Intermediate-Term Results of Ab Interno Trabeculotomy Compared with Trabecular Microbypass Stent, Both with Cataract Surgery

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Purpose

To compare the outcomes of two minimally-invasive glaucoma procedures with combined cataract extraction using the Trabectome system and

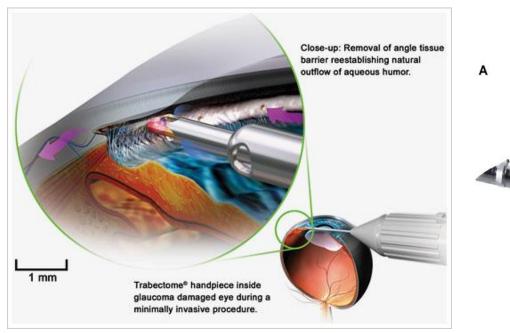
(Neomedix Inc., Tustin, CA, USA)

iStent implant.

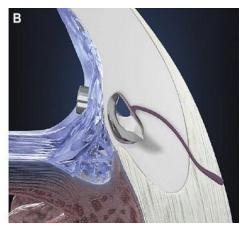
(Glaukos Corporation, Laguna Hills, CA, USA)

Introduction

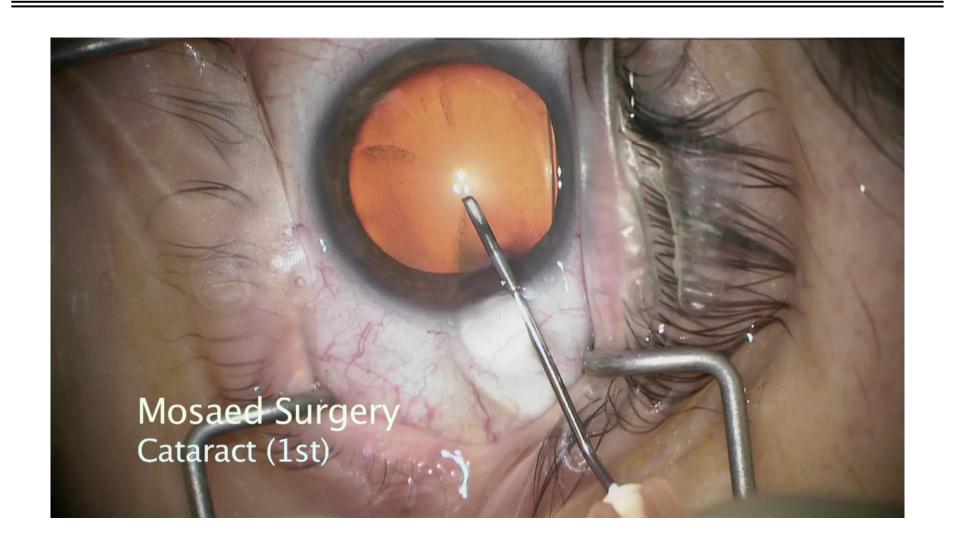
- MIGS surgery is a broad category of glaucoma treatment seeking to enhance outflow through natural pathways
- TrabectomeTM and iStentTM are two FDA approved varieties which can be combined with cataract surgery







Introduction



Methods

- Retrospective review of TrabectomeTM versus trabecular micro-bypass stenting using the iStentTM with combined cataract surgery.
- All cases had at least 6-month follow-up.
- TrabectomeTM N=42 eyes (36 patients), iStentTM N=39 eyes (29 patients)
- Main outcome measures: intraocular pressure (IOP) and number of glaucoma medications.
- Survival analysis was performed, defining success as ≥ 20% reduction in IOP, with IOP<21 in at least 2 follow up visits

