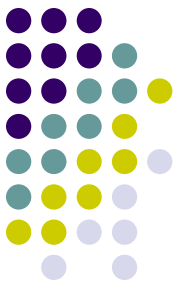
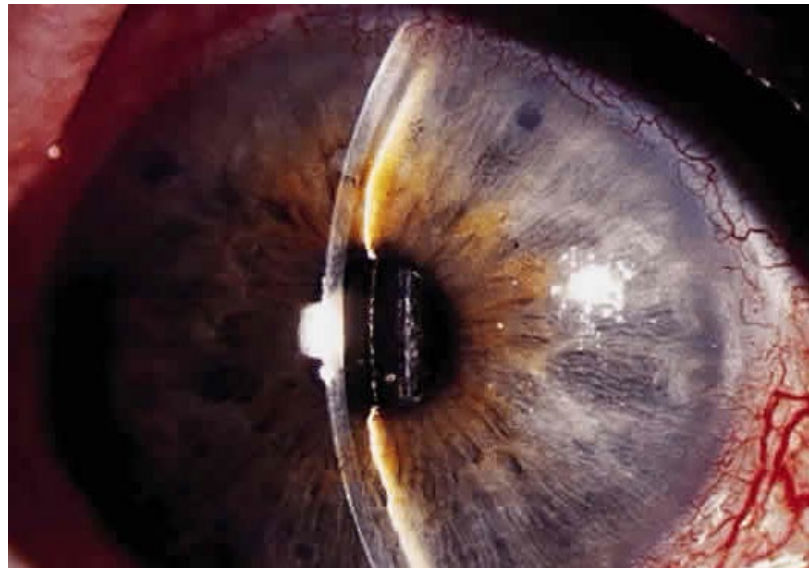


Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE
(early post-op period)

Re shallow AC after CE: What is our chief concern, ie, what do we want to keep from occurring?



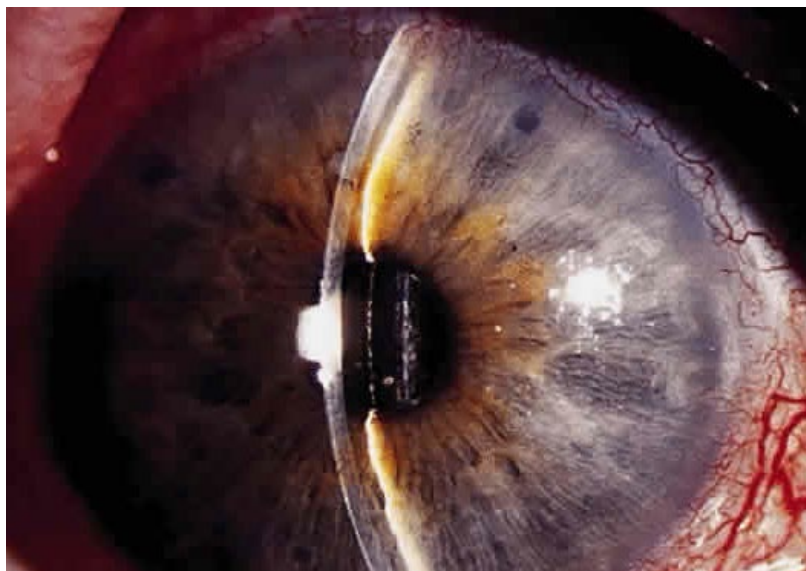
Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE
(early post-op period)

Re shallow AC after CE: What is our chief concern, ie, what do we want to keep from occurring?

We want to avoid two words touch and word + abb. touch



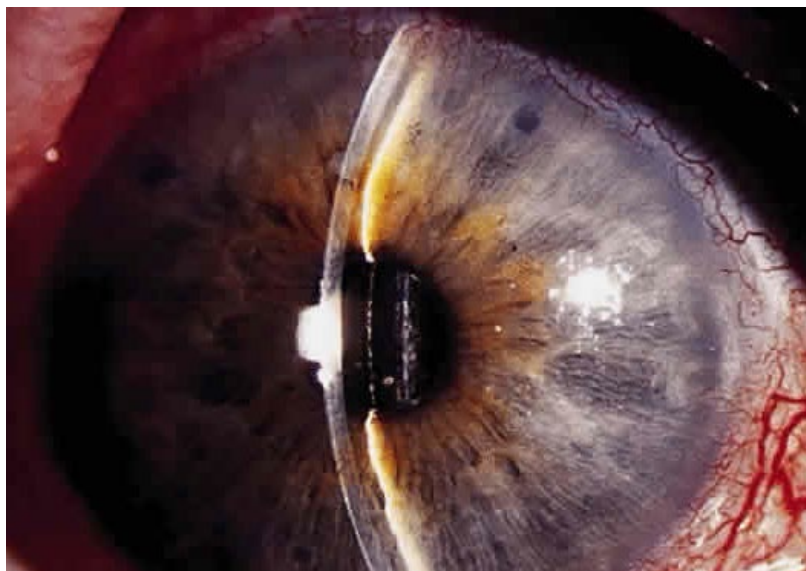
Shallow Anterior Chamber After Cataract Surgery



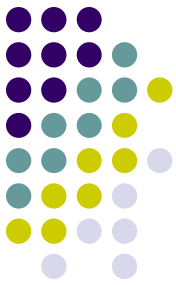
Shallow/flat AC after CE
(early post-op period)

Re shallow AC after CE: What is our chief concern, ie, what do we want to keep from occurring?

We want to avoid cornea-iris touch and cornea-IOL touch



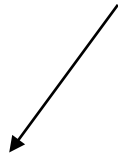
Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE
(early post-op period)

Re shallow AC after CE: What is our chief concern, ie, what do we want to keep from occurring?

We want to avoid **cornea-iris touch** and cornea-IOL touch



What dreaded complication can result from prolonged cornea-iris touch?

Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE
(early post-op period)

Re shallow AC after CE: What is our chief concern, ie, what do we want to keep from occurring?

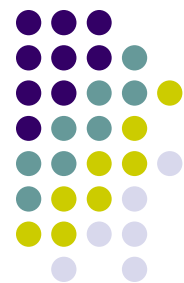
We want to avoid **cornea-iris touch** and cornea-IOL touch



*What dreaded complication can result from
prolonged cornea-iris touch?*

Peripheral anterior synechiae (PAS)

Shallow Anterior Chamber After Cataract Surgery



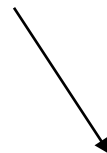
Shallow/flat AC after CE
(early post-op period)

Re shallow AC after CE: What is our chief concern, ie, what do we want to keep from occurring?

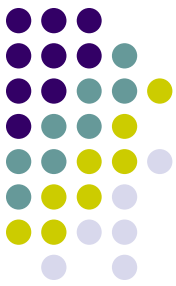
We want to avoid **cornea-iris touch** and **cornea-IOL touch**



*What dreaded complication can result from
prolonged cornea-iris touch?*
Peripheral anterior synechiae (PAS)



*What dreaded complication can result from
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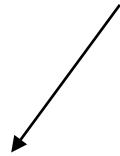


Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)

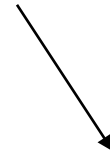
Re shallow AC after CE: What is our chief concern, ie, what do we want to keep from occurring?

We want to avoid **cornea-iris touch** and **cornea-IOL touch**



What dreaded complication can result from prolonged cornea-iris touch?

Peripheral anterior synechiae (PAS)



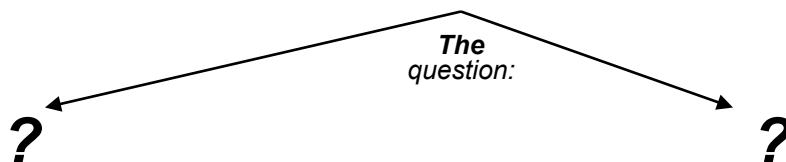
What dreaded complication can result from prolonged cornea-IOL touch?

K endothelium decompensation resulting in intractable corneal edema

Shallow Anterior Chamber After Cataract Surgery



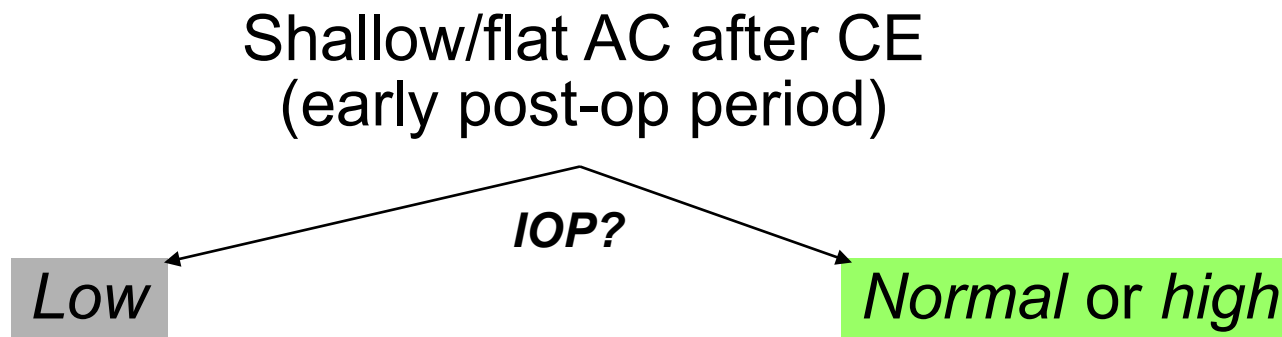
Shallow/flat AC after CE
(early post-op period)



*When faced with a flat anterior chamber in the immediate post-CE period,
your DDx is determined by the answer to one key question:*

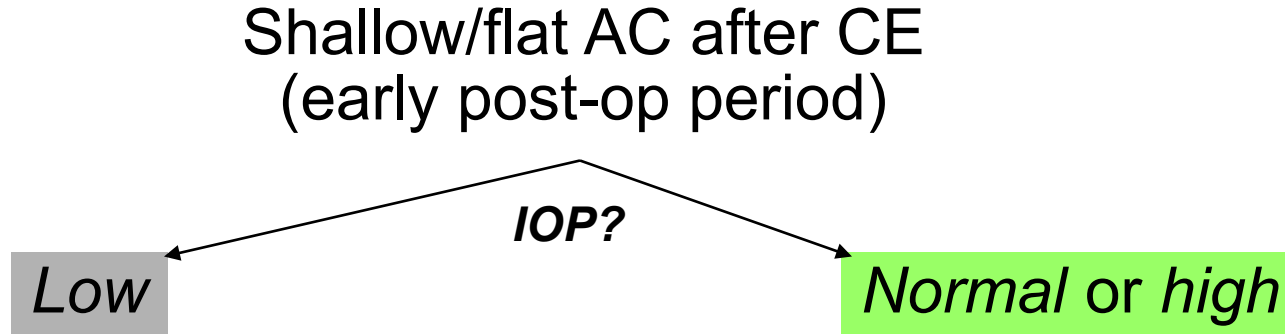
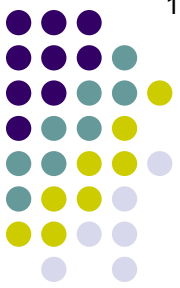


Shallow Anterior Chamber After Cataract Surgery



*When faced with a flat anterior chamber in the immediate post-CE period,
your DDx is determined by the answer to one key question:*
Is the IOP low, or normal/high?

Shallow Anterior Chamber After Cataract Surgery



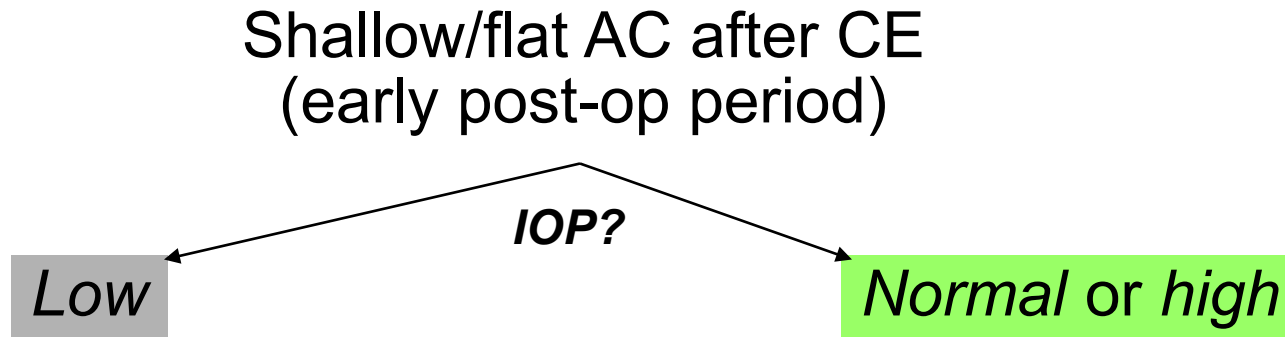
When faced with a flat anterior chamber in the immediate post-CE period, your DDx is determined by the answer to one key question:

Is the **IOP low**, or normal/high?

How low is low, ie, at what IOP should push us to this side of the DDx?



Shallow Anterior Chamber After Cataract Surgery



When faced with a flat anterior chamber in the immediate post-CE period, your DDx is determined by the answer to one key question:

Is the **IOP low**, or normal/high?

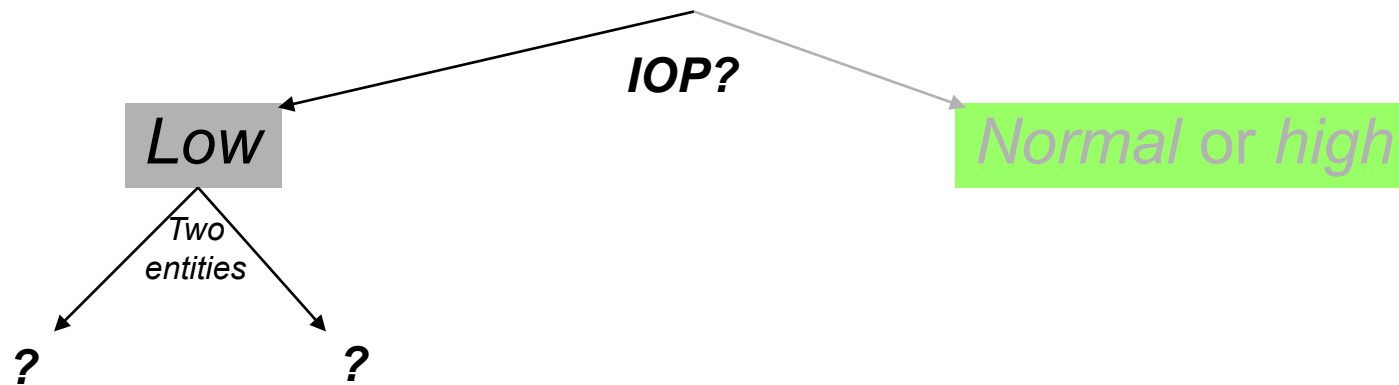
How low is low, ie, at what IOP should push us to this side of the DDx?

Less than 10

Shallow Anterior Chamber After Cataract Surgery



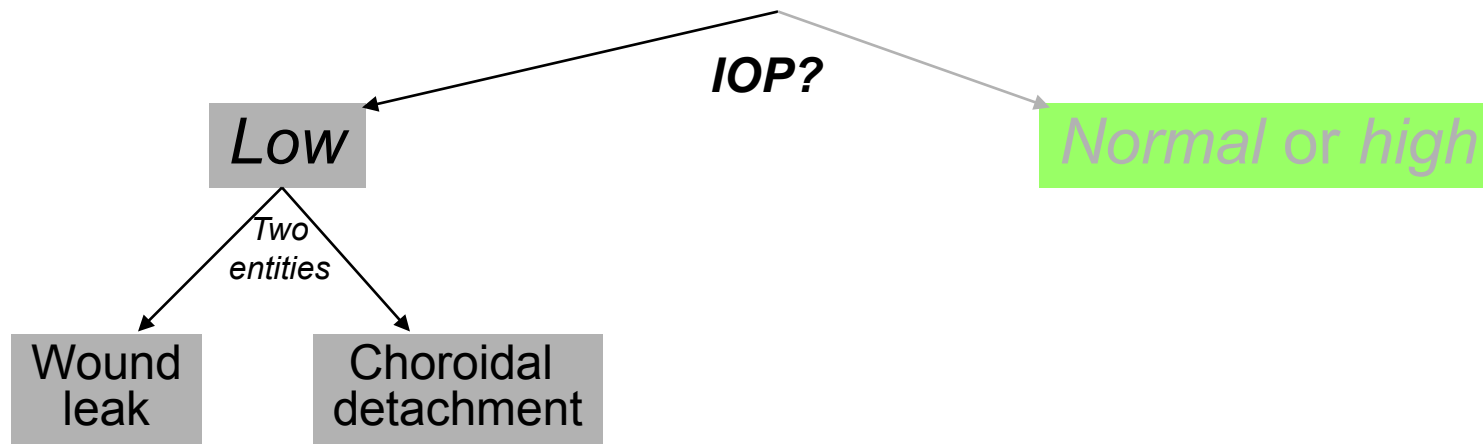
Shallow/flat AC after CE
(early post-op period)

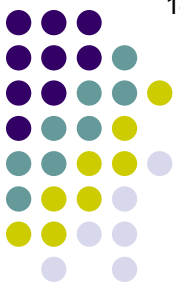


Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE
(early post-op period)





Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)

IOP?

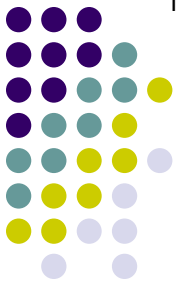
Low

Normal or high

**Wound
leak**

Choroidal
detachment

How is a wound leak diagnosed?



Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)

IOP?

Low

Normal or high

**Wound
leak**

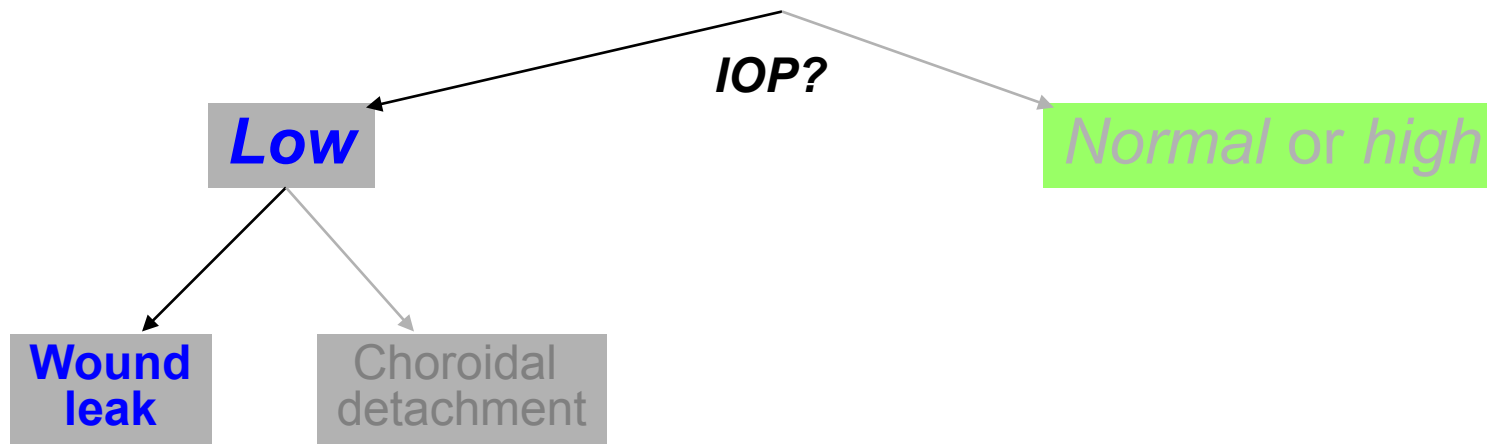
Choroidal
detachment

How is a wound leak diagnosed?
Via Seidel testing at the slit-lamp

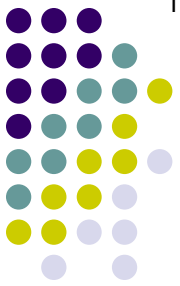


Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)

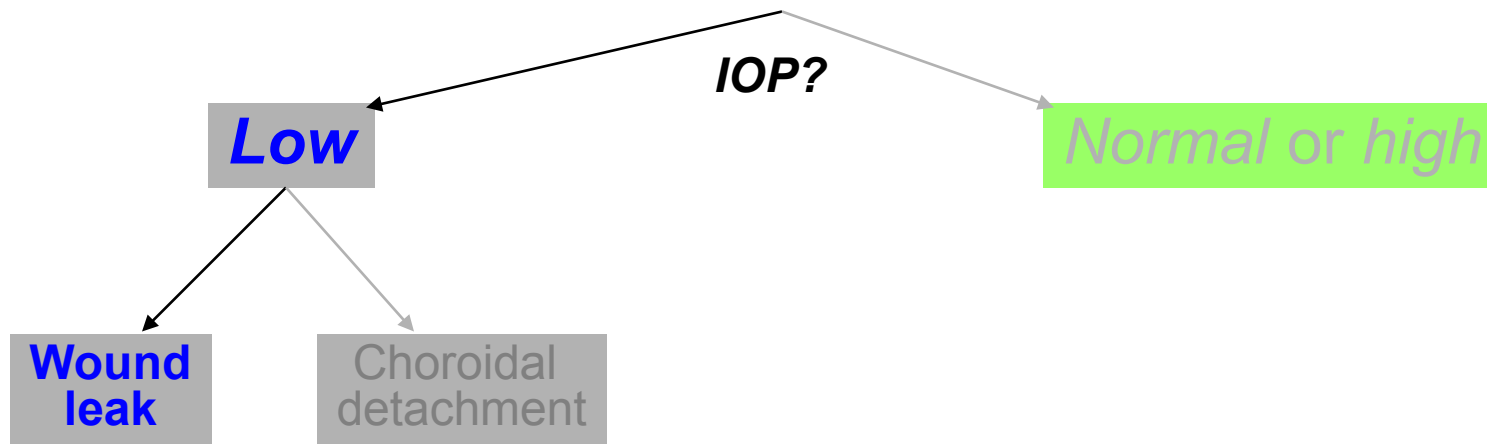


How is a wound leak managed medically?



Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



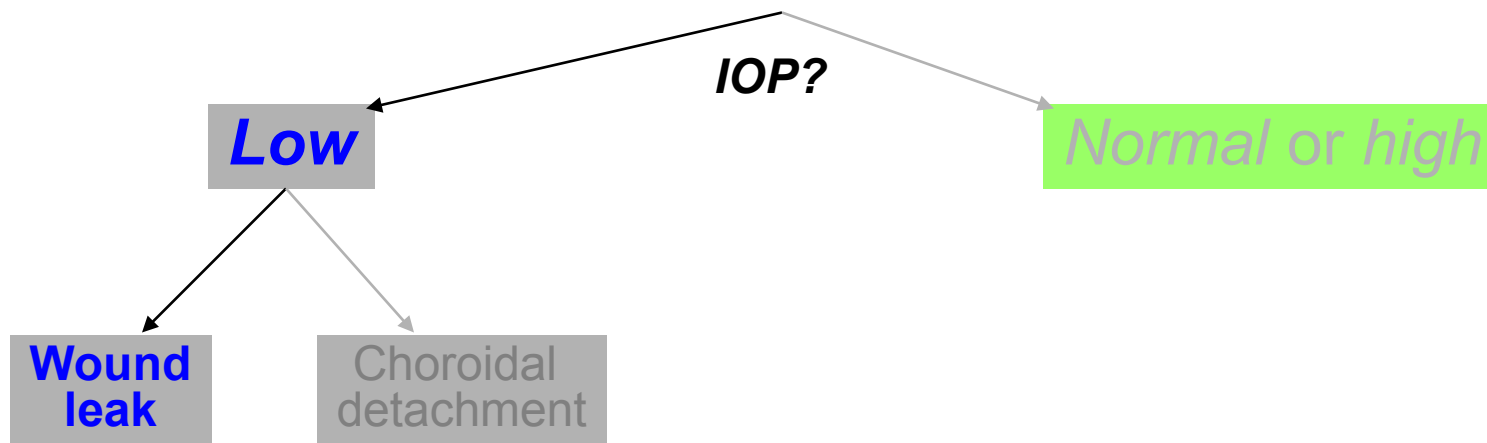
How is a wound leak managed medically? It's as simple as ABC(D):

- A
- B
- C
- D



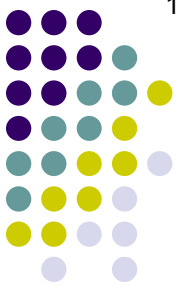
Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



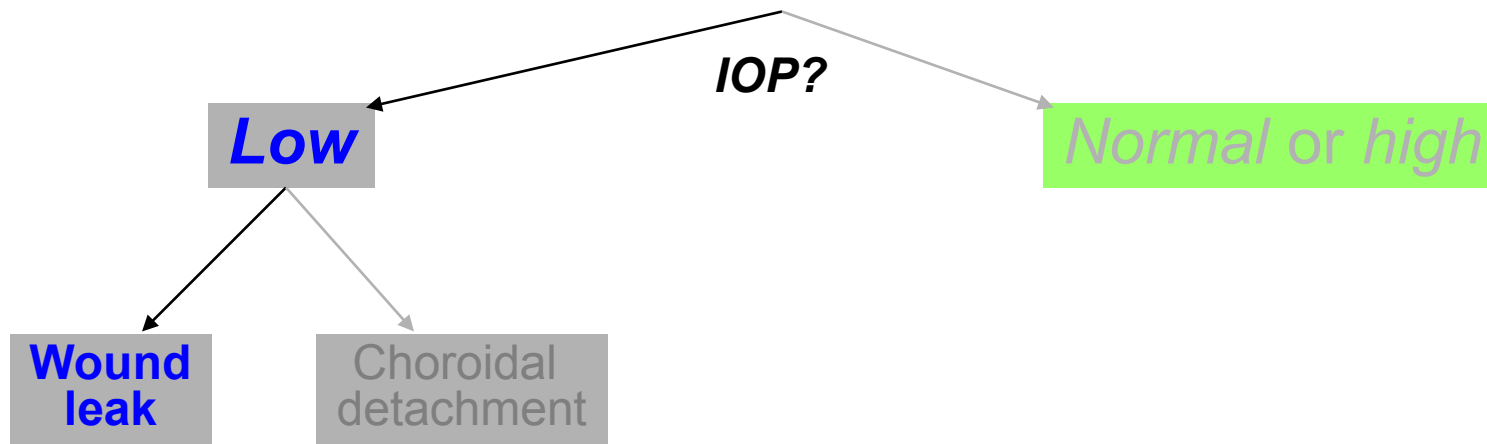
How is a wound leak managed medically? It's as simple as ABC(D):

- A**queous suppressants
- B**andage contact lens (BCL)
- C**ycloplegia
- D**iscontinue (or at least **D**iminish) topical steroids



Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



How is a wound leak managed medically? It's as simple as ABC(D):

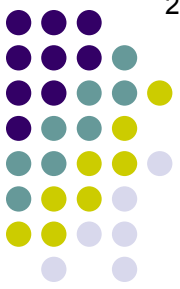
--**Aqueous suppressants**

--Bandage contact lens (BCL)

--Cycloplegia

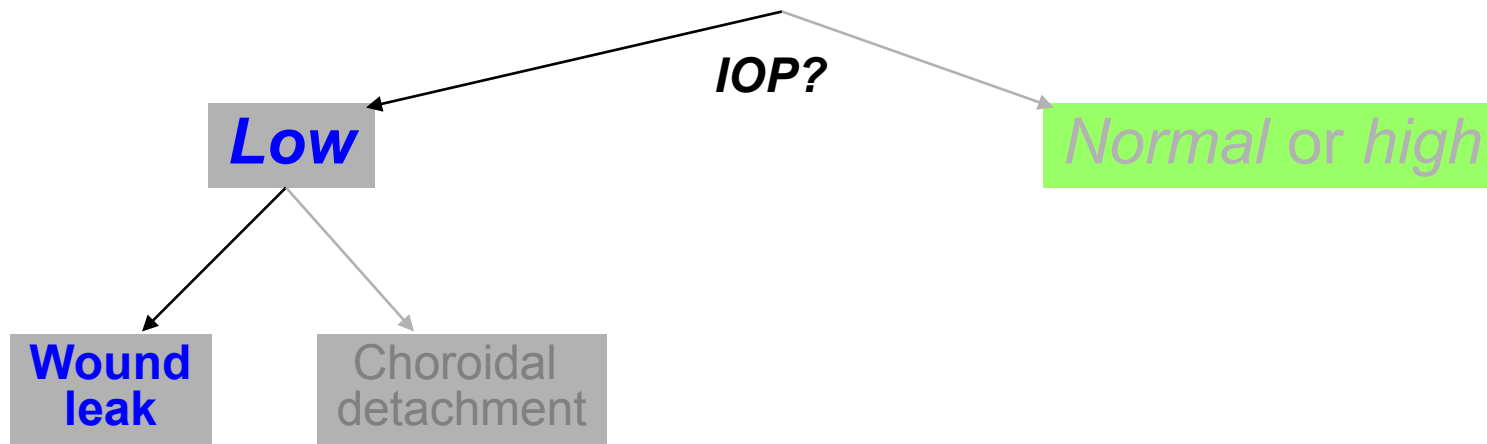
--Discontinue (or at least Dim)

What is the purpose of the aqueous suppressants?



Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



How is a wound leak managed medically? It's as simple as ABC(D):

--**Aqueous suppressants**

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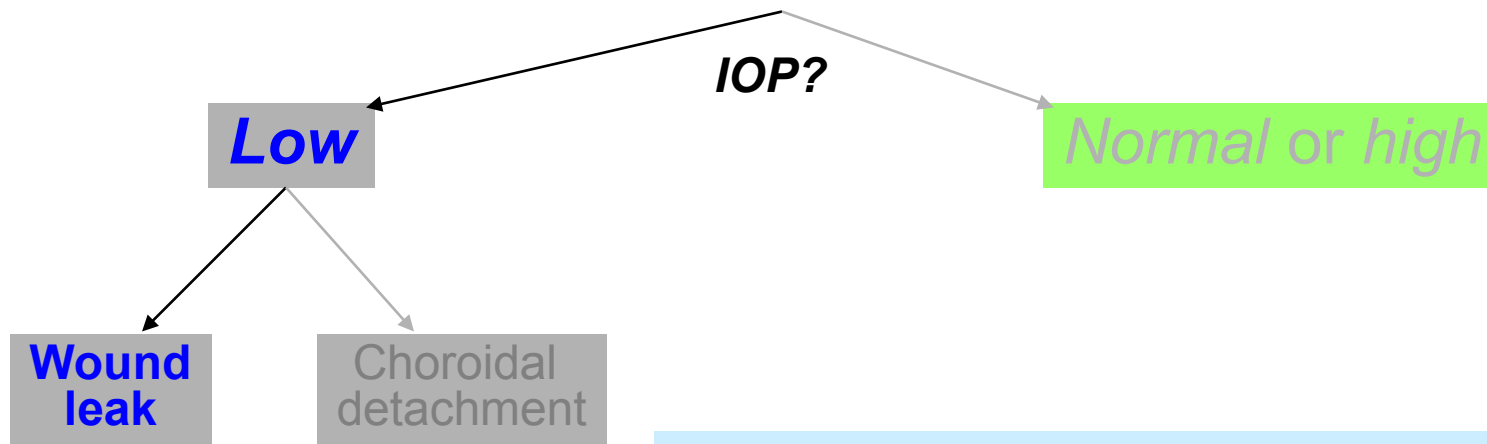
What is the purpose of the aqueous suppressants?

To promote closure of the leak by decreasing the flow of aqueous across it



Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



Which 3 drug classes are aqueous suppressants?

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How is a wound leak managed?

--**Aqueous suppressants**

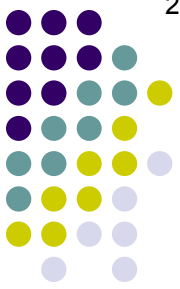
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--Cycloplegia

--Discontinue (or at least Dimin

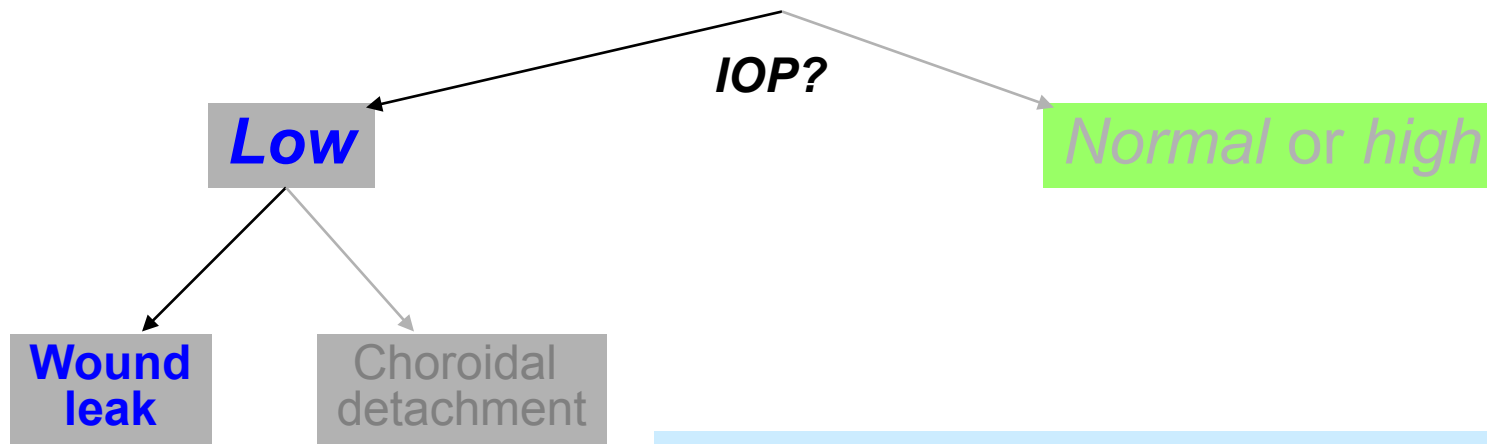
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Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



Which 3 drug classes are aqueous suppressants?

- α agonists (brimonidine probably best)
- β blockers
- Carbonic anhydrase inhibitors (CAIs)

How is a wound leak managed?

--**Aqueous suppressants**

--Bandage contact lens (BCL)

--Cycloplegia

--Discontinue (or at least Dimin

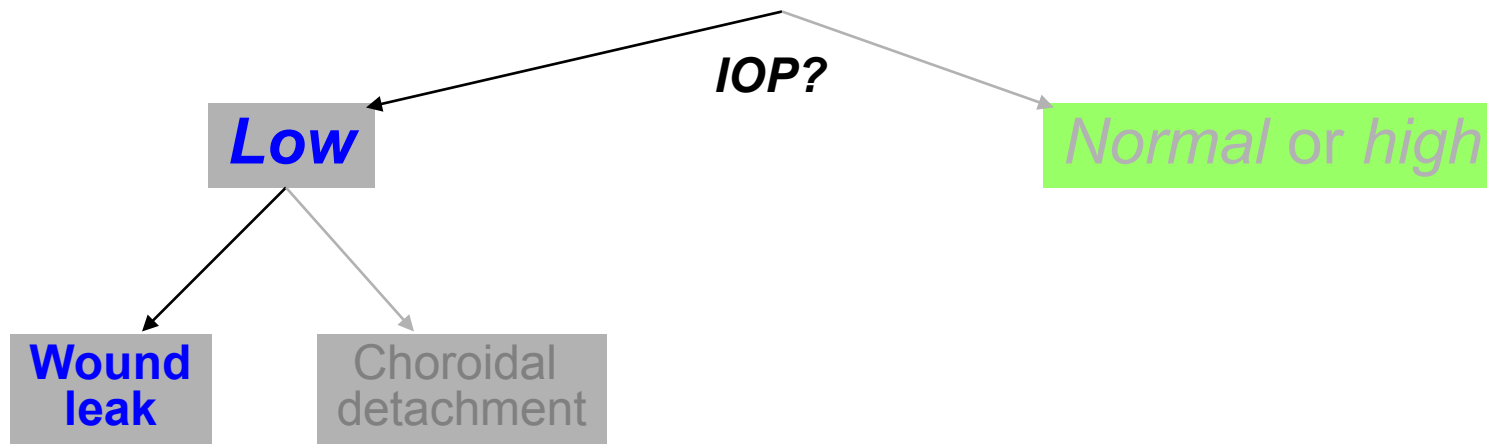
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Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
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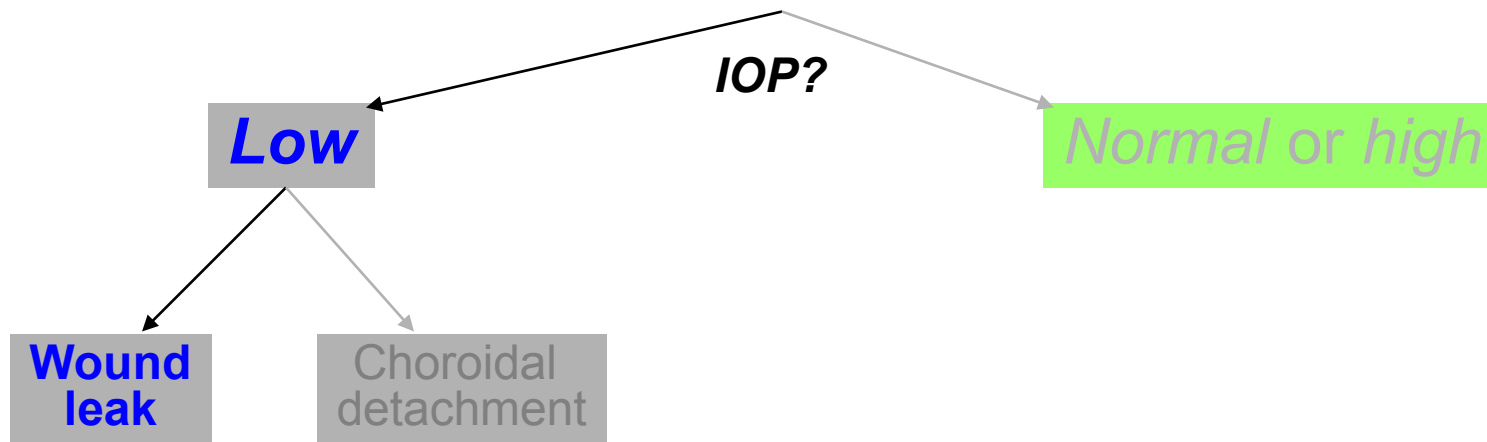
- Aqueous suppressants
- Bandage contact lens (BCL)
- Cycloplegia**
- Discontinue (or at least Diminish) topical steroids

What is the purpose of cycloplegia?



Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



How is a wound leak managed medically? It's as simple as ABC(D):

- Aqueous suppressants
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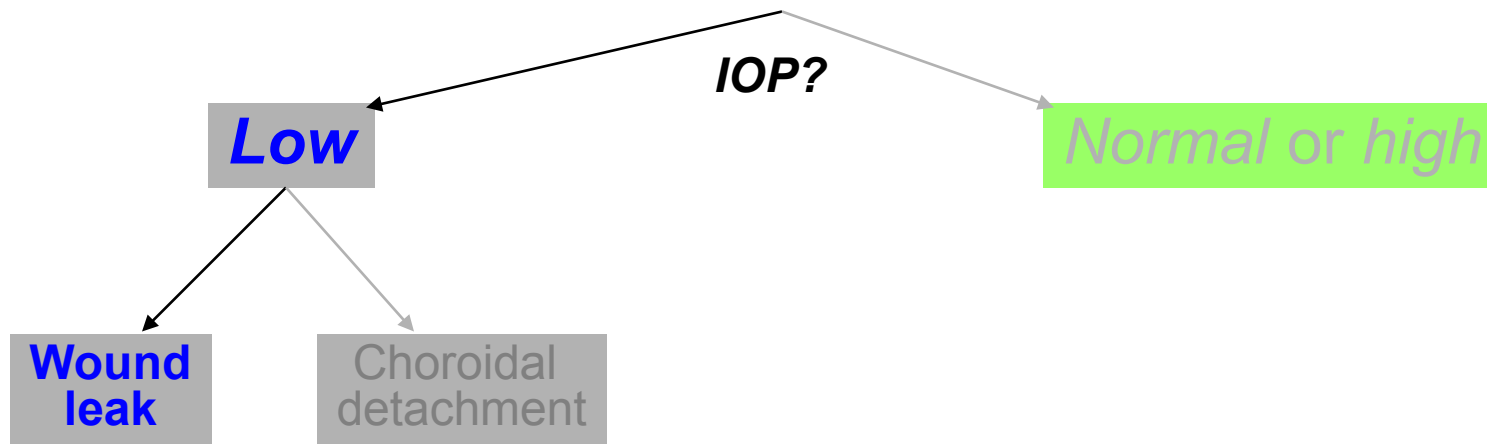
What is the purpose of cycloplegia?

To deepen the AC by rotating the ciliary body back



Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



How is a wound leak managed?

- Aqueous suppressants
- Bandage contact lens (BCL)
- Cycloplegia

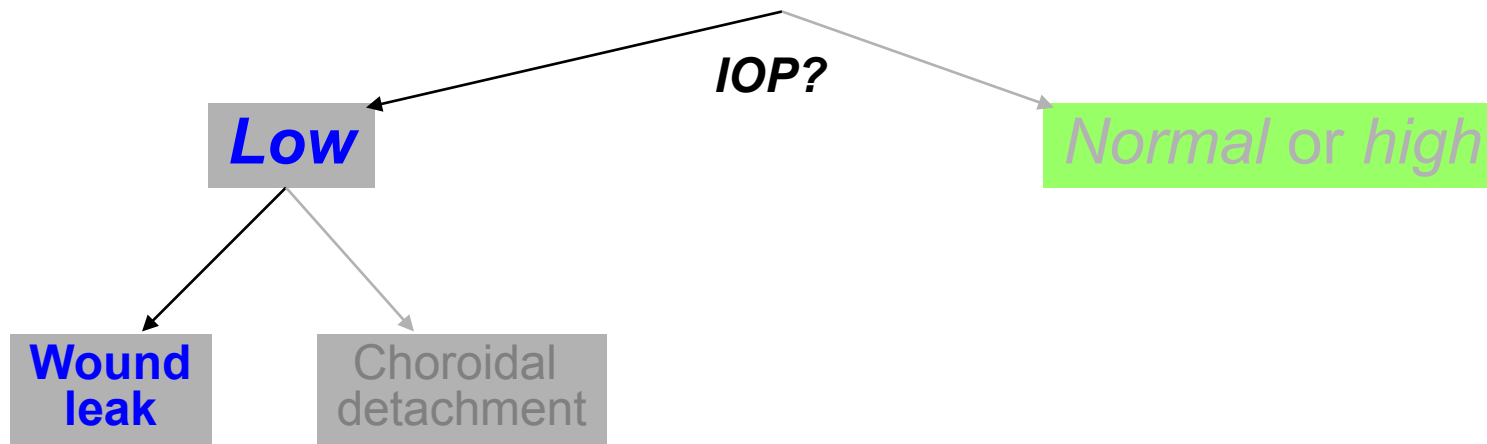
--**Discontinue (or at least Diminish) topical steroids**

Why stop steroids? Won't that increase inflammation?



Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



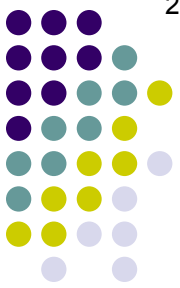
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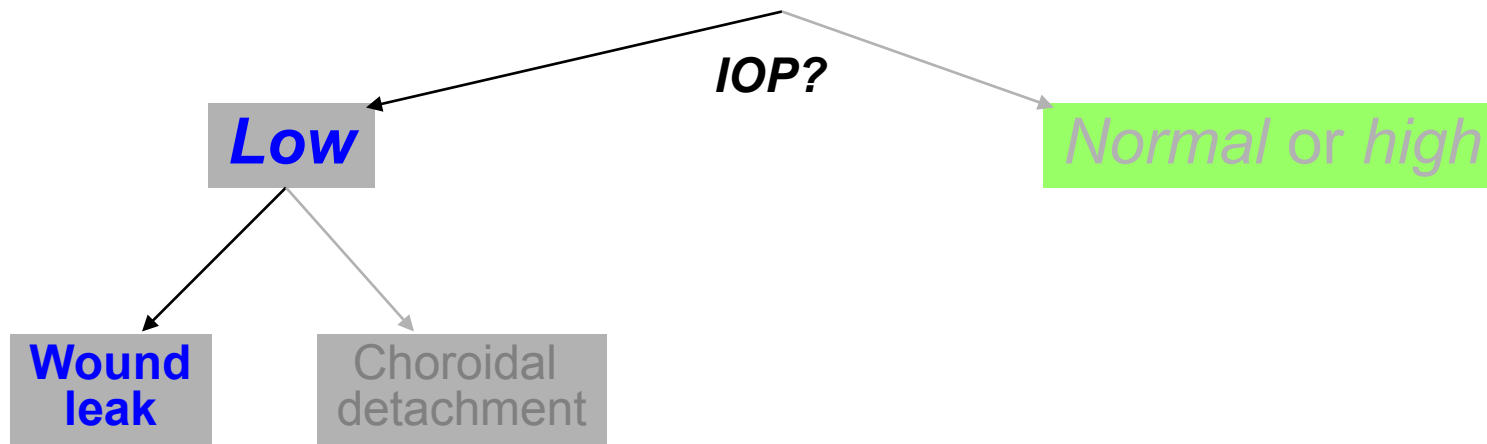
Why stop steroids? Won't that increase inflammation?

Yes, but it will also promote leak closure by removing any steroid-induced inhibition of wound healing



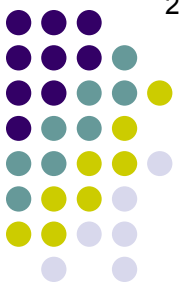
Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



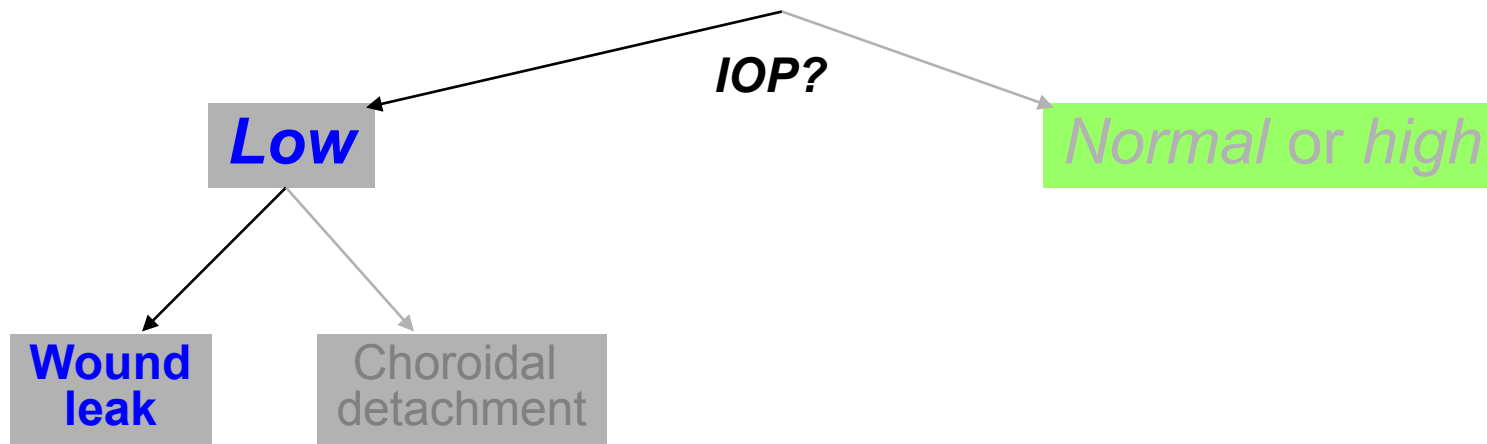
Under what circumstances should a wound leak be managed surgically?

- 1)
- 2)
- 3)
- 4)



Shallow Anterior Chamber After Cataract Surgery

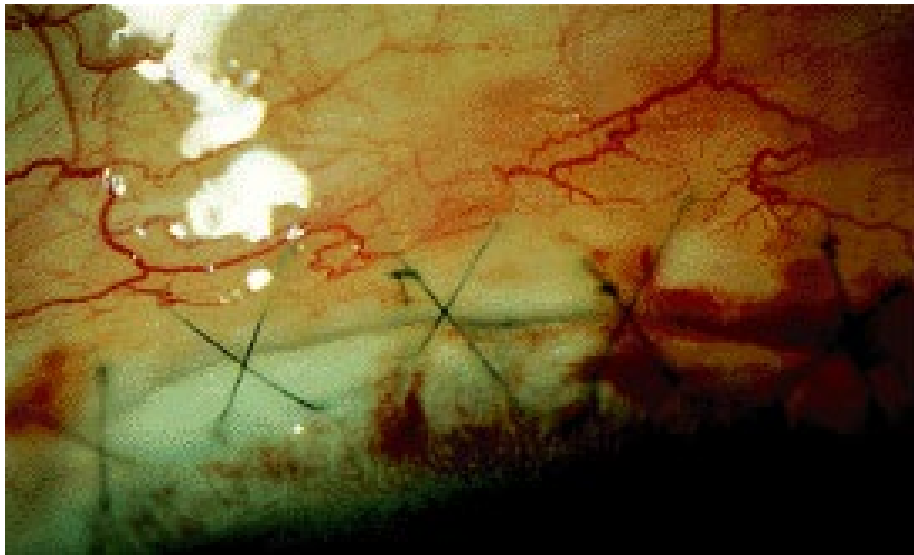
Shallow/flat AC after CE
(early post-op period)



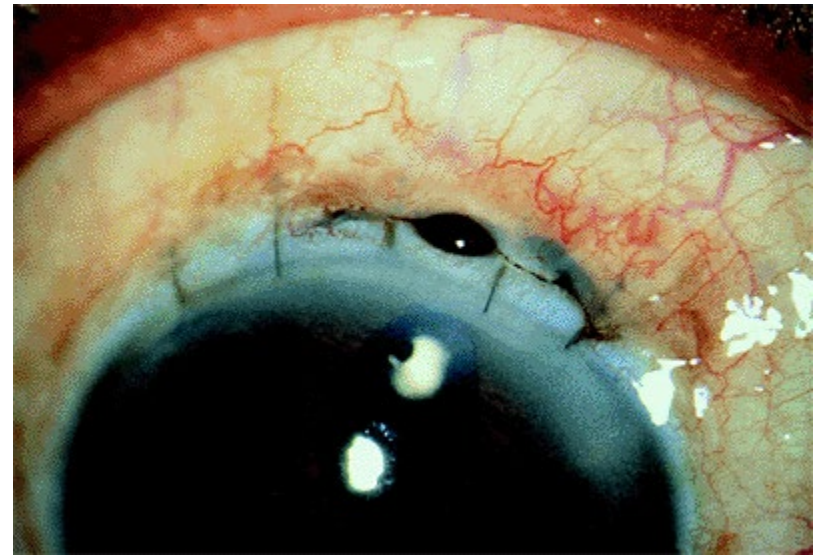
Under what circumstances should a wound leak be managed surgically?

- 1) No improvement for 48 hours
- 2) Obvious wound gape
- 3) IOL-cornea touch
- 4) Iris prolapse

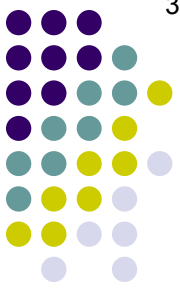
Shallow Anterior Chamber After Cataract Surgery



Wound gap

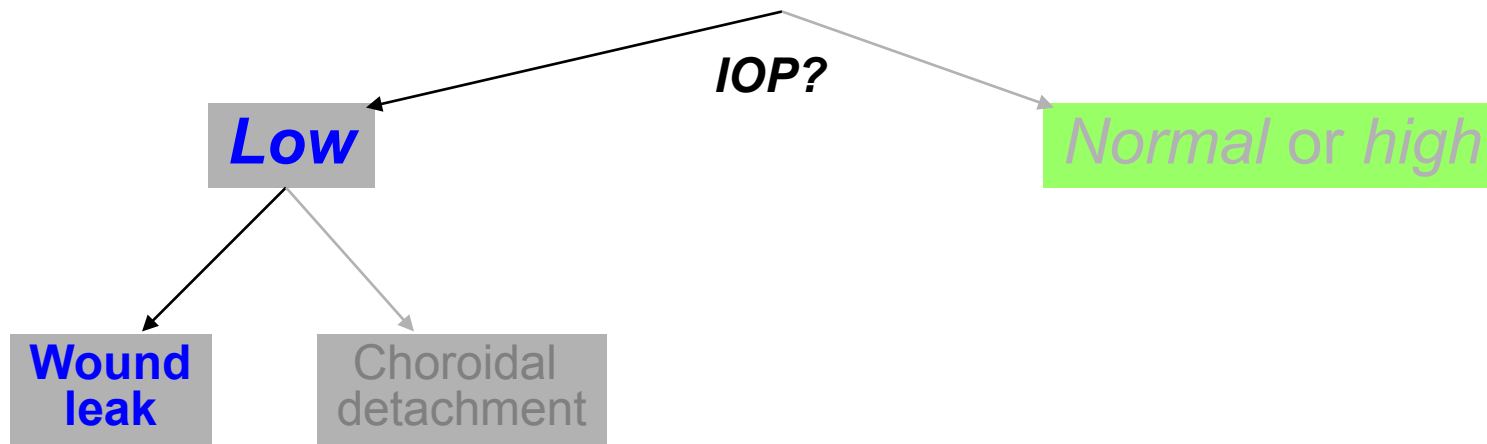


Iris prolapse



Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



Under what circumstances should a wound leak be managed surgically?

