



YAG laser periphery iridotomy

This leaflet is for patients considering a YAG laser peripheral iridotomy for treatment of acute glaucoma. It outlines what the procedure involves and its benefits, risks and side effects. If you would like further information, please ask any member of staff.

What is a YAG laser peripheral iridotomy?

An iridotomy is a small hole created with the laser beam in the iris (coloured part of the eye). The iridotomy allows fluid to circulate freely within the eye, minimising the risk of a sight-threatening pressure rise.

A laser peripheral iridotomy is performed to treat or prevent a sudden rise in pressure inside the eye (acute glaucoma) to which



Laser Peripheral Iridotomy

certain individuals are susceptible. A sustained rise in pressure is very painful and can cause a permanent loss of vision.

Why do I need this procedure?

- To prevent an attack of acute glaucoma.
- To treat an attack of acute glaucoma.
- To treat chronic glaucoma where the drainage channel is very narrow.

Are there any risks?

The treatment is generally very safe. However, complications may occur in a very small number of patients. These includes inflammation inside the eye, increase in eye pressure, or aggravation of existing glaucoma and speeding up of cataract formation. Your eye specialist is happy to discuss the benefits and risk with you and can outline any alternative treatments available.

The day of your treatment

The treatment is an outpatient procedure and normally takes approximately 15-30 minutes. On arrival, the nurse will put some eye drops in your eye in preparation for treatment. Before commencing treatment the doctor will explain the procedure and ask you to sign a consent form. The procedure is performed with or without a contact lens and the laser is delivered through an instrument similar to that used to examine the eye. You will see some bright flashes of light, hear a clicking noise and may feel slight discomfort as the laser is fired into the sensitive tissue of the iris.

It is common for both eyes to be treated in this way, but not usually at the same time.

What should I expect after treatment?

Your eye may become pink and sore and the vision is often disturbed for the rest of the day. For this reason patients are strongly advised not to drive home. You may be prescribed steroid drops for a few days to control any inflammation and sometimes drops and /or tablets to bring the eye pressure back to normal.

In severe cases, patients may need to have the eye pressure checked a few hours after treatment.

Follow up

An appointment will be made for a check-up in the Eye Clinic shortly afterwards. A number of patients will require more than one laser session.

Contact the Eye Department, if you experience:

- Severe pain or redness.
- Reduction in vision, increase in blurriness.

If you have got a minor eye problem, please seek advice from your GP, optician or pharmacist. If you think your problem might be urgent, please attend Eye Casualty.

Eye Casualty (Reading):	Mon-Fri 8.30am to 5pm; Sat & Sun & bank holidays 9am-12.30pm; Closed Christmas Day and New Year's Day.
Eye Casualty: Prince Charles Eye Unit (Windsor):	Mon-Fri 8.30am to 5pm; Sat 8.30am- 12.30pm; Closed Sun & bank holidays.
Dorrell Ward (Reading):	0118 322 7172 (24 hours a day)
Eye Day Unit (Reading):	0118 322 7123 (Mon-Fri 7am to 6pm)
Eye Day Unit (PCEU Windsor)	01753 636496 Mon-Fri 7am to 6pm)

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

RBFT Ophthalmology, April 2025. Next review due: April 2027.