Talk to your doctor

Only your doctor can decide if a Canaloplasty procedure is right for you, so talk to him or her about how you may benefit from this treatment option. After weighing the benefits and risks, your doctor may decide that you’re a candidate for this procedure.

Glaucoma management is a lifelong process that requires frequent monitoring. Since there is no way to determine if glaucoma is under control based on how a person feels, a person with glaucoma generally should be examined every 3 to 4 months.
Your eyesight is a precious gift

The ability to see is something we’ve all taken for granted at some point. Then suddenly there’s a problem, and you’re faced with the possibility of losing your sight. Glaucoma can be such a problem and chances are if you’re reading this brochure, you or a loved one has been diagnosed with this sight-threatening disease.

Glaucoma has been nicknamed “the sneak thief of sight.” According to the World Health Organization, it is the second leading cause of blindness worldwide. Glaucoma cannot be cured, and vision loss cannot be regained. But with proper treatment, it is possible to slow the progression of glaucoma and potentially halt further loss of vision.

How glaucoma affects vision and quality of life

A clear fluid, called aqueous humor, fills the front of your eye and provides nourishment to the tissues. Like the air in a balloon, the aqueous also provides pressure to help maintain the shape of the eye.

In most types of glaucoma, the eye’s natural drainage system loses function and the fluid inside the eye cannot drain. This lack of drainage causes an elevation of pressure within the eye. This increase in intraocular pressure (IOP) has demonstrated the ability to exert pressure on the optic nerve and result in vision loss.

Vision loss can have a very serious impact on one’s quality of life. Many people with glaucoma cannot drive a car safely, see their grandkids on the soccer field, or view the world as they once did. The first sign of glaucoma is often the loss of peripheral or side vision. To prevent this from happening, it is essential to lower your IOP.
Current glaucoma treatments

**DRUGS:** Some medications provide enhanced drainage, and some reduce the production of aqueous humor to help relieve the pressure. Many patients are adequately managed with drug therapy. However, drugs must be taken every day, and these medications can lose their effectiveness over time, especially with patients in the advanced stages of glaucoma.

**TRABECULOPLASTY:** Laser trabeculoplasty uses a very high energy beam of light or laser to improve fluid drainage from the trabecular meshwork (the eye’s natural plumbing system). Many people have benefited from this type of therapy. But it does have downsides: The trabeculoplasty procedure must be repeated, and the laser can cause irreversible scarring, potentially resulting in various vision problems.

**SURGERY/TRABECULECTOMY:** The most common conventional surgery performed for glaucoma is the trabeculectomy. Here, the surgeon removes a portion of the trabecular meshwork, allowing fluid to flow out of the eye, lowering IOP. However, scarring can occur around or over the flap opening, causing it to lose effectiveness. It is also possible for a single patient to require multiple trabeculectomy procedures.

A new alternative

Now there is hope in the fight against glaucoma. There’s an innovative, noninvasive procedure for patients who may be frustrated with their medications and aren’t ready for surgery. It’s called Canaloplasty.

What is Canaloplasty?

Canaloplasty is proven to safely lower intraocular pressure (IOP) and dependence on medications. And unlike traditional procedures, Canaloplasty is minimally invasive and has fewer complications and less follow-up. Canaloplasty uses breakthrough microcatheter technology in a simple and minimally invasive procedure.
How is Canaloplasty performed?

To perform Canaloplasty, your doctor will create a tiny incision to gain access to a canal in the eye. A microcatheter will circumnavigate the canal around your iris, enlarging the main drainage channel and its smaller collector channels through the injection of a sterile, gel-like material called viscoelastic. The catheter is then removed and a suture is placed within the canal and tightened. This tightened suture ensures that the canal remains open. By opening the canal, the pressure inside your eye will be relieved.

What are the benefits of Canaloplasty?

A Canaloplasty procedure might be the optimal choice for patients whose medications aren’t working, but aren’t quite ready to take on the risks of surgery. It may also be optimal for patients whose medications are working but are frustrated with the frequency of dosing.

Canaloplasty benefits compared to traditional glaucoma treatments:

- Potential reduction or elimination of medications and the associated costs
- Less risk of postoperative complications versus penetrating surgical alternatives
- Does not eliminate the possibility of future treatment alternatives
- Reduced scarring

This all adds up to the possibility that you can live life without having to deal with medications. It also means that you may never have to undergo glaucoma surgery.

Imagine waking up in the morning and not having to put drops in your eyes. Imagine going on vacation without traveling with all those medications. But most of all, imagine the security in knowing your IOP is low and your glaucoma is now under control.