## 11<sup>th</sup> Global Ophthalmologists Annual Meeting

September 25-26, 2017 Dubai, UAE

## Ahmed glaucoma valve (AGV), tube insertion technique (graft sparing) and management of rare complications in AGV surgeries

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**Introduction & Aim:** The purpose of this 5 surgical videos presentation is to demonstrate a new technique of tube insertion in AGV implantations and also provide audience with rare situations of AGV surgeries and managing complications. The presentation package has 2 videos showing AGV insertion techniques involving only needles. It gives an easy route for the tube as the scleral tunnel is designed using only needles. Hence the difficulty in pushing the tube from the large tunnel created by crescent blade (Gdih technique) into the 23G tunnel is totally avoided. There is no need to have a crescent blade and graft to cover the tube. The presentation has videos of the following surgeries.

Tube Insertion Technique: Subhan's scleral tunnel technique.

Anterior Cut Tube Insertion Technique: A modification of Subhan's scleral tunnel technique for long tunnels.

**Plate Migration Management:** Shows pictures and video of surgical management of AGV plate migration in a case having high myopia and prominent globes in a 15 year old child. The cause of plate migration was constant rubbing of the lid by the patient as the lids showed swelling because of the large bleb around the plate, which was more prominent because of the large globes. The video shows rare images of the encapsulation around the plate when surgically exposed during exchange of the AGV plate.

**Tube Exposure Repair Technique:** This video demonstrates a rare situation where the patient had undergone penetrating keratoplasty with phaco IOL previously and AGV implant. The patient already had one episode of tube exposure repair, which re-exposed again. This case was managed with a pedicle kind of conjunctival graft.

**Tube Inadvertently Entering the Vitreous Cavity:** This video shows surgical management of tube inadvertently entering the vitreous cavity during insertion. It has two videos of accurately placing the tube in the sulcus with an approach from the opposite limbus and needle tracking the tube.

**Results & Conclusion:** The tube insertion techniques provide a safe, simple and secure method, saving the need for crescent blade and graft. The other three videos provide clear and safe skills to come over tough situations in surgical management of AGV implants and its complications. The surgical video packages help the viewing surgeon to adopt new techniques and improve surgical skills in order to give quality surgical care in difficult situations with confidence.

## Biography

Full fledge ophthalmic physician and surgeon, with 18 years' of clinical and surgical experience to comprehensively manage Glaucoma and Anterior Segment. Since May 2010 he is working as Associate Consultant in the prestigious King Abdullah medical city (JCIA Hospital), Makkah, KSA. Since last year he is the Head of the Department of Glaucoma

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