Macular Buckling for Myopic Traction Maculopathy: A Comprehensive Systematic Review and Meta-Analysis

Hashem Abu Serhan¹, Abdullah Ahmed², Mahrukh Chaudhry², Zain Ali Nadeem², Fakiha Ahmed³, Usama Hussain Kamal⁴, Ameen Alkhateeb¹, Ayman G Elnahry^{5,6}

¹ HMC, Doha, Qatar ² AIMC, Lahore, Pakistan ³ FU, Islamabad, Pakistan; ⁴ SIMS, Lahore, Pakistan ⁵ Aurora BayCare Medical Center, Wisconsin, USA ⁶ Cairo University, Cairo, Egypt

INTRODUCTION

- MM is one of the very serious complications of myopia, causing significant visual impairments and blindness ranging from 12 to 27% in Asian populations and 7% in Western populations.¹
- Myopic Traction Maculopathy (MTM) is a subset of MM, leading to vision impairment due to conditions like maculoschisis, foveal detachment, and macular holes.²
- Surgical treatments include pars plana vitrectomy (PPV) and macular buckling (MB).
- MB is an ab externo procedure that aims to alleviate traction forces by using a buckle around the eye, effectively counteracting forces responsible for MTM.
- Although MB has shown promising results, consensus on its efficacy remains unclear due to limited studies

OBJECTIVES

- To evaluate the outcomes of macular buckling for myopic traction maculopathy through a systematic review and metaanalysis.
- To assess changes in best-corrected visual acuity (BCVA), axial length, retinal reattachment rate, and macular hole closure rate after MB.
- To analyze short-term, mid-term, and long-• term outcomes of MB for MTM.

METHODS

- Systematic review following PRISMA guidelines³
- Searched PubMed, Cochrane Library, and EMBASE databases
- 13 studies analyzed (482 myopic eyes) • Meta-analysis conducted using random-
- effects models, heterogeneity assessed using l^2 statistics
- Publication bias assessed by funnel plots and Doi plots with Luis Furuya-Kanamori (LFK) index

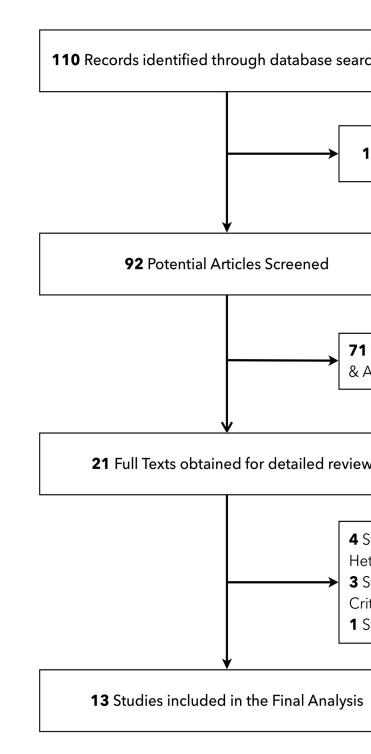


Figure 1: PRISMA Flow Diagram

rching
18 Duplicate Records Removed
1 Records excluded based on Title Abstract
w
Studies excluded due to Design eterogeneity Studies did not meet Inclusion riteria Study was not in English
3

RESULTS

- BCVA improved significantly (long-term: 0.38) logMAR units, 95% CI: 0.28 to 0.47)
- Axial length reduced consistently (long-term: 2.88 mm, 95% CI: 2.54 to 3.21)
- Long-term retinal reattachment rate: 94% (95% CI: 86-97%)
- Long-term macular hole closure rate: 72% (95% CI: 55-85%)

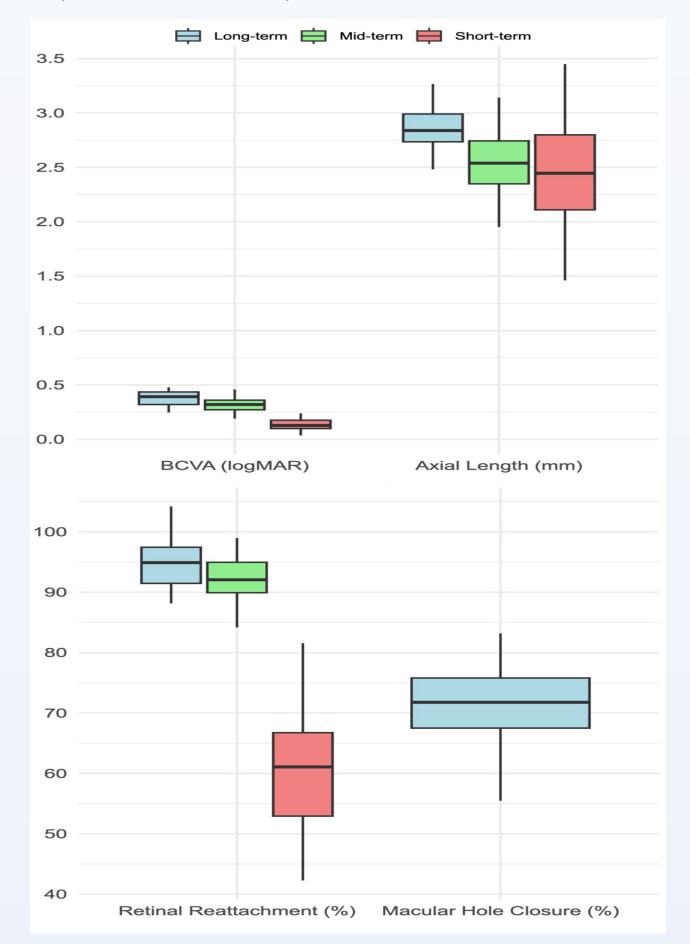


Figure 2: BoxPlot Overview of Results

CONCLUSIONS

• Macular buckling surgery provides significant improvements in visual acuity, with a durable long term reduction in axial length for myopic traction maculopathy (MTM) patients.

• Long-term outcomes show a considerable increase in retinal reattachment rate and macular hole closure rate, supporting its efficacy as a treatment option.

• While variability exists across studies, macular buckling remains a promising alternative to traditional approaches like pars plana vitrectomy (PPV).

• Further research is needed to standardize surgical techniques and explore combination therapies to optimize patient

outcomes and ensure consistent results.

REFERENCES

1. Quiroz-Reyes MA, Quiroz-Gonzalez EA, Quiroz-Gonzalez MA, Lima-Gomez V. Novel surgical approaches for treating myopic traction maculopathy: a meta-analysis. BMC Ophthalmol. 2024;5;24(1):105. doi:10.1186/s12886-024-03374-0.

2. Elnahry AG, Khafagy MM, Esmat SM, Mortada HA. Prevalence and Associations of Posterior Segment Manifestations in a Cohort of Egyptian Patients with Pathological Myopia. Curr Eye Res. 2019;44(9):955-962. doi:10.1080/02713683.2019.1606252

3. Hutton B, Salanti G, Caldwell DM, et al. The PRISMA Extension Statement for Reporting of Systematic Reviews Incorporating Network Meta-analyses of Health Care Interventions: Checklist and Explanations. Annals Intern Med. 2015;162(11):777-84. doi:10.7326/m14-2385