

# Having laser peripheral iridotomy treatment for glaucoma

Department of Ophthalmology

Information for Patients

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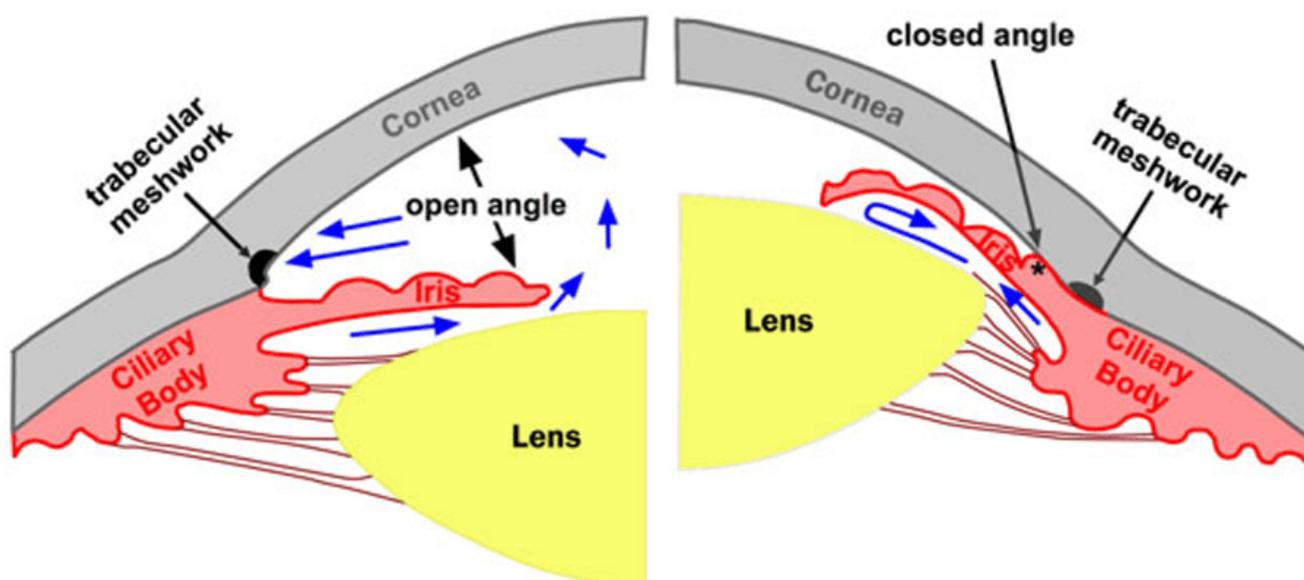
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## What is laser peripheral iridotomy?

Laser peripheral iridotomy is a treatment to help prevent or treat a type of glaucoma called angle closure glaucoma.

The laser creates a tiny hole in the coloured part of the eye (the iris) to help drain fluid and reduce pressure inside the eye.



Health information and support is available at [www.nhs.uk](http://www.nhs.uk)  
or call 111 for non-emergency medical advice

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## Who are at risk of angle closure glaucoma?

You are at a higher risk if you have narrow angle structures in your eye. This means your eye structures are more likely to block fluid drainage.

This is called Primary Angle Closure Suspect (PACS). You will need laser if you have PACS.

The term used for it PACS PLUS Disease.

You are more likely to have PACS if:

- you rely on 1 eye for your vision (important for your job or daily life).
- you may not notice vision changes easily (for example, if you are a vulnerable adult).
- a family history of angle closure glaucoma.
- you are very long sighted (more than + 6.00 diopters).
- you have diabetes or other conditions that require regular pupil dilation.
- are taking antidepressants or medicines with anticholinergic effects.
- are living somewhere remote where eye emergencies are harder to treat (like working overseas or on oil rigs).

Your ophthalmologist has recommended a YAG laser peripheral iridotomy. This is because your eye's anatomy puts you at risk of, or you are already getting a condition called Acute angle-closure glaucoma.

The decision is based on carefully examining your eye's drainage angle. When this angle is too narrow, it can close off, causing a rapid, very painful and dangerous increase in eye pressure that can damage the optic nerve.

