

How can my Antipsychotics affect my Glaucoma?



Matthew Rodriguez, AUC MS₄

What is Glaucoma?

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Glaucoma is a type of eye diseases that damages the optic nerve. It is typically due to high fluid pressure inside the eye, possibly leading to irreversible vision loss and potential blindness. There are different types of glaucoma depending on the cause, and presenting symptoms.

What are the types of Glaucoma and why is it important in relation to my antipsychotic medications?

- Primary open-angle glaucoma
- Secondary open-angle glaucoma
- Primary closed-angle glaucoma
- Secondary closed-angle glaucoma

The relationship between antipsychotic medications and glaucoma is important because some antipsychotics such as those with *anticholinergic* properties can trigger acute angle-closure glaucoma in susceptible patients. This can lead to rapid increases in intraocular pressure and permanent vision loss if not recognized right away. Understanding potential adverse effect allows your doctor to screen at-risk patients, consider safer alternatives, and respond quickly to visual or ocular symptoms.

Typical presentation of Glaucoma

Primary open-angle glaucoma:

- Most common
- Caused by *decreased* fluid outflow
- Often painless
- Gradual peripheral vision loss

Secondary open-angle glaucoma:

- Caused by *decreased* fluid outflow due to medications, trauma, or inflammation
- Presentation similar to primary-open angle glaucoma

Primary closed-angle glaucoma:

- Caused by *blocked* fluid outflow
- Severe eye pain
- Blurry vision
- Nausea and vomiting
- Red eye, fixed mid-dilated pupil

Secondary closed-angle glaucoma:

- Caused by *blocked* fluid outflow due to structural changes in the eye
- Presentation similar to primary closed-angle glaucoma

CLOSED ANGLE GLAUCOMA IS A MEDICAL EMERGENCY!

***Risk Factors: Key risk factors include high eye pressure, being over age 60, family history, African, Hispanic, or Asian descent, thin corneas, and pre existing eye conditions.**

What kinds of medications can affect my Glaucoma?

| Drug Class | Examples |
|--------------------------|----------------------------------------------------------------------------------------|
| Anticholinergics | Atropine, Scopolamine, Benztropine |
| TCAs | Amitriptyline |
| Antipsychotics | Olanzapine, Clozapine |
| Antihistamines (1st gen) | Diphenhydramine |
| Sympathomimetics | Pseudoephedrine, Phenylephrine |
| Topiramate | Causes bilateral angle closure via choroidal effusion |
| SSRIs/SNRIs | Fluoxetine, Escitalopram, venlafaxine, duloxetine (rare but reported mydriasis effect) |
| Parkinson meds | Trihexyphenidyl |

If you experience:

- Sudden onset of severe eye pain
- Sudden onset of blurry vision
- Halos in your vision
- Nausea
- Vomiting
- Pupil unresponsive to light

 **IMMEDIATELY STOP THE MEDICATION AND HEAD TO THE EMERGENCY ROOM!** 