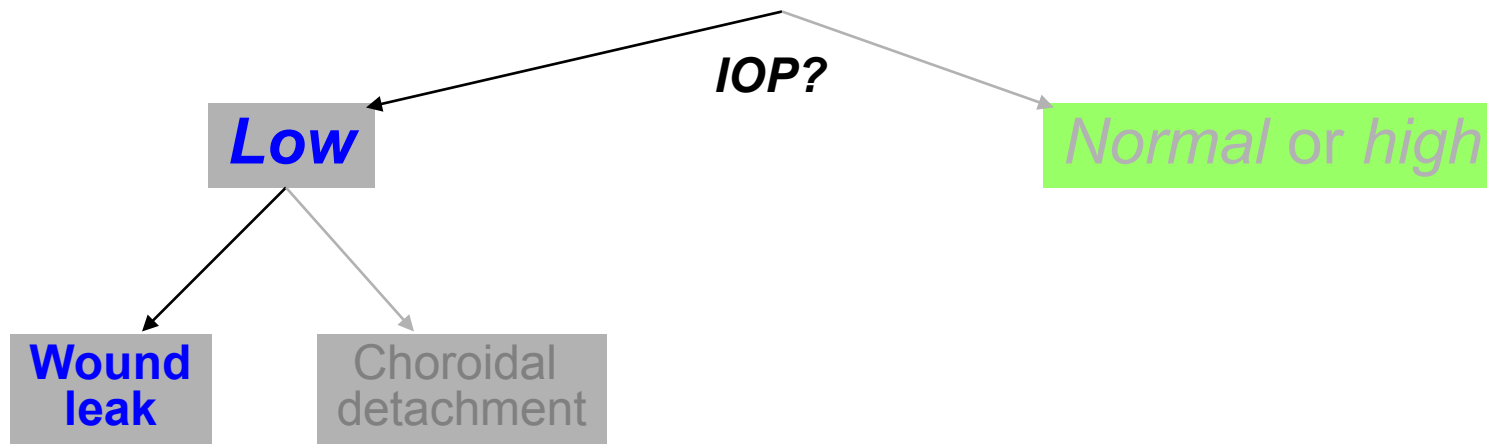
- No improvement for 48 hours
- Obvious wound gape
- IOL-cornea touch**
- Iris prolapse

What stop-gap measure could you try for this?



Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



Under what circumstances should a wound leak be managed surgically?

- No improvement for 48 hours
- Obvious wound gape
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What stop-gap measure could you try for this?

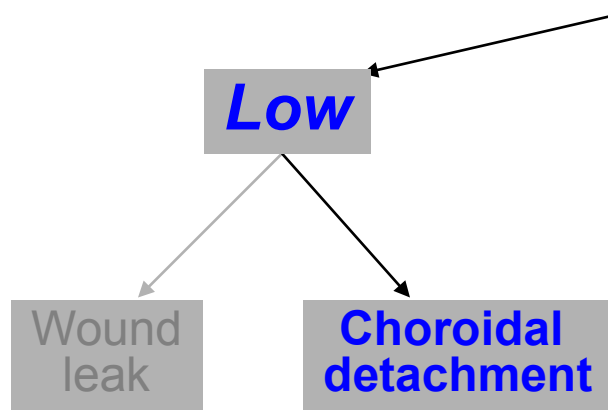
Injection of viscoelastic to re-form the AC and push the IOL back



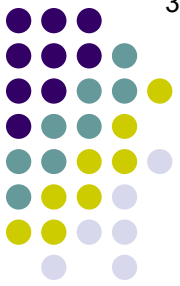
Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)

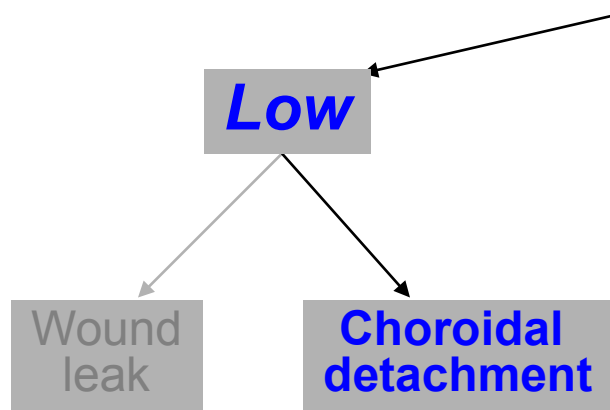
What does the term choroidal detachment mean? What is detached from what?



Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE
(early post-op period)



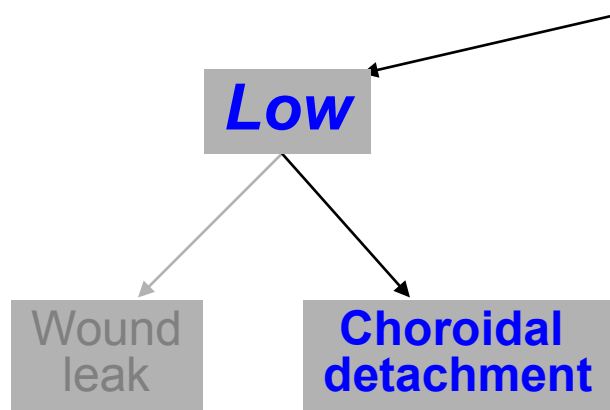
What does the term choroidal detachment mean? What is detached from what?

Under normal circumstances, the outer aspect of the choroid is closely apposed to the inner wall of the sclera.



Shallow Anterior Chamber After Cataract Surgery

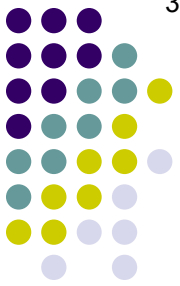
Shallow/flat AC after CE
(early post-op period)



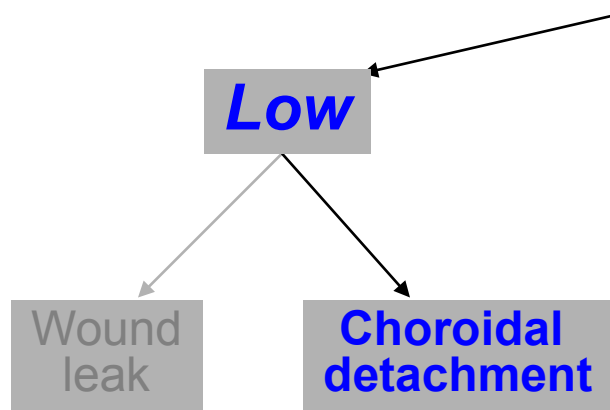
What does the term choroidal detachment mean? What is detached from what?

Under normal circumstances, the outer aspect of the choroid is closely apposed to the inner wall of the sclera. However, the choroid and sclera are actually *affixed* to one another only at the two words and around the abb.; everywhere else there is a potential space between them.

Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE
(early post-op period)

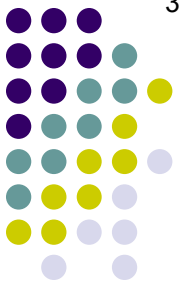


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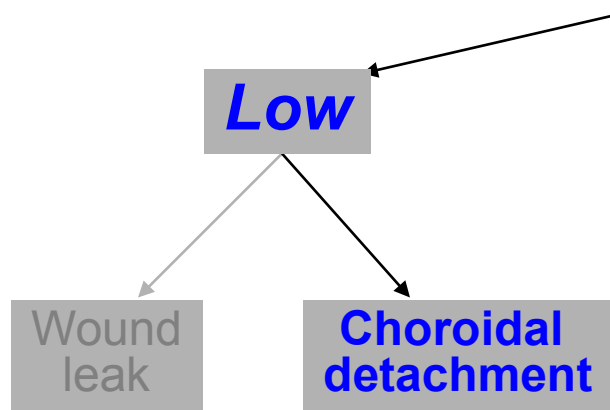
Under normal circumstances, the outer aspect of the choroid is closely apposed to the inner wall of the sclera. However, the choroid and sclera are actually *affixed* to one another only at the vortex veins and around the ONH ; everywhere else there is a potential space between them.

What is the name of this potential space?

Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE
(early post-op period)



What does the term choroidal detachment mean? What is detached from what?

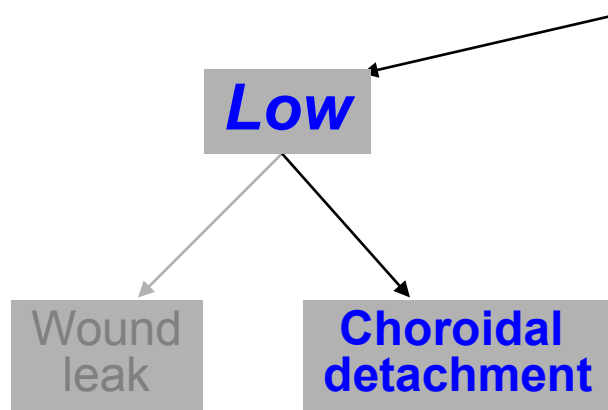
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What is the name of this potential space?
The **suprachoroidal** space



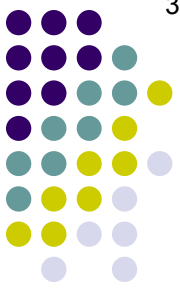
Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



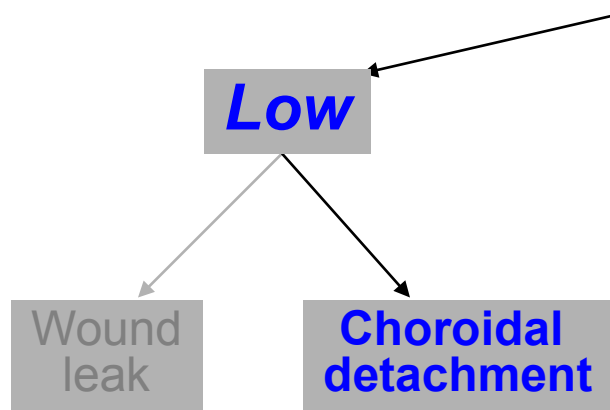
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Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



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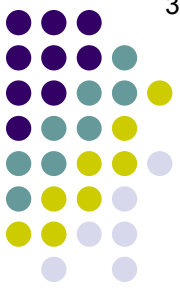
If/when fluid accumulates in this space, the choroid detaches from the sclera.

There are two broad categories of fluid that are associated with choroidal detachment--what are they?

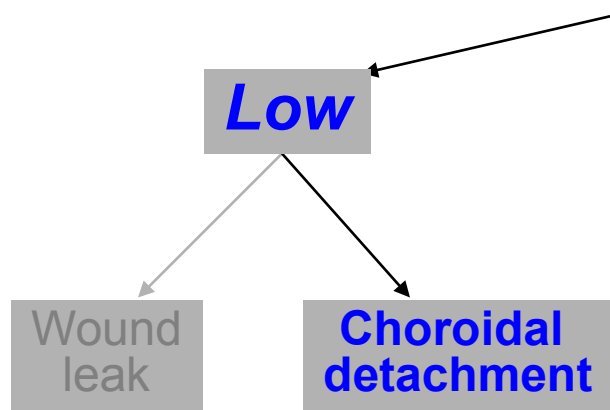
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Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE (early post-op period)



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There are two broad categories of fluid that are associated with choroidal detachment--what are they?

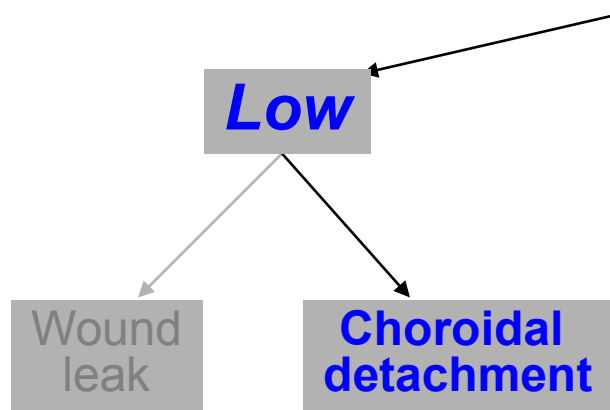
--**Serum** (via a process)

--**Blood** (via a diff process)

Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE (early post-op period)



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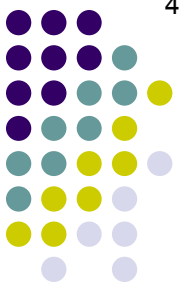
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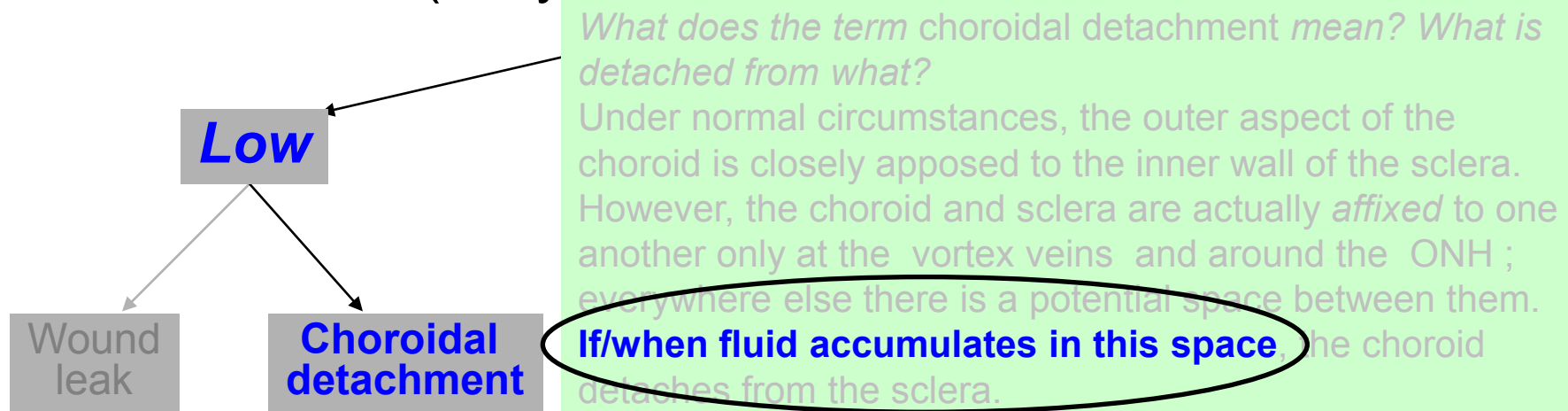
--**Serum** (via transudation)

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Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE (early post-op period)



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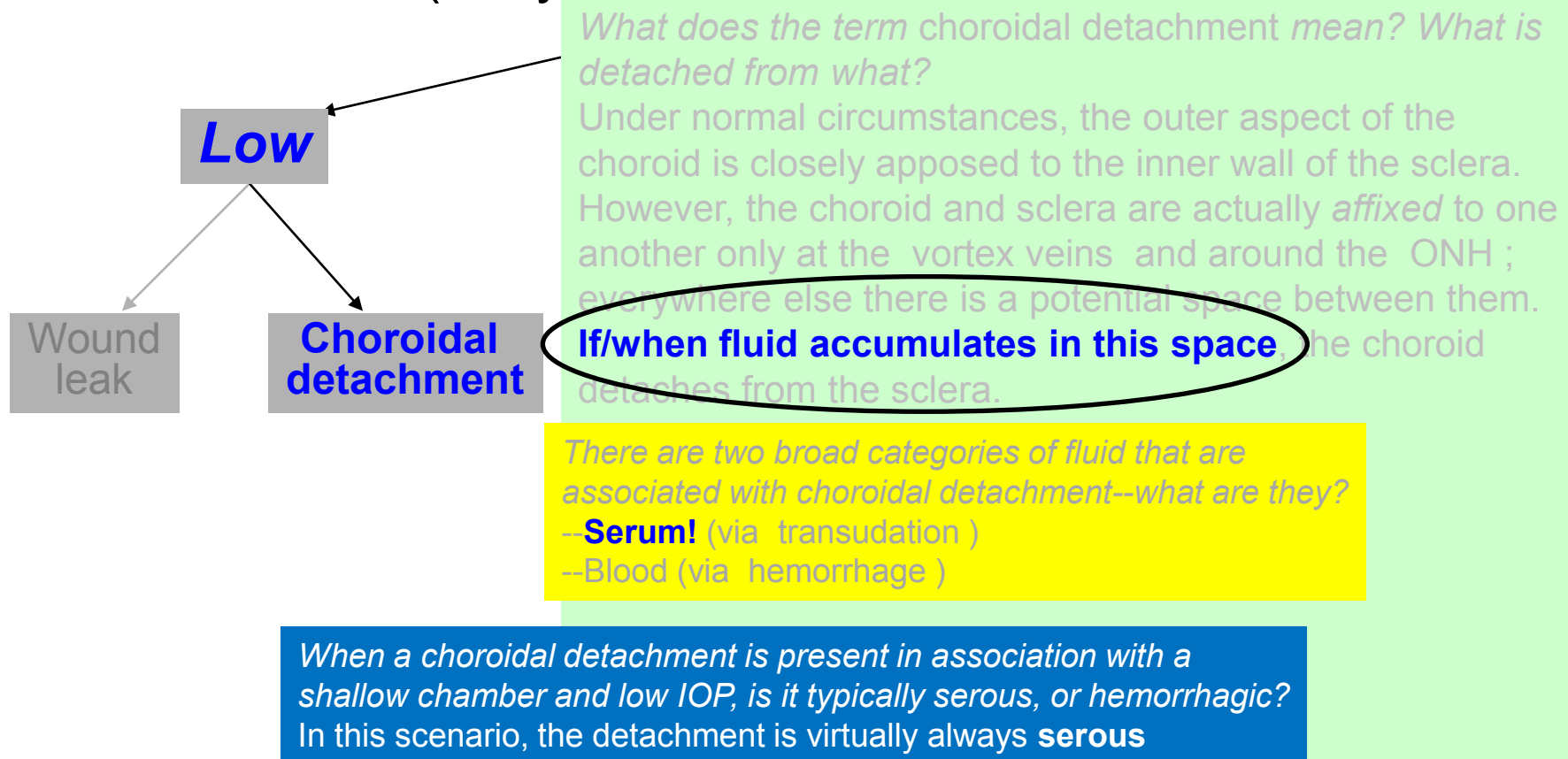
- **Serum?** (via transudation)
- **Blood?** (via hemorrhage)

When a choroidal detachment is present in association with a shallow chamber and low IOP, is it typically serous, or hemorrhagic?

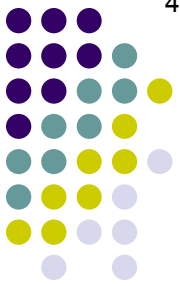
Shallow Anterior Chamber After Cataract Surgery



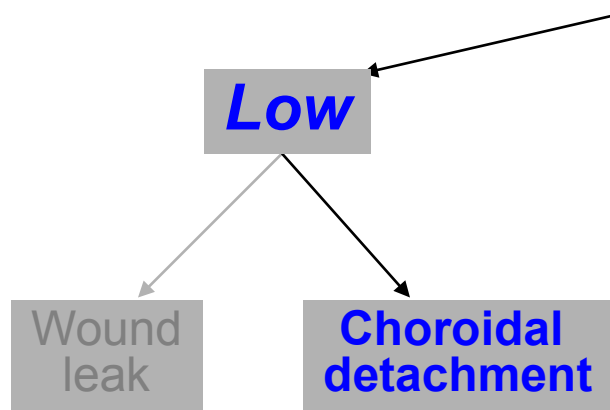
Shallow/flat AC after CE (early post-op period)



Shallow Anterior Chamber After Cataract Surgery



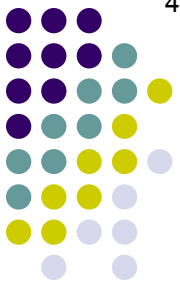
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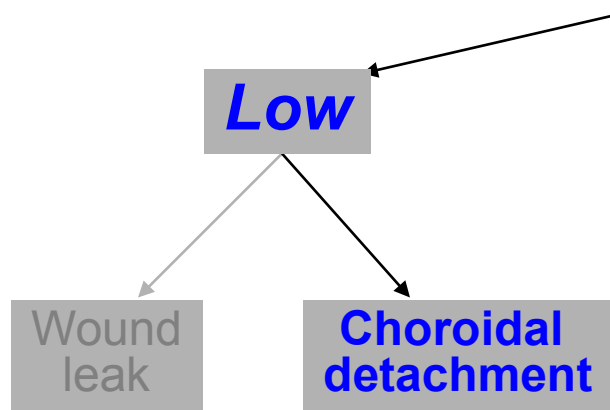
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Is choroidal detachment a common cause of low IOP + shallow/flat AC after CE?



Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



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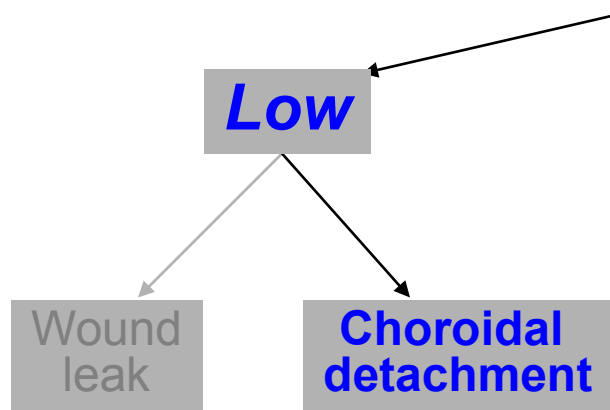
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Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE (early post-op period)



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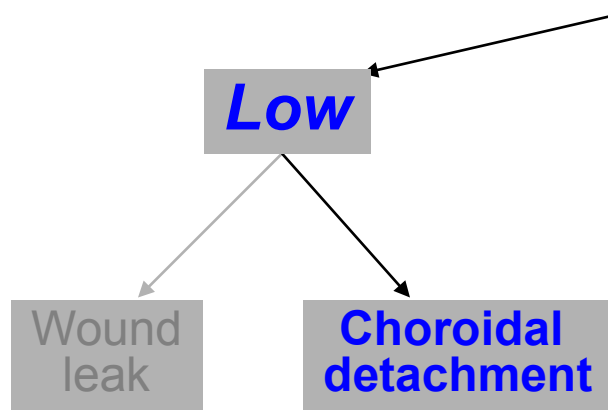
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Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE (early post-op period)



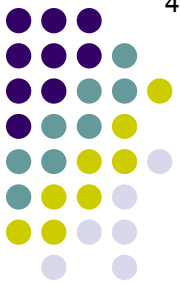
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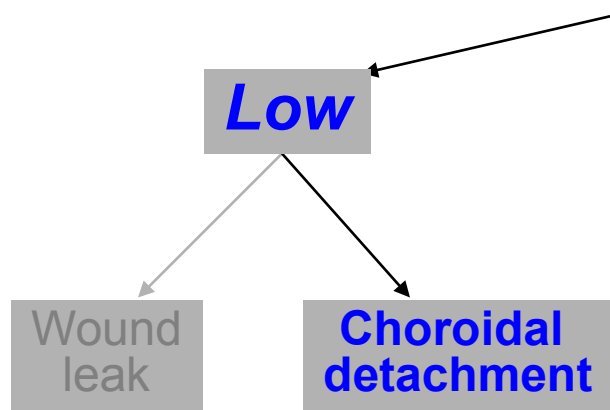
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So if a pt with a flat AC is found to have a choroidal detachment, don't assume the detachment is the cause. Be sure to check carefully for a wound leak!



Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



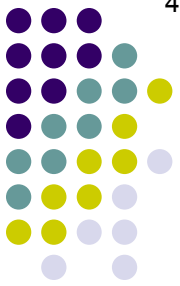
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How is choroidal detachment diagnosed?

