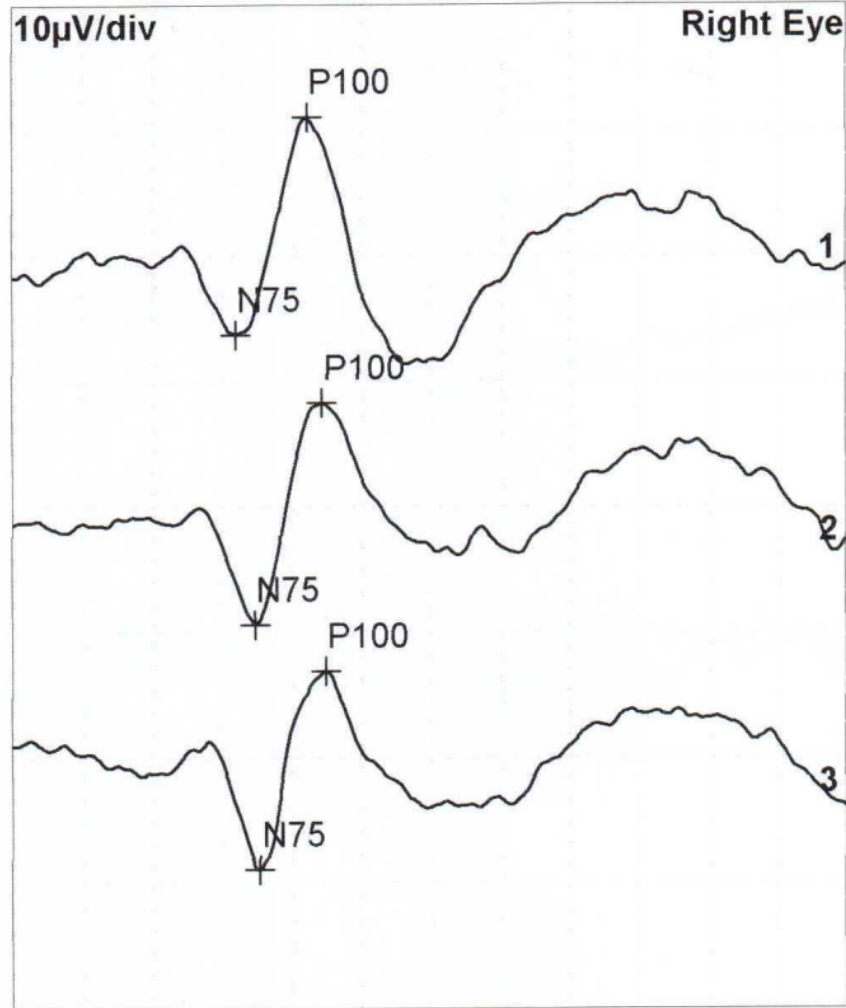


Patient: [REDACTED]
Tested: 7/16/2010 7:36:24 AM
ID: 21.63.44

Sex/Age: M/42
Operator: Dr. Gilbert WS Simanjuntak

Electrode: EEG-GoldCup
Pupil Size: nondil.

Pattern-VEP



THANK YOU

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