

# Glaucoma



THE COLLEGE  
OF OPTOMETRISTS

## Overview

Glaucoma is a group of eye diseases in which the optic nerve, which connects your eye to your brain, is damaged by the pressure of the fluid inside your eye. This may be because the pressure is higher than normal, or because the nerve is more susceptible to damage from pressure. This may affect one or both of your eyes.

Because you often cannot feel the pressure, and the damage happens slowly, you may not know you have glaucoma until a lot of damage has been done. That damage cannot be put right, so it is particularly important that you find out early. The best way to make sure of this is to have a regular eye examination with an optometrist. If you are at risk of developing glaucoma, you should have an eye examination at least every two years, or more often if your optometrist recommends it.

If you have glaucoma but do not treat it, your eyesight will gradually get worse, and you could eventually go blind. The good news is that treatment with eye drops may stop it getting worse.

### *The risk of glaucoma goes up as you get older*

If you have any concerns about the health of your eyes, please visit your local optometrist. Optometrists are the eye-health specialists on the high street. An eye examination is a vital health check and should be part of everyone's normal health care.

***Glaucoma is much more common in people of African-Caribbean or Asian origin***

**Who gets glaucoma?**

Anyone can develop glaucoma. The risk of developing glaucoma goes up if you are:

- aged over 40
- very short-sighted
- of African or Caribbean origin
- closely related to someone with glaucoma.

If one of your parents or children, or a brother or sister, has glaucoma, and you are over 40, the NHS will pay for your eye examination.

(In Scotland all eye examinations are provided under the NHS.)



Normal

A person with glaucoma may see blurring around the outside of their vision, but this is usually when glaucoma is well advanced. Catch it early to avoid this.



With glaucoma

## How is glaucoma detected?

Because the early stages of glaucoma do not cause symptoms, the best way to catch it early is to have regular eye examinations.

There are three main tests to see if you have glaucoma. The first one is where your optometrist looks at the nerve at the back of your eye using a special torch called an ophthalmoscope, or a machine called a slit lamp. They may also take a photograph of the nerve. This can be useful for future visits, to help them see if things have changed.

The second test is where the optometrist measures the pressure inside your eye. This may be done by gently blowing a puff of air at your eye, or by numbing your eye with drops and then gently pressing an instrument called a tonometer against it. The tests do not hurt, although the puff of air may make you jump a bit.

The third test is where the optometrist tests how wide your visual field is – how far you can see around you when you are looking straight ahead.

Sometimes you can have glaucoma even if you have low pressure, which is why you will usually have at least two of these three tests. If the results are not clear, you may be asked to do one or more of the tests again on a different day.



Glaucoma testing

## **I have been told that the pressure inside my eye is high, but I do not have glaucoma**

Some people naturally have pressure that is above the normal range, but this pressure does not cause any damage to their eyes. This means they do not have glaucoma. However, they are more likely to develop glaucoma, so your optometrist or ophthalmologist (a specialist eye doctor) will tell you how often you should have this checked.

***Because glaucoma causes no symptoms at first, if you are at risk you must have regular eye examinations to detect it early***

## **What will happen if I have glaucoma?**

If your optometrist suspects that you may have glaucoma, he or she will refer you to an ophthalmologist. If you do have glaucoma, you will be given eye drops to use every day. They will reduce the pressure and help control the build-up of fluid. They will not hurt.

Because you will not feel different in any way, you will not be able to tell that the treatment is working. This is why it is very important that you:

- go to your follow-up appointments; and
- keep on using the drops. If you find it hard to use the eye drops, you can get special bottles or holders to make it easier.

In a small number of cases, an ophthalmologist may recommend that you have an operation to help drain away the fluid.

There is no cure for glaucoma but it can be treated effectively, normally with eye drops. Any existing eye damage will probably be

permanent, but your sight could get much worse if you stop the treatment. It is very important that you use the eye drops every day, even if you cannot tell that they are helping.

### **I have glaucoma. Can I drive?**

If you drive a car and have been diagnosed with glaucoma in both eyes, this will affect the amount you can see, and the law says that you must tell the DVLA (Driver and Vehicle Licensing Authority). You may have to take some extra tests, but most people are still allowed to carry on driving. You can find out more at [www.direct.gov.uk/driverhealth](http://www.direct.gov.uk/driverhealth)

### **Closed-angle glaucoma**

This is a type of glaucoma where the drainage channels of your eye are blocked or damaged in some way. Sometimes the increased pressure can come and go, and some people get short bursts of pain and blurred vision. This can happen when your pupil gets bigger, so it may be at night or when you are in a dark area (like the cinema). Other symptoms are an ache in the eye which comes and goes, red eyes, or seeing haloes around lights. Or it can be a bit like looking through a haze or mist.

People who are more likely to get closed-angle glaucoma are people over 40, women, people of Asian origin, people with a family history of closed-angle glaucoma, and people who are very long-sighted.

***Glaucoma  
tends to run  
in families***

**For more information please talk to your local optometrist.**

This leaflet is produced by the College of Optometrists. The College is the professional, scientific and examining body for optometry in the UK. People who are members agree to meet the highest clinical and ethical standards. Look for the letters MCOptom or FCOptom to see if your optometrist is a member.

You can find a member optometrist near you on our website **[www.lookafteryoureyes.org](http://www.lookafteryoureyes.org)** – just go to ‘Find an optometrist’ and enter your postcode.

***Glaucoma is a condition that can be managed. Most people with glaucoma lead perfectly normal lives***

**For more information:**

- visit **[www.lookafteryoureyes.org](http://www.lookafteryoureyes.org)**
- look up glaucoma on the NHS Choices website **[www.nhs.uk](http://www.nhs.uk)**
- phone SightLine, an information, support and advice service provided by the International Glaucoma Association, on 01233 648170, or visit **[www.glaucoma-association.com](http://www.glaucoma-association.com)**

This information should not replace advice from your optometrist or relevant health professional.

Your local optometrist:

If you would like this leaflet in large print, please email  
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