

Additional risk factors for open angle glaucoma

I read with interest the article on primary open angle glaucoma and myopia (*WMJ*. 2007;106[2]:89). I believe 2 important comments should be made regarding the Conclusions paragraph.

First, the risk factors for open angle glaucoma are correct, but notably incomplete. At least as important as any of the listed risk factors is the ophthalmoscopic appearance of the optic nerve. In fact, checking intraocular pressure (IOP) without looking at the optic nerve and documenting the cup to disc ratio has been shown in many studies over many years to result in far too many false positives (ocular hypertension without glaucoma) and false negatives (low

tension glaucoma). (*Am J Epidemiol*. 1991;134:1102). The optic nerve must be examined in addition to an IOP check.

Second, there is now a Validated Prediction Model for the Development of Primary Open Angle Glaucoma in Individuals with Ocular Hypertension (*Ophthalmology*. 2007;114[1]:10-19). The calculator is an outgrowth of the Ocular Hypertension Treatment Study (Dale Heuer, MD, in Milwaukee was one of the principal investigators) and the European Glaucoma Prevention Study. The prediction model—which takes into account the patient's age, vertical cup to disc ratio, IOP, visual field score and central corneal thickness—provides further emphasis regarding the importance of examining the patient's optic nerve and estimating the vertical cup to disc ratio.

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