
TO THE EDITOR: We read with interest the paper by Schlenker et al published recently. The authors state that the results with the Xen implant (Allergan, Parsippany-Troy Hills, NJ) with mitomycin C (MMC) are very similar to those of trabeculectomy with MMC in terms of both safety and efficacy. Based on these data, they suggest that the Xen implant is a reasonable alternative to trabeculectomy. When comparing the 2 groups in this paper, this finding does indeed seem to be the case. However, we think it is reasonable to point out that results from the trabeculectomy group are considerably worse than those from other real-world studies.

Although comparison between studies is always fraught with difficulties, it is possible with some caveats. In the study by Schlenker et al, a success rate of an intraocular pressure of 6 to 17 mmHg is used as a primary measure and by 11.2 months (without medication), 25% had failed in the trabeculectomy group (with a slightly and nonsignificantly earlier failure time in the Xen group). Comparison of this current study with one of the authors’ previous papers (in what seems to be a broadly comparable group of patients) is instructive. For that study, a failure rate of 9.9% was recorded at 12 months using a similar outcome measure. Comparison with data from the UK Trabeculectomy Outcomes Study Group published in this journal and another report, show similar results to those of the 2006 paper from Stalmans et al. The complete success rate by the same criteria at 2 years in our study of 2013 was 81.3%. In both these studies, the time to 25% failure rate is not helpful because it is never reached!

Why the success rates are so different is not clear. The bleb needling rates reported in the paper from Schlenker et al are significantly higher than the rates in most comparable studies. It is not clear from the manuscript how many bleb needling procedures per patient were performed, but we infer that some patients may have had several needling revisions. Although trabeculectomy with MMC and Xen implantation with MMC have similar modest outcomes in the study from Schenker et al, it is important to be clear that there are other real-world studies with substantially better trabeculectomy outcomes.

Perhaps a better concluding statement for the paper from Schenker et al is that the Xen implant is a reasonable alternative to trabeculectomy where the trabeculectomy results are suboptimal, and where the surgeon and patient are prepared to countenance a very high bleb needling rate.

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References