

27th European

Ophthalmology Congress

November 26-28, 2018 | Dublin, Ireland

How OCT technology can be used for a more accurate glaucoma diagnosis

Honassys R Rocha Silva
UFBA, Brazil

Glaucoma can be defined as a progressive loss of the retinal nerve fiber layer and ganglion cell as well. Optical coherence tomography (OCT) is a well-known modality providing objective evaluation of structural alterations in the optic nerve head or macular area. Although many efforts have been done and the spent with this disease has been increasing in every country, there still is a challenge of reduction or eradication of new blindness cases. The greatest cause of glaucoma blindness belongs to angle-closure glaucoma. Author will present a new angle closure glaucoma diagnosis perspective through Optical coherence tomography, using the existing device. What it is already known as consensus about OCT uses? How to distinguish a glaucomatous loss to a neurological in origin loss? How to distinguish the retinal nerve fiber layer loss for glaucoma to another retinal causes? Author will present clinic cases that intend to answer these questions, besides the normal age loss.

Recent Publications

1. Costa P Vital, Harris Alan, Anderson Douglas, Stodtmeister Richard, Cremasco Fernanda, Kergoat Helene, Lovasik, John, Stalmans Ingborg, Zeitz Oliver, Lanzl Ines, Gugleta, Konstantin and Shmetterer Leopold (2014) Ocular perfusion pressure in glaucoma. *Acta Ophthalmologica* 92(4):e252-66.
2. Bussell II, Wollstein G and Schuman J S (2014) OCT for glaucoma diagnosis, screening and detection of glaucoma progression. *British Journal of Ophthalmology* 98 Suppl 2:iii15-9.
3. Leung C K (2014) Diagnosing glaucoma progression with optical coherence tomography. *Current Opinion in Ophthalmology* 25(2):104-11.
4. Room R, Babor T and Rehm J (2005) Alcohol and public health. *Lancet* 365:519-530.
5. Mizoguchi Takanori, Ozaki Mineo, Wakiyama Harumi and Ogino Nobuchika (2014) Peripheral iris thickness and association with iridotrabecular contact after laser peripheral iridotomy in patients with primary angle-closure and primary angle-closure glaucoma. DOI: 10.2147/OPHTH.S53516.

Biography

Honassys R Rocha Silva was graduated in Universidade Federal da Bahia, but he also studied Computer Science for a year and a half. Because he still searches in technology a way to improve diagnostic and therapeutic, he has built a model which utilizes technology in clinical practice while using OCT and lasers to diagnose and to treat glaucoma. For 15 years he has been Medical Director of Clínica do Olho an affordable clinic in Salvador. Through these years he earned great experience by suspect, diagnosis, follow-up and treatment of some thousands of patients with glaucoma. Also, as a member of scientific commission of Ophthalmology Society of Bahia, he brings ophthalmology in Bahia, some technologic value to the congresses he has part on.

honassys@me.com

Notes: