Some Observations on Sutures During, and the Behaviour of Vitreous Humour After Cataract Operations

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Nymegen

Of 175 cataract operations in which exclusively 2 sutures were made, the results concerning postoperative astigmatism, hyphae-mas, late recovery of the anterior chamber and iris prolapses were compared with figures from the literature of cases in which corneoscleral sutures were applied. The astigmatism appeared to be somewhat more pronounced with conjunctival sutures; no influence on the other three complications was found. Late perforation of the anterior limit of the vitreous humour with effusion of the latter into the anterior chamber, as recently described by Irvine and found in 23% of his cases, was found in only one of 100 operated eyes.

Discussion.

Flieringa contended that several conjunctival sutures, preferably four or five, lessen the chance of astigmatism compared to two sutures. Further he asked whether the hyaline membrane had remained intact at the prolapse of vitreous humour as described by the speaker.

Mulock Houwer believed that the width of the conjunctival flap was very important. In a wide flap the influence of the suture on the development of astigmatism is much greater than in a narrow one.

Dekking: In de Rooy's statistics one complication, which is mentioned again in recent Anglosaxon literature, was absent: ingrowth of the epithelium into the anterior chamber, which is rarely seen in conjunctival sutures. This seems to be a serious drawback of corneoscleral sutures.

Hagedoorn: Epithelial ingrowth occurs especially in Stallard's corneoscleral suture. When this method is applied the epithelium between the two loops is coagulated by diathermy.

De Rooy replied:

to Flieringa that the hyaloid membrane had been perforated in his case.

to Dekking: As a matter of fact

I have never seen this complication.