

NAME: _____ EYE: OD OS DATE _____

CILIARY BODY GLAUCOMA TREATMENTS

There are several ways to try to treat glaucoma. Medications or surgery are the most common techniques. Both medications and surgery are designed to do one of two things: 1) to decrease the amount of fluid production in the eye from the cells that make the fluid, or 2) to help the fluid flow out of the eye.

The traditional surgical way of treating the cells that make the fluid has been to use a cryoprobe (a freezing probe). This procedure is called a **CYCLOCRYOTHEREPY**. This technique involves putting the eye to sleep and freezing the outer part until an ice ball is formed. This freezes the inside of the eye where the fluid is made. This procedure causes the cells that make fluid in the eye to decrease their usual production. The number of treatments required to control the intraocular pressure with this technique is variable. Sometimes people require as few as one treatment, while others require many treatments. This procedure is not without risk. The greatest risk is the need for further surgery. Other risks would include: 1) loss of vision, 2) pain, 3) eventual shrinkage of the eye (phthisis), 4) corneal or ocular surface irritation, 5) intraocular inflammation, and 6) the usual risk of the anesthetic.

Another technique, **CYCLOPHOTOCOAGULATION (CPC)**, has been developed which achieves the same results as using the freezing probe. In place of using the probe, the **cyclophotocoagulation** procedure utilizes a **DIODE** laser to treat cells that make the fluid in the eye. The greatest risk involved with CPC is the need to repeat laser treatment, probably greater than the need for repeat surgery with **cyclocryotherapy**. However, the risk for the other problems is less.

There will be a need to change the medications to try to control the inflammation and discomfort of the eye. There also will be a need for the patient to be evaluated after the treatment to see how the inflammation and intraocular pressure response is effective.

I consent to have Russell Hayhurst M.D. / Blythe Monheit M.D. to perform this procedure on my right eye / left eye and had an opportunity to have my questions answered.

Patient (or person authorized to sign)

Date

Witness

Date