



Closed or Narrow Angle Glaucoma Treatment: Laser Peripheral Iridotomy (LPI)

The Procedure

This is an out patient laser surgery. The treatment for angle closure and narrow angles is to make a small hole in the periphery of the iris with a Yag Laser. Eye drops are used to numb the eye. The laser delivers fast, highly focused intense packets of energy which opens a hole in the iris. This hole is called an “iridotomy”. Most patients report a static shock feeling but experience little discomfort. This opening is placed under the upper eyelid where it is out of the line of sight. When the iris has such a hole, it cannot block the outflow of fluid. This treatment is frequently recommended as a preventive measure of the anterior chamber angle is very narrow, even if it has never closed off with pressure elevation

Success

Laser iridotomy can prevent further episodes of sudden (acute) closed-angle glaucoma. Laser iridotomy can usually prevent slow-forming (subacute) closed-angle glaucoma in people who are at risk for closed-angle glaucoma. Closed-angle glaucoma usually affects both eyes over time. When sudden (acute) closed-angle glaucoma occurs in one eye and laser surgery has been done on that eye, laser iridotomy is usually done on the other eye to prevent the condition from developing. Without treatment, there is a 50% chance that closed-angle glaucoma will also develop in the unaffected eye. Sometimes people can take less medicine to treat glaucoma after having laser iridotomy.

Recovery

Unlike traditional surgery and SLT the recovery is quick. Complications are not common after an LPI. Vision may be blurrier for several hours. You may experience a temporary increase in your eye pressure which could require short term eye drop therapy. You will be asked to return for a follow up visit about 1 week later.