Causes and Management of Descemet's Membrane Detachment Associated with Cataract Surgery—Not Always a Benign Problem

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Abstract

Introduction: Detachments of Descemet's membrane (DM) occur with not uncommon frequency during cataract surgery. The figure for extracapsular cataract extraction (ECCE) is 2.6%, and that for phacoemulsification is 0.5%. Most detachments are small and of little visual consequence. Large detachments are rare but can lead to loss of vision. Early recognition and appropriate management is the key to a favourable outcome. This review provides cataract surgeons with guidelines to the management of this problem. Methods: A review of reported studies on the subject was made using a MEDLINE search. A summary of the reviewed data is presented. Results: The problem is fairly widespread, given the number of cataract operations done today. The important points with regard to aetiology, classification, recognition and appropriate management are presented in this article. Conclusion: DM detachment should not be taken lightly because of the potential for serious visual outcome. It may be avoided in a large majority of cases. Appropriate and prompt management may prevent the patient from suffering visual loss should it occur.

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Key words: Corneal decompensation, Descemet stripping, Extracapsular cataract extraction, Penetrating keratoplasty, Phacoemulsification

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