

Re: Lim R, Lim KS: XEN Implant-Related Endophthalmitis

To the Editor:

The case of XEN[®] Gel Stent (Allergan, Dublin, Ireland) related endophthalmitis presented by Lim & Lim¹ highlights important management issues in patients with failed XEN[®] surgery and flat conjunctiva overlying the implant. While blebitis and endophthalmitis have been reported in patients with functioning XEN[®] implants,² the current case suggests a risk for infection even following failed surgery.¹ It is not currently possible to quantify the population risk of erosion or endophthalmitis in patients with failed XEN[®] surgery and further robust post-marketing surveillance of these rare but potentially devastating complications is warranted. A retrospective analysis of 185 standalone XEN[®] implantations with a median follow-up of 15 months did however report only one case of implant erosion and no cases of endophthalmitis.³ Despite its rare occurrence, the possibility of erosion and infection must be considered in patients with failed XEN[®] surgery. Lim and Lim recommend regular review of patients with failed XEN[®] surgery.¹ However, given the rapid speed of onset of endophthalmitis, regular review of patients with a failed XEN[®] may not be sufficient to prevent this sight-threatening complication. In the case of a failed XEN[®] with flat overlying conjunctiva, where revision surgery is not planned, surgical removal of the implant ought to be a consideration.

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References:

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2. Kerr NM, Wang J, Sandhu A, et al. Ab Interno Gel Implant-associated Bleb-related Infection. *Am J Ophthalmol* 2018;189:96–101.

3. Schlenker MB, Gulamhusein H, Conrad-Hengerer I, et al. Efficacy, Safety, and Risk Factors for Failure of Standalone Ab Interno Gelatin Microstent Implantation versus Standalone Trabeculectomy. *Ophthalmology* 2017;124:1579–1588.