If the drainage channels inside the eye narrow or close, pressure builds up and can damage the nerve at the back of the eye. This leads to glaucoma and vision loss.

## What happens on the day of the laser treatment?

1. You will need to stay for half a day for your appointment. Do not drive yourself home after the appointment.
2. The doctor or the nurse will explain the procedure. They will ask you to sign a consent form.
3. A nurse or technician will confirm your details and will check your vision and eye pressure.
4. You must tell the clinical team if you have **heart conditions**, use medications like **beta-blockers**, or if you have an **allergy to any of the drops we use** (pilocarpine, apraclonidine).
5. We will give you Pilocarpine 2% eye drops to prepare your eye. These drops might cause a mild headache or blurry vision. This is normal and temporary.
6. We will then give Apraclonidine 1% eye drops. They will be used to help control your eye pressure. If you have angina or have had a recent heart attack, please let us know.
7. We will then give anaesthetic drops to numb your eye.
8. You will be seated at a machine and asked to place your chin on a rest to keep your head steady. This is same as we do when we examine your eyes in our clinics or by your optician.
9. Your vision will likely be blurry, that is because of the light we shined in your eyes and the procedure we have done. Do not be worried by this. Your vision will come back.
10. The laser itself usually is not painful. You might feel a little discomfort.

Sometimes, if your iris is thick and dark, an extra type of laser (ARGON laser) is used first to make the treatment easier.

## After the procedure

- We will check your eye pressure 30 to 60 minutes after the procedure.
- We will give you steroid drops (Pred Forte or Maxidex). You must use them hourly on the day of the procedure (until midnight). Then 4 times a day for the next 6 days.
- If your eye pressure is high, we may give you extra drops or tablets.
- If you are already using pressure (lowering drops) you will often continue them.

## Are there any side effects or risks?

Laser iridotomy is generally safe. Like all procedures it can have some risks:

- **Increased eye pressure.** Happens in about 1 in 10 people early on. In more advanced cases about 1 in 3 people. This is treated with medication.
- **Bleeding or inflammation.** Sometimes a tiny blood vessel bursts during the laser. This tends to stop quickly.
- **Visual disturbances:**
  - A line in your vision (1%)
  - ghosting around objects (11%)
  - shadows (3%)
  - glare, crescents, or blurred vision for up to 48 hours (2 days)

Most of these settle within a few weeks or months. Very rarely they can last longer (up to a year).

- **Very rare risk of vision loss.** About 1 in 5,000 patients may experience serious complications.

## Are there any alternatives to laser treatment?

Cataract surgery (lens extraction) can also help by deepening the drainage angle. It carries a slightly higher risk of permanent vision loss, around 1 in 1,000 cases.

We recommend lens extraction only for:

- patient with cataract symptoms.
- eye pressure over 30 mmHg.
- patients over 50 years old.

## What if I do nothing?

If you do not have laser or surgery:

- you could develop angle closure glaucoma.
- you could experience high pressure and possible permanent vision loss.

Observation only (regular check ups) may be an option if you are currently have low pressure and no other signs of glaucoma. But you have regular eye exams with your optometrist.



## How successful is laser iridotomy?

- Laser iridotomy is very successful.
- If the hole made by the laser is open and big enough, it helps 60 to 80 in 100 patients.
- For the other 20 to 40 in 100 patients, the hole might not work as well. They may be observed or given more treatment such as eye drops or surgery.
- If more treatment is needed, we will talk with you in detail during your follow up appointment.

## What do I do if I have any concerns?

If you want to talk about the procedure or have any other queries that cannot wait until your appointment, you can call the ophthalmic secretaries on **0116 258 5928**.

If you think you may have a problem after treatment, please contact Eye Casualty on **0116 258 6273** or go to the Eye Casualty Department, Windsor Eye Clinic, Level 1, Windsor Building, Leicester Royal Infirmary.

Opening times: Monday to Friday: 8.30am to 4.30pm  
Saturday and Sunday: 8.30am to 12.30pm

If outside of these hours and you feel that it is urgent, please go to the main Emergency Department. They will check your problem and talk to the on call ophthalmologist.

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