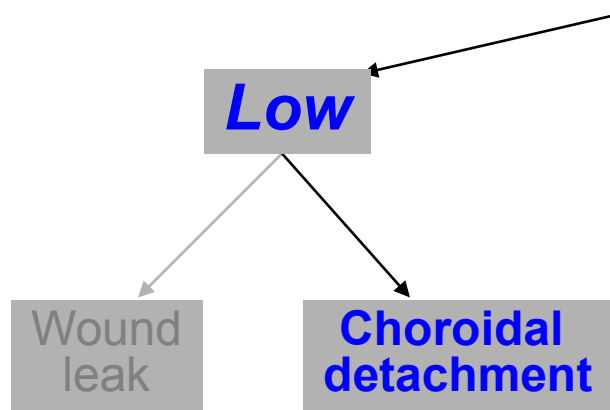
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Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE (early post-op period)



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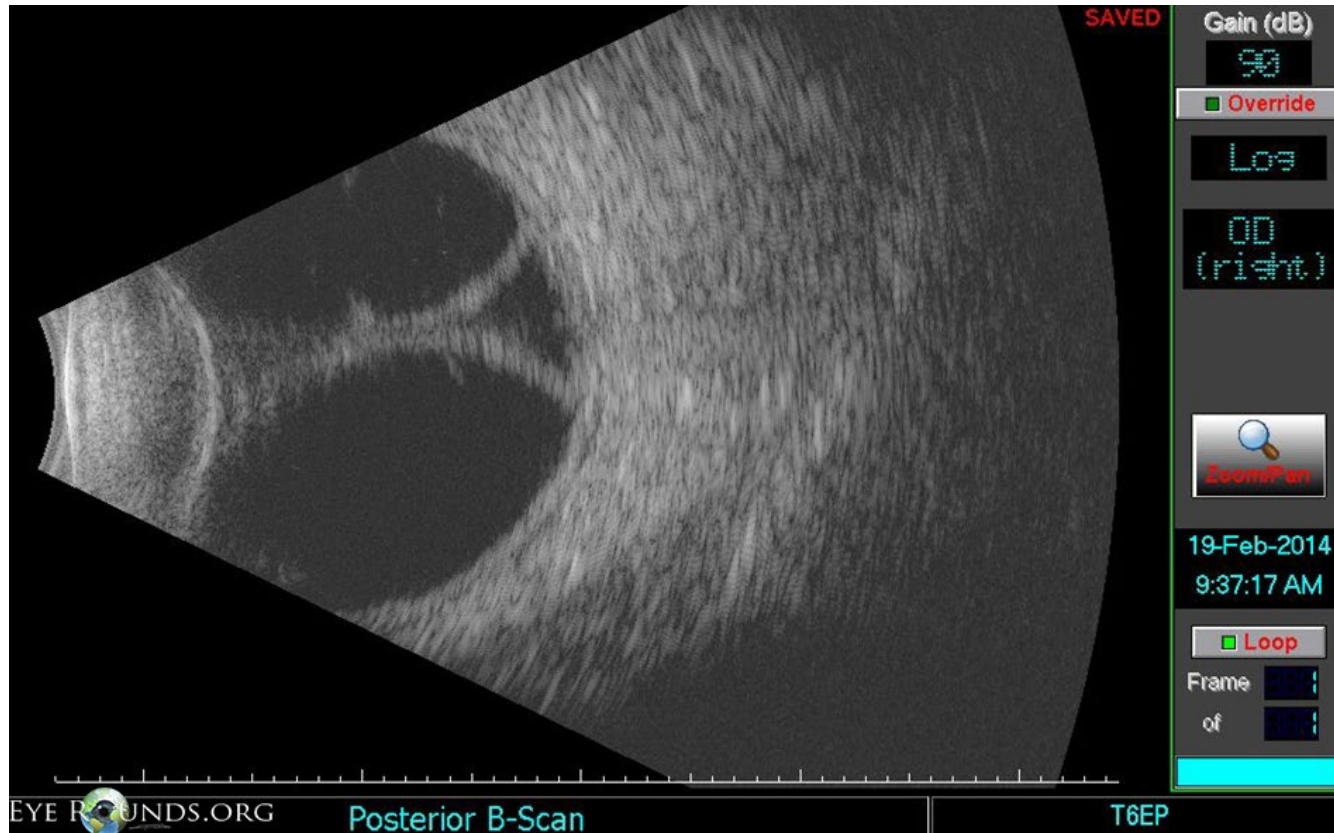
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How is choroidal detachment diagnosed? choroid
b-scan

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Shallow Anterior Chamber After Cataract Surgery

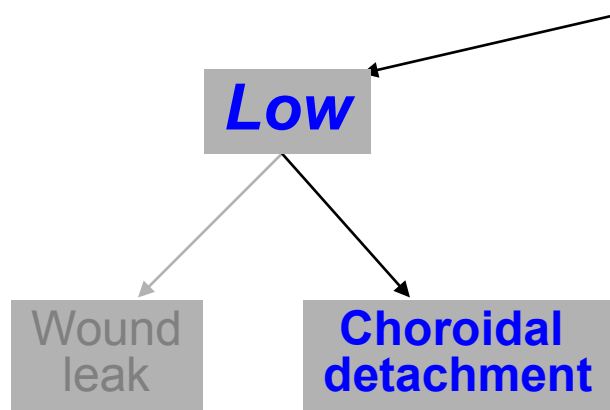


Choroidal detachment (Confession: I don't think this was post-CE)

Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE (early post-op period)



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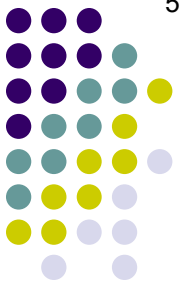
How should a flat chamber owing to a choroidal detachment be managed?

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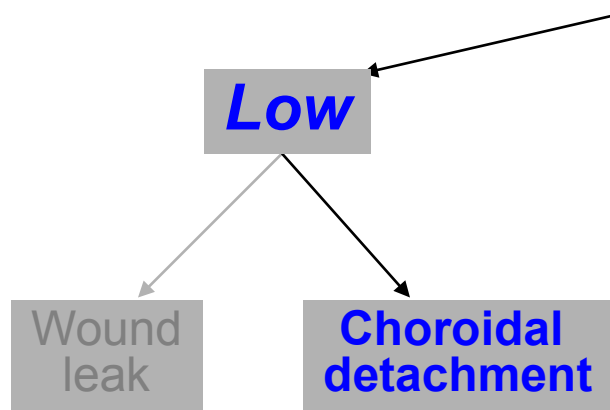
Choroidal detachments
presents
by that, in

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Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE (early post-op period)



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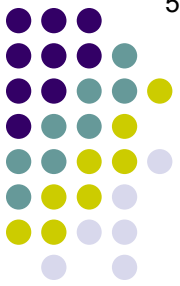
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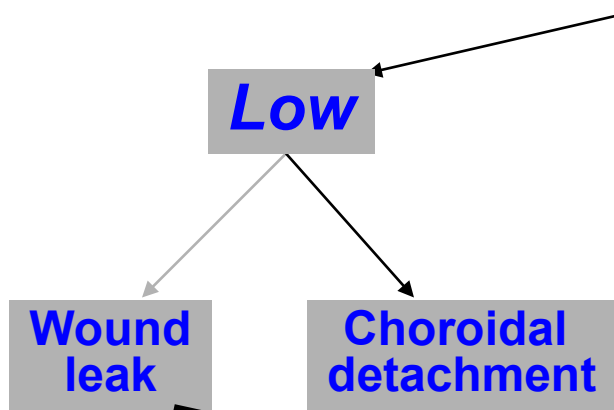
- Topical (+/- systemic) corticosteroids should be started (or increased)
- Mydriatics and cycloplegics should be employed in an attempt to rotate the lens-iris diaphragm posteriorly

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Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



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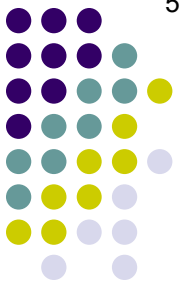
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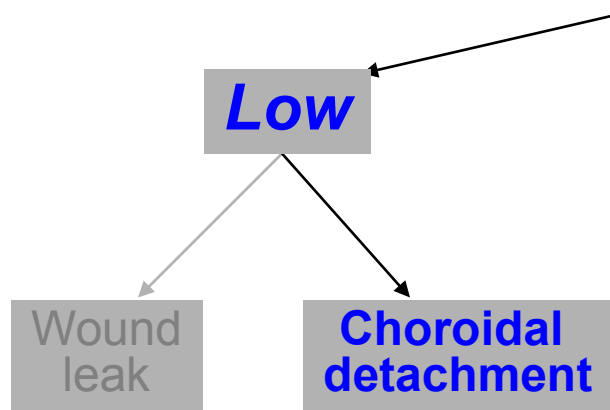
--Mydriatics and cycloplegics should be employed in an attempt to rotate

Recall that managing the other diagnosis of **flat AC+low IOP** (wound leak) included taking the **opposite** step, ie, *stopping* or *decreasing* steroids. So, it's vitally important that you differentiate accurately between these two conditions!



Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE (early post-op period)



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Under what circumstances should the detachment be addressed surgically?

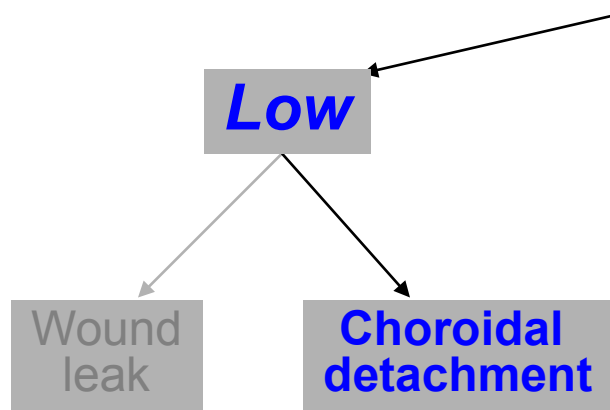
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Shallow Anterior Chamber After Cataract Surgery

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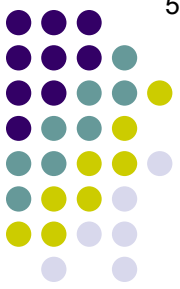
Under what circumstances should the detachment be addressed surgically?

There are no hard-and-fast rules in this regard, but indications include detachments refractory to medical management for a week or so.

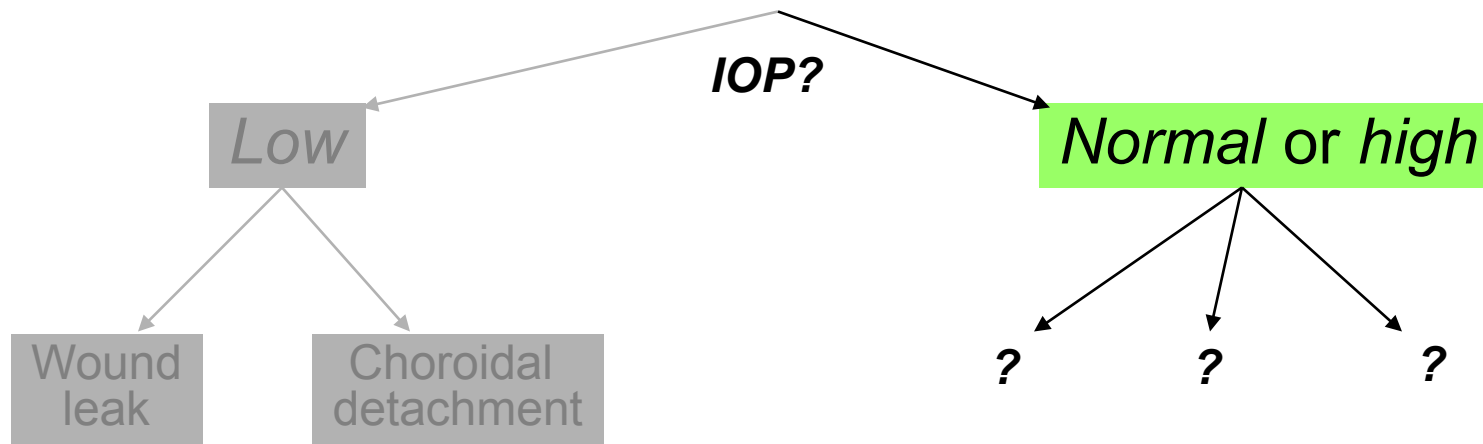
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Shallow Anterior Chamber After Cataract Surgery



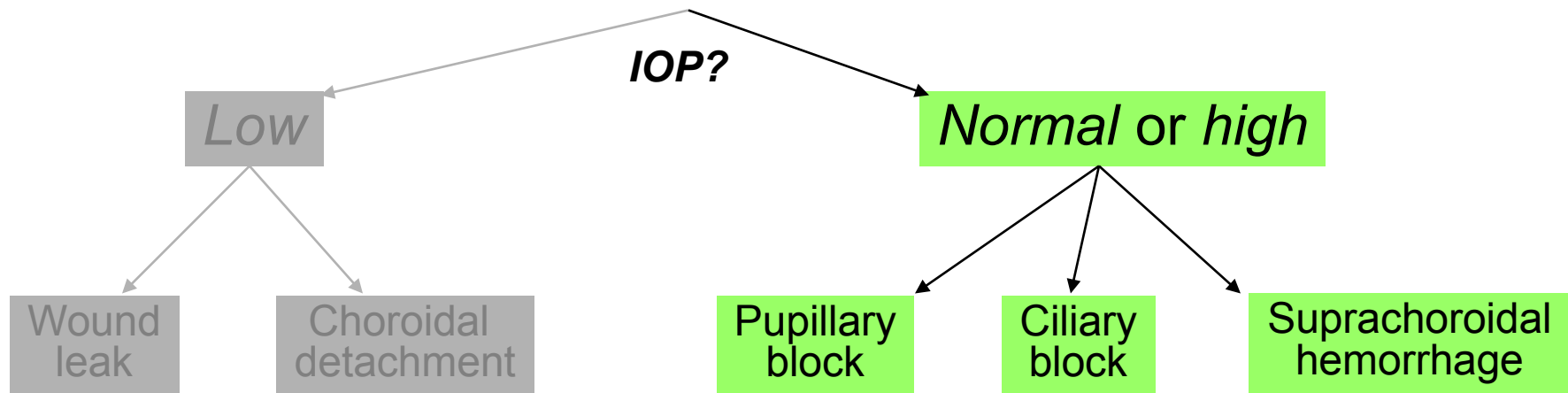
Shallow/flat AC after CE
(early post-op period)



Shallow Anterior Chamber After Cataract Surgery



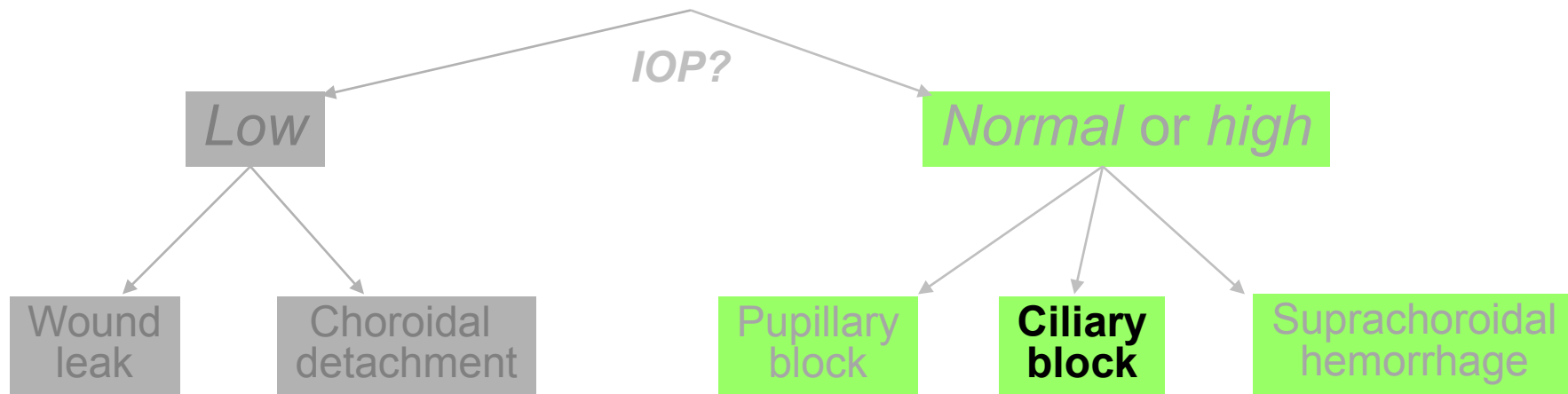
Shallow/flat AC after CE
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Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE
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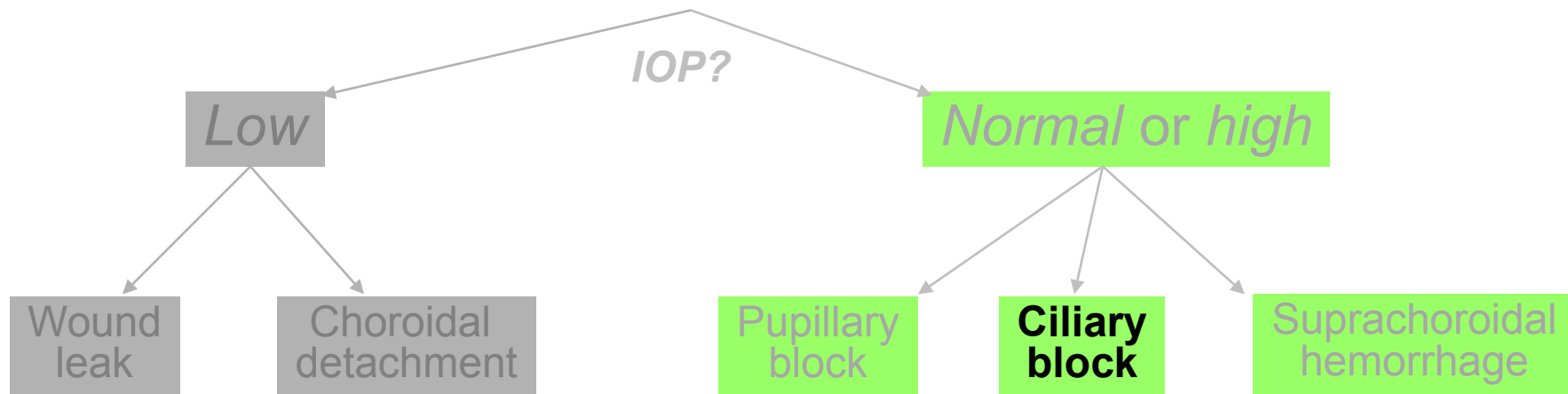
Note: The *Lens* book refers to this condition as *ciliary block glaucoma*, but the *Glaucoma* book refers to it as *aqueous misdirection syndrome*.

aka
'aqueous
misdirection
syndrome'

Shallow Anterior Chamber After Cataract Surgery

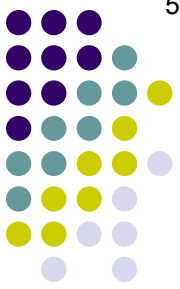


Shallow/flat AC after CE
(early post-op period)



Note: The *Lens* book refers to this condition as *ciliary block glaucoma*, but the *Glaucoma* book refers to it as *aqueous misdirection syndrome*. Both books also *aka* it as *malignant glaucoma*.

aka
'aqueous
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Shallow Anterior Chamber After Cataract Surgery

What is the mechanism underlying pupillary block?

AC after CE
(post-op period)

P?

Normal or high

**Pupillary
block**

Ciliary
block

Suprachoroidal
hemorrhage

Shallow Anterior Chamber After Cataract Surgery

What is the mechanism underlying pupillary block?

Apposition between the pupil margin and the IOL prevents the normal flow of aqueous from the posterior chamber to the AC. This results in a pressure gradient across the iris, causing it to bow forward. In doing so, the peripheral iris interferes with the egress of aqueous through the TM. The net result is a normal-to-high IOP and shallowed AC.

AC after CE
(post-op period)

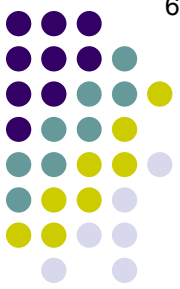
IOP?

Normal or high

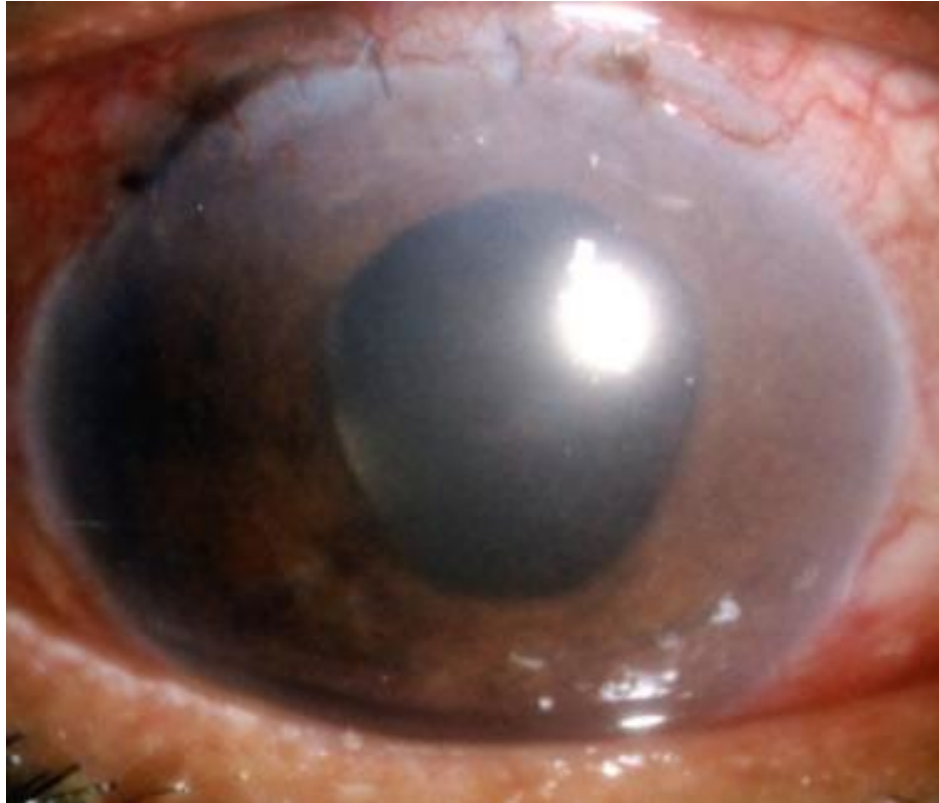
**Pupillary
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Ciliary
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Suprachoroidal
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Shallow Anterior Chamber After Cataract Surgery



PC IOL pupillary block after wound leak



Shallow Anterior Chamber After Cataract Surgery

What is the mechanism underlying pupillary block?

Apposition between the pupil margin and the IOL prevents the normal flow of

AC after CF

In the acute post-op period, what process commonly leads to the IOL being apposed to the pupillary margin?

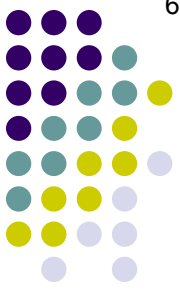
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Shallow Anterior Chamber After Cataract Surgery

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In the acute post-op period, what process commonly leads to the IOL being apposed to the pupillary margin?
One common cause is a **wound leak**, which can allow the vitreous body to push the IOL up against the pupil, resulting in pseudophakic pupillary block. So, a post-op eye that initially has a shallow chamber + low IOP ends up having a shallow chamber + a normal/high IOP.

interferes with the egress of aqueous through the TM. The net result is a normal-to-high IOP and shallowed AC.

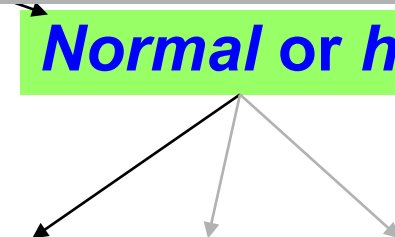
Wound leak

Normal or high

Pupillary block

Ciliary block

Suprachoroidal hemorrhage





Shallow Anterior Chamber After Cataract Surgery

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AC after CE

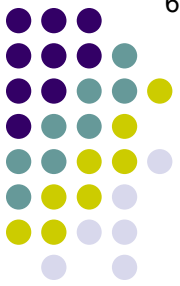
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Shallow Anterior Chamber After Cataract Surgery

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*In the **late** post-op period, what process commonly leads to the IOL being apposed to the pupillary margin?*
Severe/long-lasting post-op inflammation can result in posterior synechiae formation

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AC after CE

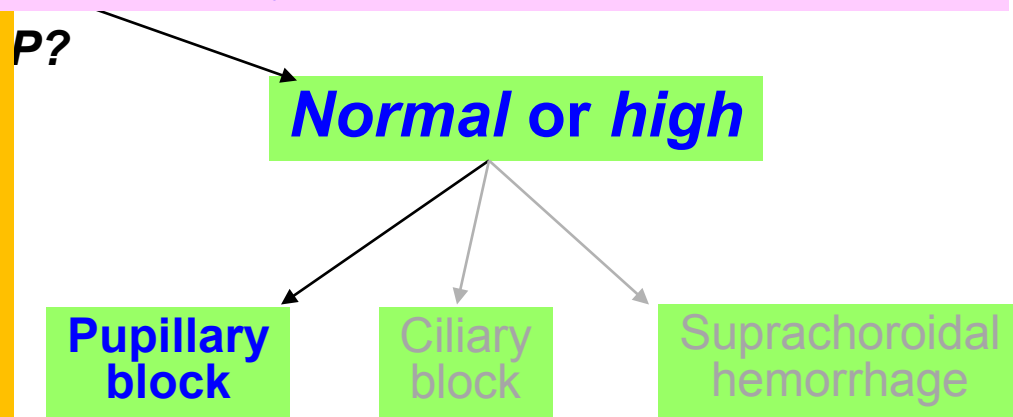
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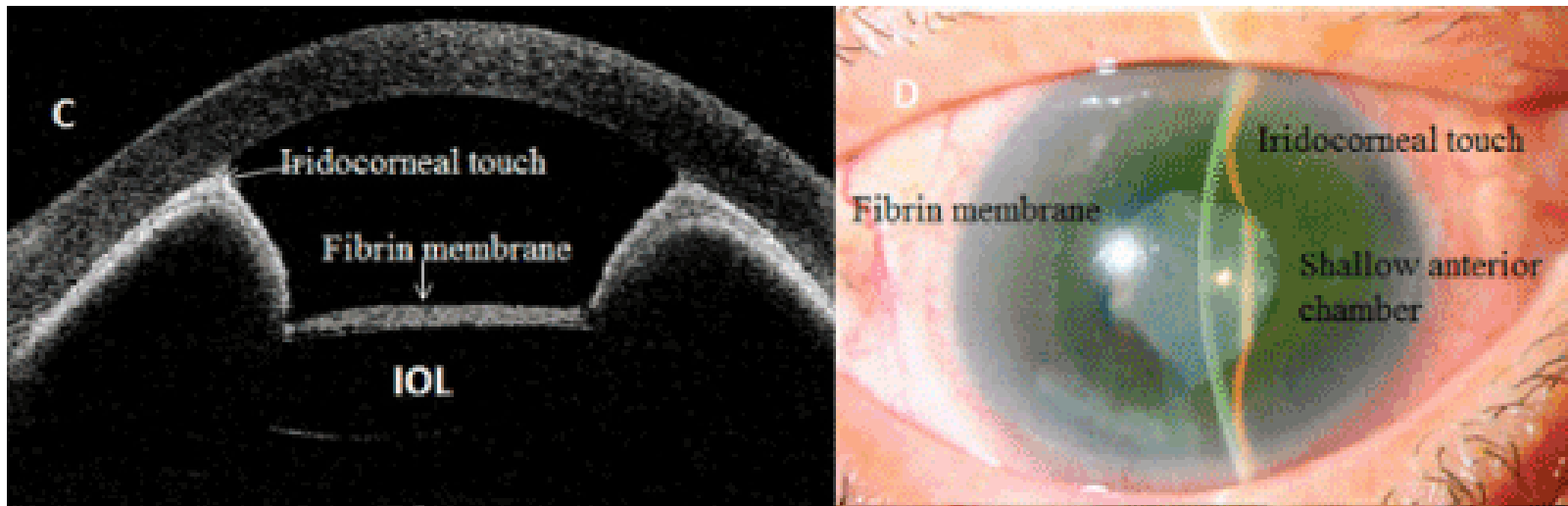
**Pupillary
block**

Ciliary
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Suprachoroidal
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Shallow Anterior Chamber After Cataract Surgery



Late-onset PSK pupillary-block shallow AC 2ndry to posterior synechiae

Shallow Anterior Chamber After Cataract Surgery

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Which pt population is particularly prone to pseudophakic pupillary block?

AC after CE
(post-op period)

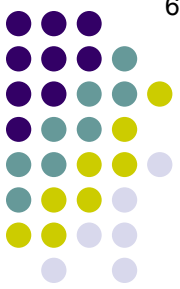
IOP?

