

Glaucoma Research Society of Canada News & Information



Vol. 28 No. 2 Fall 2017

We Support New Ideas

You're invited to the Glaucoma
Research Society of Canada's
Annual Meeting of Supporters
Tuesday, October 17, 2017

Refreshments: 5:45 pm Business Meeting: 6:30 pm
CNIB Conference Centre
1929 Bayview Avenue, Toronto

Parking fees in effect.
See enclosed flyer for details.



**We need you, your families and
friends to walk or run in the**
Scotiabank Toronto
Waterfront Marathon on
Sunday, October 22, 2017
and help raise money
for glaucoma research

Last year your Society's participation
in the Marathon raised nearly \$79,000 for
research! This year with your help, we can
do even better. To register or to sponsor a
participant, go to www.STWM.ca

Risk of glaucoma tied to drug injections for macular degeneration

A study suggests that drugs that preserve vision in people with age-related macular degeneration might increase the risk of glaucoma. The study found that people who received at least 7 eye injections of Avastin (bevacizumab) each year to treat macular degeneration have a higher risk of eventually needing surgery to treat glaucoma.

"Even though there may be a risk here, this doesn't mean you should not be getting injections for macular degeneration," said study lead author Dr. Brennan Eadie, ophthalmology resident at the University of British Columbia in Vancouver. These drugs help stave off a previously untreatable cause of blindness in the elderly, and should continue to be used. If glaucoma does develop, treatments are available.

"This is something we should monitor for, with the understanding there is a real risk of needing glaucoma surgery if the pressure remains elevated," Eadie said.

The study wasn't designed to prove a cause-and-effect relationship. It only found an association between the treatment and the development of glaucoma.

— *journal JAMA Ophthalmology, March 2017*



Dr. Rajiv Bindlish answers your questions about glaucoma

I want to use baby shampoo to treat eye lash inflammation. Do I mix it with water or use it straight from the bottle?

The use of baby shampoo or eye make-up remover is for the treatment of Blepharitis - an inflammation of the eye lashes.

Either use hot compresses for 5 minutes or lid scrubs (analogous to removing eye make-up). You can use them undiluted, but there may be less stinging and eye irritation when diluted.

I suggest trying just a drop on the finger first - if it is too irritating for the eye then dilute it with some water. No formula, just add enough water so it stays soapy but not irritating.

Is any reliable DNA testing available as glaucoma runs in my family?

Glaucoma risk increases when family members are affected. However routine genetic testing for glaucoma is only indicated in research settings. Less than 5% of primary open-angle glaucoma cases currently have an associated genetic defect. The genes tested so far - myocilin, OPTN and TKB1 - have a low positive rate.

Genetic testing is helpful for juvenile open-angle glaucoma (JOAG) (onset of glaucoma younger than age 30). Different myocilin gene variants are associated with JOAG and they can be present in up to 63% of cases. The other situation where genetic testing is used is in primary congenital glaucoma (age less than one year).

If you are over 40 with no family history of JOAG, then genetic testing is not advised.

I have glaucoma and use drops every day. My levels are consistent most of the time. My doctor wants me to undergo the Heidelberg ocular imaging test every 6 months. How often do I need the test?

Most glaucoma tests are recommended once to twice a year. Tests will vary in image quality and alignment from visit to visit. The more tests that are done the less variable the results will be and the more accurately any change in the appearance of the optic nerve will be detected. Sometimes it can take 10 tests before any meaningful change is detected and reliable.

I have both types of glaucoma, one in each eye. My doctor has told me I will probably have to get laser eye surgery in a couple of years. I'm a synchronized swimmer. I was wondering what the recovery would be like. Will I be able to swim? Will I have to wear an eye patch? When will I be able to get back to school?

Argon laser trabeculoplasty and selective laser trabeculoplast are applied to the trabecular meshwork (drain of the eye) to get it to work better and lower eye pressure in open-angle glaucoma. YAG laser iridotomy makes a small hole in the iris to open access to the drainage area in patients at risk of or who have narrow/closed angle glaucoma.

I don't foresee any issues with school or swimming as both types of laser surgery are done on an out-patient basis with no prep and quick recovery. The eye is not bandaged and there is minimal downtime.

My father had glaucoma surgery one month ago, but his eye pressure is still not controlled. What should I do?

Unfortunately glaucoma surgery does not always work the first time or in some people. Sometimes though, over time, the pressure may continue to lower so I would not be too concerned yet. Further treatment may include restarting eye drops, revising the existing surgery or doing more surgery.

