

The Future of Glaucoma in Asia

As the burden of visual disability from cataract is progressively being tackled by a series of governmental and non-governmental coordinated projects, glaucoma in its various forms is becoming increasingly appreciated as the major therapeutic challenge facing ophthalmology. Already, glaucoma is the second commonest cause of blindness worldwide,¹ and our current abilities to diagnose and to treat it effectively are so lacking that it is not even listed in the top 5 target conditions for the World Health Organization and Vision 2020 programmes.

While population screening and resources to minimise visual loss from the open angle glaucomas may be difficult to justify with current technology, the same relative nihilism may not apply to primary angle closure (PAC), and the glaucoma (PACG) it can provoke.²

In this issue, important contributions to the understanding of PAC and PACG are provided in the feature article on angle closure glaucoma and in the Conference Report for the Association for Research in Vision and Ophthalmology (ARVO) Annual Meeting held earlier this year. More accurate, easier, and cheaper methods of detection of anterior segment crowding as a predisposing feature plus greater awareness of the possible consequences, together with increased availability of lasers to create peripheral iridectomies and/or iridoplasties, are changing the scene. For our region, in particular, in which PAC and PACG pose a major public health danger, this is good news.

Under the auspices of the Asian Oceanic Glaucoma Society and the South East Asian Glaucoma Interest Group, a Working Party, supported by a Review Committee, is writing Glaucoma Guidelines for the Asian scene. These will build on the publications of the European Glaucoma Society and the Preferred Practice Patterns of the American Academy of Ophthalmology (which were supported by the American Glaucoma Society), but will be able to include more recent data, and to place this information into the context of Asia.

To reduce visual disability from the glaucomas in this region is the mission statement of our groups. From this, flow the specific objectives, including the enhancement of knowledge amongst eye care workers and guidance to provide a rational, evidence-based approach to the diagnosis and management of the glaucomas. Development of Asian Guidelines is one of the strategies to achieve this, in a manner that is relevant to the needs of our communities with their different patterns of glaucoma. This will be sensitive to the variable availability of human, structural, and equipment resources.

While the primary target audience for the Guidelines will be our community of comprehensive ophthalmologists, allied eye care professionals should find them useful. The Guidelines should aid promotion of public awareness and patient education as well as our liaison with governmental agencies and non-governmental organisations.

The Working Party welcomes input from all interested individuals and organisations. Once developed, the Guidelines will be circulated widely for comment and, hopefully, for endorsement, and then implementation.

1. Quigley HA. Number of people with glaucoma world wide. *Br J Ophthalmol* 1996;80:389-393.
2. Foster PJ, Johnson GJ. Primary angle closure: classification and clinical features. In: Hitchings R, editor. *Fundamentals of clinical ophthalmology – glaucoma*. BMJ Books: London; 2000:145-152.

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