



Patients with neovascular glaucoma should be referred to a general physician as management of their underlying systemic disease should increase their life expectancy

The Science behind the Tip

Most patients with neovascular glaucoma have retinal ischaemia secondary to either proliferative diabetic retinopathy, ischaemic central retinal vein occlusion or carotid vessel disease. The life expectancy of patients undergoing implantation surgery for this condition has been reported to be approximately 6.5 years (52%) less than expected life span. Good presenting visual acuity appears to be a significant predictor of increased life expectancy¹. In those with a preoperative visual acuity of better than 6/48, 2.4 years of life expectancy is lost, compared to 10.8 years in those with an acuity less than 6/60¹. Other studies have revealed a mortality rate of 15% -22% at 2 years after tube insertion^{2,3}.

By managing these patients in conjunction with a general physician and by controlling systemic disease, the risk to the fellow eye can be reduced and life expectancy should be increased.

References

- 1) Life expectancy of patients with neovascular glaucoma drained by Molteno implants. Blanc JP, Molteno ACB, Fuller JR et al Clin Exp Ophthalmol 2004; 32: 360-3
- 2) Molteno tube implantation for neovascular glaucoma. Mermoud A, Salmon JF, Alexander PA, et al., A ophthalmology 1993; 100- 897-902.
- 3) Filtering valve surgery for neovascular glaucoma. Krupin T, Kaufman P, Mandell A et al Am J Ophthalmol 1980: 89:338-43