

Debate..! INFERIOR OBLIQUE Graded Recession

Ayman Elghonemy MD FRCS

Consultant; Pediatric Ophthalmology
& Strabismus

MAGRABI EYE HOSPITAL

Memorial Institute of Ophthalmic Research

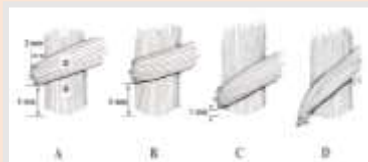


MAGRABI
HOSPITALS & CENTERS

All of you will CHOOSE for



RECESSION



WHY ?



MAGRABI
HOSPITALS & CENTERS

Background..



MAGRABI
HOSPITALS & CENTERS

INFERIOR OBLIQUE WEAKENING

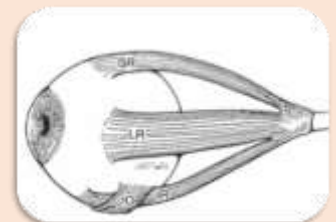
- Partial myotomy
- Myotomy
- Myopexy
- Extirpation/Denervation of the Inferior Oblique Muscle



- MYECTOMY.

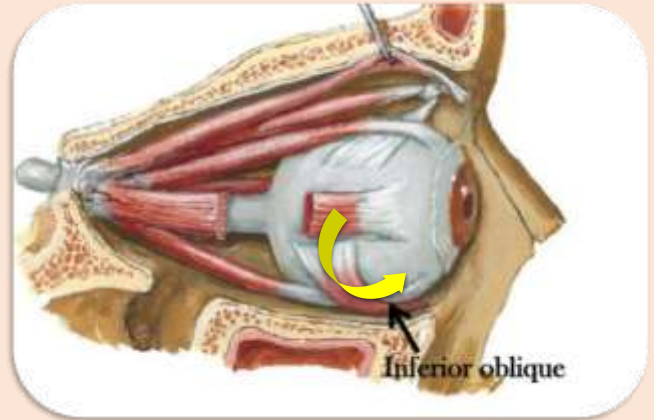


- *Graded recession/anteriorization*



MAGRABI
HOSPITALS & CENTERS

Inferior Oblique Graded recession/anteriorization



The muscle:
Disinserted, and then reattached
along the path of inferior oblique muscle towards its origin.



