ETHICAL ATTITUDE AND PRESENCE OF GLAUCOMA IN STIP

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ABSTRACT

Introduction: Glaucoma is a major cause of vision loss worldwide. Objective: There is a substantial likelihood that oftalmoloshkata practice encounter patients with glaucoma, the basic features of glaucoma: its presentation, examination, diagnosis and treatment. It highlights empathetic relationship to the patient and the ethical implications of access to ophthalmologists disease that forever changes the life of patients. Methods and techniques: National Statistical Office of Macedonia does not have data on the number of cases of this disease, but from our research for the purposes of this paper in Stip hospital found out that she is one of the most common eye diseases in patients of Stip. Survey statistics associated with glaucoma who are in the centers for primary health care in Macedonia, method of corneal impression with Shioov tonometer and method aplanacija the cornea, Tonometrijata aplanacija with the cornea, tonometry and Goldmanova aplanaciona Nonkontakt tonometry.

Results: People with glaucoma reported in Stip Clinical Hospital in the period from 01.2009 - 05.2013. Lica suffering from congenital glaucoma / Individuals affected by congenital glaucoma -2006-2 children from 0.2009 to 2 children from 0.2011 to 3 children from 0.2011 to 2 children -1 and 2013 children.

People with glaucoma reported in Stip hospital for a period of 01.2009-05.2013.

1930-1939 37 patients = 0.1940 to 1949 = 60 patients from 0.1950 to 1959 = 74 patients, 1960-1969 = 23 patients from 0.1970 to 1979 = 7 patients, 1980 to 1989 =9 patients from, 1990-1999 = 2 patients, 2000-2013 = 7 patients.

Discussion: The precise values obtained by careful measurements to determine the significance of the symptoms of glaucoma. Based on several actions differential diagnosis, final diagnosis and prognosis of glaucoma becomes closer to the actual situation and needs of the patient. From ill two thirds were men and one third women.

Keywords: ophthalmologist, ethics, eye examination, visual loss.

Introduction

Worldwide glaucoma is the second most common cause of vision loss (Quigley: 1996, 391). In recent years the number of people with glaucoma is about 60 million, and by 2020 it is expected that number to reach 80 million (Quigley, Broman: 2006, 264). Because of the importance of this health condition arising from its representation in the population should be given due attention. The number of the patient who is registered centers for primary care for symptoms of glaucoma is high. National Statistical Office of Macedonia does not have data on the number of cases of this disease, but from our research for the purposes of this paper in Stip hospital found out that she is one of the most common eye diseases in patients of Stip. Glaucoma name comes from ancient Greek word meaning green glaucoma, because the apple of the eye of the patient blinded by glaucoma, returns greenish reflex (Jane: 2004, 429). Glaucoma is an increase of intraocular pressure (IOP) which leads to loss of vision. Glaucoma may be " associated with other ocular disorders, systemic diseases, medications, eye trauma and inflammation, and may occur after intraocular surgery " (Bradford: 2010, 53) and its pathology covers quite a wide area ranging from " local and general circulation, cardiology, trombocitologija, geriatrics, and is an integral part of many syndromes "(Vojnikovic-Braço: 1984,7). manifestation of this disease is often seen late in many cases will occur once vision loss to some extent. Glaucoma is often " silent because observable symptoms and disorders of the visual fields occur late in the disease " (Bradford: 2010, 50). Among the symptoms that may be observed during an eye examination and other medical tests, and which we can determine that it is for glaucoma include: " elevated IOP gonomitskogo positive finding.
preplitka or deep front rooms, relative block iridoetalnata membrane defect in the visual field, impaired horoidalna and retinal circulation, impaired lipid status or existence of edna existing congenital abnormalities (Vojnikovic-Braco: 1984, 185).

Primary glaucoma is generally classified into three groups: closed angle glaucoma, open angle glaucoma and congenital glaucoma.

Acute angle-closure glaucoma is a "rare form of glaucoma that due to the sudden and complete closure of the angle of the anterior chamber with iris tissue" (Bradford: 2010, 53, 76). If glaucoma with pupillary block that is "genetically different and distinct clinical entity that is determined by the anatomical substrate of the anterior segment of the eye through: shallow front rooms, narrow angle and chamber disproportion of corneal diameter and depth of the little room" (Vojnikovic-Braco: 1984, 197). Without pupillary block glaucoma, also called primary plateau iris, in turn, is represented in those cases "are marked as nekongestivni" and have "normal depth of the front rooms, the normal diameter of the cornea and no relative pupillary block" (Vojnikovic-Braco: 1984, 199). Primary glaucoma is generally classified into three groups: closed angle glaucoma, open angle glaucoma and congenital glaucoma.

