

## Abstract 52

### **INVERTED ILM/ERM FLAP COMPLEX IN FTMH. CHALLENGING THE OBVIOUS.**

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#### **Introduction:**

In some cases of FTMH, after staining of the ILM, a mixed pattern of staining is seen, suggesting the presence of an ERM. In some cases it is easy to separate the ERM from ILM, yet in other cases it is almost impossible to separate. In the latter cases, saving the ERM/ILM complex and using it all together to help close the MH

#### **Materials and methods:**

A case series, for vitrectomy for FTMH, where an ERM found after Blue dye staining was used altogether with the ILM in an inverted flap fashion to help close FTMH. Pre and post operative OCTS were done as well as full ophthalmic examination preoperatively and postoperatively noting the BCVA changes.

#### **Results:**

In this case series, all FTMHs, where an ERM/ILM complex was used in an inverted flap pattern to help close the MH, were closed during post operative follow up, and there was no late reopening or late reeproliferation of the ERM during follow up, with improved BCVA

#### **Conclusions:**

Using the ERM altogether with the ILM, in cases of FTMH where the 2 layers could not be separated or when there is a risk of losing the ILM if the ERM was to be removed, inverting the ERM/ILM complex can be an alternative option with good anatomical and functional results.

#### **Sources:**

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