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Severe macular degeneration following laser treatment in facial trichophytosis wrong treatment correction

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Introduction: Trichophytosis puts a psychological pressure on female patients, and removal of unwanted hair is one of ways for solution to both cosmetic and psychological problems of women with hormonal imbalance. However, lasers are unsafe and can cause burns of varying degrees of severity in patients with sensitive skin, and even lead to retina complications. The laser can damage the retina both photothermally and photomechanically, as well as photochemically. In this case, the anti-inflammatory treatment is preferred in order to weaken body immune response and reduce eye swelling and damage. Only if choroidal neovascularization develops in delayed stages, the restoring vascular integral system and inhibiting binding of VEGF to its receptors (Flt-1, KDR) on endothelial cells, namely Anti-VEGF bevacizumab, may be prescribed.

Purpose of the study: Correction through complex conservative therapy wrongly treated by bevacizumab severe macular degeneration.

Materials and methods: 27 years old patient K.A. with no serious illnesses in the anamnesis, underwent face hair laser removal in December, 2021. Two months later, the patient began to experience blurred vision and metamorphopsia. Routine examination of the patient was carried out by angiography, viziometry, tonometry, biomicroscopy, OCT.

Results: Visa OD -0.1 (not adjusted), OS Vizus - 1.0, TNOD -21 mm Hg, TnOS -22mmHg. (pneumotonometry)

After diagnosis was identified, the patient was treated before us in another clinic with intravitreal bevacizumab every month, for year with no result. On January 12, 2022, the patient contacted our clinic due to absence of treatment result. According to her condition, we prescribed only a complex of gentle restorative conservative treatment: Ascorutin - 1 tablet 2 times a day for 10 days, Nepafenac - 2 drops 3 times a day locally, Diacarb 0.25 - 1 tablet 2 times a day N 10, and Retinalamin 5.0 intramuscularly N 10.

Results: After 2 months of our conservative treatment without intravitreal injection, regression of disease was achieved. The patient's visual acuity increased with decrease of subjective complaints. Severe pathologies of this kind are usually prone to relapses, but our patient had no exacerbations over the past three years, and her visual acuity remained stable.

Conclusion: When treating macular degeneration of laser origin, it is advisable to use anti-inflammatory therapy with vitamin complexes A, C, P despite of bevacizumab. Such complex conservative treatment is not only clinically effective, but also cost-effective.

Biography

Mahira Firudin kizi Amirova works as an Associate Professor at Department of Biochemistry and Public Health Azerbaijan Medical University Azerbaijan.