When tubes go wrong: Management of complications of glaucoma drainage device

Norshamsiah Md Din, Malaysia

Associate Professor of Ophthalmology (Glaucoma), Head and Senior Consultant Ophthalmologist at the Department of Ophthalmology, Faculty of Medicine, Universiti Kebangsaan Malaysia (UKM), Malaysia

ABSTRACT
Glaucoma drainage devices such as the Ahmed Valve and the Baerveldt tube implant has become a popular choice of treatment for recalcitrant glaucoma like neovascular glaucoma and uveitic glaucoma. When the chances of trabeculectomy failure are high, tubes are an option. While many have found that the success rate is higher with tube than trabeculectomy, it is not without its own problems. Intra-operative and post-operative complications of glaucoma drainage devices and ways to manage them will be discussed. Precautions to take to minimize complications of tube implantation will also be explained.

Ensuring success in glaucoma surgery in paediatrics

Sunder Ramasamy, Malaysia

Consultant Ophthalmologist, Thomson Hospital Kota Damansara

ABSTRACT
The surgical management of infants, toddlers and children with paediatric glaucomas are very challenging. The response to surgery in them can be unpredictable with increased risk of failure. There is often a need for corrective or repeat surgeries. A successful surgical outcome requires adequate preoperative assessment and counselling to the parents. Proper surgical techniques with emphasis on being repeatable are imperative. Good postoperative care by doctors, paramedic and parents are very important in ensuring reduced post-operative inflammation and infection. Various aspects that help with a successful outcome in trabeculectomy, trabeculotomy, combination trabeculectomy and trabeculotomy, glaucoma drainage devices and cycloablative procedures will be elucidated.