



A Buckle Suture Gone Wrong

Scleral buckling surgery was performed on the left eye of a 35-year-old woman with pathologic myopia and subtotal rhegmatogenous retinal detachment. Intraoperatively, inadvertent perforation of the thin ocular coats was suspected after noticing unintentional external drainage of subretinal fluid. The needle was withdrawn and passed again at the same site, this time being superficial in the sclera. An internal localized subretinal bleed was noticed. The next day, after the absorption of the subretinal fluid, the polyester suture was visible (**A**, arrow). Polyester sutures are inert, and a decision was taken to leave it as such and to perform a prophylactic laser delimitation (**B**). Thus, when ocular coats are perforated, it is safer to withdraw the needle and pass it posterior to the previous site to avoid retraversing the same track. (Magnified version of Figure **A-B** is available online at www.ophtalmologyretina.org).

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