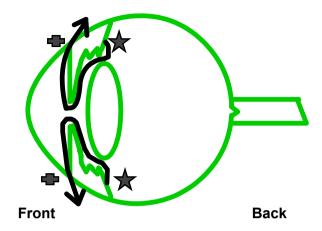
What is 'eye pressure?





Aqueous fluid produced here

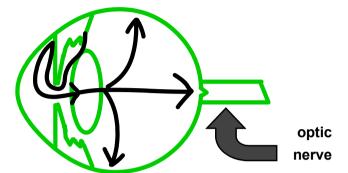
Your eye is partly filled with a watery fluid, called 'aqueous'. The aqueous is made in the middle chamber of the eye.

The fluid normally flows forward into the front chamber, and leaves the eye in a special drainage system. From the drain, it flows into the blood stream. (It has nothing to do with tears; tears cover the front surface of the eye only.)

What are your concerns?

If you have any concerns or questions after reading this leaflet, discuss them with the doctor in the eye clinic.

Why does the eye pressure go up?



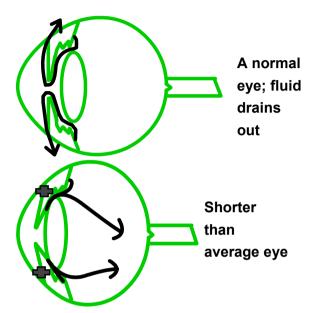
If the fluid cannot drain out of the eye, the pressure in the eye goes up. This is like a tyre being pumped up and going a little 'hard'. The extra pressure then presses on the nerve at the back of the eye.

The optic nerve is the 'electric wire' of the eye that takes messages about what you see to the brain. If the nerve is damaged your sight becomes reduced.

What is glaucoma?

Glaucoma is the name given to the condition when the pressure has damaged the optic nerve. There are many different types of glaucoma, but the nerve can become damaged in all types. Nowadays glaucoma is usually caught early and most people keep good sight for the rest of their lives.

What is angle closure glaucoma?



If you have angle closure glaucoma your eye (especially the front chamber) is smaller than normal. A blockage develops, shown by the 'crosses' immediately above. As a result there is not enough space for the aqueous fluid to flow to the front chamber of the eye and out of the eye. In addition, the fluid pushes the iris (the pupil) even further forward, trapping more fluid in the eye. This puts the pressure up and damages the optic nerve.

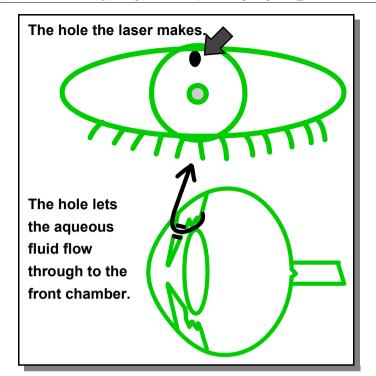
Symptoms: what you see & feel

If your ophthalmologist thinks you have or may develop angle closure glaucoma,

- without laser treatment you may develop an 'attack' of acute glaucoma. This is when your eye may become red misty and painful over a few hours. Laser as below completely prevents this.
- your sight may become worse from a type of glaucoma that develops over years. Laser helps to prevent this, but occasionally you may need drops as well.

Laser treatment

First you sit at the laser machine, then drops are used to anaesthetise the front of your eye, and a small contact lens is placed on your eye. When the button is pressed you may feel a slight pain lasting a second or less. The laser makes a tiny hole in the iris of your eye. ('Laser' is a type of very bright focused light.) The hole is invisible to the naked eye. Once the hole is made fluid can flow though to the front

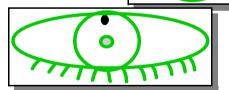


chamber and then out of the eye. This keeps the eye pressure down. Occasionally the laser only goes half way through the iris, and you may need the hole completed a week or two later.

Before the laser you need drops to make your pupil small. These may give you a headache. Tablets keep the eye pressure down for the first day, and these can make you feel a little funny, with pins and needles. You need anti-inflammatory drops for a week, as well as your regular glaucoma drops if you have any. Many people do not need drops after 4 weeks.

Angle Closure Glaucoma & Laser Treatment

- What is eye pressure?
- What is angle closure glaucoma?
- What do you notice?
- What is the laser treatment?
- Will you need drops for ever?



This leaflet describes angle closure glaucoma and the laser treatment it needs.

It may occur with other types of glaucoma, and there are other leaflets explaining these in clinic.

This leaflet is designed to be photocopied in black and white. Print out page one and two in colour.

For outpatient use is easier to photocopy than print out double sided copies. Photocopy page one, and two, as 'double sided'. The leaflet can then be folded as shown and is easy to display. Make sure one of the pages is not upside down...this may require experimenting how pages feed