Acute angle-closure glaucoma in the right eye (note the apple of medium size left eye which did not react to light and conjunctivitis) [registered under GNU Free sharing by James Heilman Wikipedia]

Open-angle glaucoma is a "chronic optic neuropathy" which is usually associated with elevated IOP (Jane: 2004, 442). He notes in glaukomatoznata papilloedema excavation of the optic nerve and leads to changes in the visual field.

Congenital glaucoma is a "structural abnormality in the area of the front corner of the eye chamber" that causes "preventing normal brain fluid from the chamber through the filtration apparatus" which leads to "elevated IOP and increasing bulge, because it is a flexible and extensible korneosklera the person in the first year of life" (Vojnikovic: 1984, 245). This form of glaucoma, and infantile glaucoma is manifested by "tearing and sensitivity to light, which is secondary to corneal edema from elevated IOP" (Bradford: 2010, 53).

Secondary glaucoma occurs for reasons that are primarily related to other compromised health conditions of the eye, such as the spread of the lens, iris atrophy, shallow medium sobichka etc. (Vojnikovic-Braco: 1984, 191). The occurrence of glaucoma can contribute and external factors or diseases affecting other authorities such as trauma, infections, tumors, side effects of certain medications, and many other conditions. When dealing with secondary glaucoma should take into account all the complex factors that led to his appearance.

Objective: The aim of the paper is to develop the relationship of health care worker to a patient presents with symptoms of glaucoma as well as how to help it deal with the situation. We pay attention to the special circumstances and needs pertaining to people with glaucoma. The ultimate goal is to identify major procedures and necessary measures should be taken in the diagnosis and treatment of glaucoma.

Methods and Techniques: In accordance with the purpose of labor and its practical dimension versus theoretical and scientific knowledge in the literature we present the application and specific research activities. They include, survey statistics associated with glaucoma who are in the centers for primary health care in Macedonia, method of corneal impression with Shiocov tonometer and method aplanacija the cornea, with Tonometrijata aplanacija the cornea is najprimenuvana (Bradford: 2010, 17). It is usually performed by two techniques: 1) Goldmanova aplanaciona tonometry or 2) Nekontaktna tonometry. In the first case using slit lamp with Goldman tonometer and prism (Carlson, Kurtz: 2010, 293). This instrument comes into contact with the cornea of the patient and should therefore keep an eye on the condition of the patient's anterior segment, especially the cornea and apply a drop of anesthetic. The estimated goniokopija front corner of the chamber (Carlson, Kurtz: 2010, 253) (Bradford: 2010, 55). She performed with Goldmanova lens with three mirrors or lens goniokopija 4 mirrors, slit lamp, liquid goniokopija, local.
anesthetic and sterilized saline wetting. With ophthalmoscopy estimated health of the posterior segment of the eye (Carlson, Kurtz: 2010, 272-280). For her performance is required monokularen direct ophthalmoscope that optometrists should be managed carefully. The patient should feel comfortable, because during the review ophthalmoscope touches his face, and it will take patience and further notes while optometrists values (Jane: 2004, 51). And several interviews with doctors - ophthalmologists in the mentioned centers. In this exploratory stage, just a few interviews we have imposed specific starting points in the development of labor and through them and provided important operational data for demographic structure, common needs and problems of people with glaucoma.

**Results:** The survey and interview doctors employees of the Department of Ophthalmology at the Clinical Hospital in Stip enabled us insight into the dynamics of this problem in practice. On receiving information about the frequency of the need to deal with glaucoma in Stip. In addition, provide details and demographic profile of the patients, as well as specific advice on the approach to dealing with the disease that are based on their experience. People with glaucoma reported in Stip Clinical Hospital in the period 01.2009-05.2013.

People with congenital glaucoma / Individuals affected by congenital glaucoma -2006-2 children from 0.2009 to 2 children 3deca 0.2011 - 0.2011-2 children and 2 013 -1 child.

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**Discussion:** In order to enter into a discussion of the ethical relation and communication with people with glaucoma is necessary first to determine what exactly is glaucoma, which are signs and symptoms that are manifested through which are conditions that are considered in differential diagnosis, how establishing diagnosis and prognosis are estimated and prescribe treatment for dealing with this disease. The treatment of glaucoma, because of the severity of the condition often requires surgery.

**Conclusion:** Glaucoma is a serious health problem associated with visual loss. Because of this condition forever change the lives of patients, an ophthalmologist should always be prepared to explain the importance of check-ups, treatment and severity of disease. Ethics requires him to always show understanding for the problems with the type of patients, and to show compassion and understanding when he describes the long-term prognosis of patients.

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