MAGRABI
HOSPITALS & CENTERS

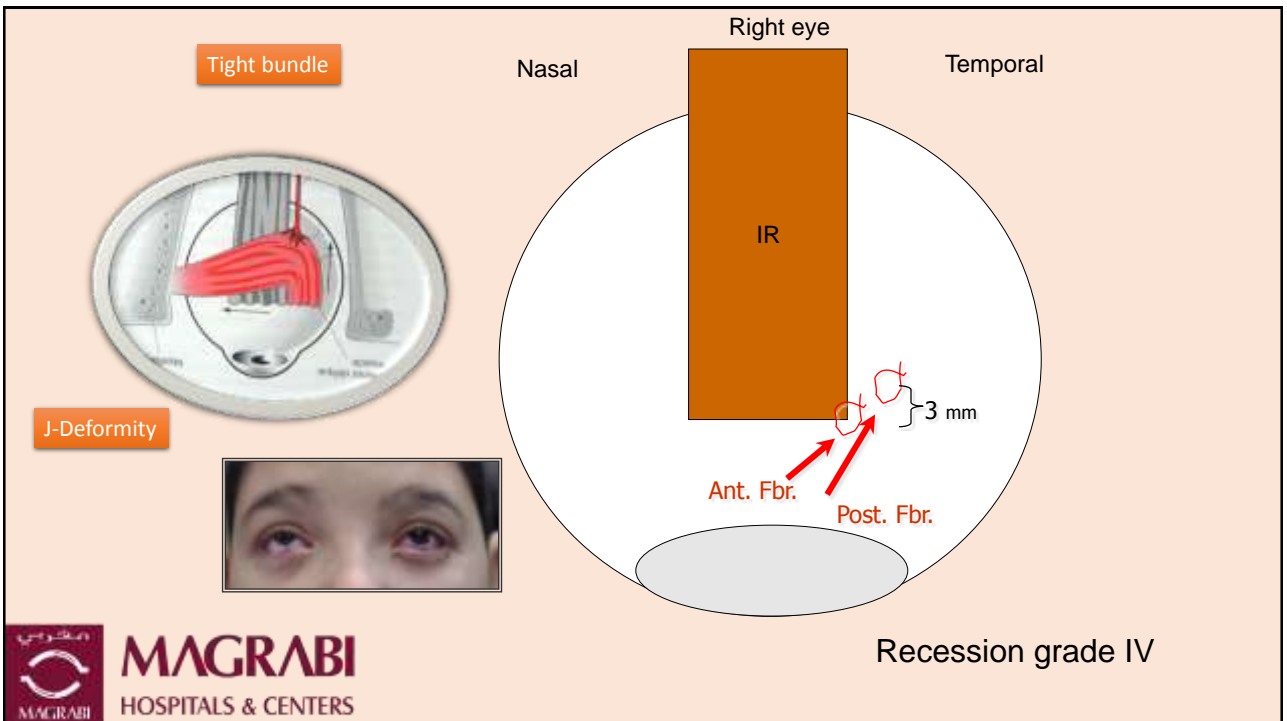
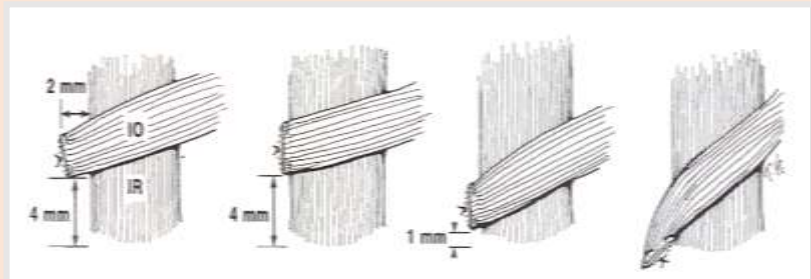
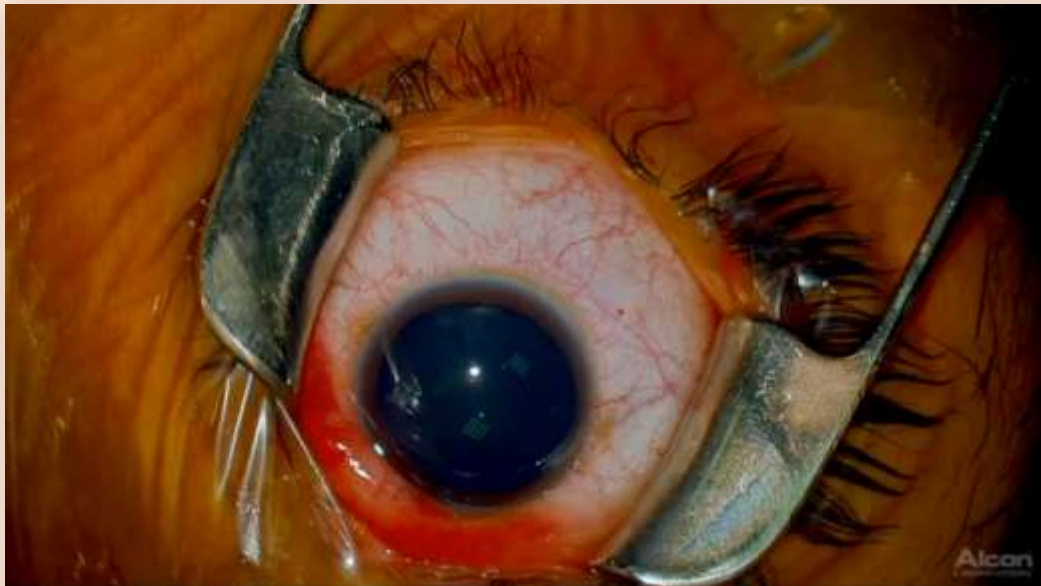


TABLE 11-1. Graded Recession–Anteriorization of Inferior Oblique Muscle.