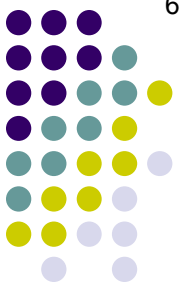
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Shallow Anterior Chamber After Cataract Surgery

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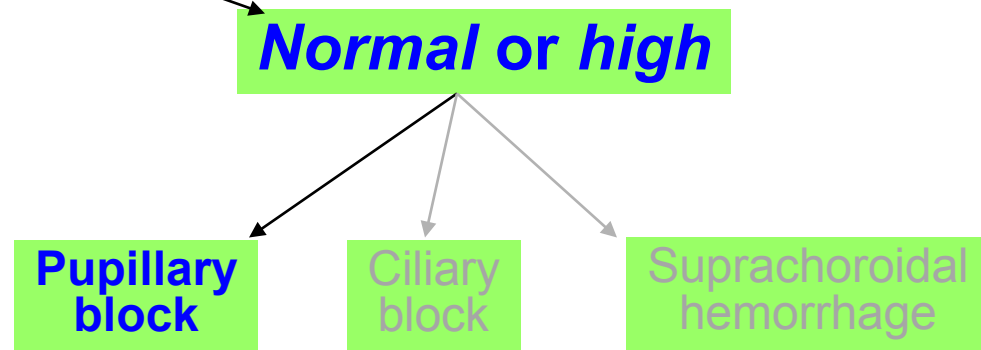
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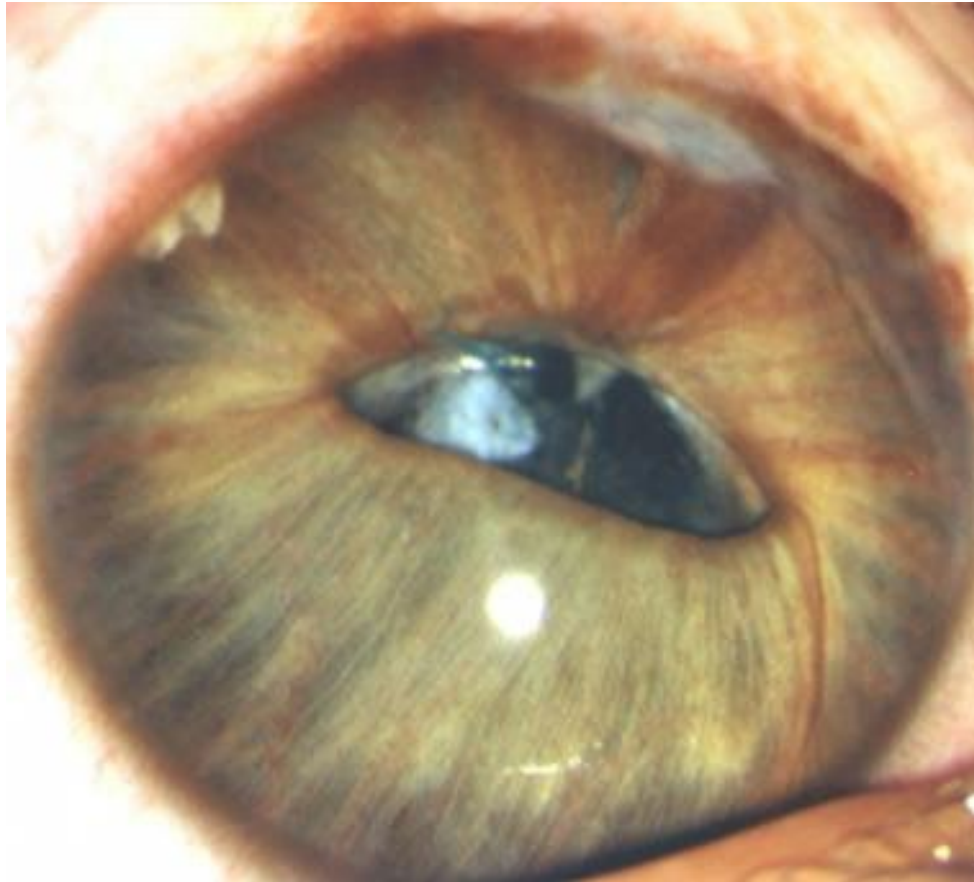
The pediatric population. As a general rule, the younger the pt, the more likely they are to develop pseudophakic pupillary block.

AC after CE
(post-op period)

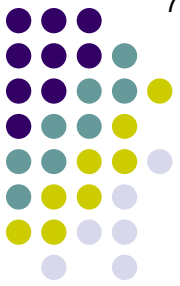
IOP?



Shallow Anterior Chamber After Cataract Surgery



The patient is 6 years old. Closure of peripheral iridectomy, lens decentration, partial pupil capture, and adhesions between the optic and the iris have produced pupillary block. One of the loops has started cheese-wiring the iris. Iris bombé is all around. Iris incision line adhesions are visible.



Shallow Anterior Chamber After Cataract Surgery

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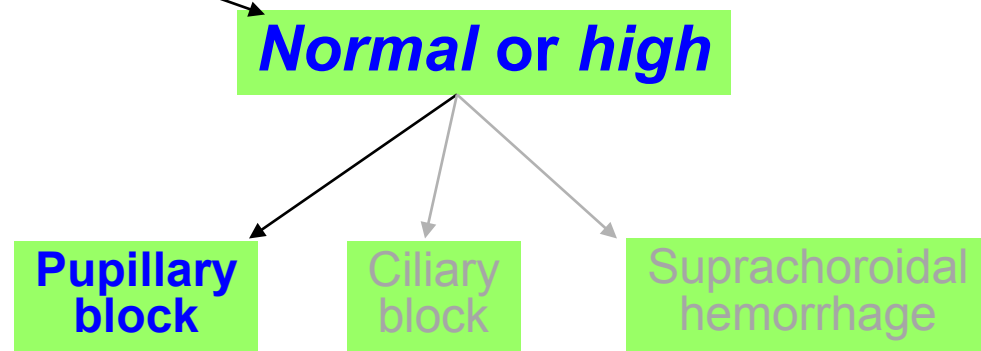
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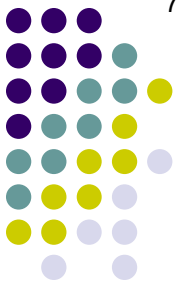
The pediatric population. As a general rule, the younger the pt, the more likely they are to develop pseudophakic pupillary block.

In adults, what class of IOL is most likely to produce pseudophakic pupillary block?

AC after CE
(post-op period)

IOP?





Shallow Anterior Chamber After Cataract Surgery

What is the mechanism underlying pupillary block?

Apposition between the pupil margin and the IOL prevents the normal flow of aqueous from the posterior chamber to the AC. This results in a pressure gradient across the iris, causing it to bow forward. In doing so, the peripheral iris interferes with the egress of aqueous through the TM. The net result is a normal-to-high IOP and shallowed AC.

Which pt population is particularly prone to pseudophakic pupillary block?

The pediatric population. As a general rule, the younger the pt, the more likely they are to develop pseudophakic pupillary block.

In adults, what class of IOL is most likely to produce pseudophakic pupillary block?

AC IOLs, especially if the surgeon fails to perform an iridectomy at the time of IOL implantation

AC after CE
(post-op period)

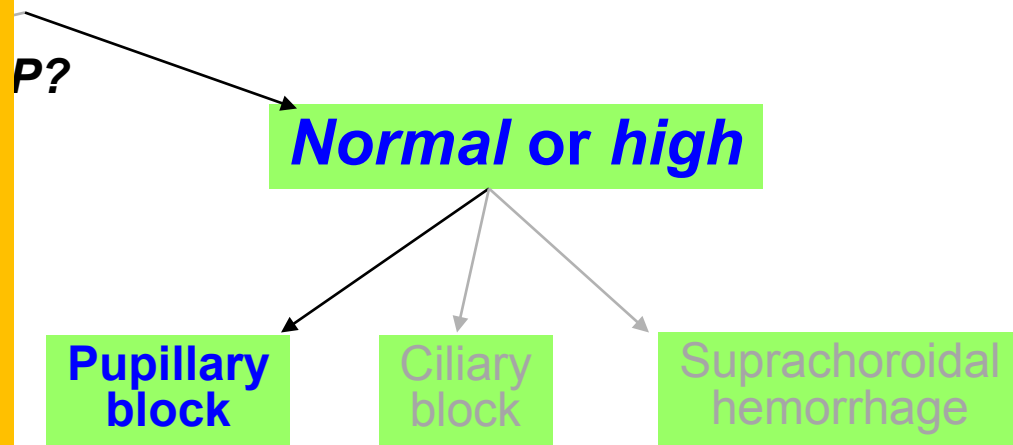
P?

Normal or high

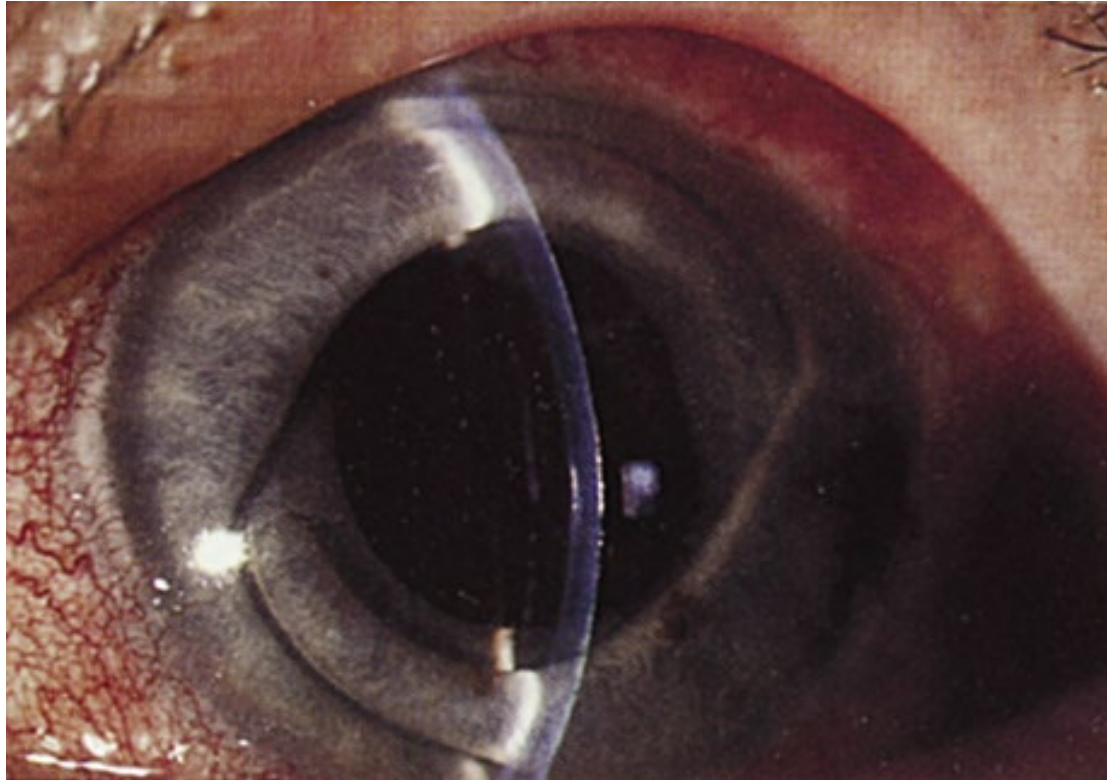
**Pupillary
block**

Ciliary
block

Suprachoroidal
hemorrhage

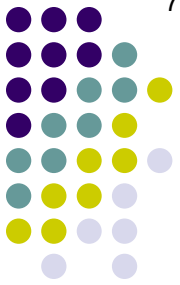


Shallow Anterior Chamber After Cataract Surgery



That feeling when an AC IOL is implanted, but the surgeon forgets to create a PI

Shallow Anterior Chamber After Cataract Surgery



What is ciliary block glaucoma?

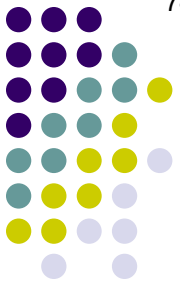
E

Normal or high

**Ciliary
block**

Suprachoroidal
hemorrhage

Shallow Anterior Chamber After Cataract Surgery



What is ciliary block glaucoma?

A rare condition in which anterior rotation of the ciliary body causes newly-produced aqueous to be directed posteriorly, toward and perhaps into or behind the vitreous body

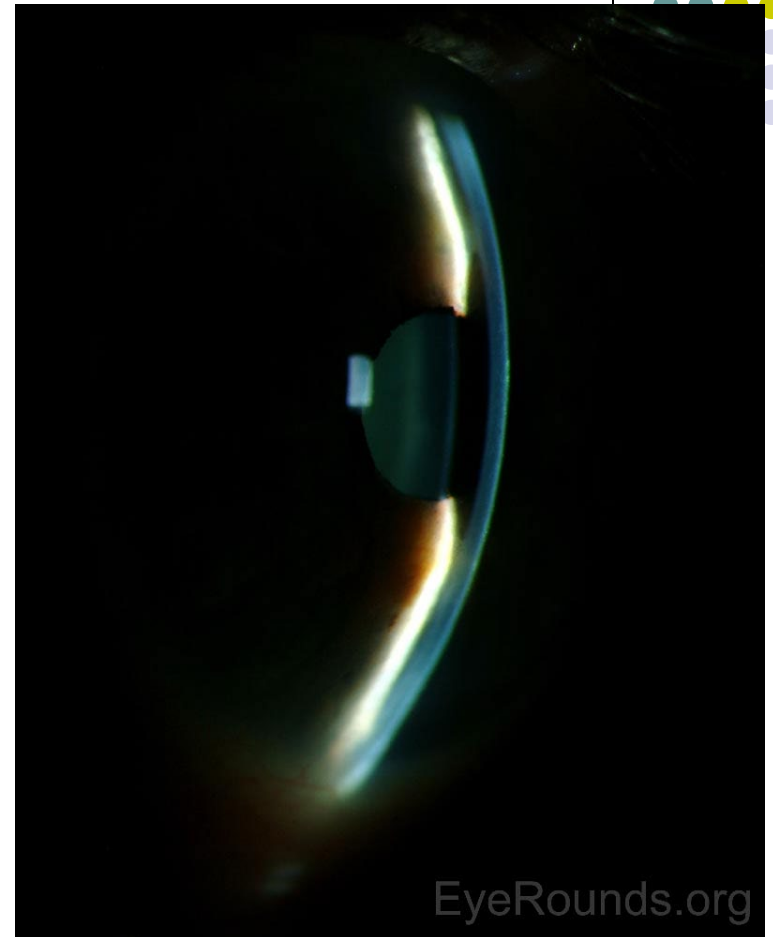
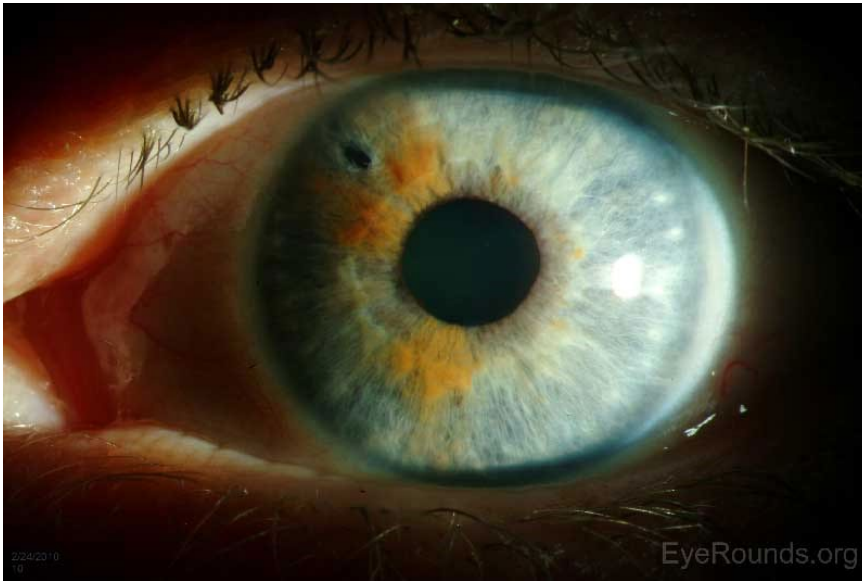
E

Normal or high

**Ciliary
block**

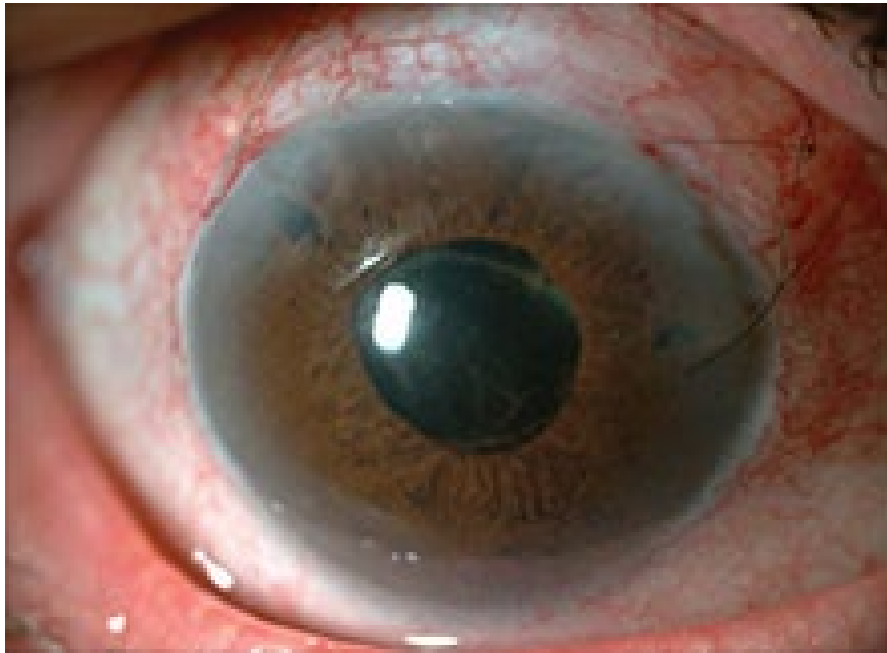
Suprachoroidal
hemorrhage

Shallow Anterior Chamber After Cataract Surgery



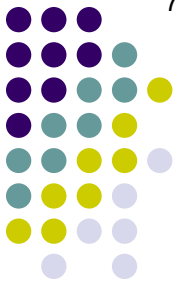
Ciliary block glaucoma. Lateral illumination produces shadowing nasally, revealing the extent of AC shallowing. Note the presence of an LPI, ineffective because pupillary block is not present.

Shallow Anterior Chamber After Cataract Surgery



Ciliary block glaucoma. AS-OCT reveals the extent of AC shallowing. Note again the presence of an ineffective LPI.

Shallow Anterior Chamber After Cataract Surgery



What is ciliary block glaucoma?

A rare condition in which anterior rotation of the ciliary body causes newly-produced aqueous to be directed posteriorly, toward and perhaps into or behind the vitreous body

Is it common, or rare?

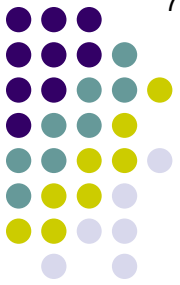
E

Normal or high

**Ciliary
block**

Suprachoroidal
hemorrhage

Shallow Anterior Chamber After Cataract Surgery



What is ciliary block glaucoma?

A rare condition in which anterior rotation of the ciliary body causes newly-produced aqueous to be directed posteriorly, toward and perhaps into or behind the vitreous body

Is it common, or rare?

Rare

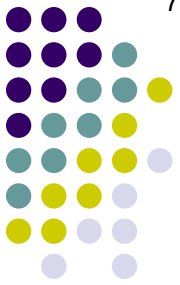
E

Normal or high

**Ciliary
block**

Suprachoroidal
hemorrhage

Shallow Anterior Chamber After Cataract Surgery



What is ciliary block glaucoma?

A rare condition in which anterior rotation of the ciliary body causes newly-produced aqueous to be directed posteriorly, toward and perhaps into or behind the vitreous body

Is it common, or rare?

Rare

What is the chief risk factor?

E

Normal or high

**Ciliary
block**

Suprachoroidal
hemorrhage

Shallow Anterior Chamber After Cataract Surgery



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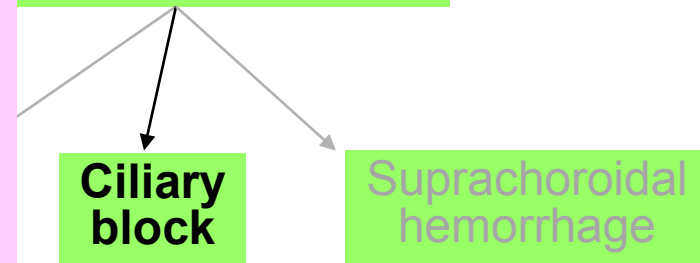
Rare

What is the chief risk factor?

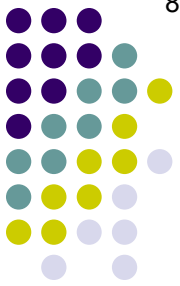
Intraocular surgery in an eye with tight angles

E

Normal or high



Shallow Anterior Chamber After Cataract Surgery



What is ciliary block glaucoma?

A rare condition in which anterior rotation of the ciliary body causes newly-produced aqueous to be directed posteriorly, toward and perhaps into or behind the vitreous body

Is it common, or rare?

Rare

What is the chief risk factor?

Intraocular surgery in an eye with tight angles

How is ciliary block glaucoma managed medically?

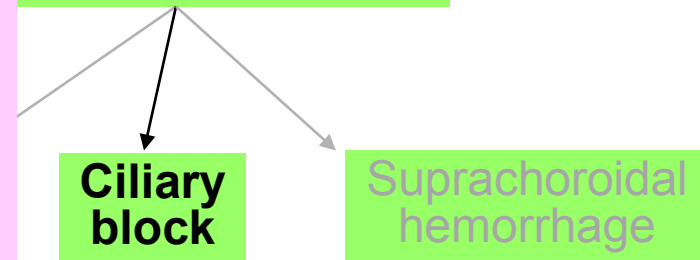
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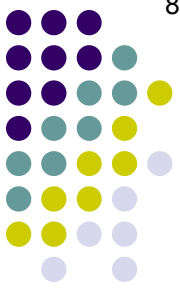
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E

Normal or high



Shallow Anterior Chamber After Cataract Surgery



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Is it common, or rare?

Rare

What is the chief risk factor?

Intraocular surgery in an eye with tight angles

How is ciliary block glaucoma managed medically?

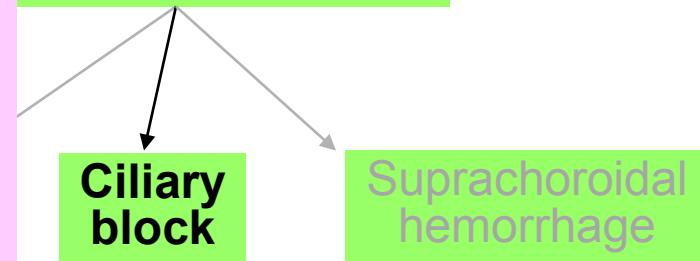
--Aqueous suppressants

--Aggressive cycloplegia (atropine 1% and phenylephrine 10% qid)

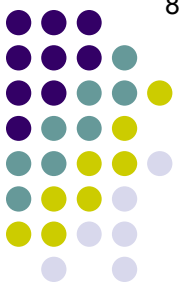
--Dehydration of the vitreous with hyperosmotic agents

E

Normal or high



Shallow Anterior Chamber After Cataract Surgery



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A rare condition in which anterior rotation of the ciliary body causes newly-produced aqueous to be directed posteriorly, toward and perhaps into or behind the vitreous body

Is it common, or rare?

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What is the chief risk factor?

Intraocular surgery in an eye with tight angles

How is ciliary block glaucoma managed medically?

--Aqueous suppressants

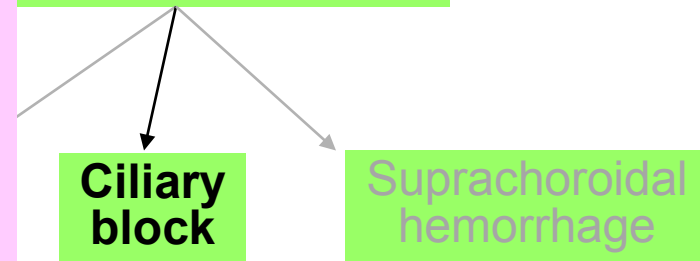
--Aggressive cycloplegia (atropine 1% and phenylephrine 10% qid)

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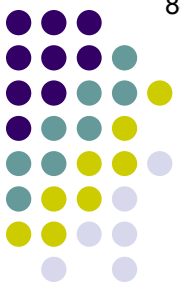
What about surgical management--is it usually necessary?

E

Normal or high



Shallow Anterior Chamber After Cataract Surgery



What is ciliary block glaucoma?

A rare condition in which anterior rotation of the ciliary body causes newly-produced aqueous to be directed posteriorly, toward and perhaps into or behind the vitreous body

Is it common, or rare?

Rare

What is the chief risk factor?

Intraocular surgery in an eye with tight angles

How is ciliary block glaucoma managed medically?

--Aqueous suppressants

--Aggressive cycloplegia (atropine 1% and phenylephrine 10% qid)

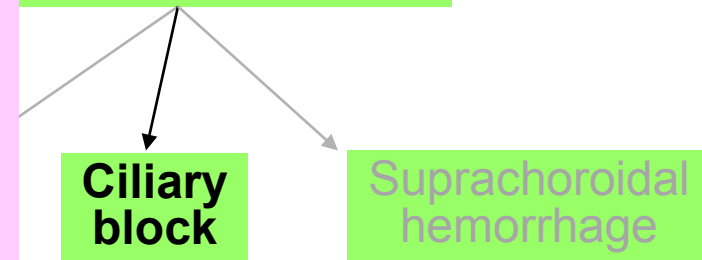
--Dehydration of the vitreous with hyperosmotic agents

What about surgical management--is it usually necessary?

