

# WALL POSTERS

## PRODUCT FEATURES

RESEARCHED  
BASED DESIGN  
& LAYOUT

SIMPLIFIED  
ANATOMICAL  
ILLUSTRATIONS

EVIDENCE BASED  
MEDICAL  
INFORMATION



WRITTEN IN  
A LAYMAN'S  
LANGUAGE

DRUG  
AND  
TREATMENT  
OPTIONS

MEDICAL TERMS  
EXPLAINED

SELF-HELP  
INFORMATION

REVIEWED  
BY FAMILY  
DOCTORS

REVIEWED  
BY A  
PATIENT  
GROUP

**Diseases Explained™**

# Glaucoma

**What Is Glaucoma?**  
Glaucoma is the name given to a group of conditions in which the optic nerve sustains damage when it leaves the eye. In many cases, this damage is caused by a rise in pressure (intraocular pressure) within the eye.

**What Causes Glaucoma?**  
In the pressure build-up, it compresses the highly blood vessels supplying the optic nerve, which sends messages to the brain. If left untreated, this can lead to irreversible damage to the optic nerve.

**Recognizing the Symptoms**  
The most common form of Glaucoma, open angle, starts gradually and gives no warning symptoms, until a late stage, where much irreversible damage has been done by the full situation. Without treatment it can progress to complete blindness.

**Treatment**  
Although treatment can control Glaucoma, and possibly avoid or delay the need for surgery, sight loss cannot be reversed or early detection and treatment is vital.

**DRUG AND TREATMENT OPTIONS**

Drug Type	Effect
Alpha 2 Agonists	Increase the aqueous outflow and decrease the rate of fluid production.
Beta Blockers	Reduce the production of aqueous humor by blocking the enzymes which stimulate fluid production.
Carbonic Dehydratase Inhibitors	Reduce a fluid to pressure by suppressing production of aqueous humor.
Prostaglandin Synthase Inhibitors	Increase the aqueous outflow from the eye.
Prostaglandin Analogs	Increase the aqueous outflow from the eye.
Sympathomimetics	Increase intraocular pressure by increasing the outflow of fluid. May be used in conjunction with a beta-blocker.
Myotic	Reduce outflow by constricting the pupil of the eye.
Direct Acting Cholinergic Agents	Reduce outflow by stimulating the action of parasympathetic on the eye.
Cholinesterase Inhibitors	Reduce outflow by inhibiting the enzyme acetylcholinesterase.

**HOW TO THE EYE GROUPS**  
The eye care team includes an optician, ophthalmologist, and ophthalmic nurse.

**Eye Care**  
There are different eye tests, but some can lead to serious complications unless checked. If the test has been passed and you are not in contact with an ophthalmologist, you should be advised to see an ophthalmologist. The most common cause of blindness and vision loss is glaucoma, which is a result of a rise in the fluid pressure within the eye.

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