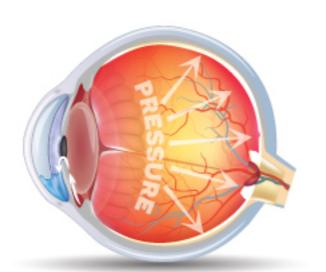


Glaucoma damages the optic nerve, causing increased intraocular pressure (IOP)

Fluctuation of IOP is a possible risk factor for glaucoma progression



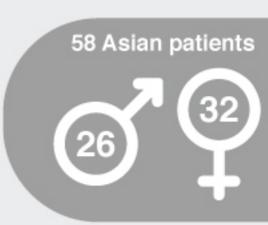
Common types are primary open-angle glaucoma (POAG) and normal-tension glaucoma (NTG)

How effective are 360° SLT and 0.004% travoprost in reducing 24-h circadian IOP?

Comparative study between patients with POAG and NTG





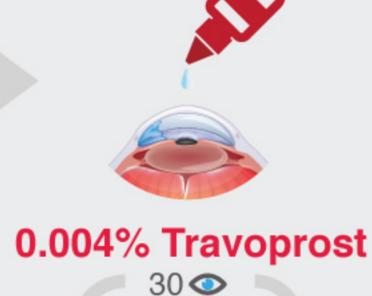




POAG 16 👁

NTG 14 💿

Avg. IOP reduction: 3.7 mmHg



POAG 16

NTG 14 👁

Avg. IOP reduction: 4.1 mmHg

Percentage of eyes that achieved post treatment 24-h IOP fluctuations < 3 mmHg

87%

82%

9 AM to 7 PM

100% 96%

94%

93%



98% 96%

SECONDARY OUTCOME MEASURES

Peak IOP

Trough IOP

SLT success rate

Reduction of mean IOP

24-h circadian curves of IOP

Success in IOP fluctuation reduction

75% SLT

92% **Travoprost**

≥ 50% reduction

Both SLT and travoprost achieved IOP fluctuations < 3mmHg during the night time

Travoprost controls diurnal IOP fluctuations more effectively than SLT