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Patient information

Laser treatment for angle closure glaucoma or those potentially at risk of angle closure glaucoma

For further questions or advice, please contact the Glaucoma Nurse on 01284 712923

This leaflet is for patients with angle-closure glaucoma or those potentially at risk of angle-closure glaucoma, who have been recommended laser peripheral iridotomy as a treatment.

What is laser peripheral iridotomy?

Laser peripheral iridotomy is a procedure used in the treatment of patients with angle-closure glaucoma, or as a preventative measure in people who are at risk of angle-closure glaucoma.

“Angle-closure” refers to a narrowing of the drainage channel for the aqueous fluid within the eye, resulting in high pressure inside the eye (intraocular pressure). This high intraocular pressure can cause damage to the optic nerve, which can result in a type of vision loss known as glaucoma.

Putting you first

A small hole is made with the laser in the iris in order to relieve the narrow or closed angle. (This hole is not visible to the naked eye). The aqueous fluid then passes through the hole inducing the iris to fall back away from the drainage meshwork thus allowing the aqueous fluid to drain freely through the meshwork.

Risks of the procedure

A small amount of bleeding from the laser hole (inside the eye) is not uncommon and can cause misty vision which usually settles within 24 hours. This can also cause a temporary rise in eye pressure. Around a quarter of all patients undergoing laser iridotomy notice a small change in their vision. In the majority of cases, the vision returns to normal within a month. Rarely, patients notice a permanent change in their vision. Research has shown that “ghosting” around objects may be experienced but this is extremely rare.

What will happen on the day?

The procedure takes place in a room separate from the main clinic area. You will be given some eye drops beforehand which sometimes cause a mild transient headache. They may affect your vision, altering the focus of the eye, and making things appear darker and more blurred than usual. These effects are normal and temporary. For this reason do not drive the day you come for your laser treatment.

You will be given local anaesthetic drops which often cause a slight tingling or stinging for a few seconds. A contact lens is used to improve the doctor’s view and prevent the eye from closing. It is important not to move; the vast majority of patients manage to keep still without any problems.

A bright white light is shone into the eye to allow the doctor to see where the treatment is being applied. This can cause the vision to be dimmed for up to 30 minutes afterwards. A pulsed ("YAG") laser is used, which makes a soft clicking noise and gives a very short flicking sensation when activated. While most people do not experience any sensation apart from the flicking, the treatment is occasionally uncomfortable for a small number of patients.

Aftercare

Routinely, you will be given anti-inflammatory eye drops to use for a few days after the procedure and then seen in clinic for a check-up.

Some patients also require long term drops treatment to further control their eye pressure.

For further questions or advice, please contact the Glaucoma Nurse on 01284 712923

West Suffolk NHS Foundation Trust is actively involved in clinical research. Your doctor, clinical team or the research and development department may contact you regarding specific clinical research studies that you might be interested in participating in. If you do not wish to be contacted for these purposes, please email info.gov@wsh.nsh.uk. This will in no way affect the care or treatment you receive.

If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (the new name for DisabledGo) https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust

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