Pars Plana Vitrectomy with Endolaser for Repair of a Perforating Globe Injury

Ferdinand Rodriguez Agramonte, Joshua D Levinson and Juanita S Bryant

1The Retina Group of Washington, Chevy Chase, MD, USA
2Georgetown University Hospital Ophthalmology Residency, Washington, DC, USA

*Corresponding Author: Juanita Sonya Bryant, The Retina Group of Washington and Georgetown University Hospital Ophthalmology Residency, Washington, DC, USA.

Received: August 23, 2017; Published: September 12, 2017

A 31-year old gentleman reported an object hitting his left eye while hammering metal. Funduscopic exam revealed vitreous hemorrhage with concern for possible intraocular foreign body. An entrance wound is seen in the sclera (A). The patient underwent closure of his scleral laceration and pars plana vitrectomy. Intraoperatively, he was noted to have an exit wound posteriorly where the foreign body had penetrated the retina and sclera along the superior arcade. The exit wound was barricaded with endolaser which is photographed at 3 days (B) and 2 months (C) post-operatively. At month 2, the retina was attached with 20/20 vision.

Conflicts of Interest
The authors declare no conflicts of interest.

Financial Support
None.

Volume 7 Issue 6 September 2017
© All rights reserved by Juanita S Bryant, et al.