

BACKGROUND:

- **1,573,761** people expected to present with angle closure (AC) in Europe by 2020¹
- COVID-19 stopped routine referrals and routine hospital appointments
- Waiting time increased for primary angle closure suspects (PACS)
- Increased potential risk for acute angle closure (AAC) in primary angle closure (PAC) not diagnosed

DEFINITIONS:

Primary Angle Closure Suspect

- pupillary block or plateau iris
- Minimum 180° of iridotrabecular contact (ITC)^{2,4} 270° for referral to HES³
- Normal IOP
- No peripheral anterior synechia (PAS), no glaucomatous optic neuropathy (GON) or visual field loss as a result of glaucoma.

Primary Angle Closure

- 180° ITC⁴
- May result in PAS and increased IOP
- No signs of GON

Chronic Angle Closure

- PAS (variable degree)
- Signs of GON.

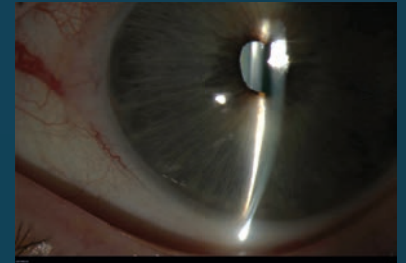


Figure 1: Narrow anterior chamber angle on slit lamp examination

PROBLEM:

- 23% patients on waitlist in Scotland for PACS⁵
- Long waitlist for routine laser following diagnosis
- Anterior segment OCT has high false positive rate for PAC therefore gonioscopy required.

METHODS:

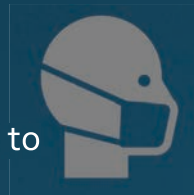
Telephone consultation (optometrist):

- History & risk factors
- Clinic structure
- ?Discharge without face to face exam
- Possible diagnosis and treatment



Face to Face (pre-clinician)

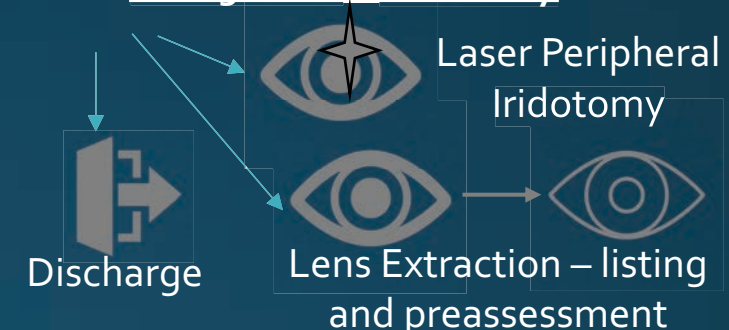
- +/- Visual fields (suspect glaucoma or no referral visual fields)
- Optical Coherence Tomography
- Disc Photos



Face to face (optometrist/consultant)

- VA
- Pupils
- Anterior segment exam
- Gonioscopy

Management – Same day



RESULTS:

- **92.3%** of patient survey responses positive
- **9/11** PI patients discharged following treatment
- Good reliability of referrals within health board confirmed
- PAC diagnosis: **4%** of eyes
- PACS diagnosis: **59.5%** of eyes
- Open diagnosis: **36.5%** of eyes

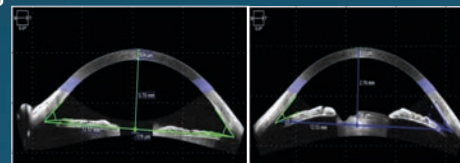
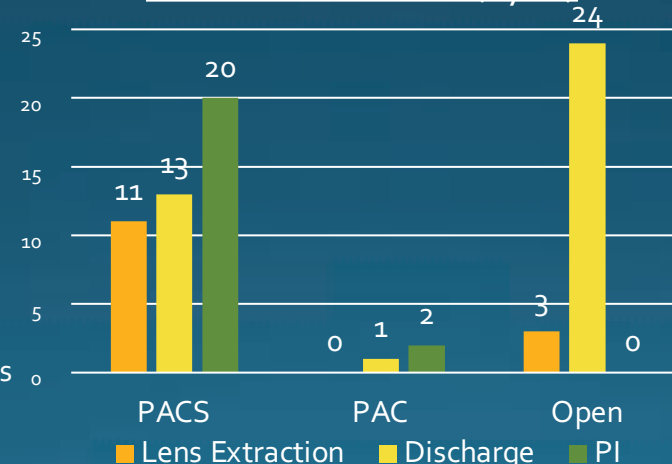


Figure 2: Anterior chamber angle pre and post lens extraction in an angle closure patient

Patient Outcomes (eyes)



CONCLUSIONS:

- One-stop clinic is an effective way to diagnose and manage PAC/PACS
- One-stop clinics could help to reduce waitlists and routine recall patients
- One-stop clinic was well received by patients
- Reduced footfall required during COVID-19 facilitated by one-stop clinics.
- Scope for diagnosis and treatment one stop clinics in other areas of glaucoma.

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