

青光眼



这张图片显示了随着时间推移，青光眼可能会对视力造成影响的其中一个病例。

什么是青光眼？

青光眼是会缓慢损伤眼底视觉神经（视神经）的一系列眼部疾病。这通常会与眼内高压有关，但在正常眼压下也会发生。

在澳大利亚，青光眼是导致失明和视力丧失的主要因素之一。只有一半的澳大利亚青光眼患者知道自己患有此疾。

及早的发现和治理能够预防或延缓因青光眼导致的视力丧失。

青光眼有哪些症状？

- 通常在视神经受到严重损伤之前，青光眼没有任何症状。
- 通常青光眼会导致视力从外围（周边）开始丧失。大多数情况下视力丧失是逐渐发生的。
- 两只眼睛有可能同时患有青光眼，但其中一只的情况可能比另一只要差。
- 在极为罕见的情况下，有些人可能会有突发的疼痛性青光眼，并伴有视力迅速丧失。这属于紧急医疗状况。

Glaucoma

This image shows an example of how glaucoma may affect vision over time.

What is glaucoma?

Glaucoma is a group of eye diseases that slowly damage the nerve for vision at the back of the eye ('optic nerve'). It is often linked to high pressure inside the eye but can also occur with normal pressure.

Glaucoma is one of the leading causes of blindness and vision loss in Australia. Only half of Australians with glaucoma know they have it.

Early detection and treatment can prevent or delay much of the vision loss caused by glaucoma.

What are the symptoms?

- Often glaucoma has no symptoms until significant damage has been done to the optic nerve.
- It can lead to vision loss which often starts with the loss of peripheral (side) vision. In most cases this is gradual.
- Can develop in both eyes, but one eye may be worse than the other.
- Very rarely, people may develop a sudden-onset, painful form of glaucoma with rapid loss of vision. This is a medical emergency.

谁有患青光眼的风险？

- 所有年龄超过40岁的人。患病的风险随着年龄增加。年龄在70岁以上的人患有青光眼的风险要比40岁的人高出3倍。
- 有青光眼家族病史的人。他们患有青光眼的风险相比之下要高出8倍。
- 有非洲或亚洲血统的人。
- 患有糖尿病的人。
- 严重近视或远视的人。
- 以前眼部受过伤或服用皮质类固醇药物的人。

应该做什么？

- 定期在眼科专家处（验光师或眼科医生）接受眼科检查。这些应该包括视神经和眼压的检查。
- 如果视力出现变化，请立即去看眼科专家。

及早的发现很重要。千万不要等到症状出现再做检查，要定期接受眼科检查。

诊断为青光眼后，相应的治疗通常能够延缓并防止病情恶化。治疗的目标是能永久性维持视力。

拯救您的视力—接受眼科检查

获得更多信息

与眼科专家或您的家庭医生谈一谈。

请拨打1800 500 880致电澳大利亚青光眼协会或者登录网站查询 www.glaucoma.org.au

请登录网站www.visioninitiative.org.au

Medicare能报销大部分的验光服务费用。与验光师预约不需要转诊信。如果有必要，您的家庭医生或验光师会将您转诊给一位眼科医生。

有些服务和帮助能为您适应视力丧失，继续保持自理并参与您所选择的的活动。与眼科专家或您的家庭医生谈一谈，了解更多信息。

Who is at risk?

- All people aged over 40. The risk increases with age. People aged over 70 are three times more likely to develop glaucoma than those aged 40.
- People with a family history of glaucoma. They are up to eight times more likely to develop the condition.
- People of African or Asian descent.
- People who have diabetes.
- People who are very short- or long-sighted.
- People who have had previous eye injuries or who take corticosteroid medications.

What can be done?

- Have regular eye tests with an eye health professional (optometrist or ophthalmologist). These should include a check of the optic nerve and eye pressure.
- Visit an eye health professional without delay if vision changes.

Early detection is essential. Don't wait for symptoms, have regular eye tests.

When glaucoma is diagnosed, treatment can usually slow or stop the disease from getting worse. Treatments aim to maintain vision throughout life.

Save Your Sight - Get Tested

For more information

Speak to an eye health professional or GP.

Contact Glaucoma Australia on 1800 500 880 or visit www.glaucoma.org.au

Visit www.visioninitiative.org.au

A Medicare rebate is available for most optometry services. You do not need a referral to see an optometrist. If required, your GP or optometrist can refer you to an ophthalmologist.

There are services and supports to help people adjust to vision loss, remain independent and continue to participate in their chosen activities. Speak to an eye health professional or your GP to find out more.