NIIOS Netherlands Institute for Innovative Ocular Surgery

Intraocular Graft Unfolding Techniques in Descemet membrane endothelial keratoplasty (DMEK)

Baydoun L., Liarakos V., Dapena I., Ham L., van Dijk K. and Melles G.R.J. Netherlands Institute for Innovative Ocular Surgery (NIIOS), Melles Cornea Clinic (MHR), Amnitrans Eye Bank (AER), Rotterdam, The Netherlands

Purpose

To define and evaluate various Descemet membrane graft unfolding techniques in DMEK

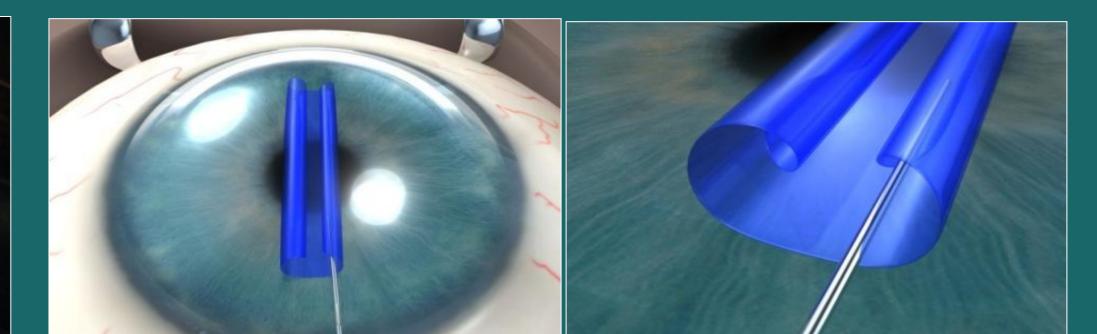
Materials & Methods Retrospective video analysis of 100 consecutive DMEK cases

Outcome measures: Best Corrected Visual Acuity (BCVA), Endothelial Cell Density (ECD), Complications \geq 6 months

DMEK steps before graft unfolding

1. Graft preparation 2. Graft implantation 3. Check graft orientation





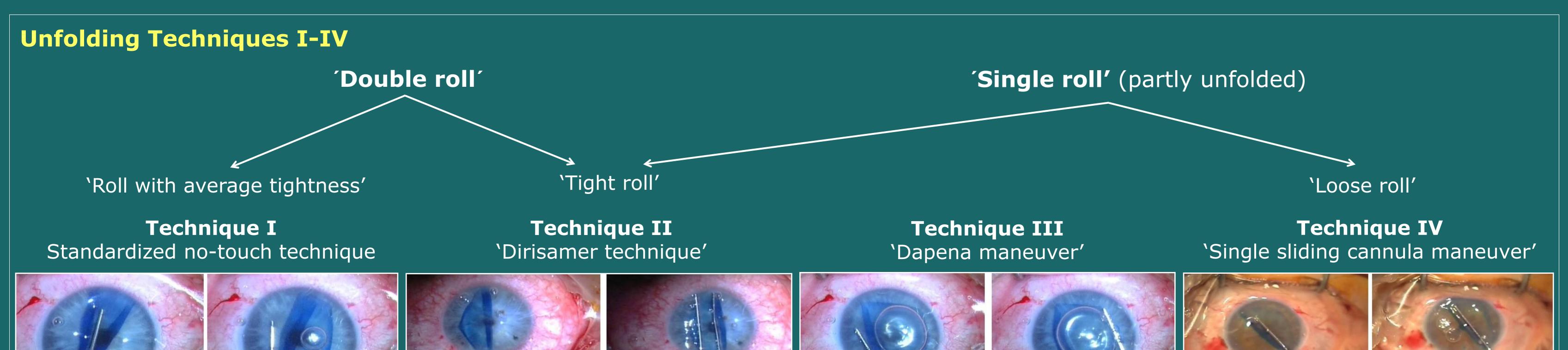
Unfolding methods were categorized into four basic techniques (Technique I, II, III, IV)

