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Magnetic Resonance Imaging in Patients With Low-Tension Glaucoma

Gesa A. Stroman, MD; William C. Stewart, MD; Karl C. Golnik, MD; [et al](#)[» Author Affiliations](#)*Arch Ophthalmol.* 1995;113(2):168-172. doi:10.1001/archopht.1995.01100020050027

Abstract

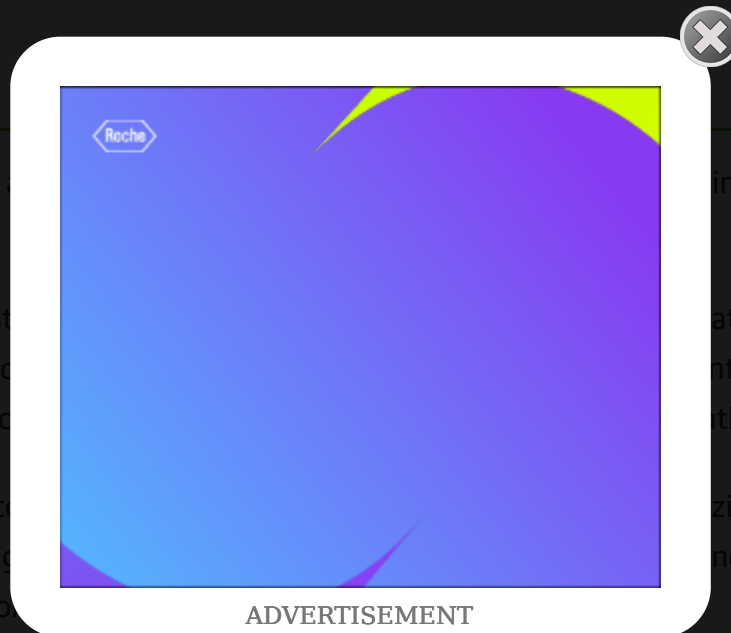
Objective: To study diagnoses of low-tension glaucoma.

Patients: We included in this study patients with low-tension glaucoma. We individually matched control patients with normal ocular findings who had magnetic resonance

Design: We studied axial and coronal magnetic resonance imaging in patients with low-tension glaucoma. We individually matched control patients with normal ocular findings who had magnetic resonance

Results: We found no difference between groups in the optic nerve diameter or length, the carotid artery area, or the distance from the optic nerve to the carotid artery ($P>.05$). Left optic nerve area was greater in the control patients than patients with low-tension glaucoma ($P=.026$). The prevalence of intracranial abnormalities, including meningioma, aneurysm, and arteriovenous abnormality, was similar between groups ($P>.05$). However, diffuse cerebral small-vessel ischemic changes were found more in patients with low-tension glaucoma ($n=8$) than control patients ($n=1$) ($P=.0196$).

Conclusions: This study proposes a hypothesis that cerebral small-vessel ischemia is more common in patients with low-tension glaucoma and potentially reflects indirectly a vascular cause of the optic nerve head damage at least in a subgroup of patients. Importantly, further research still is required to provide direct evidence for a vascular cause involved in low-tension glaucoma.



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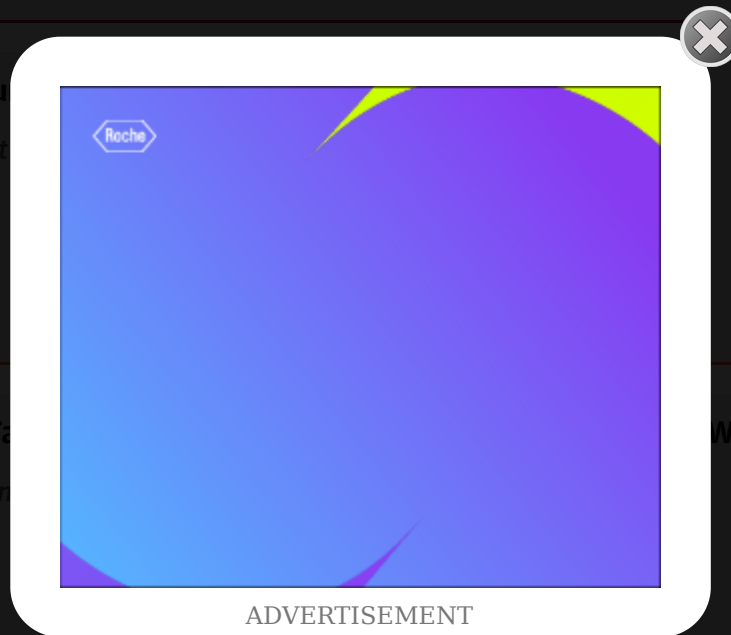
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