

Treatment of ocular hypertension and chronic open angle glaucoma

Before prescribing medication, consider relevant comorbidities and interactions.

Treatment of ocular hypertension, suspected COAG or COAG																																
<p>1. Prescribe generic prostaglandin analogue</p> <p>If intolerant, consider another prostaglandin analogue or a drug from another therapeutic class (beta blocker, carbonic anhydrase inhibitor, sympathomimetic)</p> <p>or</p> <p>preservative free eye drops if allergic to preservatives or with clinically significant and symptomatic ocular surface disease</p>	<p>Counsel patients on how to apply eye drops, including technique (punctual occlusion and devices) and hygiene (storage)</p> <p>Consider discussing compliance device if necessary</p> <p>Advise to continue using the same treatment unless:</p> <ul style="list-style-type: none"> IOP cannot be reduced sufficiently to prevent the risk of progression to sight loss There is progression of optic nerve damage There is progression of visual field defect Intolerance to the eye drops <p>Notes:</p> <ul style="list-style-type: none"> Prescribe generic eye drops Preservative free eye drops if allergic to preservatives or clinically significant symptomatic ocular surface disease 	<table border="1"> <thead> <tr> <th>Eye drops</th> <th>With preservative Multidose</th> <th>Preservative free SDU</th> </tr> </thead> <tbody> <tr> <td>Prostaglandin analogue</td> <td>Latanoprost 50 micrograms/mL</td> <td>Latanoprost 50 micrograms/mL SDU</td> </tr> <tr> <td></td> <td><u>If intolerant to above:</u> Bimatoprost 100 micrograms/mL</td> <td>Bimatoprost 300 micrograms/mL SDU</td> </tr> <tr> <td>Beta-blocker</td> <td>Timolol 2.5 mg/mL</td> <td>Timolol gel 1 mg/g SDU</td> </tr> <tr> <td>Carbonic anhydrase inhibitor</td> <td>Dorzolamide 20 mg/mL</td> <td>Dorzolamide 20 mg/mL SDU</td> </tr> <tr> <td>Carbonic anhydrase inhibitor with Beta-blocker</td> <td>Dorzolamide with Timolol 20 mg/mL 5 mg/mL</td> <td>Dorzolamide with Timolol 20 mg/mL 5 mg/mL SDU</td> </tr> <tr> <td>Prostaglandin analogue with Beta-blocker</td> <td>Bimatoprost with Timolol 300 micrograms/mL 5 mg/mL</td> <td>Bimatoprost with Timolol 300 micrograms/mL 5 mg/mL SDU</td> </tr> <tr> <td>Carbonic anhydrase inhibitor with Alpha-adrenergic agonist</td> <td>Brinzolamide with Brimonidine 10 mg/mL 2 mg/mL</td> <td></td> </tr> <tr> <td>Alpha-adrenergic agonist</td> <td>Brimonidine 2 mg/mL</td> <td></td> </tr> <tr> <td>Antimuscarinic</td> <td>Pilocarpine 20 mg/mL</td> <td>Pilocarpine 20 mg/mL SDU</td> </tr> </tbody> </table>	Eye drops	With preservative Multidose	Preservative free SDU	Prostaglandin analogue	Latanoprost 50 micrograms/mL	Latanoprost 50 micrograms/mL SDU		<u>If intolerant to above:</u> Bimatoprost 100 micrograms/mL	Bimatoprost 300 micrograms/mL SDU	Beta-blocker	Timolol 2.5 mg/mL	Timolol gel 1 mg/g SDU	Carbonic anhydrase inhibitor	Dorzolamide 20 mg/mL	Dorzolamide 20 mg/mL SDU	Carbonic anhydrase inhibitor with Beta-blocker	Dorzolamide with Timolol 20 mg/mL 5 mg/mL	Dorzolamide with Timolol 20 mg/mL 5 mg/mL SDU	Prostaglandin analogue with Beta-blocker	Bimatoprost with Timolol 300 micrograms/mL 5 mg/mL	Bimatoprost with Timolol 300 micrograms/mL 5 mg/mL SDU	Carbonic anhydrase inhibitor with Alpha-adrenergic agonist	Brinzolamide with Brimonidine 10 mg/mL 2 mg/mL		Alpha-adrenergic agonist	Brimonidine 2 mg/mL		Antimuscarinic	Pilocarpine 20 mg/mL	Pilocarpine 20 mg/mL SDU
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<p>2. If target IOP not achieved in patients with satisfactory adherence and eye drop instillation technique</p> <p>add a drug from another therapeutic class (beta blocker, carbonic anhydrase inhibitor, sympathomimetic)</p>																																
<p>3. If drugs from two therapeutic classes have not achieved the target IOP consider surgery</p>																																

Key: COAG chronic open angle glaucoma; IOP intraocular pressure; SDU single dose units. References: NICE Glaucoma: diagnosis and management 2017; BNF 76; SPCs all eye drops