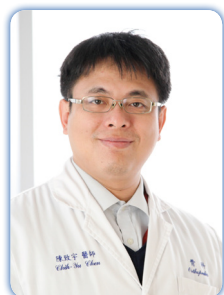


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Augmented superior rectus transposition with intraoperative botulinum toxin injection for large angle chronic six nerve palsy: A case report

A case of 54 years-old female patient, presented with 75 Δ PD esotropia, combined with obvious hypotropia of right eye in primary position. She was a case of right traumatic six nerve palsy for three years with chin-up and face turn to right. There was a filtration bleb on the upper limbus of right eye due to acute attack of PACG after the trauma. Augmented superior rectus transposition with intraoperative botulinum toxin injection of right medial rectus, combined with bilateral medial rectus muscle recessions. (od 6.5 mm, os 4.5 mm) on December 2017. Complete ptosis with lateral gaze limitation (-2) (od) and nasal limitation (-1) (ou) was found two weeks after the operation. Later, 18-20 PD exotropia (od) was found with slight hypertropia and ptosis (3+) after one month. Two months later, there was no exotropia or esotropia, just six prism-diopters hypertropia and slight degree of ptosis was found. Four months later, orthotropia in primary position and no more ptosis. A gain of 15 degree lateral gaze across the midline was achieved after the SRT surgery compared complete paralysis before the operation. There was a final exoshift of 75 prism-diopters and a successful outcome was achieved in this case. Augmented Superior Rectus Transposition (SRT) with intraoperative botulinum toxin injection maybe a selective method for the treatment of large angle chronic six nerve palsy.

Biography

Chih-Yu Chen has completed her PhD at the age of 25 years from Taipei Medical University and had obtained her Master degree of Medical Science from National Taiwan University later. She is currently working in the field of Pediatric Ophthalmology and Strabismus at Taipei Municipal Wanfang Hospital (Managed by Taipei Medical University), Taiwan.

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