

WHICH IS PREFERABLE? TWO METHODS FOR PTERYGIUM SURGERY

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INTRODUCTION

Pterygium is defined as a degenerataive ocular surface disorder. It is characterised by fibrovascular growth of bulbar conjunctiva and subconjunctival tissue extending onto cornea. The development of pterygium is strongly associated with ultraviolet B exposure. Especially, those being exposed to ultraviolet B more than average at early ages carry a higher risk of pterygium development at later ages.

Fibrin glue is widely used due to many reasons like easy fixation of graft, short operation time and reduction in complications and postoperative discomforts.

Suturing is most common fixation technique for conjunctival autograft. But it has disadvantages like increased operating time, inflammation, buttonhole, necrosis, giant papillary conjonctivitis, scarring and granulom formation.

The purpose of the study is to compare sutured conjunctival autograft and fibrin glue methods, as they are most recommended ones for pterygium surgery with respect to surgery time, postoperative discomforts and recurrences.

MATERIALS AND METHODS

40 eyes were included in this prospective study. The patients were seperated into two groups. Sutured(8/0 Vicryl) conjunctival autograft method was performed to the 1. group. Tisseel fibrin glue (Tisseel Lyo) method was performed to the 2. group. 20 eyes were included in both groups.

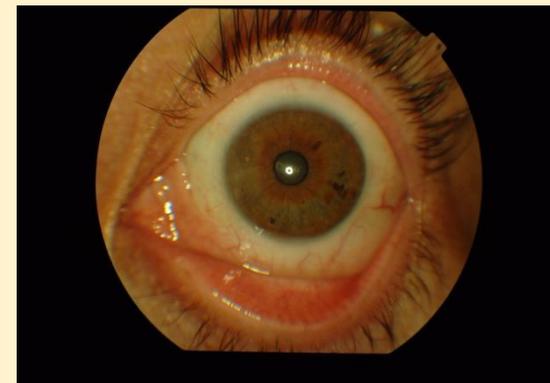


Figure 1: Sutured autograft was performed to right eye of same patient and there was recurrence. Autograft with fibrin glue was performed to left eye and there was no recurrence.

RESULTS

The mean surgery time was 23.95 min (between 18-21 min) in Tisseel fibrin glue group and 30.55 min (25-38 min between) in suture group. The mean surgery time was significantly shorter in fibrin glue group($p < 0.005$) compared to the suture group.

At the end of 6 months 2 recurrences occurred in fibrin glue group(10%). 3 recurrences also occurred in suture group(15%). There were significantly less complaints in fibrin glue group in terms of postoperative discomforts on the postoperative 1., 2. and 3. day ($p < 0.005$ (day 1), $p < 0.005$ (day 2) and $p = 0.001$ (day 3)). However, there were no significant difference during the other days.

CONCLUSIONS

In our study we noticed our surgery time longer compare to the other studies both with fibrin and suture groups. Despite this, surgery time in fibrin group was shorter than suture group. Similar to the other studies, we found that high cost in fibrin glue group was a common point.

Both of fibrin glue and sutured conjunctival autograft technique, are safe and effective methods for pterygium surgery. Fibrin glue technique is considered to be more preferable for surgeons and patients due to the fact that it has shorter surgery times and there are less recurrence despite its high cost.

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