

Monitoring intraocular pressure for 24 h

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Abstract

High intraocular pressure (IOP) is a leading risk factor for glaucoma, and lowering IOP continues to be the only evidence-based treatment for preventing the development of glaucoma or reducing the rate of its progression. There are considerable data showing that the IOP peaks of many glaucoma patients appear outside the usual office hours.^{1 2} As peak IOP is related to glaucoma progression,³ this suggests that clinicians should take IOP measurements outside office hours into account when planning and prescribing glaucoma treatment.

Based on data collected in our sleep laboratory at the University of California, San Diego, the average supine IOP during the nocturnal/sleep period has been found to be significantly higher than the average sitting IOP during the diurnal/wake period in untreated glaucoma patients.⁴ Our studies compared supine IOP during the nocturnal/sleep period with sitting IOP during the diurnal/wake period to mimic the habitual body positions during the course of our daily activities.

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