<i>Overaction</i>	<i>Inferior oblique placement</i>
+1	4 mm posterior and 2 mm lateral to inferior rectus (IR) insertion
+2	3 mm posterior to IR insertion
+3	1–2 mm posterior to IR insertion
+4	At the IR insertion



MAGRABI
HOSPITALS & CENTERS

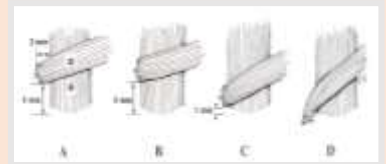


MAGRABI
HOSPITALS & CENTERS

WHY RECESSION?



- **GRADED (1-4)**
 - Cases of asymmetrical IO Overaction -> Unequal recession.
- **Predictable**
 - Muscle is sutured in EXACT needed position
- **Reversible**
 - Intact muscle, known place.

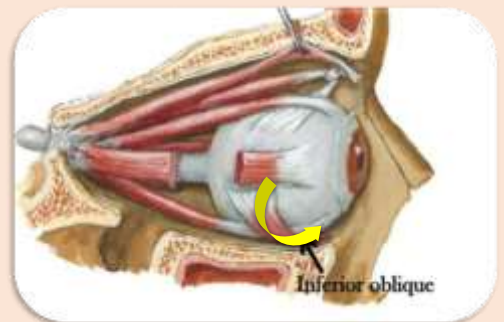


MAGRABI
HOSPITALS & CENTERS

WHY RECESSION?



- **GRADED (1-4)**
 - Cases of asymmetrical IO Overaction -> Unequal recession.
- **Predictable**
 - Muscle is sutured in EXACT needed position
- **Reversible**
 - Intact muscle, known place.
- Not only weakened the action, but also
 - Changing the I.O from an elevator to a **passive depressor**



MAGRABI
HOSPITALS & CENTERS

WHY RECESSION?

Even with "claimed" drawbacks..!



- Its drawbacks are actually **ADVANTAGES..!**
 - Full anteriorization can cause limited elevation?



- Post fibers **BEHIND** ant. fibers
- Combined IOOA + DVD
(The best surgical results in DVD)
- Just do it bilaterally



MAGRABI
HOSPITALS & CENTERS

WHY RECESSION?

Even with "claimed" drawbacks..!



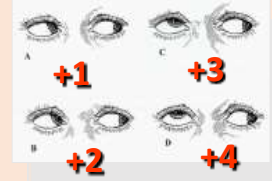
- Its drawbacks are actually **ADVANTAGES:**
 - Full anteriorization can cause limited elevation?
- *Can perforate?*
 - Any squint surgery can be complicated by perforation
(we frequently operate on dominant eyes)
 - We don't take deep bites (muscle will not retract as its origi
- *Consumes suture?*
 - In myectomy we need cautery (in recession we don't)
 - *Any other?*



MAGRABI
HOSPITALS & CENTERS

WHY **NOT** Myectomy?

- *NON Gradable*
 - IOOA grade 1: Myectomy
 - IOOA grade 2: Myectomy
 - IOOA grade 3: Myectomy
 - IOOA grade 4:? Myectomy..!



MAGRABI
HOSPITALS & CENTERS

WHY **NOT** Myectomy?

- *NON Gradable*
- *Unpredictable place of reattachment.*
- *Irreversible*
- *If wrong muscle hooked (e.g Inferior rectus) will be a disaster.*



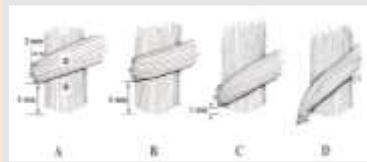
MAGRABI
HOSPITALS & CENTERS

If you'll choose



RECESSION

Raise your hand



THANK YOU



MAGRABI
HOSPITALS & CENTERS