“Glaucoma- What a GP needs to know”
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What is Glaucoma
-“an optic neuropathy characterized by a specific pattern of optic nerve head and visual field damage- a final common pathway resulting from a number of different conditions that can affect the eye”
- most of these disorders are associated with raised intraocular pressure
  (1/3 of glaucoma patients have a normal IOP: less than 21mmHg)
- gonioscopy determines whether the anterior chamber angle is closed or open, allowing categorization into open or closed angle glaucoma.

How big is the problem?
60.5 million by 2010, 80 million by 2020; 7% blind due to glaucoma
50% are aware of their disease (OAG) in UK
Which drugs can make glaucoma worse?
Open Angle  Steroids
Closed Angle  Tricyclics, MAOIs, antihistamines, antiparkinsonian/antipsychotic/antispasmodylic
Sulfa containing medications- even after laser iridotomy
Who is at risk?
Elderly (over 70s have 3.5x risk of 40s). Family Hx (up to 10x risk)
Who gets free eye tests?
Under 16, or under 19 and in full time education
Aged ≥60 (60-70 it is one test every 24 m ; >70 it is one test every 12 m)
Registered blind or partially sighted
Diagnosed as having diabetes or glaucoma
≥40 or over with a first degree relative with glaucoma, or you have been advised by an ophthalmologist that you are at risk of glaucoma
Are there any hospital/community glaucoma schemes in operation in Cambs PCT?
Yes. Currently the only scheme east of Peterborough is the CHANGES scheme
(Community & Hinchingbrooke Allied Network Glaucoma Evaluation Scheme)
What are the classes of eyedrops for lowering IOP? generics?
Broadly these are prostaglandin analogues, beta blockers, miotics and carbonic anhydrase inhibitors. There are also bottles that contain combinations of these. Betagan and timoptol have generic equivalents. Other than these, medications should not be switched without seeking advice of ophthalmologist.

What non-IOP dependent factors are there?
Vasospastic factors: eg. migraine & Raynaud’s syndrome
Poor perfusion: nocturnal dippers, sleep apnoea

A spectrum of severity

Glaucoma & Cataract Surgery
Often co-exist. Cataract surgery often more complex.

Conclusions:
Common disease becoming commoner
Important role of community in its Mx
Requires support of patient as chronic Dx with chronic Rx
Strong evidence base with ongoing research

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