



York and Scarborough  
Teaching Hospitals  
NHS Foundation Trust

# Argon Laser Peripheral Iridoplasty

Information for patients, relatives and carers

## Ophthalmology Department

① For more information, please contact the Eye Clinic:

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Or

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<b>Contents</b>	<b>Page</b>
What is argon laser peripheral iridoplasty? .....	3
What is angle closure? .....	3
How does the laser procedure work? .....	3
What are the benefits of this procedure? .....	4
Are there any risks? .....	4
What is the success rate? .....	4
What happens during the procedure? .....	5
What can I expect after the procedure? .....	6
Tell us what you think of this leaflet .....	7
Teaching, training and research .....	7
Patient Advice and Liaison Service (PALS) .....	7

## **What is argon laser peripheral iridoplasty?**

This is a form of laser treatment conducted in situations where other forms of laser treatment for angle closure are deemed to have not worked.

## **What is angle closure?**

In order for your eye to maintain its normal pressure, fluid (aqueous humour) within your eye is constantly being produced. It then has to drain away through pores in the front chamber of the eye situated between the coloured part of your eye (the iris) and the clear window in front of it (the cornea). Where these structures meet is called the doors of the eye (angle). If this angle is too tight (narrow) the fluid cannot access where it drains and the eye pressure can build up. This will affect the optic nerve, which carries signals from the eye to the brain and can lead to irreversible damage and visual loss.

## **How does the laser procedure work?**

A laser is applied to edge of the iris in an effort to draw or pull it out of the angle and create more space in the angle of the eye. This will allow the normal drainage of fluid. This results in lower pressure and reduces the risk of further damage occurring at the optic nerve.

## **What are the benefits of this procedure?**

This treatment is to prevent a sudden (acute) rise in pressure within your eye. Without having this treatment, you are at risk of developing sudden glaucoma and irreversible damage to your sight.

## **Are there any risks?**

1. Inflammation inside the eye is common for a short period of time following the procedure until the eye settles with the short term use of steroid eye drops. Reported 4% incidence of persistent inflammation one week following the procedure.
2. Persistent enlargement/irregularity of the pupil is very rare.
3. A rise in eye pressure occurs in around 20% (1 in 5) of patients and is normally detected within an hour after your laser treatment. If necessary we can treat with additional medication at that time. There is a very small risk that your eye pressure will not respond to this treatment and could require further treatment or effect/ change your vision.

## **What is the success rate?**

In about one in five of cases (25%) the angle may not open. Depending on the situation, further treatment may be needed.

## **What happens during the procedure?**

Treatment takes place in the outpatient department. You can expect to be in the eye clinic for up to two hours.

A nurse will check your eyesight and put some drops into your eye to make your pupil smaller. These drops might cause a temporary headache/brow ache and can take up to an hour to work.

Additional drops to protect against a rise in eye pressure following the laser treatment may also be given. If it hasn't already been done at your previous appointment, a doctor will take your written consent and explain further or answer any questions.

Once seated in front of the laser machine, which looks similar to the microscope you had been examined on in our clinic, you will have anaesthetic eye drops put in to numb your eye.

A special contact lens will then be placed against the front of your eye, to allow the doctor to get a better view of the structures and drainage angle. This is not painful, but might feel a little strange. During the laser you might see some flashes of light, hear clicking noises and may feel some pricking sensation lasting a second or less. The procedure takes between five and ten minutes.

## **What can I expect after the procedure?**

You may be asked to wait 45-60 minutes, after which your eye pressure will be checked before you leave.

You should not drive for at least six to eight hours as the drops that make the pupil smaller can affect your peripheral vision.

You may be given some tablets to keep the eye pressure down for the first day or two. These tablets can make you experience 'pins and needles' in your fingers, toes and around your lips and you may find you need to urinate more frequently.

You will be given steroid eye drops and informed how often you should use them and how long you should use them for. Continue to use your regular glaucoma drops unless you have been instructed otherwise.

Your eyesight may be slightly blurred but should recover completely after a few days. There may be discomfort for a few days, which should be relieved by painkiller tablets such as paracetamol.

Please contact the eye clinic if there is extensive pain or loss of vision.

An appointment will be arranged, usually in around four weeks following the procedure to check it has been effective.

## **Tell us what you think of this leaflet**

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact:

The Eye Clinic, The York Hospital, Wigginton Road,  
YO31 8HE or telephone 01904 726758.

## **Teaching, training and research**

Our Trust is committed to teaching, training and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

## **Patient Advice and Liaison Service (PALS)**

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email [pals@york.nhs.uk](mailto:pals@york.nhs.uk).

An answer phone is available out of hours.

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