

## **Sobrevida libre de rechazo o falla en pacientes sometidos a queratoplastia penetrante**

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Trabajo de Investigación presentado como requisito para optar el título de:  
**Especialista en Oftalmología**

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## RESUMEN

La queratoplastia penetrante (QP) es una técnica quirúrgica ampliamente empleada para tratar enfermedades corneales que afectan la transparencia y funcionalidad visual. A pesar de los avances, el rechazo inmunológico y la falla del injerto siguen siendo desafíos relevantes para su sobrevida a largo plazo.

**Objetivo:** Evaluar la sobrevida libre de rechazo o falla del injerto en pacientes sometidos a queratoplastia penetrante en una institución de referencia en Barranquilla entre 2018 y 2023.

**Métodos:** Se realizó un estudio retrospectivo y analítico. Se incluyeron 299 pacientes mayores de 18 años con seguimiento postoperatorio  $\geq 6$  meses. Se recolectaron variables clínicas, quirúrgicas y del donante. Se aplicaron análisis descriptivos, pruebas de asociación (Chi-cuadrado, Wilcoxon) y curvas de Kaplan-Meier para estimar la sobrevida según sexo, medio de preservación y tiempo de isquemia. Se utilizó R (v4.3.3) para el análisis.

**Resultados:** La sobrevida libre de rechazo o falla a los 12 meses fue del 91% (IC 95%: 87.6–94.5%). No se encontraron diferencias significativas por sexo ni por tiempo de isquemia. La tasa de rechazo fue mayor en injertos preservados con Optisol (22%) comparado con Eusol (7.3%,  $p < 0.001$ ), aunque la sobrevida general fue similar. El queratocono fue más frecuente en hombres jóvenes, mientras que leucomas y rechazos previos predominaron en mujeres mayores.

**Conclusión:** La QP muestra una alta efectividad a corto plazo. El medio de preservación y la patología de base podrían influir en el riesgo de rechazo, lo que resalta la necesidad de estrategias individualizadas.

**Palabras clave:** Queratoplastia penetrante; Rechazo del injerto; Medio de preservación; Sobrevida; Córnea.

## ABSTRACT

Penetrating keratoplasty (PK) is a widely used surgical technique for treating corneal diseases that impair transparency and visual function. Despite technical advances, graft rejection and failure remain significant challenges for long-term survival.

**Objective:** To evaluate rejection-free or graft failure-free survival in patients undergoing penetrating keratoplasty at a referral institution in Barranquilla between 2018 and 2023.

**Methods:** A retrospective, analytical study was conducted. A total of 299 patients aged >18 years with  $\geq 6$  months of postoperative follow-up were included. Clinical, surgical, and donor variables were collected. Descriptive statistics, chi-square and Wilcoxon tests were used, and Kaplan-Meier survival curves estimated graft survival by sex, preservation medium, and ischemia time. R software (v4.3.3) was used for analysis.

**Results:** Graft survival free of rejection/failure at 12 months was 91% (95% CI: 87.6–94.5%). No significant differences were observed by sex or ischemia time. Rejection was more frequent with grafts preserved in Optisol (22%) compared to Eusol (7.3%,  $p < 0.001$ ), although overall survival was similar. Keratoconus was more prevalent in younger males, whereas leucomas and prior rejections were more common in older females.

**Conclusion:** PK demonstrates high short-term effectiveness. Preservation medium and underlying pathology may influence rejection risk, highlighting the importance of individualized strategies.

**Keywords:** Penetrating keratoplasty; Graft rejection; Preservation medium; Survival; Cornea.

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