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## **GUIDED SURGICAL DECISIONS BY UBM**

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Ultrasonic Biomicroscopy of the anterior segment reveals many hidden pathological abnormalities or postoperative problems that may change our surgical decisions and plans. Cases like congenital corneal opacities, post-cataract surgery and IOL implantation complicated by pseudophakic bullous keratopathy, failed filtration after penetrating glaucoma surgeries are examples of conditions that need UBM to decide the best procedure for correction. UBM became essential for preoperative evaluation of cases of Peter's anomaly, sclerocornea, failed trabeculotomy or trabeculectomy or acute hydrops. Surgical decisions for traumatic cases or hidden IOFBs differ after UBM examination.





## Biography

Zeinab Elsanabary has completed her PhD in 1991 from Cairo University. She has published about 30 publications as single author or in collaboration with others and supervised about 35 theses, as Master and Doctorate and Reviewer Member in the Egyptian Universities Promotion Committee of Ophthalmology. She is the Vise CEO of Bostan Diagnostic Eye Center since 2005, a specialized center for investigative ophthalmology, a recognized and pioneer center for ophthalmic diagnosis. She was the Head of Ophthalmic Diagnostic Laser Unit, Kasr El Eini Hospitals, Cairo University starting from August 2011 till August 2015. She was assigned as Sub-investigator in a clinical trial about treat and extends in wet AMD (Novartis) in 2013 and Principal investigator in a clinical trial about Bimatoprost SR implant for glaucoma (Allergan) in 2016 (ongoing). She was teaching junior fellows. She got National Encouraging Award in Advanced Scientific Technology in the Medical Science 2001.

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Figure 1: UBM of a case of Peter's anomaly differentiating it from primary congenital glaucoma



Figure 3: Post-trabeculectomy case with increased IOP, showing patent internal ostium by UBM at the site of the iridectomy giving a chance for bleb revision by needling



Figure 4: A case of ICL implantation for high myopia showing anterior vaulting and angle closure due to wrong measurement of sulcus to sulcus diameter