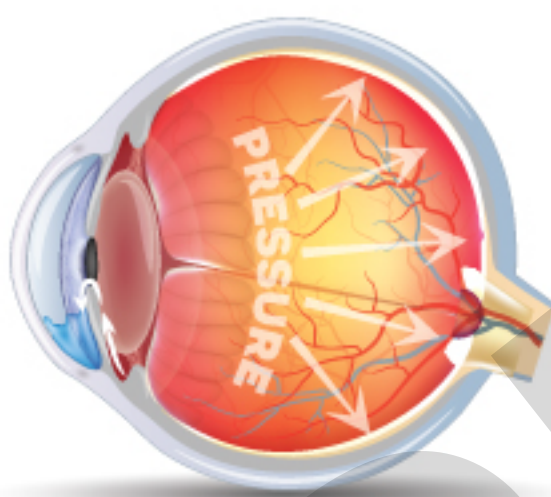


GLAUCOMA

Glaucoma damages the optic nerve, causing **increased intraocular pressure** (IOP)

Fluctuation of IOP is a possible **risk factor** for glaucoma progression



Common types are **primary open-angle glaucoma** (POAG) and **normal-tension glaucoma** (NTG)

How effective are 360° SLT and 0.004% travoprost in reducing 24-h circadian IOP?

Comparative study between patients with POAG and NTG

60



(1:1 randomization)

58 Asian patients

26

32



360° SLT

30

POAG

16

NTG

14

Avg. IOP reduction: 3.7 mmHg



0.004% Travoprost

30

POAG

16

NTG

14

Avg. IOP reduction: 4.1 mmHg

Percentage of eyes that achieved post treatment 24-h IOP fluctuations < 3 mmHg

87%

82%



9 AM to 7 PM

100%

96%

94%

93%



9 PM to 7 AM

98%

96%

SECONDARY OUTCOME MEASURES

Peak IOP

Trough IOP

SLT success rate

Reduction of mean IOP

24-h circadian curves of IOP

Success in IOP fluctuation reduction

75%
SLT

92%
Travoprost

≥ 50% reduction

Both SLT and travoprost achieved IOP fluctuations < 3mmHg during the night time

Travoprost controls diurnal IOP fluctuations more effectively than SLT