

ANTERIOR TRANSPOSITION OF THE INFERIOR OBLIQUE MUSCLE FOR DISSOCIATED VERTICAL DEVIATION

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Recently, anterior transposition of the inferior oblique muscle was reported to be an effective treatment for dissociated vertical deviation (DVD). Here, our experiences of anterior transposition of the inferior oblique muscle for dissociated vertical deviation treatment in these two years are reported. A retrospective study of 13 patients (17 eyes) with DVD was analyzed. The mean preoperative DVD amount was 16.1 PD. The mean DVD amount at last follow-up measured was 2.7 PD. The best results were achieved in eyes

with preoperative DVD amount less than 15 PD (0 of 7 failures). When the preoperative DVD amount measured larger than 15 PD, 2 of 10 were failures. 15% (2/13) of patients revealed postoperative primary position hypotropia and these two cases were operated unilaterally. In conclusion, anterior transposition of inferior oblique muscle is an effective method for DVD, but postoperative hypotropia should be noticed in unilaterally treated cases.

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