Elevated intraocular pressure remains the most important but not the only risk factor for the development and progression of glaucomatous optic nerve damage. Accurate measurement of intraocular nerve pressure, therefore, remains essential regarding the management of patients with suspected glaucoma. In a study of 40 eyes of 20 normal subjects and 20 open angle glaucoma patients Tseng and coworkers demonstrate that a tight necktie increased the intraocular pressure, on average, by 2.6 mm Hg in healthy volunteers and in glaucoma patients by 1.0 mm Hg. Not all subjects experienced an increase in pressure after tightening and some even had a decrease. A tight necktie may cause an increase in intraocular pressure in susceptible individuals.

See p 946

Assessing the retinal vein pressure in patients with chronic open angle glaucoma

In recent years, retinal vein occlusion (RVO) has been identified as an adverse event in patients with chronic open angle glaucoma (COAG). Intraocular pressure (IOP) elevation, the presence of neovascularization, and central retinal vein occlusion (CRVO) have been associated with a higher risk of RVO.

In a study, Jonas, using a new ophthalmodynamometer, measured central retinal vein collapse in 19 eyes with chronic open angle glaucoma and 27 eyes of a control group. Central retinal vein collapse pressure measurements were abnormally high in eyes with chronic open angle glaucoma. Future studies may show whether determination of central retinal vein collapse pressure in eyes with chronic open angle glaucoma is suitable for predicting which eyes have a higher risk for eventual retinal vein occlusion and the need therefore for more intensive intraocular pressure lowering therapy.

See p 972

Intravitreal triamcinolone injection for the treatment of chronic open angle glaucoma

The use of intravitreal triamcinolone for the treatment of chronic open angle glaucoma has been associated with an increased risk of retinal vein occlusion. In a study, Sutter and coworkers report four patients who developed an endophthalmitis-like reaction following intravitreal injection of triamcinolone. A dense vitreous haze with severe reduction of the details of the fundus was reported in all cases. There was no periorbital inflammation or pain and no infectious agents were detected to account for the vitreous changes. It appears that acute vitreous haze is an uncommon event after intravitreal injection of triamcinolone and it does not appear to be associated with other serious adverse events and may resolve spontaneously without treatment.

See p 972

Unilateral high myopia

Unilateral high myopia is an uncommon condition. It is however often associated with poor visual acuity even when appropriate anisometric amblyopic therapy has been undertaken. Weiss reports 48 children with unilateral high myopia (5 dioptres or more). In this group, 94% of the children had axial elongation of the more myopic eye. Nearly 90% of patients with axial myopia had an associated abnormality of the eye (especially optic nerve anomalies), central nervous system, or family history of high myopia. Such high prevalence associated pathology in this series suggests that axial myopia is usually a consequence of a pre-existing abnormality.

See p 1025