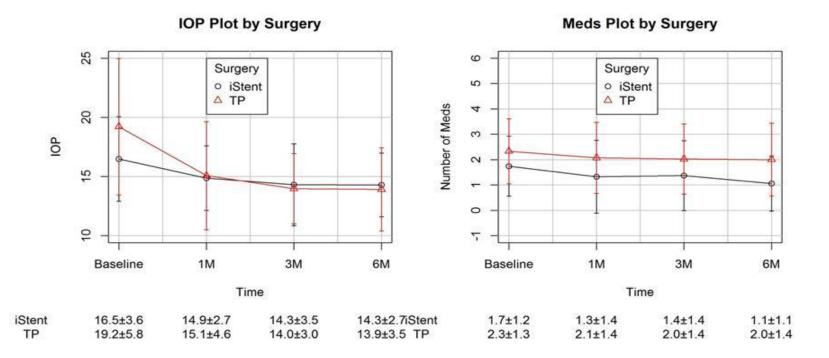
Results

TrabectomeTM group

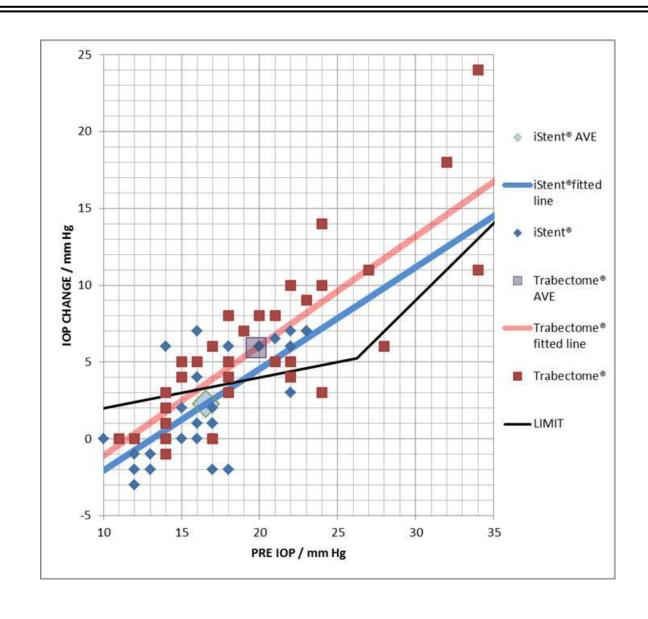
• Preop IOP 19.2±5.8 mmHg; Postop IOP 13.9±1.4 mmHg; Mean IOP reduction 5.9+/-5.2mmHg (30.7%)

iStentTM group

Preop IOP 16.5±3.6 mmHg; Postop IOP 14.3±2.7;
 Mean IOP reduction 2.3+/-3.4mmHg (13.9%)

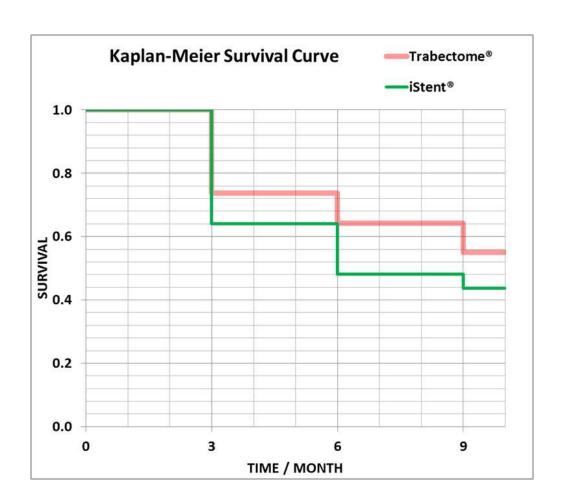


Results



Kaplan Meier Success Rate

TrabectomeTM 76% at 6 months iStentTM 48% at 6 months



Conclusion

TrabectomeTM or iStentTM with combined cataract surgery both achieve reduction in IOP and drug burden.

TrabectomeTM combined with cataract surgery achieved a greater reduction in IOP and a higher rate of success than iStentTM with cataract surgery

A randomized, prospective study with larger sample size and longer follow up may provide more insight into subgroups that respond better to each treatment