Abstract 20

CLINICAL PROFILE AND OUTCOMES OF PATIENTS WITH BREAKTHROUGH VITREOUS HEMORRHAGE SECONDARY TO POLYPOIDAL CHOROIDAL VASCULOPATHY

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we aim to evaluate the treatment outcomes and recurrences in patients with breakthrough vitreous hemorrhage secondary to polypoidal choroidal vasculopathy (PCV): is it the end stage disease?

Patients presenting with breakthrough hemorrhage secondary to PCV or PEHCR (diagnosed intra or post op) were included in the study. Patients with vitreous hemorrhage subsequent to other macular diseases were excluded. Demographic data, best corrected visual acuity (BCVA) pre and post-operative ancillary imaging were analyzed. Number of recurrences, treatment followed and mean follow up were calculated.

10 eyes of 10 patients fulfilling the inclusion criteria were included (6 males, 4 females). All patients had non resolving vitreous hemorrhage before surgery. Five of the ten patients (50%) showed subretinal hyper-echogenecity on ultrasound B-scan pre-operatively. All patients underwent pars plana vitrectomy with or without tamponade and intravitreal aflibercept injection. Intra-operative aflibercept injection was given in 5 patients. Post operative intravitreal aflibercept was required in 4 patients (40%) for the lesion to scar and stabilize. Only one patient developed a recurrence (10%), which was from a different site than the original PCV and was treated with subretinal TPA and intravitreal aflibercept. Mean follow up was 14.5 months.

This preliminary data shows that breakthrough vitreous hemorrhage tends to scar and stabilize the PCV and represent an end stage disease. However, the small sample size is a major limiting factor and larger studies with collaborative data from different geographical regions would be essential.

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