How is glaucoma treated?

Glaucoma damage is permanent—it cannot be reversed. But medicine and surgery help to stop further damage to your eyes.

Medication. Glaucoma is usually controlled with eye drop medicine. Use drop medicine every day as directed by your ophthalmologist. These drops can make your vision temporarily blurry. Some drops cause changes in your eye color or eyelash growth. Using eye drops reduces the amount of fluid in the eyes.

- **Changes in breathing (especially if you have asthma or breathing problems)**
- **Dry mouth**
- **Blurred vision**
- **Eye pain**
- **Eye redness**
- **Eye irritation**
- **Eye swelling**
- **Eye changes**
- **Eye darkening**
- **Eye itching**

You should call your ophthalmologist if you think you may have side effects from glaucoma medicine.

Never change or stop taking your glaucoma medicine without talking to your ophthalmologist. If you are about to run out of your medicine, ask your ophthalmologist if you should have your prescription refilled.

**Laser therapy.** There are two main types of laser therapy to treat glaucoma. They help aqueous drain from the eye.

**Trabeculoplasty.** This is a surgery your ophthalmologist may use if you have angle-closure glaucoma. The eye surgeon uses a laser to create a tiny hole in the iris. This helps fluid flow to the blood vessels.

**Trabeculectomy.** This is a surgery your ophthalmologist may use if you have open-angle glaucoma. The eye surgeon removes a flap in the sclera (white of your eye). He or she will also create a tiny opening in the sclera (called a reservoir). Your eye surgeon creates this reservoir beneath the conjunctiva (the thin membrane that covers the inside of your eye). When the fluid in the reservoir is absorbed into nearby blood vessels, it is usually hidden under the eyelid and cannot be seen. It is usually hidden under your skin or your vision.

**Summary**

Glaucoma is a disease that can damage the eye’s optic nerve. When the optic nerve is damaged, it can cause blindness. Ophthalmologists treat glaucoma with medicine and surgery. Because glaucoma has no warning signs, it is important to see your ophthalmologist regularly, who will check for eye and vision changes.

If you have any questions about your eyes or your vision, speak with your ophthalmologist. They are committed to protecting your eyes or your treatment, talk with your ophthalmologist.

**Your role in glaucoma treatment**

Treating glaucoma successfully is a team effort between you and your doctor. Your ophthalmologist will prescribe your glaucoma treatment. It is up to you to follow your doctor’s instructions and use your eye drops.

Once you are taking medications for glaucoma, your ophthalmologist will want to see you regularly. You can expect to visit your ophthalmologist about every 3 to 6 months. However, this can vary depending on your treatment needs.

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## Medication

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### What is glaucoma?

Glaucoma is a disease that damages your eye’s optic nerve. It usually happens when fluid builds up in the front part of your eye. That extra fluid increases pressure in your eye, damaging the optic nerve.

### How is glaucoma diagnosed?

The only sure way to diagnose glaucoma is with a complete eye exam. A glaucoma screening includes people who:

- are over age 40
- have family members with glaucoma
- are African, Hispanic or Asian heritage
- have diabetes, high blood pressure, migraines, poor blood circulation or other health problems affecting the whole body

Glaucoma suspects:

- People who:
  - have diabetes, high blood pressure, migraines, poor blood circulation or other health problems affecting the whole body
  - have thinning of the optic nerve
  - have diabetes, high blood pressure, migraines, poor blood circulation or other health problems affecting the whole body

### Who is at risk for glaucoma?

People with more than one of these risk factors have an even higher risk of glaucoma. People with more than one of these risk factors have an even higher risk of glaucoma.

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### Eyes to Know Words

Optic nerve: A nerve at the back of the eye that connects to your brain. The optic nerve sends light signals to your brain so you can see.

Aqueous humor: Clear liquid inside the front part of your eye. Aqueous humor circulates around your eye to nourish it and helps it stay in shape.

Drainage angle: The area of the eye where the aqueous humor drains out of the eye. It is like a drain that carries excess liquid out of the eye. The drainage angle helps regulate the flow of fluid into the eye, keeping pressure stable.

### Glaucoma is a leading cause of blindness for people over 60 years old. But blindness from glaucoma can often be prevented with early treatment.

### Types of glaucoma

There are two major types of glaucoma:

- Open-angle glaucoma
- Angle-closure glaucoma

### What causes glaucoma?

Your eye constantly makes aqueous humor. As new aqueous flows into your eye, the same amount should drain out. The fluid drains out through an area called the drainage angle. This process keeps pressure in the eye (called intraocular pressure or IOP) stable. But if the drainage angle is not working properly, fluid builds up in the eye. That extra fluid increases pressure in your eye, damaging the optic nerve.

The optic nerve is made of more than a million tiny nerve fibers. It is like an electric cable made up of many small wires. As these nerve fibers die, you will develop blind spots in your vision. You may notice these blind spots until most of your optic nerve fibers have died. If all of the fibers die, you will become blind.

### Glaucoma suspects.

Some people have no signs of damage but have higher than normal eye pressure (called ocular hypertension). These patients are considered “glaucoma suspects” and have a higher risk of eventually developing glaucoma.

### Normal tension glaucoma.

Normal tension glaucoma. People with “normal tension glaucoma” have eye pressure that is within normal ranges, but show signs of glaucoma, such as blind spots in their field of vision and optic nerve damage.

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