Yes; surgical or laser disruption of the vitreous face is often required for resolution

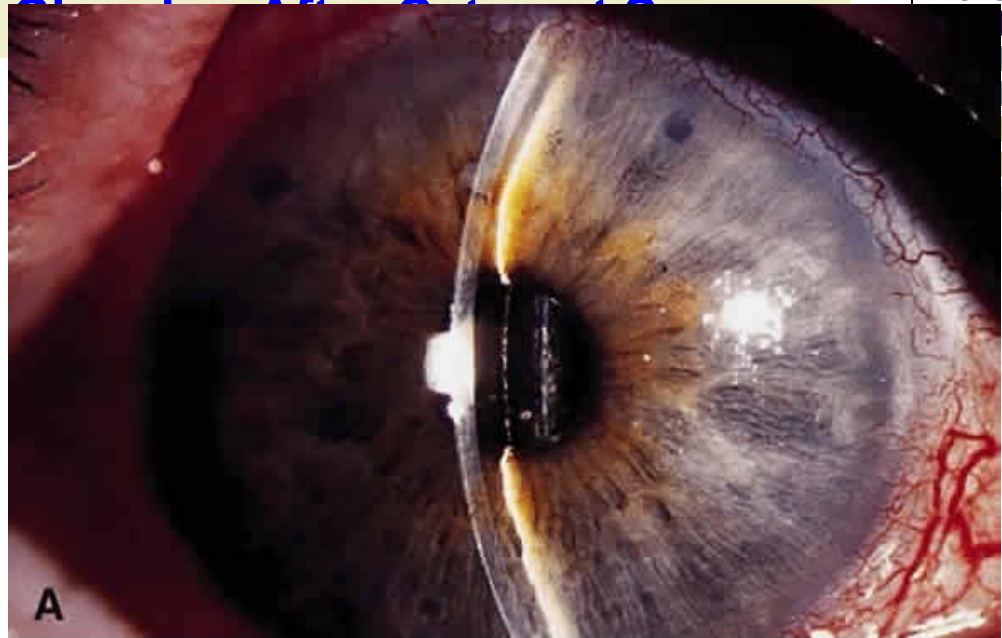
E

Normal or high



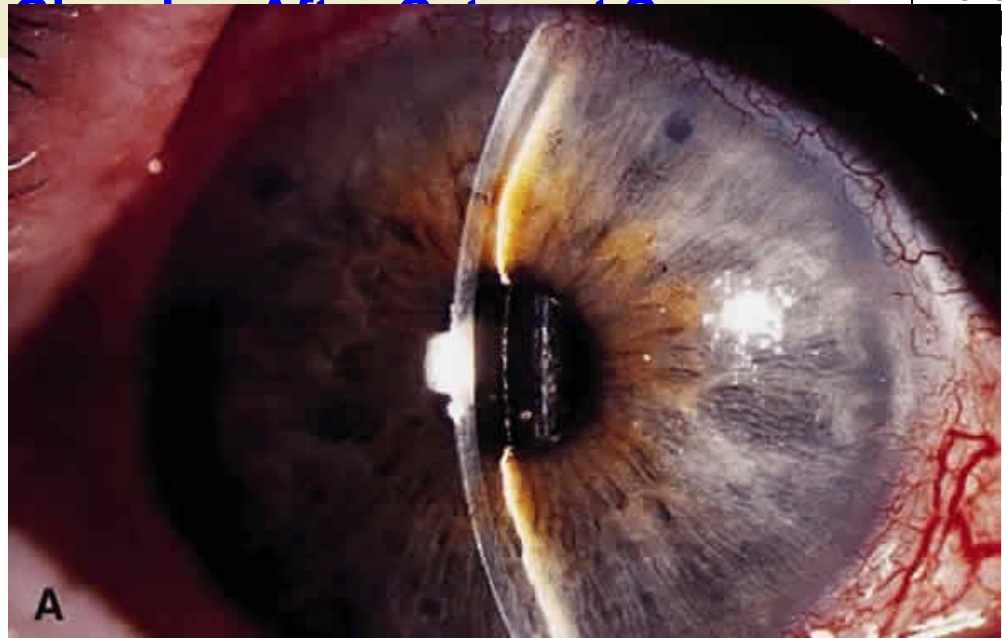
Shallow Anterior Chamber After Cataract

Aqueous misdirection. The anterior chamber is shallow. Two patent peripheral iridotomies are barely seen at the 10- and 1-o'clock positions. Intraocular pressure was 42 mmHg.

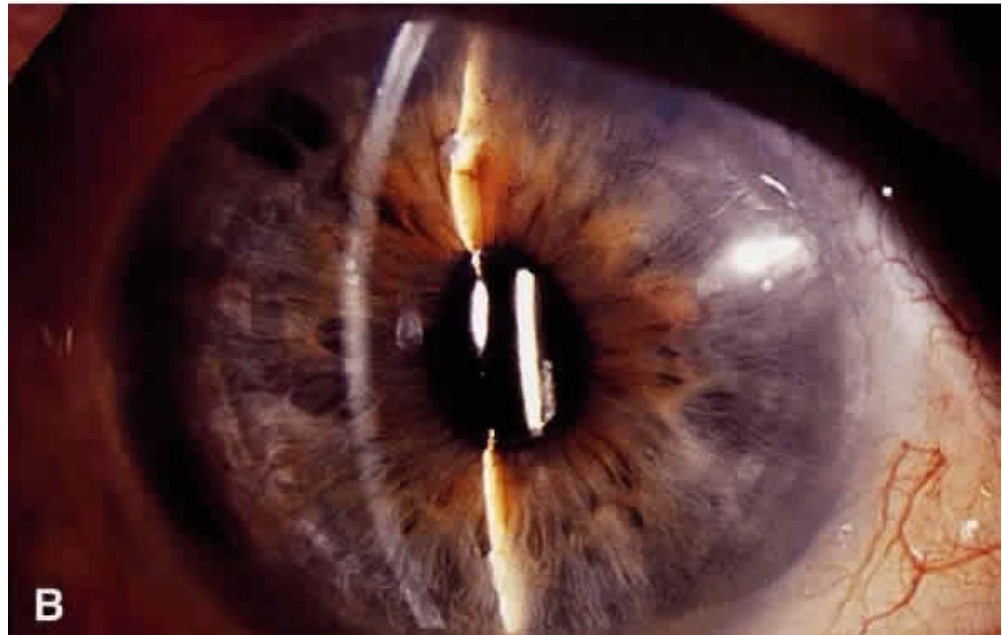


Shallow Anterior Chamber After Glaucoma Surgery

Aqueous misdirection. The anterior chamber is shallow. Two patent peripheral iridotomies are barely seen at the 10- and 1-o'clock positions. Intraocular pressure was 42 mmHg.



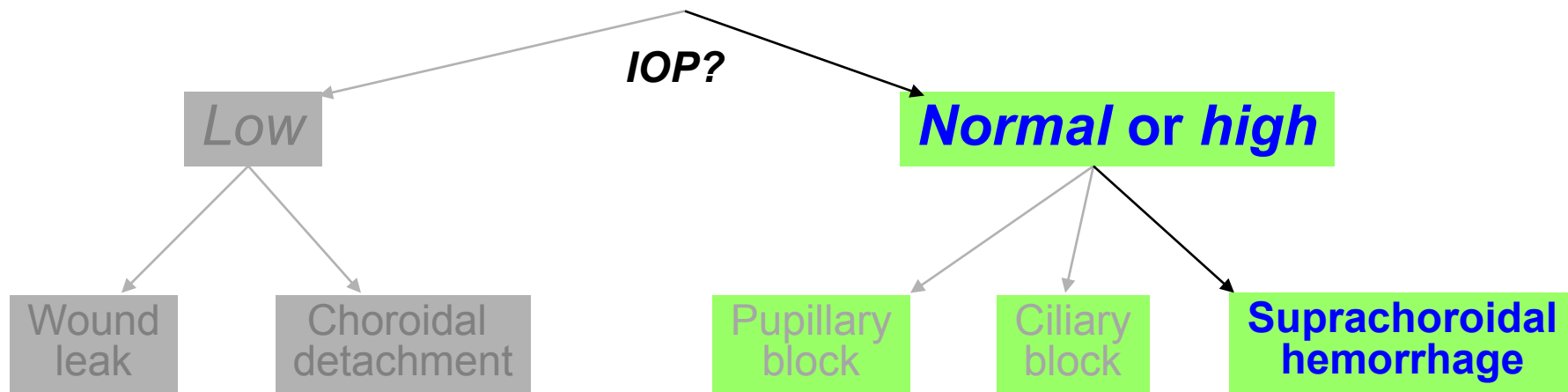
Same eye 4 weeks after pars plana tube insertion of aqueous shunt with vitrectomy. The anterior chamber is deep. The temporal iridectomy is enlarged. Intraocular pressure was 12 mmHg.



Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE
(early post-op period)

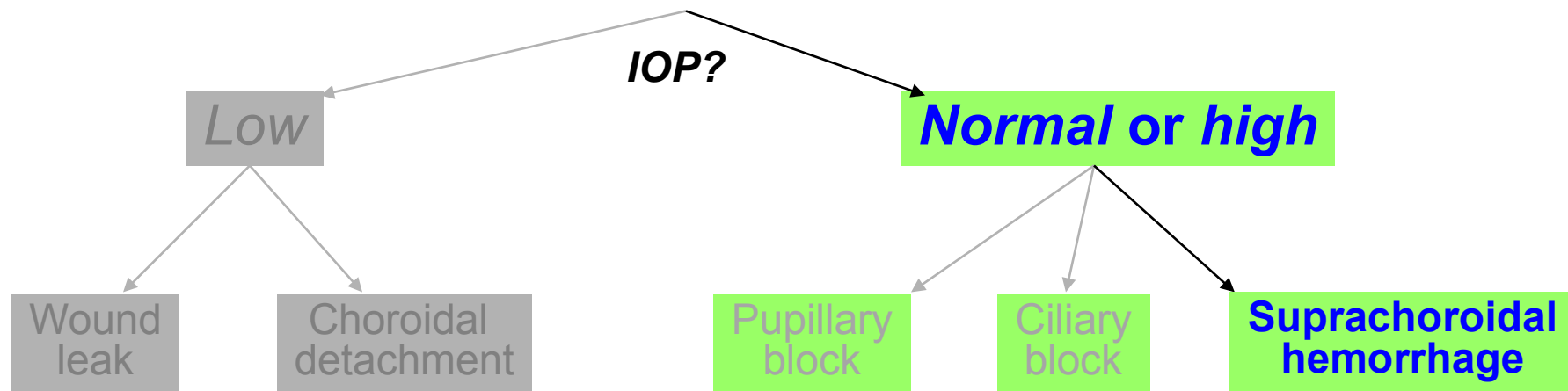


What is the classic presentation of a post-op suprachoroidal hemorrhage, ie, what will the pt complain of?

Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE
(early post-op period)



What is the classic presentation of a post-op suprachoroidal hemorrhage, ie, what will the pt complain of?

The pt will complain of the sudden onset of

two words

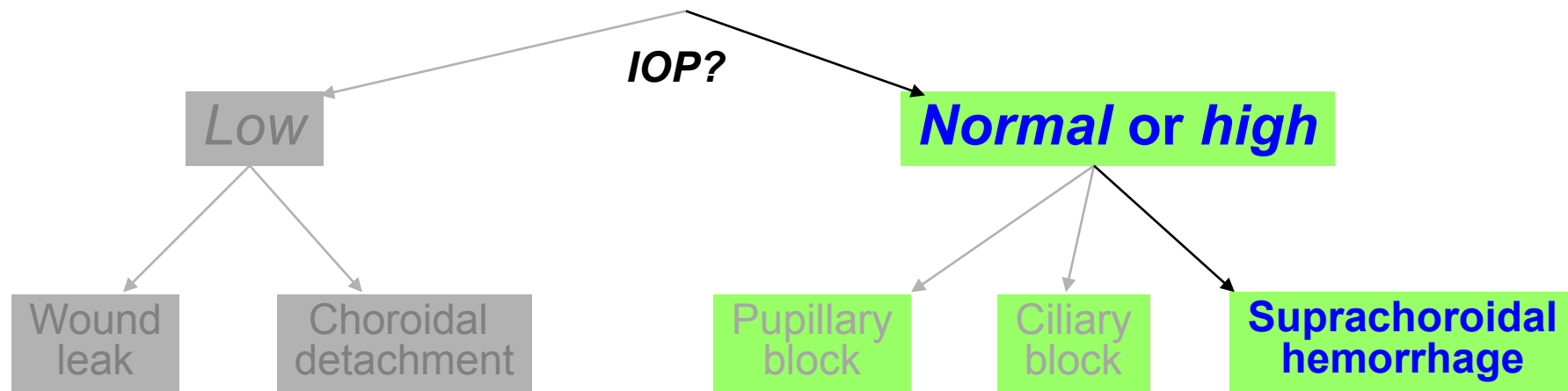
and

two diff words

Shallow Anterior Chamber After Cataract Surgery



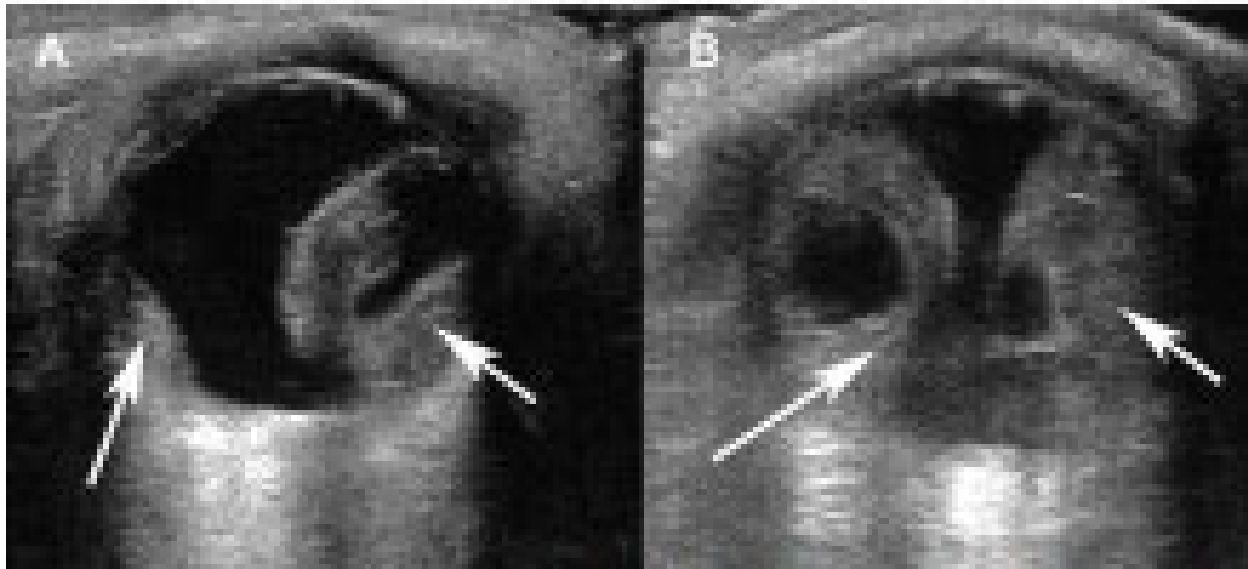
Shallow/flat AC after CE
(early post-op period)



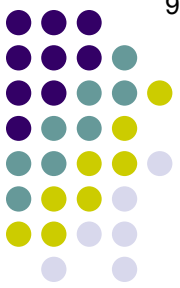
What is the classic presentation of a post-op suprachoroidal hemorrhage, ie, what will the pt complain of?

The pt will complain of the sudden onset of **vision loss** and **excruciating pain**

Shallow Anterior Chamber After Cataract Surgery

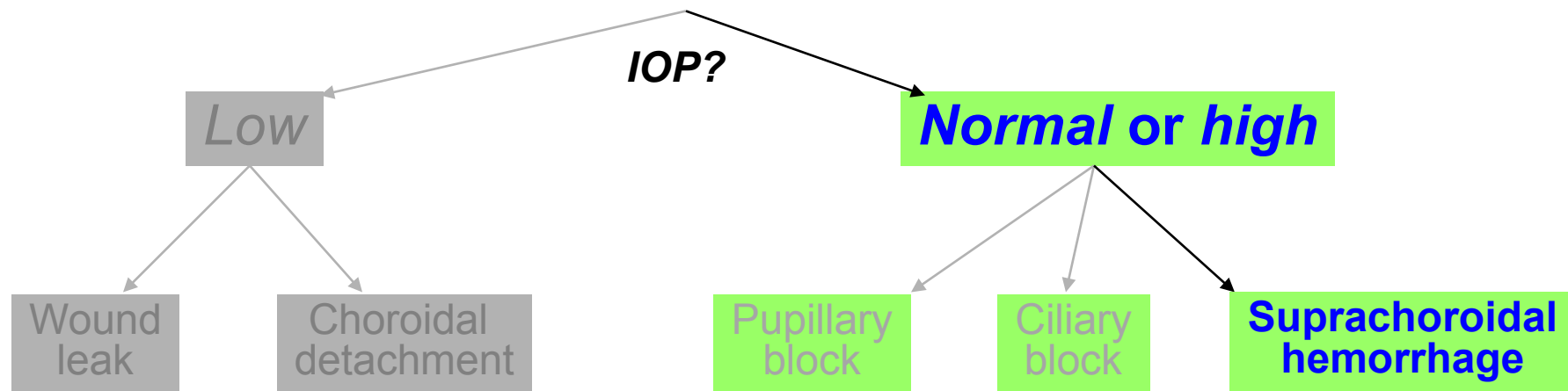


Suprachoroidal hemorrhage



Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



What is the classic presentation of a post-op suprachoroidal hemorrhage, ie, what will the pt complain of?

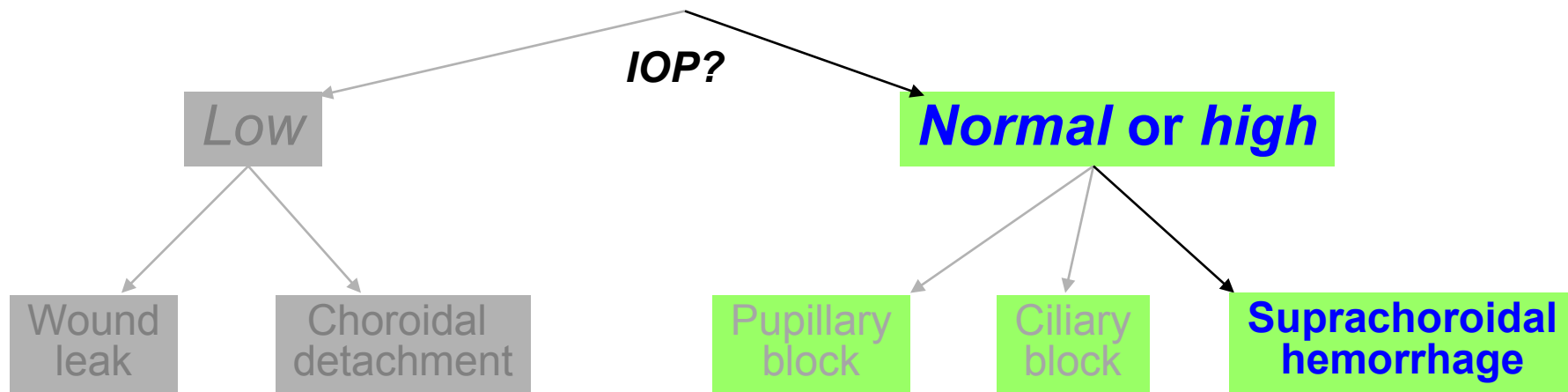
The pt will complain of the sudden onset of **vision loss** and **excruciating pain**

Is the vision loss usually mild, or severe?



Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)

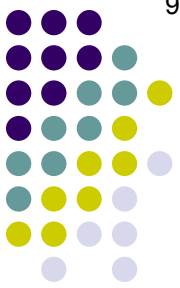


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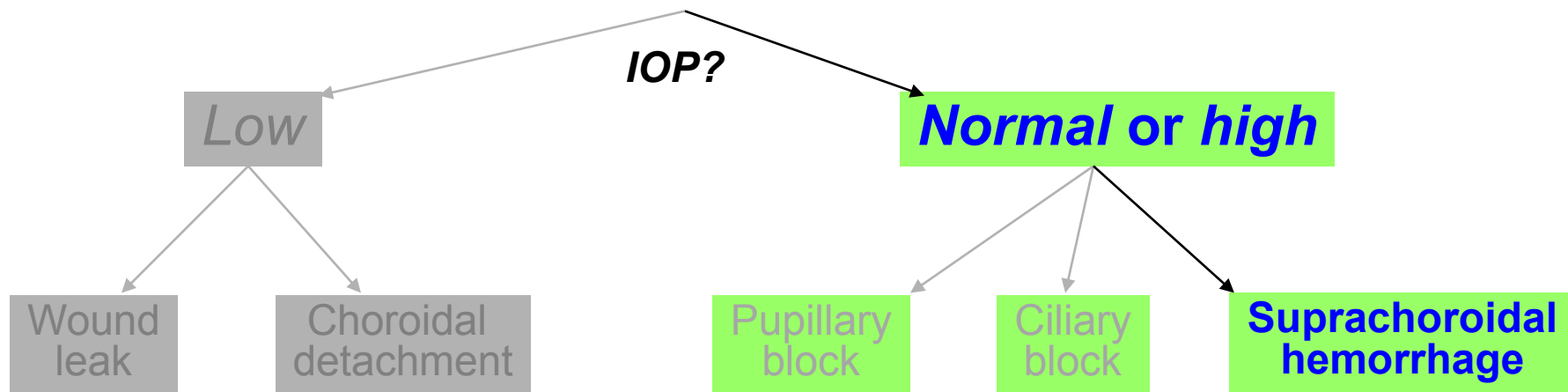
The pt will complain of the sudden onset of **vision loss** and **excruciating pain**

Is the vision loss usually mild, or severe?
Severe

Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE
(early post-op period)



What is the classic presentation of a post-op suprachoroidal hemorrhage, ie, what will the pt complain of?

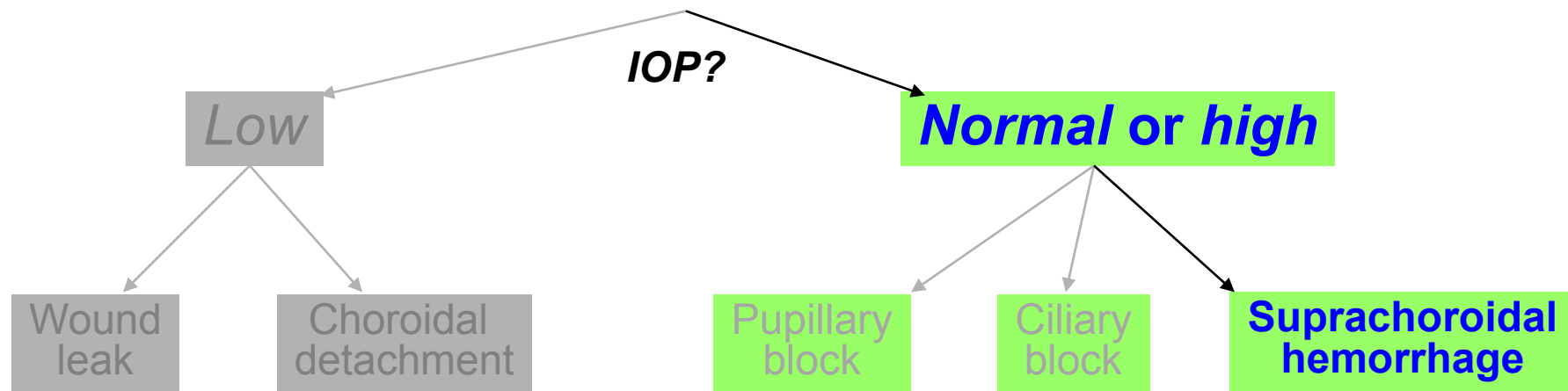
The pt will complain of the sudden onset of **vision loss** and **excruciating pain**

What word classically characterizes the nature of the pain?

Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE
(early post-op period)



What is the classic presentation of a post-op suprachoroidal hemorrhage, ie, what will the pt complain of?

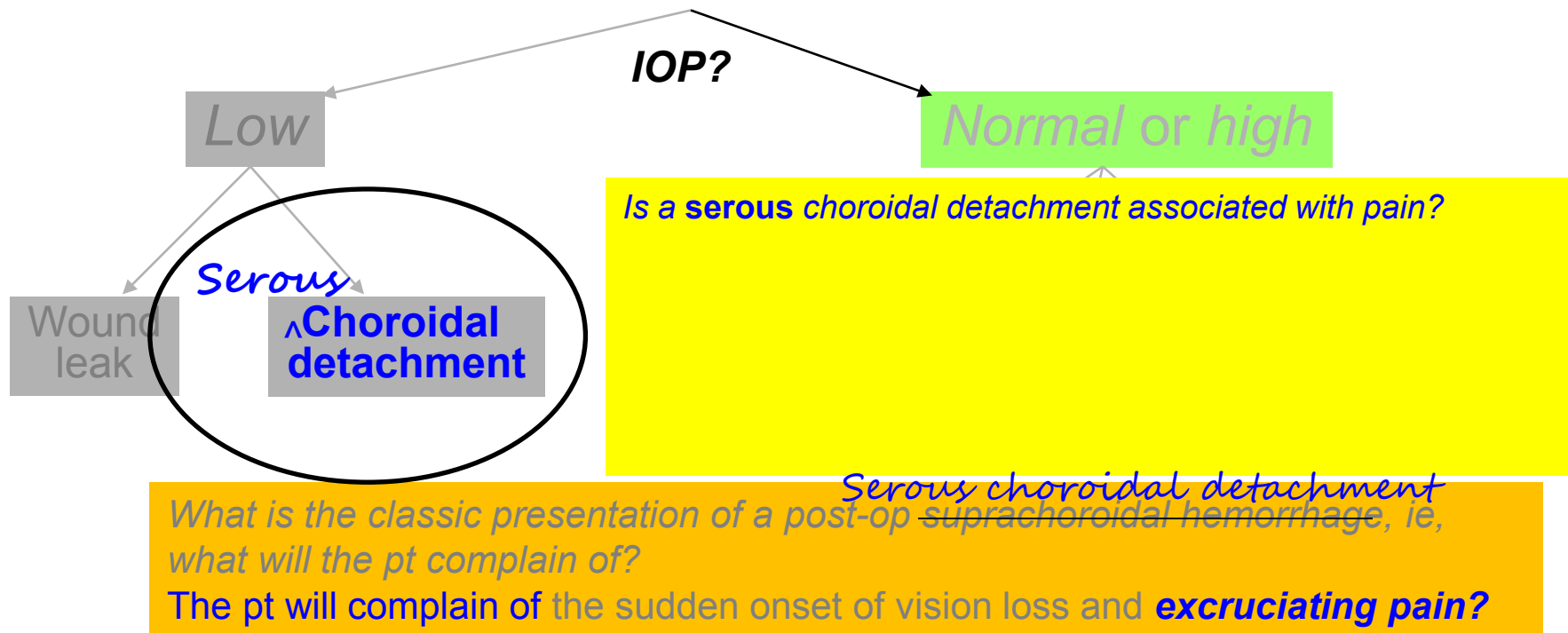
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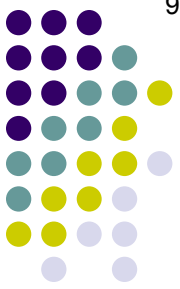
What word classically characterizes the nature of the pain?
'Throbbing'



Shallow Anterior Chamber After Cataract Surgery

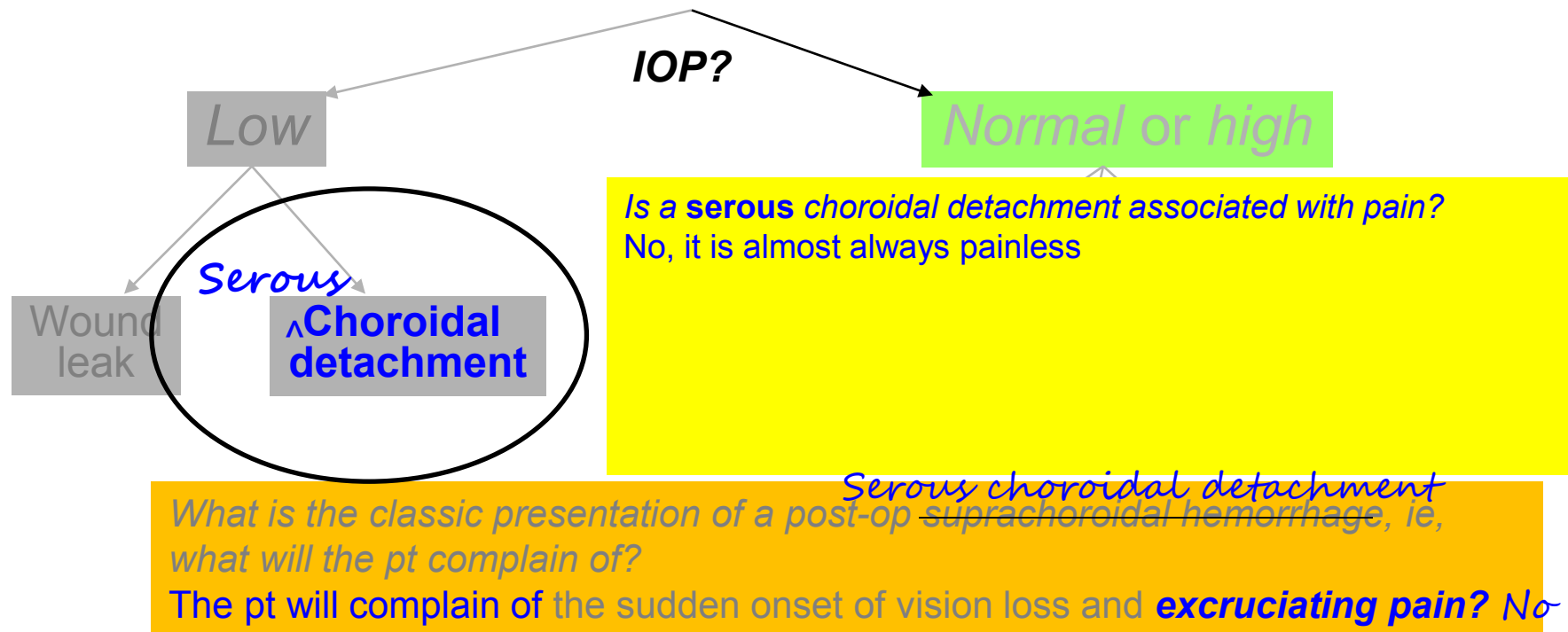
Shallow/flat AC after CE
(early post-op period)





Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)





Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)

IOP?

