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Outcomes of cataract surgery in patients with exudative age-related macular degeneration and macular fluid

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Purpose: The purpose of this study was to investigate whether having macular fluid on the OCT prior to cataract surgery adversely affected vision or anatomic outcomes after cataract surgery in patients with exudative AMD.

Design: Retrospective, cohort study.

Methods: We examined all patients who underwent cataract surgery and were receiving intravitreal anti-VEGF injections from January 1st, 2012 through December 31st, 2016. There were 81 eyes that underwent cataract surgery and had received at least one intravitreal anti-VEGF injection for a diagnosis of exudative AMD within 6 months prior to surgery. Data collected included the development of subretinal or intraretinal macular fluid, or subretinal hemorrhage in the 6 months following surgery, number of injections, best corrected visual acuity (BCVA), and central subfield thickness (CST).

Results: There was a significant improvement between pre- and post-operative BCVA when comparing all patients (p values <0.0001) and no significant difference in CST before and after surgery ($p >0.05$). There were 23 eyes with fluid on the pre-operative OCT. There were no differences in final BCVA or CST and no difference in the development of fluid post-operatively when compared to patients without fluid pre-operatively (all p values >0.05). These patients also saw a significant improvement in BCVA ($p = 0.006$).

Conclusion: In a real world setting, patients with both cataracts and wet AMD may safely undergo cataract surgery. Patients with stable pre-operative fluid on OCT should be considered for cataract surgery as these patients did well post-operatively with no worsening of their neovascular process.

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