When glaucoma is not glaucoma

The Science behind the Tip

An increased excavation of the optic nerve head is usually associated to glaucoma, but other optic neuropathies may also display an increased excavation thereby resembling glaucoma.

While hereditary, vascular, infectious, or nutritional (including methanol-induced) causes may be suspected by a thorough medical history, compressive opticopathies in addition can have distinctive clinical features: age below 50, visual acuity below 6/12, pale optic nerve rim, vertical axis of visual field defects, dyschromatopsia or sudden onset of symptoms, and should prompt neuroradiological imaging. These features carry high specificities, however sensitivities are quite low. OCT can aid in differentiation between glaucomatous versus compressive opticopathy showing more pronounced temporal and nasal reduction of macular and circumpapillary parameters in compressive opticopathies. Still, in ambiguous cases clinical alertness should be high.

References


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