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Comparison of Irrigation and Aspiration (I/A) with Primary Anterior Vitrectomy vs YAG Laser Posterior Capsulotomy between Eyes of infants having bilateral Congenital Cataract

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Purpose: To compare the results and complications faced with irrigation & Aspiration (I/A) with primary anterior vitrectomy verses I/A with early YAC laser capsulotomy between eyes of infants having congenital bilateral cataract. Patients and Methods: We launched a prospective study from January 2001 in our Department in which 40 patients (80 eyes) were included with a minimum follow up period of 3-6 months. Patients were aged between 7 days to 1 year but 95% were less than 6 months old. One group of patients had 1 / A only (group A) while the other group had I/A with posterior capsulotomy and anterior vitrectomy (group B). Results: 33 patients (66 eyes) under went IIA alone (group A1) on one side and IIA with anterior vitrectomy (group B1) on the other side. There were 3 patient who had bilateral IIA only (Group A2) and four patients had I/A with anterior vitrectomy bilaterally (group B2). 21 (54%) eyes in (group AI) needed YAC laser capsulotomy after four weeks to three months post operatively. YAG laser was applied under C/A. 18 Eyes (46%) in group A did not need YAG laser application. 3 eyes in group B needed YAG laser memberanectomy inspite of having anterior vitrectomy. One eye in each group had failed YAG laser capsulotomy and needed surgical membranectomy. Similarly one eye in each group needed repeat YAG laser. Two eyes of one patient in group AI developed thick layer of elschnig`s pearls needing repeat I/A followed by YAG Laser application. In each group 2 patients developed secondary glaucoma in one of their eye. Table 1-3 are showing results in detail. Conclusion: In our study simple I/A with YAG laser posterior capsulotomy `If needed` showed comparable results with I/A and primary anterior vitrectomy in infants having bilateral congenital cataract.