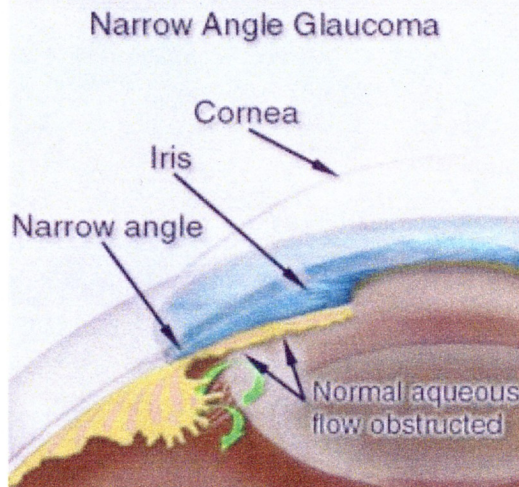
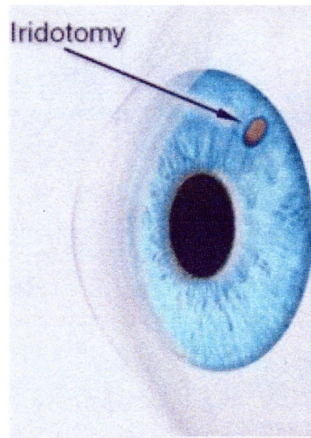


Laser Peripheral Iridotomy (PI)

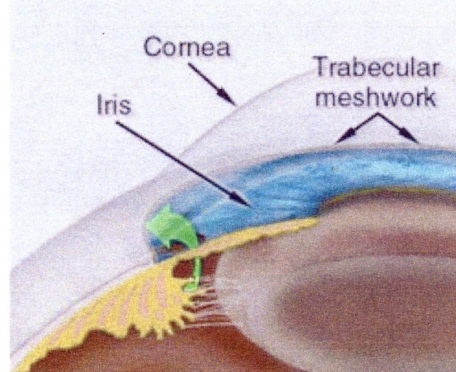
A Laser peripheral iridotomy (PI) is performed almost exclusively for patients with narrow **angles**, narrow angle glaucoma, or **acute angle closure glaucoma**. Aqueous fluid is made in the **ciliary body** of the eye, which is anatomically situated behind the **iris**. The aqueous fluid primarily escapes the eye by flowing between the lens and iris of the eye, and then drains via the **trabecular meshwork**, which is located in the angle of the eye (where the front clear **cornea** meets the iris, essentially). If the flow of aqueous fluid to the drainage angle (trabecular meshwork) is obstructed by a forwardly bowed iris, the patient is said to have narrow angles. This condition may predispose one to an **acute** episode of angle closure glaucoma. If the angles are never acutely closed, but glaucoma is still present, the patient is diagnosed with narrow angle glaucoma.



Laser peripheral iridotomy involves creating a tiny opening in the peripheral iris, allowing aqueous fluid to flow from behind the iris directly to the **anterior** chamber of the eye. This typically results in resolution of the forwardly bowed iris and thereby an opening up of the angle of the eye. The narrow or closed angle thus becomes an open angle! [Top of page](#)



The laser peripheral iridotomy procedure is usually completed in the office or as a brief outpatient procedure. Prior to the procedure, the **pupil** is often constricted with an eye drop medication known as pilocarpine. The procedure itself is completed with the patient seated at the laser, and requires no sedation. Usually, a lens is placed on the eye after topical anesthetic drops are applied to better control the laser beam. The entire procedure only takes a few minutes. The lens is then removed from the eye, and vision will quickly return to normal. After the procedure, your eye surgeon may recommend anti-inflammatory eye drop medications for the next few days. A post-op visit will be scheduled. [Top of page](#)



FAQ's

Does laser peripheral iridotomy reverse glaucoma?

In general, glaucoma is not reversed by any procedure or medicine. The goal of treatment is either prophylaxis against the development of glaucoma or treatment of existing glaucoma. In either case, if an ophthalmologist recommends a laser peripheral iridotomy, he or she believes this procedure is appropriate for the prevention of, or treatment of, glaucoma. [Top of page](#)

Is the procedure painful?

The surface of the eye is numbed with topical anesthetics for this procedure, but the iris is not numbed for the procedure. Therefore, when the laser beam hits the iris to create the peripheral iridotomy, mild discomfort may occur. In general, only a few very brief episodes of slight discomfort are associated with this procedure. Also, there is absolutely no discomfort postoperatively in the great majority of cases.

What are the potential complications?

A laser peripheral iridotomy is an extraordinarily safe procedure. Complications, fortunately, are very rare. These potential complications include bleeding in the eye, inflammation in the eye, and transient pressure elevations. As such, most ophthalmologists will treat the patient with eye drop medications (following the procedure) to prevent these potential complications.