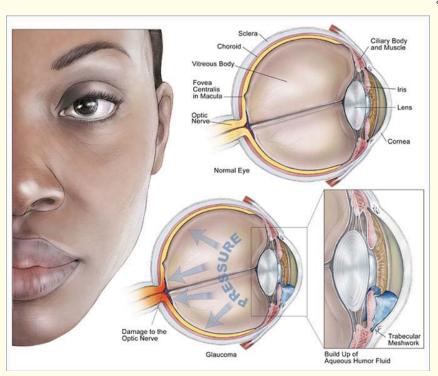
GLAUCOMA

Glaucoma is a silent progressive eye disease that can irreversibly destroy your vision. After cancer and heart disease, glaucoma is the 3rd most feared disease. It is estimated of the over 3 million Americans who have glaucoma only half are aware of the disease. In fact, glaucoma is the second leading cause of blindness worldwide. Current estimates suggest there are about 65 million cases of glaucoma worldwide.

Approximately 120,000 Americans are blind from glaucoma which accounts for 9% to 12% of US cases. About 2% of the population ages 40-50 and 8% over 70 have elevated intra-ocular pressures (IOP). Glaucoma is known to be the leading cause of blindness among Blacks and they are 6-8 times more likely to develop glaucoma than Whites. Blacks between the ages of 45-65 statistically are 14-17 times more likely to go blind from glaucoma than Whites in the same age group.

In addition to race as a factor for the development of glaucoma there are other additional high-risk categories.



ARE YOU AT RISK FOR GLAUCOMA?

Everyone potentially is at risk. However, certain factors make groups of people at higher risk than others. Those who are at risk for glaucoma development should get a complete dilated eye exam every year.

The following groups are at higher risk for developing glaucoma: African-Americans; People over 60; Family history of glaucoma; Diabetics; High blood pressure; People who are severely nearsighted; Steroid users (both oral and via inhalers); Previous eye injuries; Having a central corneal thickness less than .5 mm.

ARE THERE ANY SYMPTOMS TO GLAUCOMA?

Most forms of glaucoma have NO symptoms. The exception is Closed Angle Glaucoma (CAG). In its milder presentation, CAG may have minimal to no symptoms. When CAG is in its severe or acute stage, immediate medical attention is mandatory. The symptoms of an acute angle closure usually affect one eye and are

accompanied by sudden severe blurring of the vision, intense boring eye pain, colored halos around lights, redness around the eye, nausea and vomiting.

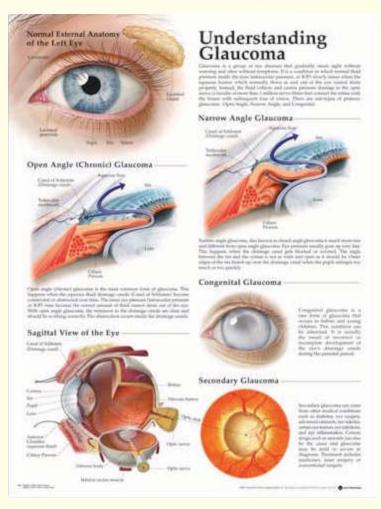
FOUR KEY FACTS ABOUT GLAUCOMA:

 Glaucoma is a leading cause of blindness.

Glaucoma will cause blindness if left untreated. Approximately 10% of people with glaucoma who receive proper treatment still experience loss of vision.

2. There is no cure (as of yet) for glaucoma.

Glaucoma is not curable at this time and any vision lost cannot be regained. Generally, with appropriate medication and most important, excellent patient compliance, it is possible to halt



further loss of vision. Since glaucoma is a chronic condition, it must be monitored for life. Proper diagnosis is the first step in preserving your vision.

3. Everyone is at risk for glaucoma.

Everyone is at potential risk for glaucoma from infants to senior citizens. Certainly older Americans risk is higher for glaucoma yet there are babies born with glaucoma (approximately 1 out of every 10,000 babies born in the United States). Young adults are susceptible to develop glaucoma and African-Americans in particular are susceptible at a younger age.

4. 4. There may be no symptoms to warn you.

The most common form of glaucoma, known as Open Angle Glaucoma (OAG), had

virtually no symptoms. An eye with a higher pressure is not necessarily an uncomfortable eye. Glaucomatous vision loss begins with the peripheral or side vision. Sadly, the vast majority of people do not recognize this silent loss of vision until significant progression has occurred. The best way to protect your sight from glaucoma's deleterious effects is to be tested and followed regularly. If you are diagnosed with glaucoma, treatment may begin immediately.

Sources: (1) Prevent Blindness America; (2) National Eye Health Program/ National Institutes of Health; (3) American Academy of Ophthalmology; (4) Racial differences in the cause-specific prevalence of blindness in east Baltimore. N Engl J Med. 1991 Nov 14:325(20):1412-7; (5) Quigley, "Number of people with glaucoma worldwide," 1996; (6) NEI, Report of the Glaucoma Panel. Fall 1998

TYPES OF GLAUCOMA:

There are many types of glaucoma: Primary Open Angle Glaucoma, Angle Closure Glaucoma, Low or Normal Tension Glaucoma (LTG or NTG), Secondary Glaucomas, and Pediatric Glaucoma.

The two main types of glaucoma are primary open angle glaucoma (POAG), and angle closure glaucoma (ACG); typical findings are an increase of intraocular pressure (IOP) or pressure within the eye. When optic nerve damage is observed despite normal IOP, it is termed low or normal tension glaucoma. Secondary glaucoma refers to any case in which another disease causes or contributes to increased eye pressure, resulting in optic nerve damage and vision loss. Most pediatric glaucoma cases are congenital in nature.

COMMON GLAUCOMA DIAGNOSTIC TESTS:

Early detection through regular and complete eye exams are the single greatest key to protecting your vision from glaucoma damage. When a glaucoma diagnosis is made or suspected, the following tests are recommended:

Tonometry: This measures the eye's IOP. A normal range is between 10-20mmHg.

Ophthalmoscopy: This technique uses a special light while using magnification to examine the inside of the eye. Special emphasis is on the optic nerve.

Visual Field Perimetry: This test measures the patient's peripheral (side) vision. Damage generally affected the patient's periphery first and almost

always occurs without the patient's awareness.

Gonioscopy: A small contact lens-like instrument held over the eye directly evaluates the eye's "drainage" system.

Optic Nerve Computer Imaging: Several instruments are available to evaluate retinal nerve fiber layer (NFL) thickness and determine if NFL loss has occurred. GDx, HRT II, and the OCT are but a few instruments in the arsenal of glaucoma detection and monitoring. Thinning of the NFL also shows up on the results of the visual field tests.

Corneal Thickness: The Ocular Hypertension Study (OHTS) in 2002 re-demonstrated corneal thickness importance wherein too thick or too thin corneas may mask an accurate reading of eye pressure. Pachymetry is a quick painless test to measure corneal thickness.

TREATING GLAUCOMA:

Current treatment modalities include prescription eyedrops, laser procedure(s), filtration surgery, or placement of a special valve within the eye to obtain a consistent reduction in IOP. Success results in prevention of further damage to the optic nerve.

While there is no current glaucoma cure, research continues at a furious pace. In the meantime, early diagnosis, treatment, and close patient follow-up care are significant factors in preserving eyesight. Regularly scheduled visits to your eye doctor monitoring the IOP and potential for peripheral vision changes in addition to patient compliance in taking their medications are key in winning the fight on glaucoma.





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