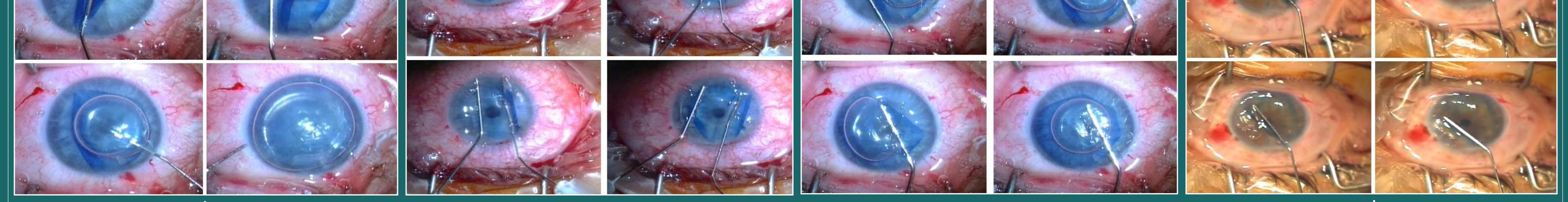
Statistical regression analysis

✓Try to achieve a \checkmark Try to inject double roll already correctly

oriented

 Correct orientation with endothelium on the outside: graft curls are facing up, tip of cannula turns blue

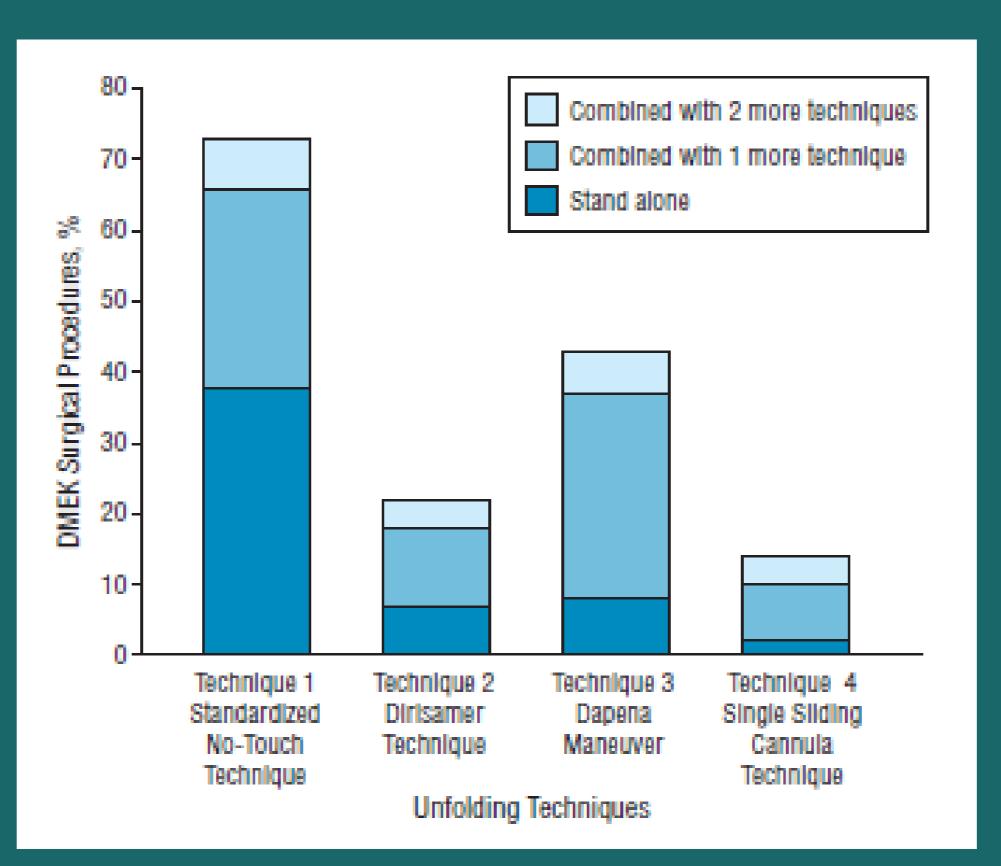




Each technique used either as stand-alone or in combination with one or more techniques -

Results

- ✓ Technique I was used in 73% of surgeries either as stand-alone or in combination with one or more techniques
- Combination of techniques were used in 44%
- \checkmark Auxiliary techniques were used in 62%



Auxiliary techniques

- 1. Flushing the graft to turn it from 'upside down' orientation
- 2. Manual centration of the graft with a cannula
- 3. 'Bubble bumping' to unfold inward folds after graft lifting

✓ None of techniques I-IV correlated with BCVA, ECD or postoperative complication rate (P>0.1)



Conclusion ✓ DMEK may be facilitated by using controlled techniques for unfolding the Descemet membrane graft, either as a stand-alone technique or in various combinations

Choosing the most 'suitable' technique will make DMEK safer and easier

Without compromising the result or affecting the final outcome \checkmark

Watch the videos on the unfolding techniques here ----> or on www.youtube.com (keywords: NIIOS, DMEK)

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