

What should I do?

Based on your risk factors and current eye exam, Dr. Cecchi will recommend periodic monitoring and possibly treatment.

Resources online include:

www.glaucoma.org

www.nei.nih.gov/health/glaucoma/

Also talk to family members about their risk and need for yearly eye exams.

Who We Are

About Us

Dr. Cecchi offers a wide variety of eye and vision related services.

Specializing in cataract surgery, he also offers comprehensive eye exams, glaucoma screening and treatment, macular degeneration monitoring, and functional eyelid surgery.

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Open Angle
Glaucoma



What is it?

Glaucoma is damage to the optic nerve from eye pressure that is too high. It is usually without symptoms until later stages, where it can lead to “tunnel vision”, then blindness. Fortunately, if treated, most cases are able to be controlled. There are several different forms of glaucoma, the most common of which is called Open Angle Glaucoma (OAG).

Risk factors

Known risk factors include increased eye pressure, thin cornea, positive family history in 1st degree relatives, age (over 60), race (African American). Minor risk factors include, Diabetes, Low blood pressure, sleep apnea, prolonged use of systemic steroids. Other ocular abnormalities pose risks for developing glaucoma but usually only detectable by an eye doctor.

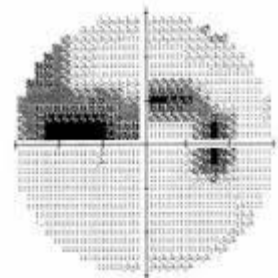
Diagnosis

The early diagnosis of glaucoma can be difficult. Routine eye exam can detect early changes which may require further testing to confirm that optic nerve damage is occurring. Typically, optic nerve “cupping” can tip the eye doctor that there is on-going nerve damage. Intraocular pressure (IOP) is a routine, easy to perform measurement of eye pressure, which if elevated heightens the risk of glaucoma.

The gold standard is the peripheral vision test. The test is performed on an automated perimeter which can map out the peripheral vision. Even if you feel your peripheral vision is good, the perimeter can detect subtle changes which may indicate that there is field loss from glaucoma.

Optic coherence tomography (OCT) is also now used to analyze the optic nerve tissue and can map changes on the nerve. It is highly reproducible and therefore very useful in following any progression of the disease.

Other tests include central corneal thickness (pachymetry) and gonioscopy.



Typical field loss with glaucoma

Treatment

Intraocular pressure (IOP) lowering is the only known treatment for glaucoma. Unfortunately it is not curative; that is, if the treatment is stopped, the progression of glaucoma ensues.

Treatment is in 3 forms. Topical medication (eye drops), laser, or surgery. Usually in that order.

Typically topical medication is started in the affected eye(s). If the eye pressure is not adequately reduced further drops may be needed.

Laser trabeculoplasty (SLT) is targeted to the drainage site within the eye and may lower the eye pressure by facilitating drainage of the eye's internal fluid.