

Surgical Retina

DID SURGICAL TREATMENT PATTERNS OF RHEGMATOGENOUS RETINAL DETACHMENT CHANGE WITH COVID-19 PANDEMIC?

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PURPOSE: To compare treatment patterns of Rhegmatogenous Retinal Detachment (RRD) before and during COVID-19 pandemic.

METHODS: Retrospective cohort study of primary RRD surgeries through review of patient's medical records, from March to July 2019 (pre-pandemic), and the same period in 2020 (COVID-19 pandemic). Preoperative factors and intraoperative technique with adjunctive procedures were recorded.

RESULTS: 32 RRD procedures were included. Patients in pandemic group waited more days since first visual symptoms until medical observation comparing to pre-pandemic group ($p=0.01$). Accordingly, total preoperative waiting time was greater in pandemic group ($p=0.006$). Preoperative best-corrected visual acuity (BCVA) was similar between the groups ($p=0.90$). One (5.3%) pneumatic retinopexy (PR) and 18 (94.7%) pars plana vitrectomy (PPV) were performed in pre-pandemic group, and 2 (15.4%) PR and 11(84.6%) PPV in pandemic group. In COVID-19 group, more patients received silicone oil as tamponade in PPV ($p=0.033$) instead of gas tamponade. More patients in pandemic group underwent Schepens cerclage compared to pre-pandemic ($p=0.036$). Retinal reattachment with one surgery was achieved in 76.9% of cases during pandemic and 84.2% pre-pandemic. Postoperative BCVA 3-months after surgery was not different between groups ($p=0.93$).

CONCLUSIONS: Although pandemic group had more preoperative waiting time, mainly due to more time with visual symptoms until medical observation, similar functional results were seen in postoperative period. The use of silicone oil and Schepens cerclage was more frequent in the COVID-19 group.