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Comparing aquaflow implant with Esnoper implant in deep sclerectomy

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Purpose: To compare the efficacy and safety of non-penetrating deep sclerectomy (NPDS) with absorbable Aquaflow® or non-absorbable Esnoper® implantation.
Material and methods: Retrospective comparative study of open angle-glaucoma patients that underwent NPDS with Aquaflow® or Esnoper® implantation, between January 2010 and December 2012. We included 76 eyes of 65 patients. Of these, 50 eyes received Aquaflow® implant and 26 Esnoper® implants.
Results: The mean follow-up period was 23.16 ± 8.99 months for Aquaflow® device (group 1) and 18.00 ± 9.60 months for Esnoper® (group 2), maximum 36 months and minimum 6 months. After a 24 month follow-up, mean intraocular pressure (IOP) decreased in the Aquaflow® group from IOP decreased 20.02 ± 3.68 mmHg to 14.62 ± 3.22 mmHg and in Esnoper® group from 19.81 ± 5.58 mmHg to 14.70 ± 3.30 mmHg ($p = 0.946$); complete success rates were 76% and 90%, respectively ($p = 0.007$). After 36 months of follow-up, mean IOP was 16.64 ± 3.41 mmHg (group 1) and 14.25 ± 1.26 mmHg (group 2) ($p = 0.204$). There was no statistically difference between the number of antiglaucoma medications used in either group ($p = 0.841$). Among postoperative complications, six patients (12%) of group 1 and 2 (8%) of group 2 had complications.
Conclusions: In the case of Aquaflow® and Esnoper® application, NPDS demonstrates similar efficacy and safety, although the qualified sucess rate in the case of NPDS with Esnoper® is significantly higher after a 24-month follow-up. Esnoper® is a cheaper option for NPDS, when resource limitations prevents implant use.