

Screening examination of premature infants for retinopathy of prematurity

2002/01(制定)
2013/10(修)

Who:

BWt < 1500 g, GA ≤ 30 wk

BWt 1500-2000g with an unstable clinical course

Record:

Use the international classification of ROP to record the location and sequential retinal changes.

When:

First examination : **4 weeks of chornologic age, or 31st week of postconceptional age whichever comes later**

Follow up

- ◆ Zone I any ROP, Zone II or III stage 2 or 3:
 - repeat exam in 1 week.
- ◆ Imcomplete vessels or stage 1 or 2 in zone II:
 - repeat examination in 2 weeks.
- ◆ Imcomplete vessels or stage 1 or 2 in zone III:
 - repeat examination in 2-3 weeks.
- ◆ Mature eye: 3 months post-term

When to treat

- ◆ Treat prethreshold eyes that develop plus disease.
- ◆ Prethreshold ROP
 - Zone I : any stage of ROP
 - Zone II : stage 2+ or 3 , or 3+ with insufficient clock hours.

Exceptions:

- Zone I : Treat stage 3 without plus.
- Zone II : add stage “1+”
- Zone III: Rarely, if ever, treat.

• Treatment modalities:

- Intravitreal injection of VEGF inhibitor (avastin)
- Laser photocoagulation
- Surgical intervention for retinal detachment: Vitrectomy or scleral buckle for retinal detachment

International Classification of ROP

Stage I : demarcation line

Stage II : ridge

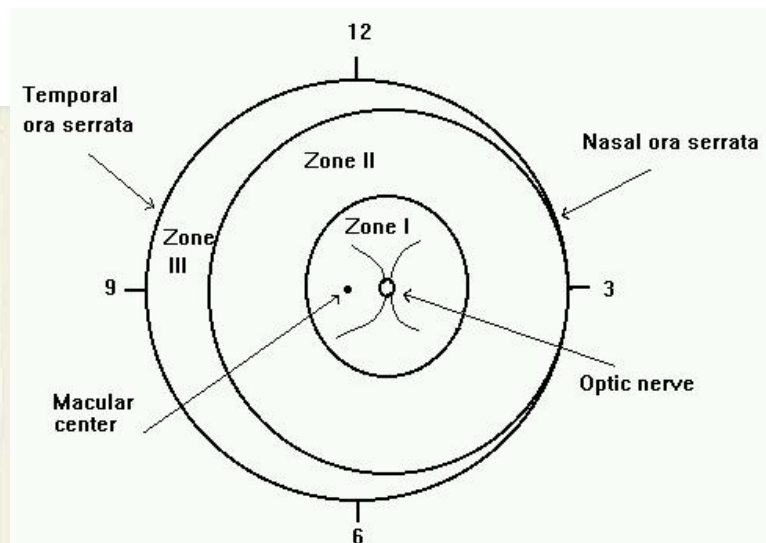
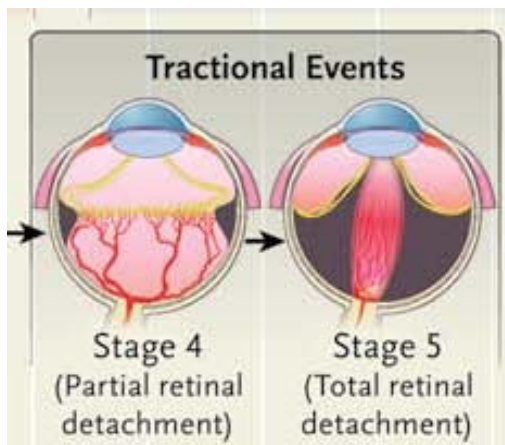
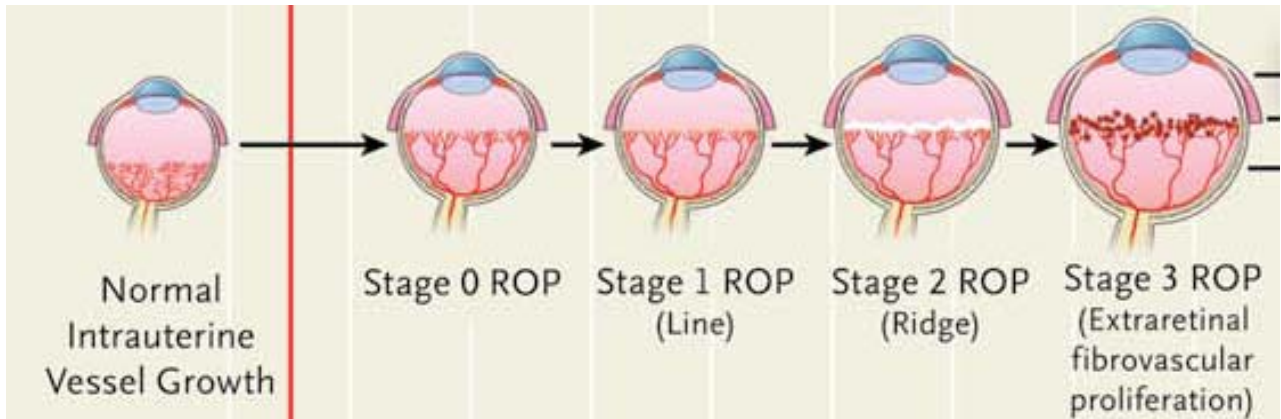
Stage III : ridge with extraretinal fibrovascular proliferation

Stage IV : subtotal retinal detachment (A: extrafoveal, B: including fovea)

Stage V : complete retina detachment

Plus sign : dilation & tortuosity of the blood vessels near the optic nerve. Growth & dilation of abnormal blood vessels on the surface of the iris, rigidity of the pupil, and vitreous haze.

⇒ marked vascular shunting, meaning relative high risk of progression



參考網址：<http://www.konnections.com/eyedoc/icrop.html>