Low

Normal or high

Serous

Choroidal
detachment

Wound
leak

Is a **serous** choroidal detachment associated with pain?
No, it is almost always painless

Is it associated with severe vision loss?

Serous choroidal detachment

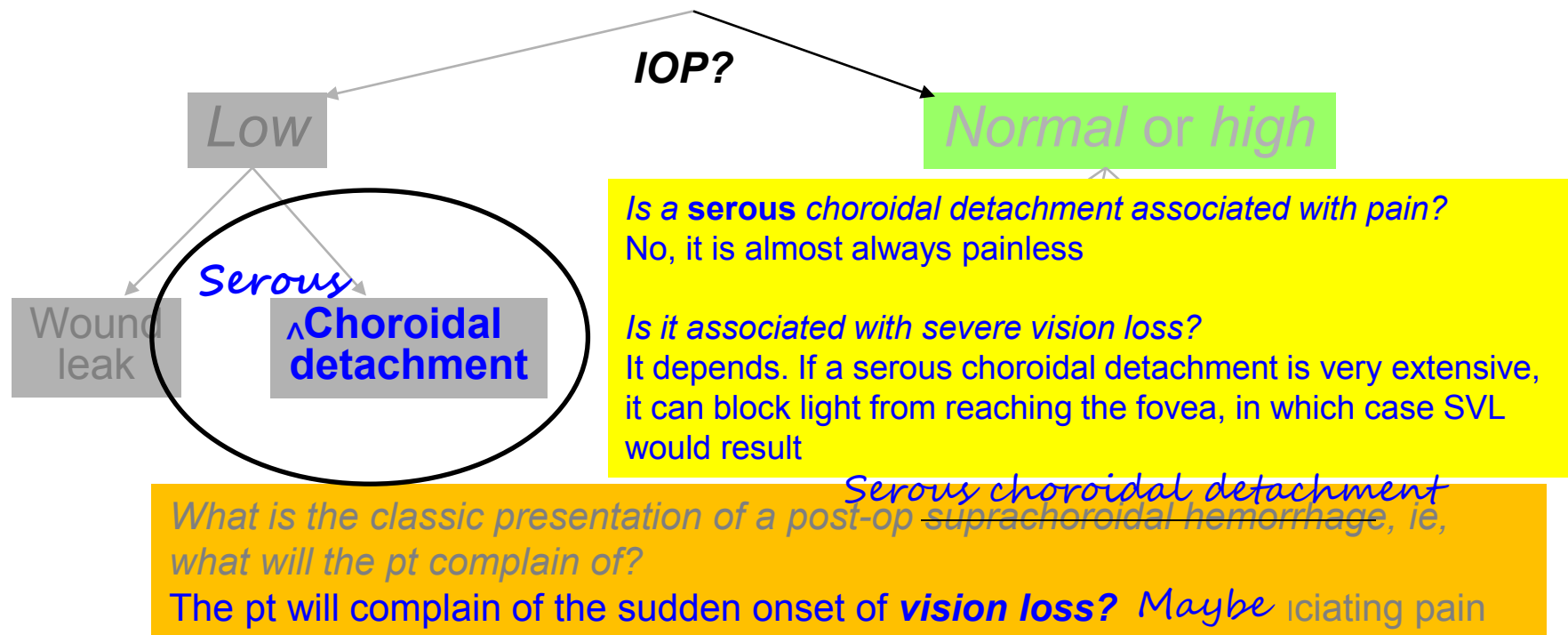
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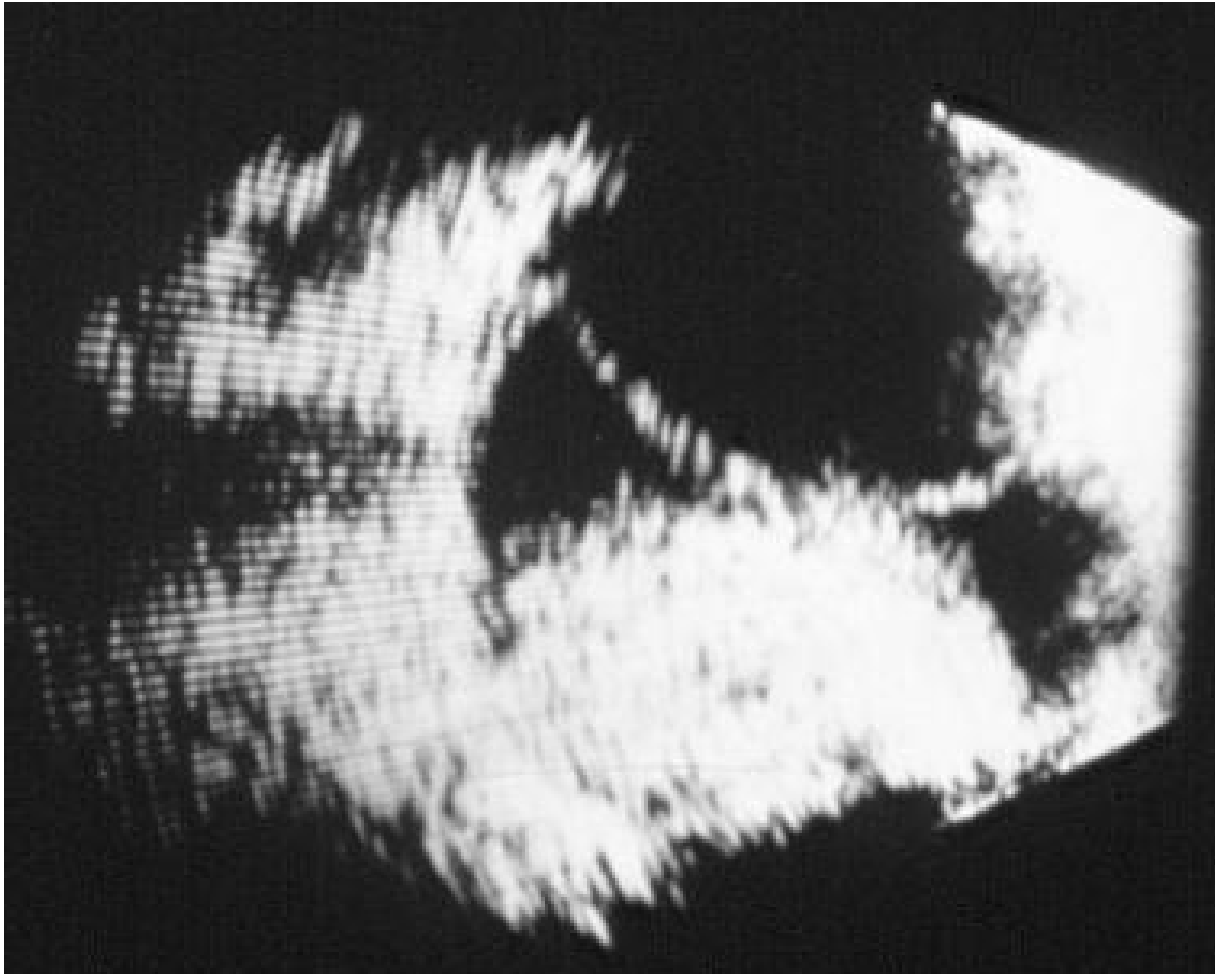


Shallow Anterior Chamber After Cataract Surgery

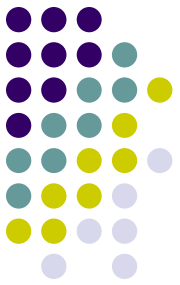
Shallow/flat AC after CE
(early post-op period)



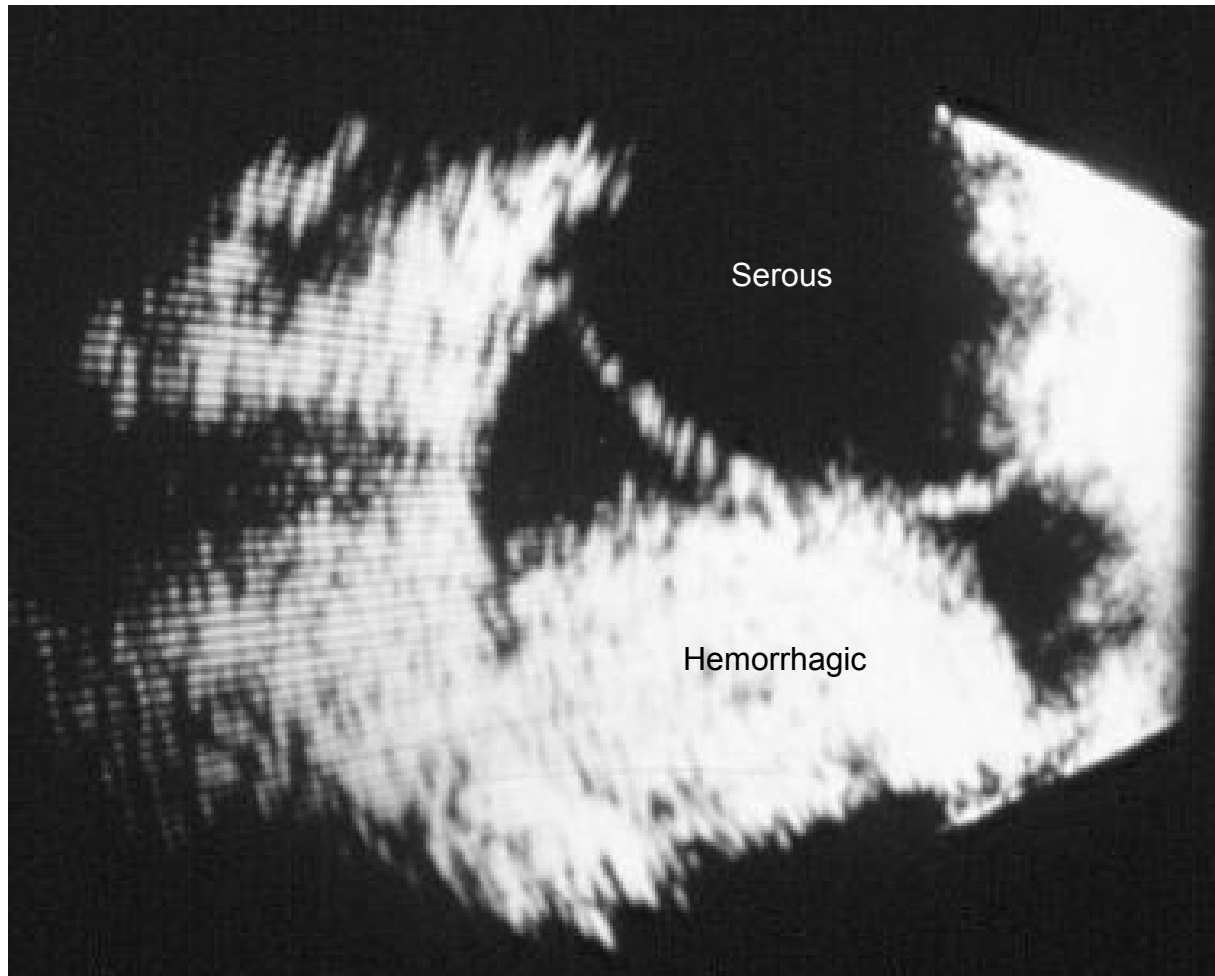
Shallow Anterior Chamber After Cataract Surgery



Is this suprachoroidal effusion serous, or hemorrhagic?



Shallow Anterior Chamber After Cataract Surgery

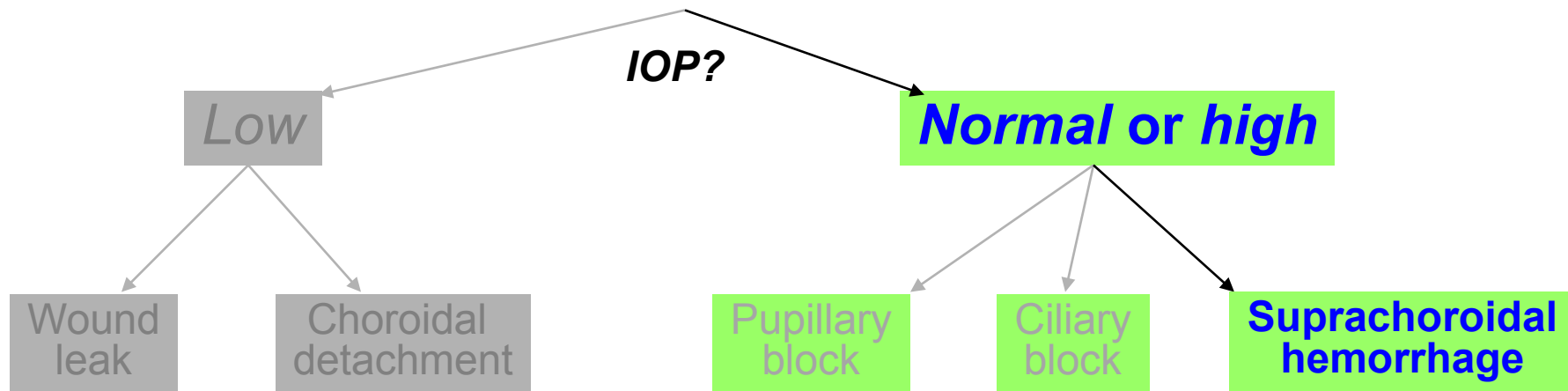


*Is this suprachoroidal effusion serous, or hemorrhagic? It's **both***

Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE
(early post-op period)



What factors put an eye at risk for post-op suprachoroidal hemorrhage?

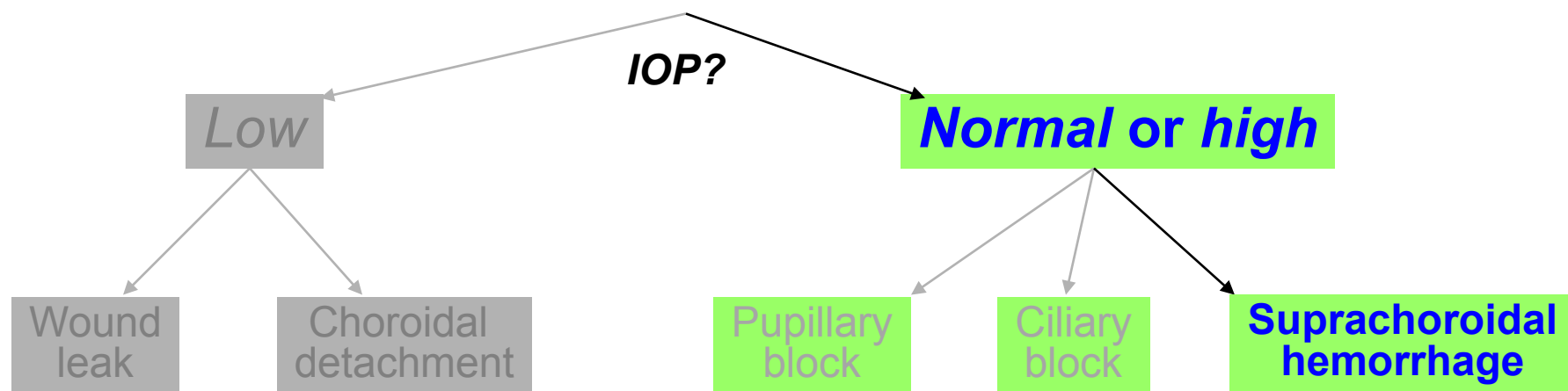
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--(there are a number of others)



Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



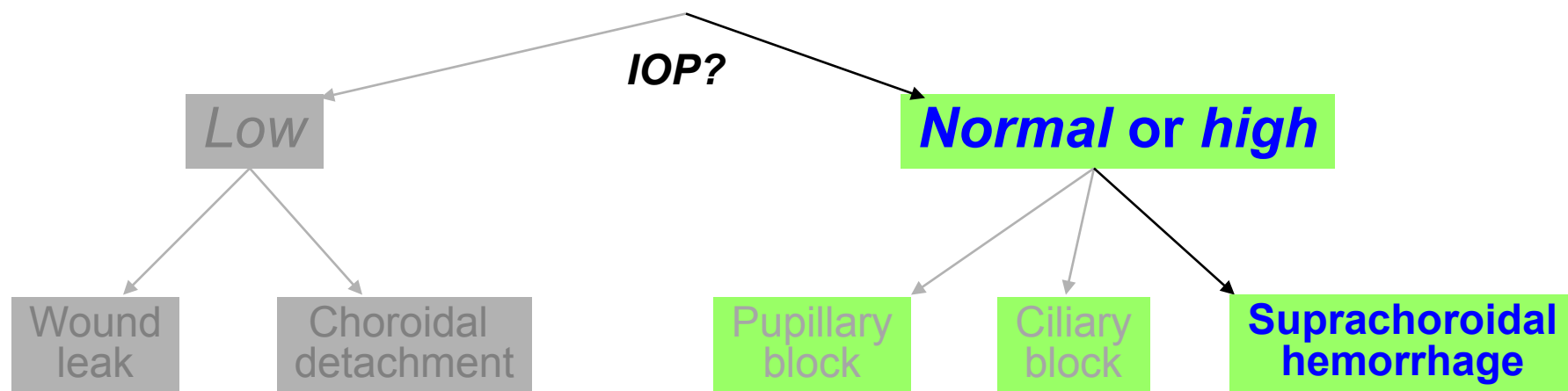
What factors put an eye at risk for post-op suprachoroidal hemorrhage?

- High myopia
- Nanophthalmia
- Sturge-Weber syndrome
- Hypertension
- Glaucoma
- (there are a number of others)



Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



What factors put an eye at risk for post-op suprachoroidal hemorrhage?

--High myopia

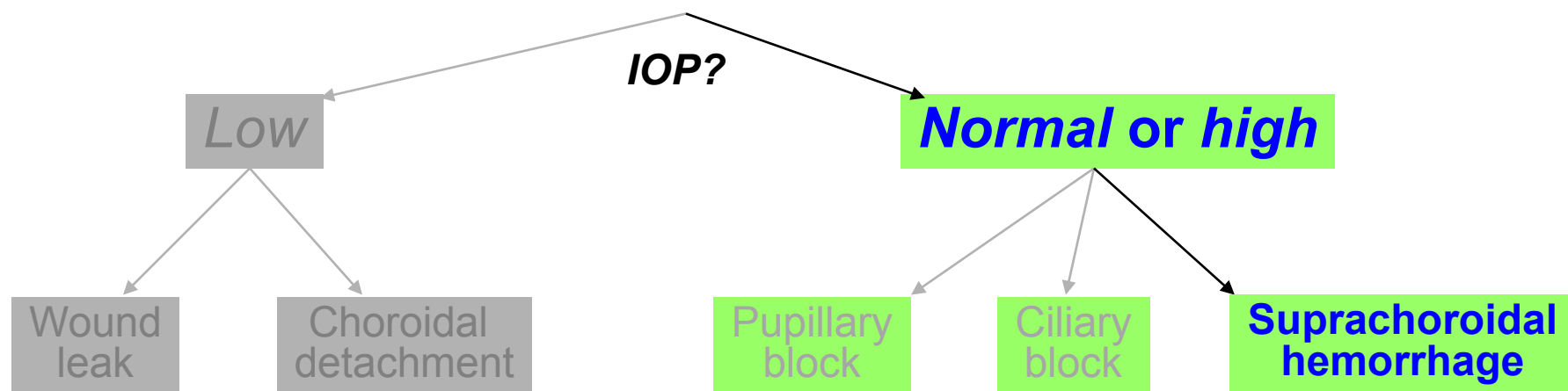
Do the others include being in anticoagulated state?

--(there are a number of others)



Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)



What factors put an eye at risk for post-op suprachoroidal hemorrhage?

--High myopia

Do the others include being in anticoagulated state?

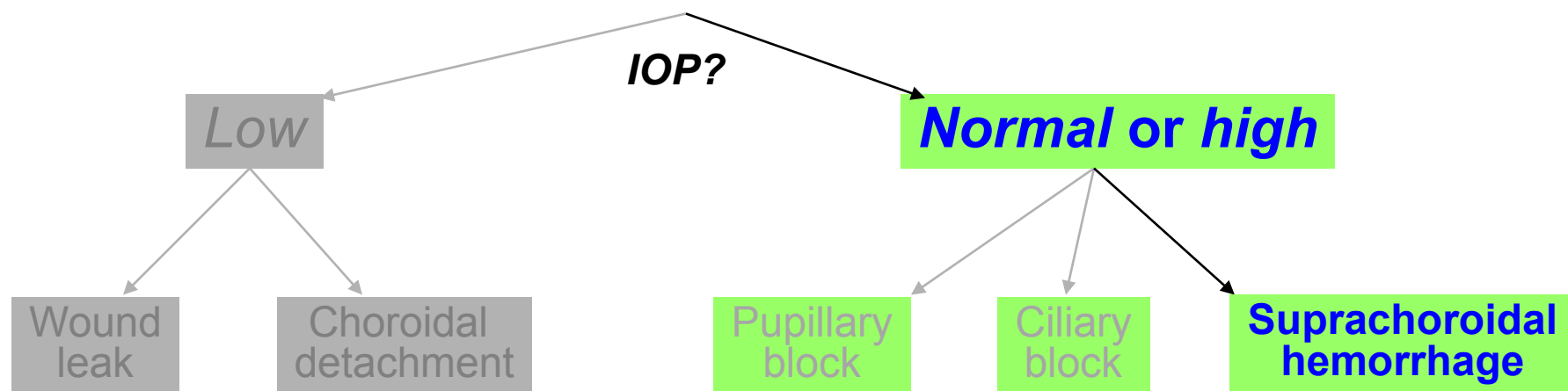
Surprisingly, no. Long thought to be a risk factor for intra- and post-op hemorrhage, a large clinical trial found no evidence for this.

--(there are a number of others)



Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
(early post-op period)

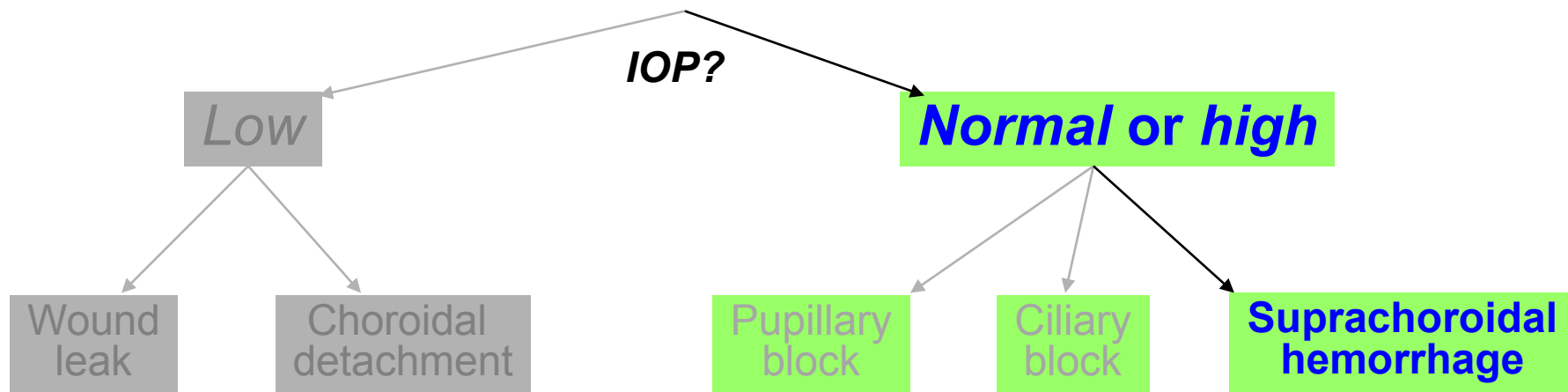


What is the classic precipitating event for a post-op suprachoroidal hemorrhage?

