

Scleral Buckling Using Chandelier and Releasable Suture: A Useful Surgical Variant

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Abstract

Purpose: To describe a surgical variant for scleral buckling technique using a chandelier and scleral releasable suture.

Methods: We collected retrospectively 20 eyes of 20 patients who underwent to scleral buckling for retinal detachment. In all cases, the surgeons performed the surgical variant of scleral buckling using a 27-gauge (G) chandelier as endoillumination and releasable 7.0 vicryl scleral suture.

Results: None of the operated eyes developed lens opacity or lens marks at the entrance site of the chandelier used during the surgery, and no cataract development was observed as well, during the follow-up. Retinal reattachment was achieved in 19 out of 20 eyes at the first surgery in the follow-up time of 6 months.

Conclusion: The association of chandelier and releasable suture was a useful surgical variant when performing scleral buckling technique for retinal detachment. Complications like lens opacity or lens marks at the entrance site of the chandelier due to the use of chandelier itself can be greatly reduced, as well as complications due to vitreous prolapse from the sclerotomy by using releasable scleral suture.