Record Nr. UNINA9910821210303321 Autore Feldman Robert M. **Titolo** Complications of glaucoma surgery / / Robert M. Feldman, Nicholas P. Bell; managing editor, Kimberly A. Mankiewicz, Ph.D Oxford, [England]: .: Oxford University Press, . 2013 Pubbl/distr/stampa ©2013 0-19-756270-1 **ISBN** 0-19-970021-4 Descrizione fisica 1 online resource (436 p.) Collana Oxford scholarship online Disciplina 617.741059 Soggetti Glaucoma - Surgery Glaucoma - Surgery - Complications Lingua di pubblicazione Inglese **Formato** Materiale a stampa Livello bibliografico Monografia Previously issued in print: 2013. Note generali Incudes bibliographical references at the end of each chapters and Nota di bibliografia index. Cover; Contents; Contributors; PART ONE. AQUEOUS OUTFLOW Nota di contenuto MECHANISM AFTER GLAUCOMA SURGERY; A. Trabeculectomy and Tube Shunts; 1. Trabeculectomy and Tube Shunts; B. Angle and Nonpenetrating Surgery; 2. Angle and Nonpenetrating Glaucoma Surgery; PART TWO. WOUND HEALING IN GLAUCOMA; 3. Wound Healing in Glaucoma; PART THREE. FILTERING SURGERY COMPLICATIONS; A. Intraoperative Complications; 4. Conjunctival Buttonholes; 5. Intraoperative Hyphema; 6. Choroidal Effusion and Hemorrhage; 7. Vitreous Prolapse and Lens Injury: 8. Descemet's Membrane Detachment: 9. Scleral Flap Dehiscence B. Early Postoperative Complications 10. Hypotony; 11. Elevated IOP with a Flat Anterior Chamber; 12. Elevated IOP with a Deep Anterior Chamber: 13. Early Excessive Iritis: 14. Early Vision Loss after Trabeculectomy; C. Late Postoperative Complications; 15. Late Bleb Failure; 16. Late Bleb Leaks; 17. Cataracts and Visual Axis Opacities; 18. Dysesthetic Blebs; 19. Bleb-Related Vision Loss; 20. Uveitis; 21. Late Hypotony without Leak; D. Complications Common to the Early and Late Postoperative Periods; 22. Hypotony Maculopathy; 23.

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## Sommario/riassunto

This text provides clear and detailed guidelines on the management of complications in glaucoma surgery. Coverage spans the entire spectrum of glaucoma, including descriptions of traditional and newly emerging modalities available for surgeons.