

## Patient information

# **Glaucoma**

St Pauls Eye Department – Royal Liverpool Hospital

### **My Doctor Says I Have Glaucoma What Does This Mean?**

Glaucoma is a very common condition of the eyes, particularly in the elderly. It can run in families. Glaucoma causes no symptoms at first, but as the disease progresses 'peripheral vision' can be lost. Peripheral vision is the part of your sight that lets you see things out of the corner of your eye.

Some people find that their vision becomes hazy, as if they were looking through frosted glass. Primary open angle glaucoma is the most common type of glaucoma. It can be caused by an increase in the pressure inside the eye.

### **Why do I have high pressure in my eyes?**

Normally, your eye is filled with a watery liquid that is constantly being made and then draining away. If a blockage occurs in the drainage channel, the liquid can't drain away and so stays in your eye causing the pressure to rise. High pressure in the eye can damage vital parts of your eye, for example the optic nerve that transmits information from your eye to your brain.

### **Are there any other related conditions?**

Pressure in your eye may be high without causing any damage. This condition is called Ocular Hypertension. Your ophthalmologist may monitor this or ask your optician to do so. Treatment may be given to prevent glaucoma.

Glaucoma type damage may occur without high pressure. This is called normal (or low) tension glaucoma.

### **How does glaucoma affect me? Will I go blind?**

Most people carry on a normal existence and never become aware of glaucoma damage. Most people who are treated do not lose their sight. Carrying out visual field tests can monitor your peripheral vision loss. Without regular monitoring and effective treatment, tunnel vision can develop and blindness may occur.

### **How is glaucoma treated?**

Glaucoma is usually treated with drops. Your ophthalmologist will choose and discuss the best option for you.

You may be prescribed one or more eye drops. You must try to use your drops exactly as prescribed. Only your ophthalmologist will be able to tell if your drops are working. It is important that you do not stop taking your drops.

### **What if I forget to take my drops?**

Don't worry. Don't put any extra drops in but take the next dose at the right time. You must make sure that you always have enough drops and that you never run out.

### **Are there any other treatments?**

Your ophthalmologist may decide that you need an operation or laser treatment to reduce the pressure in your eye.

### **How often do I need to be seen?**

If you have glaucoma, you should be seen at least once a year. When you are seen, your ophthalmologist will measure the pressure in your eye and examine the inside of your eye. A field test is done about once a year, depending on your eye condition. The test takes an average ten minutes to complete. If you do not have glaucoma and are over 40, an eye test should be done once a year (especially if glaucoma runs in your family).

## **Feedback**

Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

## **Further information**

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**Glaucoma Nurses**

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**The International Glaucoma Association**  
**[www.iga.org.uk](http://www.iga.org.uk)**

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