

CLINICAL STUDY OF DALK IN HETEROGENEOUS CORNEAL DISEASES

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ABSTRACT

The present study aims to characterize the varied indications and outcomes of deep anterior Lamellar Keratoplasty. The prospective observational case series of 22 eyes of 22 patients with various anterior corneal pathologies was considered for the study, in whom deep anterior lamellar Keratoplasty was performed for optical and tectonic indications in a Regional Institute of Ophthalmology from Oct 2010 to May 2012, thorough evaluation by clinical examination and necessary investigations. The follow up period ranged from three months to one year. The main outcome measures were documented, and which was Visual acuity, graft survival and its complications. Of the 22 cases, corneal ectasia (45.44%) and corneal dystrophy (45.44%) constituted about (90.88%). among the ectasia group, keratoconus comprises (22.27%) of cases, keratoglobus (9.09%), Pellucid marginal degeneration (4.54%), macular dystrophy 22.27%, lattice dystrophy 18.18%, Gelatinousdystrophy (4.54%). The mean pre operative visual acuity was 1.936 -logmar 0.664 and logmar in the postoperative period .It was found to be statistically significant ($P < 0.0001$). The Post operative BCVA in the ectatic group was in the range of 6/12 (0.30-logmar) to 6/36 (0.778 logmar). In case of dystrophy group, it was ranged from 6/12 (0.30logmar) to 6/60 (1.00 logmar). Three cases apparently had intraoperative micro perforation and one cases was converted to penetrating keratoplasty. Only single case has developed significant interface haze, which was dropped in the visual acuity by two line of intersection. One more complications was included in suture related infections, which was managed clinically and vascularisation of the graft system, and which was managed with topical bevacizumab. Only one case has developed graft opacification and who underwent a PK as an accounted 95.46%

The study suggest that ,the lamellar keratoplasty is an evolving option for both optical and tectonic indications though without any curb and which was need to be identified.

KEYWORDS: Deep Anterior Lamellar Keratoplasty, Indications, Optical, Tectonic, BCVA