

Optometric Role in Treating Glaucoma

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I) Can you feel the pressure?

- A) Central Corneal Thickness
- B) Goldmann Applanation Tonometry
- C) Other Applanation Tonometers

II) What's your angle?

A) Rational

- 1) Major decision point in glaucoma therapy
- 2) Essential for ongoing glaucoma therapy
- 3) Reimbursable procedure

B) Anatomy

- 1) Iris
- 2) Last roll of the irisAKA: Iris recess
- 3) Ciliary Body
 - a) Three muscle tissue
 - b) Anatomy
 - i) Pars Plana
 - ii) Pars Plicata
 - iii) Anterior Segment extension
 - iv) Iris insertion
- 4) Scleral Spur
- 5) Trabecular meshwork

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a) Functional

b) Non-Functional

c) Schlemm's Canal

II) What's your angle? (cont.)

B) Anatomy

6) Schwalbe's Line

a) Posterior embryotoxinAKAAnteriorly displaced Schwalbe's line

ii) Visible by slit-lamp examination (no gonio)

iii) Clinical appearance

i) Thin, white, posterior, peripheral line

ii) Circumcorneal

iii) Usually most easily visualized on lateral cornea

C) Lens Selection

1) 3-mirror contact lens

a) Description

i) Parabolic mirror (single) for the angle

ii) Rectangular mirror peripheral retina

iii) Trapezoidal mirror equatorial retina

iv) Scleral

b) Advantages

i) Stable

ii) Versatile

c) Disadvantages

i) Large size

ii) Limited usefulness (single mirror)

iii) Mirror is "short"

iv) Mirror is has a "flat" angle

v) Eccentric mirror position

vi) Requires cushioning solution

vii) 270° rotation for anterior chamber evaluation

2) 2-mirror contact lens

a) Description

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- i) Both mirrors for the angle
- ii) Both mirrors are "tall"
- iii) Both mirrors are "close-in"
- iv) Scleral

b) Advantages

- i) Easier insertion
- ii) Effective even in narrow/steep angles
- iii) Only 90° rotation for anterior chamber evaluation

II) What's your angle? (cont.)

C) Lens Selection(cont.)

3) 4-mirror contact lens

a) Description

- i) 4 mirrors
- ii) Corneal

b) Advantages

- i) Small profile
- ii) No cushioning solution
- iii) No rotation to see entire angle
- iv) Compression gonioscopy

c) Disadvantages

- i) Difficult to learn
- ii) Steep learning curve

D) Cases

III) Playing the field...

A) Strategies

B) Parameters

C) Analysis

D) Cases

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IV) You've got a lot of nerve...

A) Techniques

B) ISNT rule

C) Technology

D) Cases

V) Do as I say, not as I do...

A) Challenges in compliance

B) Building rapport with your patient

C) Cases

VI) Pharmacology

A) The monocular trial

B) Target Pressure

C) Practical Clinical Guidelines