GLAUCOMA AND COVID-19





Despite initial delays in patient care, glaucoma treatment in Wuhan has returned to normal.

BY TU HAIXIA, MD; AND WANG YONG, MD

uhan Aier Ophthalmic Hospital is a specialized ophthalmic hospital in Wuhan, China. Throughout the COVID-19 pandemic, the hospital has maintained outpatient and emergency operations. Early isolation management measures issued by the municipal government in Wuhan helped to control the spread of the virus; however, they also affected the medical care of our area residents. Some patients could not travel to the hospital due to transportation closures, and others were afraid to leave their houses. In patients with acute angle-closure glaucoma who are not treated in a timely manner, irreversible visual impairment can result.

Because it was difficult for some patients to travel to the hospital during the height of the pandemic in Wuhan, it was suggested that physicians increase their online consultation



Figure. Full personal protective equipment, including a face mask and shield, is worn during surgery.

services in order to serve patients with symptoms. In addition, patients were advised to consult with physicians in a timely manner to avoid delays in medical treatment.

From January 23 to April 8, the early isolation period, 27 patients were hospitalized in our facility for acute angle-closure glaucoma. In addition to eye pain and poor vision, these patients experienced severe symptoms with varying degrees of headache, nausea, and high IOPs (range, 35-60 mm Hg; average, 43 mm Hg). The time between onset and treatment ranged from 2 to 60 days (average, 25 days). In comparison, previous time between onset and medical treatment was fewer than 7 days.

All patients were treated with paracentesis to reduce IOP, and 80% also underwent a combined phacoemulsification and goniosynechialysis to open the angle (Figure). In the latter group, 80% experienced a decrease in IOP to 21 mm Hg or less, and 20% needed further medication to control IOP. Because of irreversible mydriasis or optic nerve injury, only 45% of patients had 20/40 or better BCVA postoperatively.

As of April 8, the coronavirus epidemic in Wuhan has been eliminated, and the treatment of patients with glaucoma has returned to normal. During April, the number of patients at the hospital recovered by 50%. In May, it recovered by 70%, and in June, the number of patients was fully recovered to the same number it was during the same period last year.

Prior to April, we were relying on telephone consultations and a drug mailing service in order to serve patients who had difficulty returning for reexamination. Since that time, we have been able to return to reexamining patients as normal.

For ophthalmologists all over the world, it is important to educate patients—especially those with a progressive disease such as glaucoma—to seek medical care before it is too late, even during a lockdown.

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