

VITREOMACULAR TRACTION

What is VMT and VMA?

Vitreomacular traction (VMT) is a condition when the vitreous jelly in the eye has an abnormal persistent adhesion to the central retina (the macula). This produces symptomatic vitreomacular adhesion (VMA).

What are symptoms of VMT and VMA?

Distortion with wrinkled or bent straight lines and reduction in central vision. A central visual defect in can occur in some cases.

How can it be treated?

If the VMT is minimal, it is best left alone and to allow it to resolve by itself. However, in some cases, it may progress to a full thickness macular hole.

If the symptoms are severe, there are several options of treatment as follows:

- 1) **Gas injection into the eye** – this gas theoretically will help relieve the traction but there is a risk that it may progress to a macular hole as well. Other risk includes a small risk of cataract progression, retinal detachment, infection, short term increased in eye pressure and loss of vision.
- 2) Injection of a medicine called **JETREA**. It is an enzyme that dissolves the adhesion between the vitreous and the macula. A relief of the VMT can be achieved up to 30% of cases in one month after the injection. This medicine has its risk of causing a transient drop in vision, flashing or floaters, short term increased in eye pressure and other risk of infection and retinal detachment.
- 3) **Pars plana vitrectomy** – this is an operation to relieve the VMT manually through surgery. This surgery is similar to repairing a macular hole.

