Slide 5 Minutes:
Angle Recession Glaucoma

Malik Y. Kahook, MD
The Slater Family Endowed Chair in Ophthalmology
Professor and Vice Chair, Dept. of Ophthalmology
Chief, Glaucoma Service
University of Colorado School of Medicine
Aurora, Colorado
Angle Recession Glaucoma

- Post blunt trauma tear between the circular and longitudinal fibers of the ciliary body with associated damage to the trabecular meshwork
  - Widening of CB band
  - Absent or torn iris processes
  - Glistening white scleral spur
  - Irregular pigmentation of the TM and adjacent tissues
  - PAS on either end of the angle recession
- Glaucoma may develop months or years later
- Usually unilateral and trauma history is forgotten
- Up to 50% of fellow eyes develop POAG (Predisposition?)
- Treatment with topical drops (PGA, BB, AA, CAI, etc.)
- Miotics might have a paradoxical effect
- Laser trabeculoplasty typically ineffective
- Filtration surgery may be needed if drops are ineffective

Post blunt trauma gonioscopic view of widening of the inferior CB band and irregular pigmentation of the angle
Educational Resources:

www.KEOGT.com

https://www.youtube.com/channel/UCLm_TXNeeM4ixPmHQEBtCaQ

Twitter: @MalikKahook

IG: malik.kahook_md