10. İNGİLİZCE ÖZET

Purpose: Intraocular pressure (IOP) does not have a constant value. IOP is highest during systole and lowest during diastole. The aim of this study was to evaluate the ocular pulse amplitude in pseudoexfoliation syndrome using pascal dynamic contour tonometry.

Methods: 32 patients with pseudoexfoliation syndrome and 32 age and sex matched controls were included into the study. All patients underwent complete ophthalmic examination including ocular pulse amplitude values determined by pascal dynamic contour tonometry.

Results: In pseudoexfoliation syndrome group, mean intraocular pressure (IOP) with Goldmann was 15,0±3,5 mmHg, mean IOP with pascal dynamic contour tonometry (DCT) was 18,0±4,0 mmHg, mean OPA was 2,60±0,92 mmHg. In control group, mean intraocular pressure (IOP) with Goldmann was 15,0±3,7 mmHg, mean IOP with pascal dynamic contour tonometry (DCT) was 17,0±3,0 mmHg, mean OPA was 2,24±0,87 mmHg. There was no significant difference between groups with respect to intraocular pressure as measured with GAT (p=0,534), DCT (p=0,524), and OPA (p=0,085). We found a significant positive correlation between OPA and IOP values using DCT and GAT in healthy subjects. In the XFS group, there was a significant positive correlation between OPA and IOP values obtained by GAT but not IOP values obtained by DCT.

Conclusion: Pseudoexfoliation is a common situation in our country. Ocular pulse amplitude that reflects association between blood pressure and IOP was compared with controls. There was no significant difference in the OPA values between healty and XFS.

Key words: ocular pulse amplitude, pseudoexfoliation syndrome, Pascal Dynamic Contour Tonometer, Goldmann applanation tonometer