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POSTERIOR STAPHYLOMA AS HALLMARK OF PATHOLOGIC MYOPIA AND SEVERE PATHOLOGIC MYOPIA

Oral

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Purpose:

The aim of this study was to study the incidence and clinical repercussion of posterior staphyloma in pathologic myopia and severe pathologic myopia.

Methods:

Cross-sectional, non-interventional study of consecutive 473 eyes of 259 high myopic patients (spherical equivalent >-6.0 D and/or >26 mm of axial length (AL)). Demographic data were recorded from medical records. All patients underwent complete ophthalmologic examination, best corrected visual acuity (BCVA), axial length (AL) and multimodal imaging. Eyes were graded based on ATN system and classified as pathologic myopia (PM) (if $\geq A2$) or severe PM (if $\geq A3$, $\geq T3$, and/or N2). Posterior staphyloma classification was made according to Curtin' and Ohno-Matsui'.

Results:

The incidence of posterior staphyloma was 69.4% (n=328/473). PM was diagnosed in 62.2% and severe PM in 39.7%, presenting staphyloma 86.7% and 94.1%, respectively. Severe PM eyes showed higher incidence of staphyloma ($p<0.05$) than PM subgroup. Within PM group, eyes with staphyloma presented worse BCVA, higher AL, were older, had higher score in A and T components ($p<0.01$). Regarding severe PM group, staphyloma' eyes had worse BCVA, higher AL and were older ($p<0.01$). Nevertheless, no differences were obtained in ATN components ($p>0.05$). The risk of posterior staphyloma presence in PM and severe PM eyes was 89.8% and 96.7%, respectively.

Conclusions:

The presence of posterior staphyloma determines worse BCVA and higher degree of myopic maculopathy. Posterior staphyloma should be considered practically as a constant hallmark of PM and, even more, severe PM, determining the follow-up and prognosis of these patients.