



The regular (and sometimes clandestine) application of periorbital corticosteroid cream can induce glaucoma in susceptible individuals

The Science behind the Tip

Steroid-induced ocular hypertension and glaucoma is typically associated with topical steroid therapy and presents with a clinical picture that resembles open-angle glaucoma. The degree of IOP elevation is related to the potency of the steroid and the route of administration. On rare occasions, this can be caused by the use of periorbital steroid cream^{1,2}. Discontinuation of the steroid is usually all that is required to reduce the IOP.

The condition is commonly witnessed in patients with established glaucoma. Risk factors include a family history of glaucoma, diabetes and high myopia³. The rise in IOP is a consequence of increased resistance to aqueous outflow, possibly through an influence on the extra-cellular matrix or endothelial cells of the trabecular meshwork⁴.

References

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- 3) Tripathi RC, Parapuram SK, Tripathi BJ et al. Corticosteroids and glaucoma risk. Drugs Ageing 1999; 15: 439-450.
- 4) Zhang X, Clark AF, Yorio T. FK 506-binding protein 51 regulates nuclear transport of the glucocorticoid receptor beta and glucocorticoid responsiveness. Invest Ophthalmol Vis Sci 2008; 49: 1037-1047.