First Removal of Retained Descemet Membrane Using Femtosecond Laser

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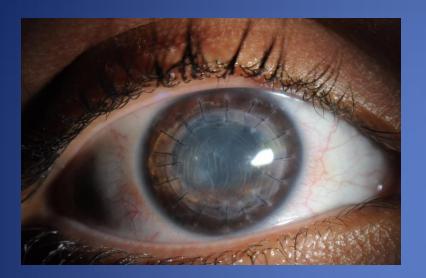
The authors have no financial interests to disclose

Purpose:

 To report the use of femtosecond laser (FSL) for removal of retrocorneal membrane.

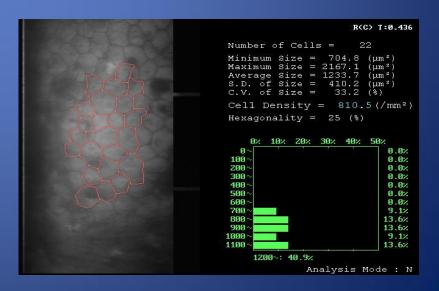
- A case report of a 22 year old male who underwent penetrating keratoplasty for keratoconus in his left eye. Ten months later, the patient presented to our clinic with:
 - Blurry vision in the left eye.
 - Uncorrected visual acuity was 20/300.
 - Intraocular pressure was 17 mmHg.

Ocular examination revealed:



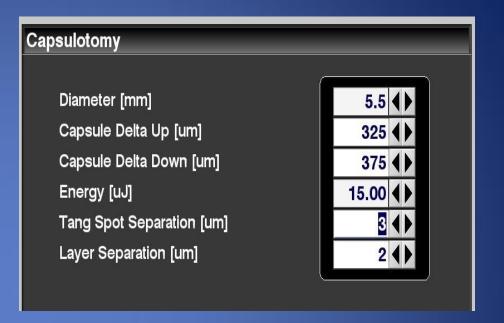


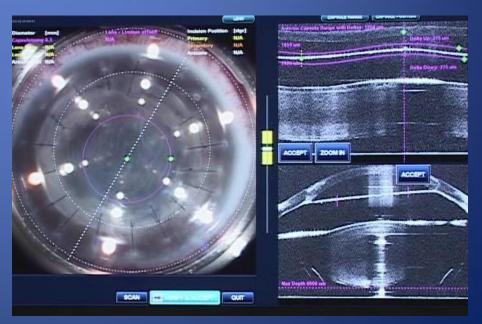




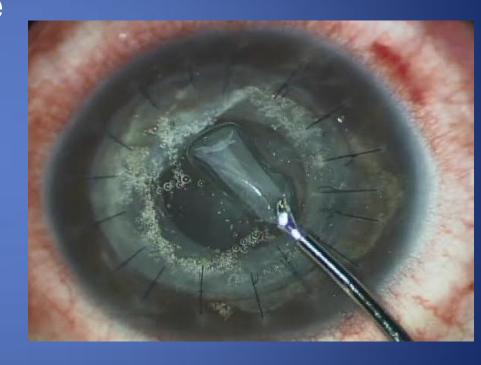
 Removal of the retrocorneal membrane with femtosecond laser (FSL) was planned.

 The laser beam was focused on the retrocorneal membrane instead of the anterior capsule.





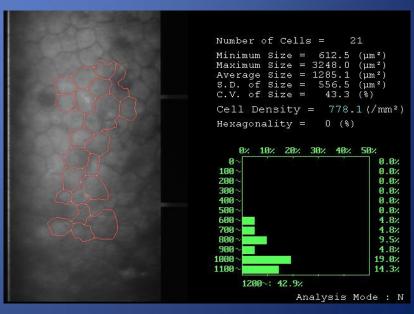
 After FSL treatment, the retrocorneal membrane was removed smoothly with capsulorhexis forceps through a 2 mm limbal corneal incision under operating microscope.



Results:

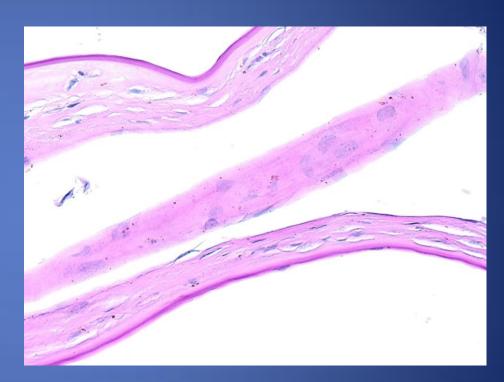
- □ Postoperative:
- UCVA 20/50, IOP 16.
- Clear corneal graft, a well centered 5.5mm opening in the retrocorneal membrane.
- Specular microscopy showed a minimal decrease in endothelial cell count to 778.





Results:

 Tissue histopathology established the diagnosis of retained Descemet Membrane (DM).



Conclusion:

- This report discuss the first use of FSL in a case of retrocorneal membrane after penetrating keratoplasty.
 - Advantages of FSL :
 - reduced intraocular operative time.
 - less stress on corneal endothelial cells .
 - less intraocular manipulation in a phakic patient .
 - Disadvantages of FSL:
 - Additional equipment and cost associated with the FSL.

Conclusion:

 The FSL can be used to safely remove retained DM. It results in a perfectly centered and round membranotomy, with minimal effect on the corneal endothelial cells.