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Surgical Out Come in Pterygium Surgery with Conjunctival Auto Graft Using Fibrin Glue and Patient's Own Blood Serum

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Purpose

To observe the difference between use of Fibrin Glue in conjunctival auto grafting and use of patient's own blood serum to fix conjunctival graft.

References

1. <https://www.ncbi.nlm.nih.gov/>
2. <https://www.ncbi.nlm.nih.gov/>
3. <https://journals.lww.com/ijo/pages/default.aspx>

Method

We examined the patients on slit lamp having Pterygium grade one to grade four. All patients were segregated in two groups, one grade one to two and other one grade three to four.

Intra op we observed that conjunctival grafts were well fixed with patient's own blood bath but in patients with bigger Pterygium i.e. grade three to four were sometimes gets folds in grafts or dislocate from its position. In this situation we again took those patients for repositioning of grafts.

Results

This study shows that conjunctival auto grafting with autologous blood is good in small Pterygium i.e. grade one to two and no inflammatory reaction noticed post operatively in four weeks because no foreign substance used to fix it. For grade three or more we found either use Fibrin Glue or even Polyglactine suture gives good post operative results. Even in Pterygium greater than grade four Amniotic membrane is a better option so the sclera exposure can be avoided post operatively with less inflammation.

Recurrence rate is very low in the follow ups patients who had conjunctival auto grafting for three to six months.



Pre op Pterygium

Post excision Pterygium

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