
Erratum

Vitreous Floaters and Vision: Current Concepts and Management Paradigms

Laura C. Huang, Kenneth M.P. Yee, Christianne A. Wa, Justin N. Nguyen, Alfredo A. Sadun, and J. Sebag

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L.C. Huang, BA
VMR Institute for Vitreous Macula Retina,
7677 Center Avenue, suite 400,
Huntington Beach, CA 92647, USA

Doheny Eye Institute, Department of Ophthalmology,
Los Angeles, CA, USA

University of Miami Miller School of Medicine, Miami, FL, USA
e-mail: lchuang@med.miami.edu

K.M.P. Yee, BS • C.A. Wa, BA
J. Sebag, MD, FACS, FRCOphth, FARVO (✉)
VMR Institute for Vitreous Macula Retina,
7677 Center Avenue, suite 400,
Huntington Beach, CA 92647, USA

Doheny Eye Institute, Department of Ophthalmology,
Los Angeles, CA, USA
e-mail: kennethmpy@gmail.com;
cwa@usc.edu; jsebag@VMRinstitute.com

J.N. Nguyen, BA
VMR Institute for Vitreous Macula Retina,
7677 Center Avenue, suite 400,
Huntington Beach, CA 92647, USA

A.A. Sadun, MD, PhD, FARVO
Doheny Eye Institute/UCLA,
Los Angeles, CA, USA
e-mail: alfredo.sadun@gmail.com

The Figure V.B.8-9 in chapter V.B.8. is incorrect. The correct figure and its legend are given below:

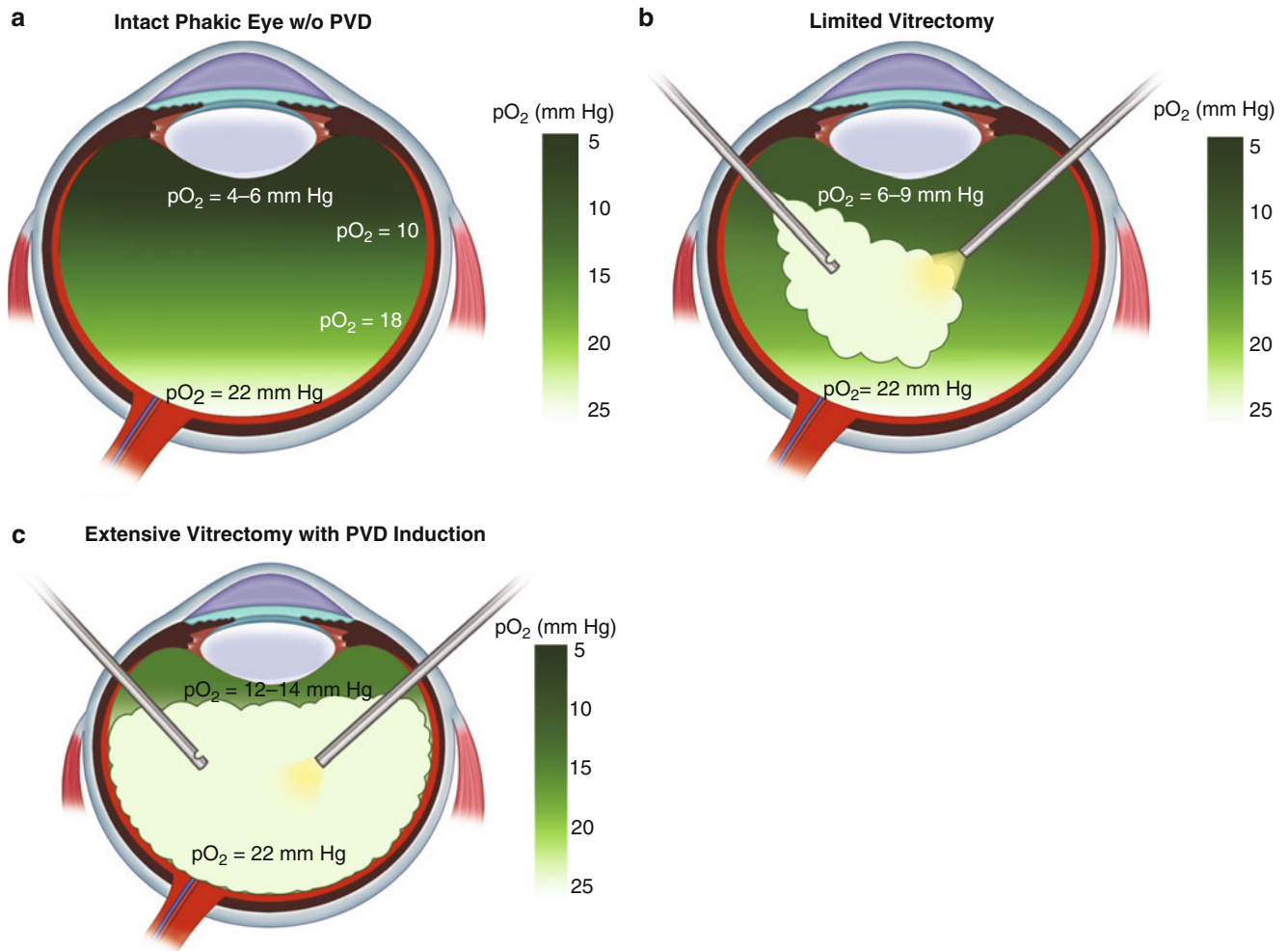


Figure V.B.8-9 The effects of limited vitrectomy on oxygen distribution. Intravitreal oxygen arises from the retina/choroid circulation posteriorly as well as from the ciliary body anteriorly. Vitrectomy increases convective motion and fluid circulation in the vitreous chamber, which increases oxygen levels behind the lens. (a) **Intact eye.** The pO_2 gradient ranges from 22 mmHg at the posterior pole to 18 mmHg at the equator and 10 mmHg peripherally in front of the ciliary body. pO_2 levels are 4–6 mmHg behind the lens. (b) **Limited vitrectomy.** Leaving the anterior vitreous intact and not inducing a PVD results in increased

retrolental oxygen levels of only 6–9 mmHg. This may account for the relatively low (23 %) incidence of cataract formation observed with limited vitrectomy. (c) **Extensive vitrectomy with PVD induction.** Following extensive vitrectomy with surgical induction of PVD, retrolental oxygen levels increase to 12–14 mmHg, approaching three-fold above those in the intact eye. These elevated levels may account for the 50–76 % incidence of cataract formation following extensive vitrectomy. (Adapted from Beebe, Holekamp, et al.)