I am 85 years old in good health except for hypertension which is under control. An optometrist tested my eyes and told me I needed an iridotomy for narrow-angle glaucoma. I went for a second opinion and that optometrist could not see why I would need an iridotomy. An ophthalmologist did many tests including a gonioscopy and said that on a scale of 4 to 1, I was 2 in one eye and 1.5 in the other and that I should have surgery. What should I do?

Gonioscopy is performed during an eye exam to evaluate the internal drainage system of the eye and diagnose narrow-angle glaucoma. We usually recommend treatment for narrow angles when the drain of the eye (trabecular meshwork) is not visible. There is a risk of angle closure glaucoma without treatment. Treatment for narrow angles is a YAG laser iridotomy that makes a small opening in the iris.

Recently, cataract surgery (removal of the natural lens) has been shown to improve narrow angles and the cause for the narrowing is the large lens (cataract) crowding the inside of the eye. If you have minimal cataract or minimal visual issues then laser may be a more conservative approach. In your case, I would ask the optometrist or ophthalmologist to refer you to a glaucoma specialist to confirm if you have a significantly narrow-angle.

I have been using LUMIGAN® at night and sometimes in the morning. Is this okay?

No, it is best to use LUMIGAN® in the evening. If you miss a dose, use it the next evening. Using the medication twice per day can affect its potency and increase side effects.

**Email your questions
about glaucoma to
info@glaucomaresearch.ca
or call**

416-483-0200 1-877-483-0204

President's Message



In its fiscal year ended May 31, 2017, the GRSC received bequests of over \$97,000 and raised nearly \$79,000 from participating in the 2016 Scotiabank Waterfront Marathon. This enabled it to approve research grants in excess

of \$293,000 in support of 15 projects, while maintaining a reserve for the next year. The descriptions of these projects in the enclosed insert reflect the complexity of the issues in dealing with causes of, treatment for and effects of glaucoma and the ongoing need for the Society to support this leading edge research. The GRSC thanks all of its generous supporters for making those grants possible.

The GRSC will participate in the Scotiabank Waterfront Marathon on Sunday, October 22, 2017. Dr. Mark Shaffer, our Executive Secretary, is again leading this effort along with a committee of volunteers. In March, the Society participated in a fundraising event sponsored by the Hudson's Bay Company, which generously gave discounts for goods purchased by holders of tickets purchased from the Society for \$5. The Society plans to participate in a similar event in early 2018. More information will be forthcoming in due course.

The upgrade of the Society's website is continuing. An update on progress will be available at the October 17 Annual Meeting of Supporters. Copies of the audited financial statements will be available at that meeting and will be posted on the website.

More information is available on the next page of this newsletter and on our website about how you can support the Society financially. With your ongoing financial support, the GRSC will make a significant difference through its research.

— James M. Parks, President

Powerful ways to help fund glaucoma research

You can give an existing life insurance policy or purchase a new one naming the Glaucoma Research Society of Canada as owner/beneficiary. Gifts of an existing policy entitle the donor to a tax receipt for the fair market value, which may be greater than the cash surrender value.

You can also designate the GRSC as the beneficiary under a life insurance policy, a registered retirement savings plan, a registered retirement income fund or a tax-free savings account. In that way, the funds will be paid directly to the GRSC without passing through an estate.

Donating marketable securities eliminates any tax on a capital gain and entitles the donor to a receipt for a fair market value donation. This is more tax efficient than giving cash after selling the securities.

Donors should seek professional tax advice in connection with gifts of insurance policies or securities or designations of RRSPs, RRIFs, TFSAs, etc.

You can also make a donation through your will. New rules provide more flexible tax credits if the gift is made within 36 months after death.

Looking for a special and memorable gift to mark a milestone in life?

Whether it's for a birthday, anniversary, wedding, graduation, bar/bat mitzvah or the passing of a loved one, a donation to the GRSC is a meaningful and lasting way to express your sentiments. Your gift funds researchers working to find more effective treatments and a cure for glaucoma.

It's easy to donate over the phone, through our secure website, or by mail. We'll send you a letter acknowledging your gift and a tax deductible receipt.

The Glaucoma Research Society of Canada is a national registered charity funding research into finding a cure for glaucoma. Since 1989, the GRSC has raised over four million dollars for research.

Charitable Registration No 889178695 RR0001

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