



**Early detection of hypotony maculopathy is essential, as permanent chorioretinal changes and poor visual outcomes will occur without rapid surgical intervention**

### ***The Science behind the Tip***

Hypotony maculopathy is an uncommon but serious late complication of glaucoma filtration surgery, particularly when an antimetabolite has been used<sup>1</sup>. Risk factors for the development of this condition include: male gender, young age (<60 years) and myopia<sup>2</sup>.

A successful outcome depends on correctly identifying and treating the cause of the hypotony as soon as possible. The best option is to surgically revise the bleb, inserting additional sutures into the scleral flap to reduce aqueous outflow. This approach results in a significant improvement in visual acuity, without the need for glaucoma medication in most patients<sup>3</sup>. Conjunctival compression sutures have been reported to be useful to treat large over-filtering blebs associated with hypotony<sup>4</sup>.

### ***References***

- 1) Thomas M, Vajaranant TS, Aref AA. Hypotony maculopathy: clinical presentation and therapeutic methods. *Ophthalmol Ther.* 2015; 4: 79-88
- 2) Fannin LA, Schiffman JC, Budenz DL. Risk factors for hypotony maculopathy. *Ophthalmology* 2003; 110: 1185-1191
- 3) Bitrian E, Song BJ, Caprioli J. Bleb revision for resolution of hypotony maculopathy following primary trabeculectomy. *AM J Ophthalmol* 2014; 158: 597-604.
- 4) Quaranta L, Riva I, Floriani IC. Outcomes of conjunctival compression sutures after glaucoma filtration surgery. *Eur J Ophthalmol.* 2013; 23: 593-596.