Shallow Anterior Chamber After Cataract Surgery

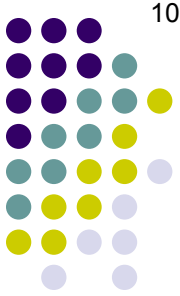


Shallow/flat AC after CE
(early post-op period)

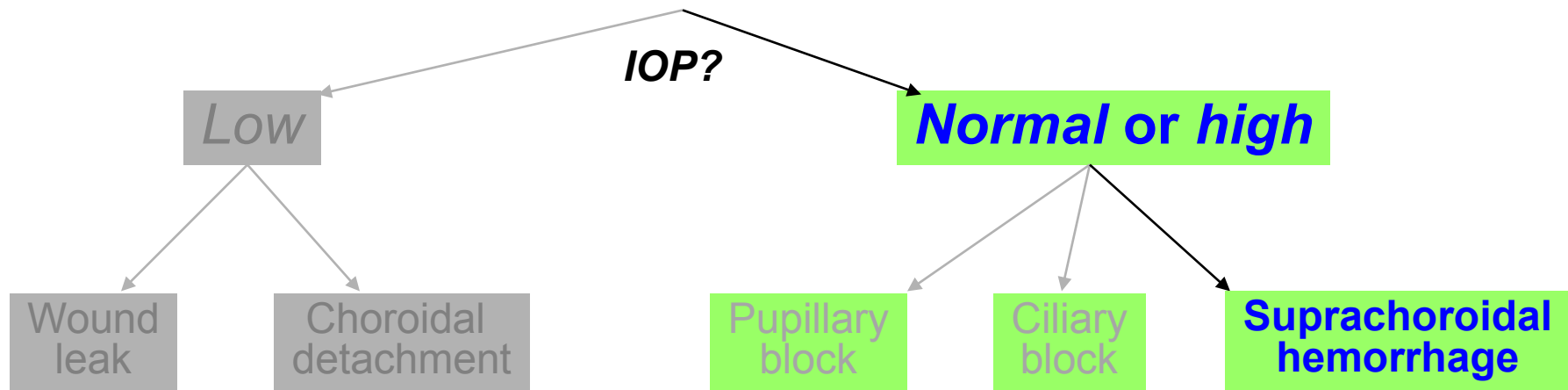


What is the classic precipitating event for a post-op suprachoroidal hemorrhage?
A Valsalva maneuver on the part of the pt (eg, sneezing; coughing; straining at stool)

Shallow Anterior Chamber After Cataract Surgery



Shallow/flat AC after CE
(early post-op period)

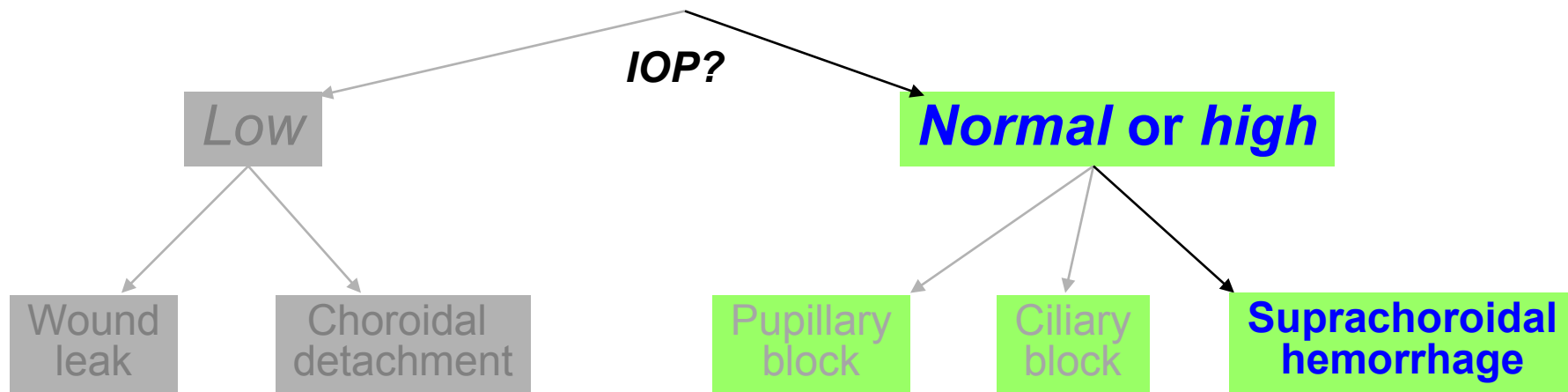


How is a suprachoroidal hemorrhage managed?

Shallow Anterior Chamber After Cataract Surgery



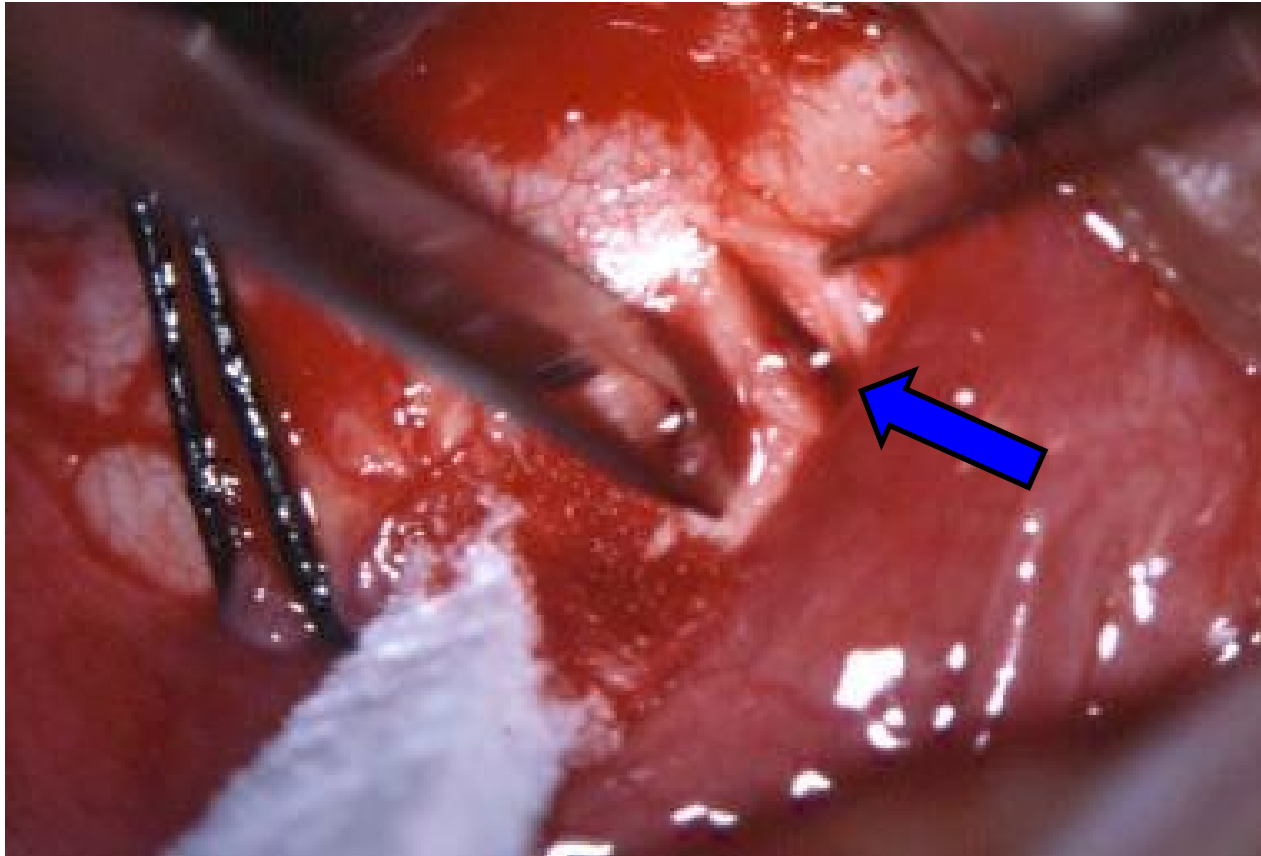
Shallow/flat AC after CE
(early post-op period)



How is a suprachoroidal hemorrhage managed?

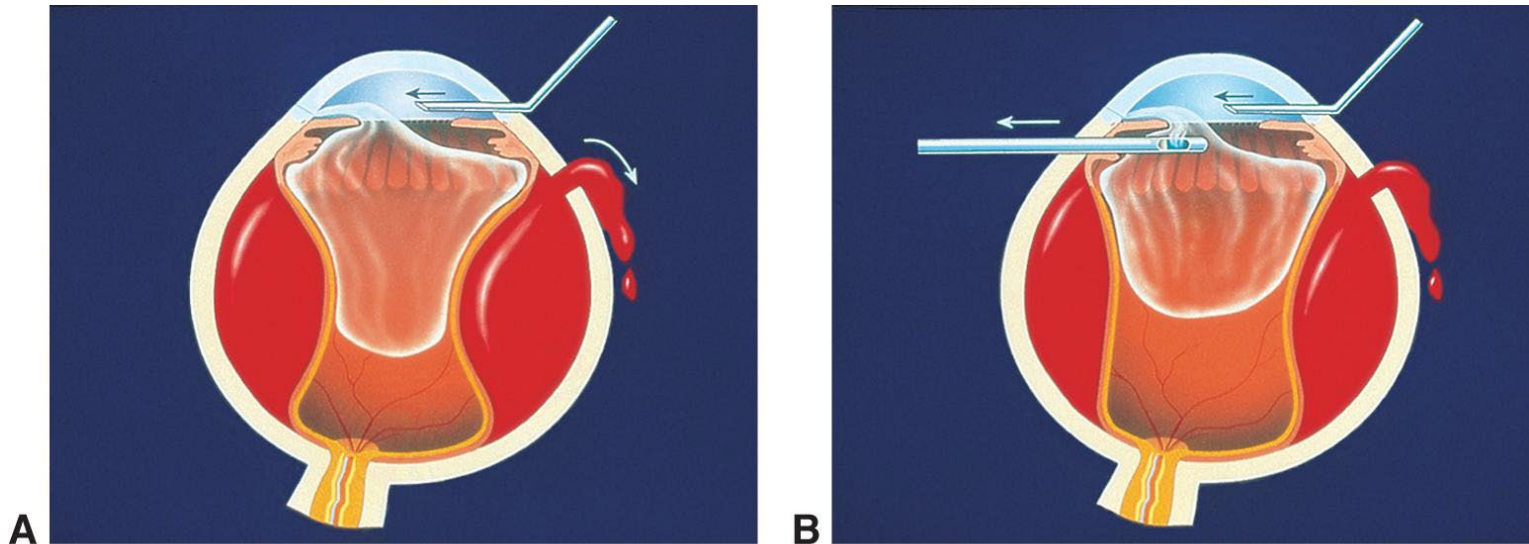
If not too severe (ie, the AC is not flat; the IOP not too high; the pt not in too much pain; no kissing choroidal present), medical management with aggressive cycloplegia and aqueous suppressants can be attempted. Otherwise, sclerotomy surgery is indicated.

Shallow Anterior Chamber After Cataract Surgery



Suprachoroidal hemorrhage: Drainage via sclerotomy

Shallow Anterior Chamber After Cataract Surgery



Suprachoroidal hemorrhage. A, Schematic shows anterior infusion and simultaneous drainage of suprachoroidal hemorrhage through pars plana sclerotomy. B, Schematic shows pars plana vitrectomy to remove vitreous prolapse as drainage of suprachoroidal hemorrhage continues

Shallow Anterior Chamber ^{During} ~~After~~ Cataract Surgery

Shallow/flat AC ^{during} ~~after~~ CE



*With regard to an **intraoperative** shallowing of the AC, one of these entities is closely related to the most dreaded intraoperative complication of all. What is that most dreaded of complications?*

Wound
leak

Choroidal
detachment

Pupillary
block

Ciliary
block

Suprachoroidal
hemorrhage

Shallow Anterior Chamber ^{During} ~~After~~ Cataract Surgery

Shallow/flat AC ^{during} ~~after~~ CE



*With regard to an **intraoperative** shallowing of the AC, one of these entities is closely related to the most dreaded intraoperative complication of all. What is that most dreaded of complications? The **expulsive choroidal hemorrhage***

Wound
leak

Choroidal
detachment

Pupillary
block

Ciliary
block

Expulsive
**Suprachoroidal
hemorrhage**

Shallow Anterior Chamber ^{During} ~~After~~ Cataract Surgery



- Expulsive choroidal hemorrhage is the most feared intraoperative complication of CE surgery. What is the classic first sign?

Shallow Anterior Chamber ^{During} ~~After~~ Cataract Surgery



- Expulsive choroidal hemorrhage is the most feared intraoperative complication of CE surgery. What is the classic first sign?
Darkening of the red reflex

Shallow Anterior Chamber ^{During} ~~After~~ Cataract Surgery



Still from a video depicting an expulsive choroidal hemorrhage

Shallow Anterior Chamber ^{During} ~~After~~ Cataract Surgery



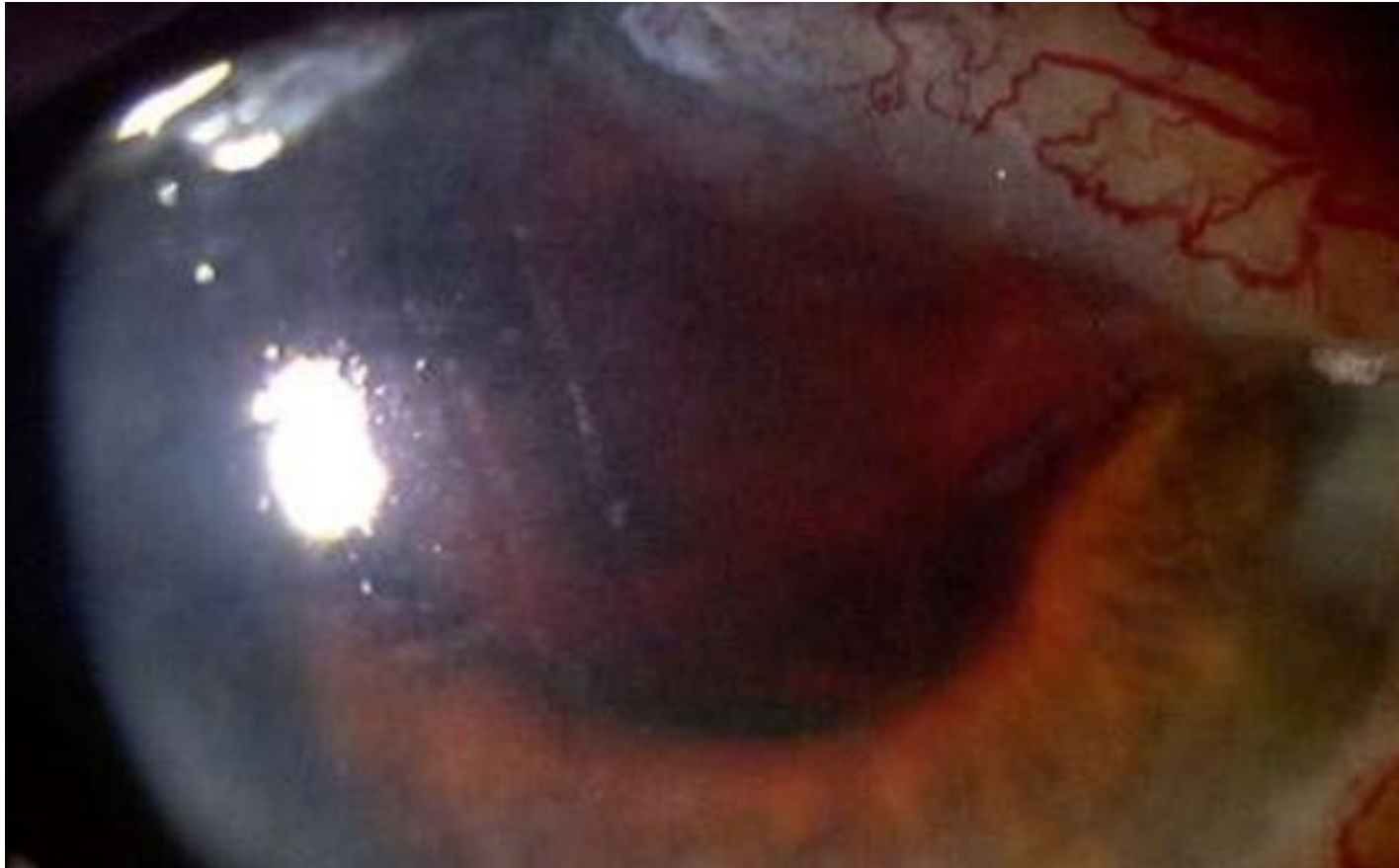
- Expulsive choroidal hemorrhage is the most feared intraoperative complication of CE surgery. What is the classic first sign?
Darkening of the red reflex
- What is the classic 'late' sign?

Shallow Anterior Chamber ^{During}~~After~~ Cataract Surgery

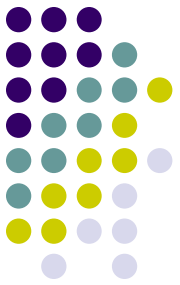


- Expulsive choroidal hemorrhage is the most feared intraoperative complication of CE surgery. What is the classic first sign?
Darkening of the red reflex
- What is the classic 'late' sign? Expulsion of the intraocular contents through the wound

Shallow Anterior Chamber ^{During} ~~After~~ Cataract Surgery



Expulsive suprachoroidal hemorrhage



Shallow Anterior Chamber ^{During}~~After~~ Cataract Surgery



- Expulsive choroidal hemorrhage is the most feared intraoperative complication of CE surgery. What is the classic first sign?
Darkening of the red reflex
- What is the classic 'late' sign? **Expulsion of the intraocular contents through the wound**
- How should it be managed intraoperatively?
 - 1)
 - 2)
 - 3)

Shallow Anterior Chamber ^{During}~~After~~ Cataract Surgery



- Expulsive choroidal hemorrhage is the most feared intraoperative complication of CE surgery. What is the classic first sign?
Darkening of the red reflex
- What is the classic 'late' sign? Expulsion of the intraocular contents through the wound
- How should it be managed intraoperatively?
 - 1) Put your finger on the wound to seal it
 - 2) Suture the wound closed
 - 3) Consider posterior sclerotomies to drain blood

Shallow Anterior Chamber ^{During}~~After~~ Cataract Surgery



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- Post-op, how should IOP be managed?

Shallow Anterior Chamber ^{During}~~After~~ Cataract Surgery



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 - 1) Put your finger on the wound to seal it
 - 2) Suture the wound closed
 - 3) Consider posterior sclerotomies to drain blood
- Post-op, how should IOP be managed?
Leave it elevated (will tamponade the bleed)



Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
Late (~~early~~) post-op period)

*What is the differential for a shallow AC in the **late** post-op period?*

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oidal
age



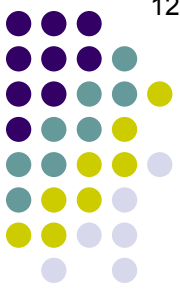
Shallow Anterior Chamber After Cataract Surgery

Shallow/flat AC after CE
Late (~~early~~) post-op period)

*What is the differential for a shallow AC in the **late** post-op period?*

- RD
- Bleb formation
- Chronic uveitis
- Cyclodialysis
- Delayed choroidal hemorrhage

oidal
age



Shallow Anterior Chamber After Cataract Surgery

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Late (~~early~~) post-op period)

What is the differential for a shallow AC in the late post-op period?

--RD

--**Bleb formation**

--Chronic uveitis

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What sort of incision makes inadvertent bleb formation more likely?

oidal
age



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--**Bleb formation**

--Chronic uveitis

--Cyclodialysis

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What sort of incision makes inadvertent bleb formation more likely?
A limbal incision

oidal
age



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oidal
age



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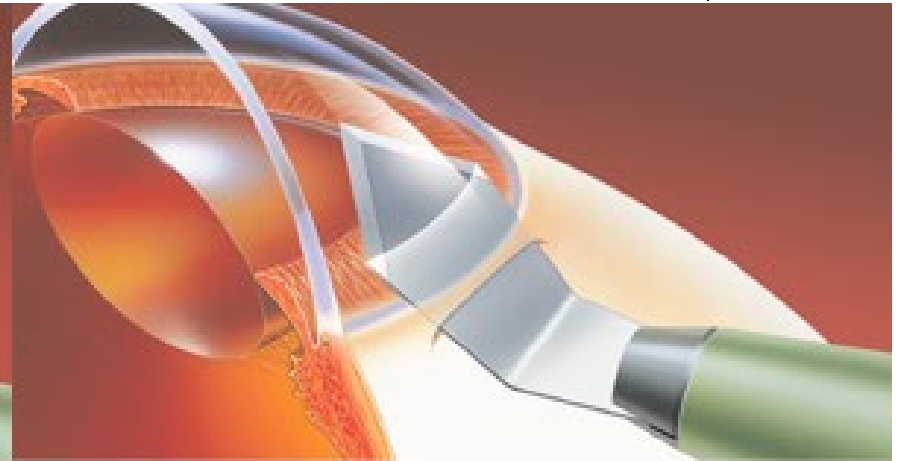
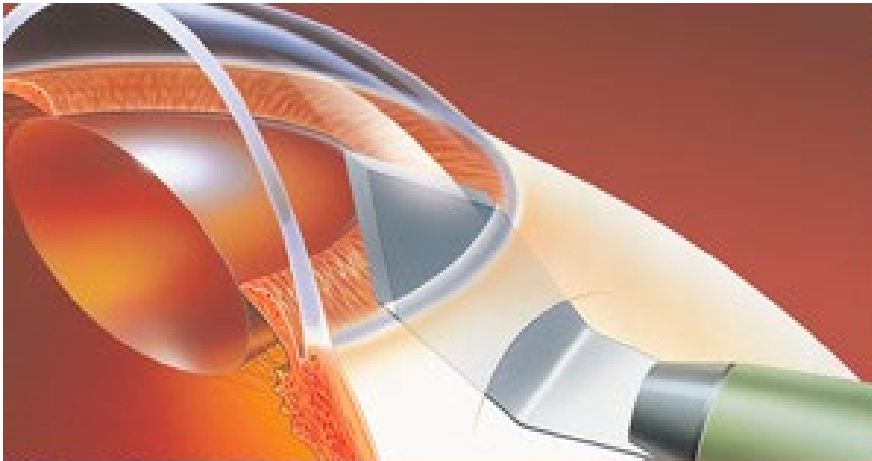
What sort of incision makes cyclodialysis more likely?
A scleral-tunnel incision

oidal
age

Shallow Anterior Chamber After Cataract Surgery



‘Scleral tunnel’



‘Limbal’



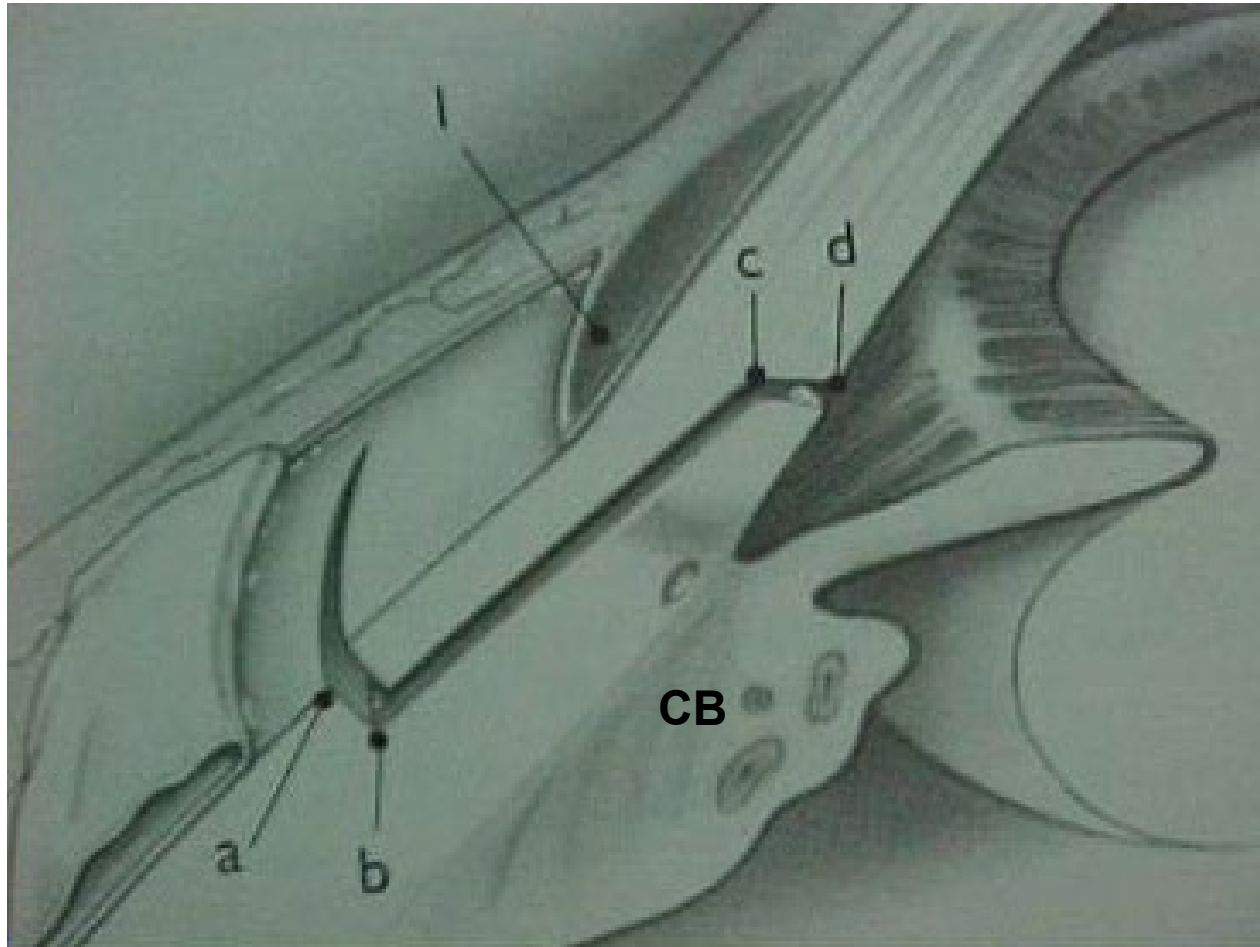
‘Clear cornea’

Shallow Anterior Chamber After Cataract Surgery

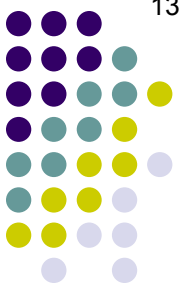


Bleb formation after limbal-incision CE

Shallow Anterior Chamber After Cataract Surgery



Scleral-tunnel CE incision. Note the proximity to the ciliary body (CB)



Shallow Anterior Chamber After Cataract Surgery

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What exam maneuver should be performed to check for cyclodialysis?



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What exam maneuver should be performed to check for cyclodialysis?
Gonioscopy