Patients with pigmentary glaucoma respond well to laser trabeculoplasty, but steps must be taken to reduce the risk of the IOP spike that may occur immediately after the laser treatment.

**The Science behind the Tip**

Argon or selective laser trabeculoplasty (LT) is an established therapeutic option in the treatment of patients with pigment dispersion syndrome and pigmentary glaucoma\(^1\)-\(^3\). This treatment is more effective in younger patients than in older patients. There is a greater chance of failure in patients with pigmentary glaucoma who have had the condition longer and in those with higher pre-treatment IOP\(^1\). The effect declines over time (80% control at 1 year, 45% control at 6 years after argon LT)\(^2\).

A significant concern is the IOP spike that may follow immediately after the laser treatment, presumably secondary to pigment release\(^3\). The risk can be reduced by using g.Aproclonidine 1% pre-treatment, by using low laser energy settings and by reducing the number of treatment spots\(^3\). These patients should have their IOP checked 2 hours after their procedure.

**References**


**Contributor:** J F Salmon MD FRCS, Oxford Eye Hospital