### INFLUENCE OF SLEEP ON THE NYCTEMERAL CURVE OF INTRA-OCULAR PRESSURE

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PURPOSE: Intra Ocular Pressure (IOP) varies through out the nycthemeral. Nocturnal studies described recently an elevation of IOP during sleep. However, no report on sleep patterns associated with the measurement of IOP was made. We report here, 2 studies on hourly measurement of IOP over a period of 24 hours

<u>METHODS</u>: Twelve young causasians subjects (aged 20,6 $\pm$  0,3 years), twelve older caucasians adults (aged 59,5 $\pm$ 1,6 years old), sixteen healthy atricans subjects (aged 23,5 $\pm$ 1 year old) and eleven glaucomalous africans (aged 36,6  $\pm$  3,6 years old) had hourly 10P measurements for 24 hours with an electronic tonometer after instillation of a contact anesthetic (oxybuprocaine). Polysomhographic nocturnal recordings allowed the 2O seconds scotling of wakefulness, light sleep (stages 1+2) slow wave sleep (slages 3 + 4) and paradoxical sleep.

RESULTS: Nycthemeral variations were related to the states of

vigilance. Slow wave sleep values, in both studies, are higher than paradoxical sleep values (p< 0,05).

CONCLUSION: Higher nocturnal values of IOP were related to sleep. Slow wave sleep values were higher than paradoxical sleep values. Is myosis induced by paradoxical sleep the main factor of this relative ocular hypotony?

#### STUDY OF THE VARIATIONS IN THE AQUEOUS HUMOUR FLOW DURING A DYNAMIC TEST

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<u>Purpose</u>: The aim of this study was to verify the hypothesis of "decreasing aqueous humour flow" in the determination of the decreasing intraocular pressure observed during a dynamic test.

Methods: The aqueous humour flow was measured in healthy male subjects using the fluorophotometric method during a rest-test and an stress-test. We compared the results of both tests.

Results: We observed a decreasing intraocular pressure due to stress. Compared to the rest results, no significant decrease of the aqueous humour flow due to stress could be found, at the risk of  $\alpha \leq 5\%$ .

Conclusion: The decrease in the intraocular pressure during the dynamic test is not due (at the risk of 5%) to the decrease in the aqueous humour flow evaluable in fluorophotometry.

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# QUANTITATIVE ASSESMENT OF AQUEOUS FLARE IN PSEUDOEXFOLIATION SYNDROME AND OPEN-ANGLE GLAUCOMA

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Purpose: To study whether there are alterations of the blood-aqueous barrier in eyes with pseudoexfoliation syndrome in comparison with normal control eyes, and whether flare values migth be related to the presence or absence of: open angle glaucoma

Methods: We used the Laser Flare Meter Kowa-500 to measure the aqueous? flare in 18 eyes with pseudoexfoliation in 20 normal control eyes and in 20 eyes with open-angle glaucoma unrelated to pseudoexfoliation

Results: In pseudoexfoliation eyes aqueous flare values (14,5 +/- 2,79photons/insec) were significantly higher than in normal control group (6.9) 11. 3.92 photons/insect and in open-angle glaucoma group without pseudoexfobation (8,82 +/ 2,03 photons/msec) p < 0,001. No significant difference could be found between the flare counts of normal eyes and opeangle glaucoma eyes without pseudoexfohation

Conclusion: Our findings indicate that the blood aqueous barrier is impaired in eyes with pseudoexfoliation, and the Laser Flare Meter is useful to quantify these changes. The alteration of the blood aqueous barrier in eyes with pseudoexfoliation need to be considered in medical treatment, laser therapy or ocular surgery.

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#### THE ANTERIOR CHAMBER ANGLE ANALYSIS IN MYOPIA LIN Szu-Yuan<sup>1</sup> YANG Chang-Hao<sup>2</sup> HUANG Jau-Kang<sup>2</sup> SHIH Yung-Feng<sup>2</sup> LIN L.L.K.<sup>2</sup> HUNG Por-Tying<sup>2</sup>

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Purpose There is a strong tendency toward deepening of the anterior chamber in high myopia. The anatomy of angle have an impact upon the level of intraocular pressure, but the morphology of the chamber angle in high myopia are not extensively studied. We analyzed the chamber angle by using an anterior segment image processing technique applying Scheimpflug principle.

Methods One hundred and fifty six eyes were studied. Age from 18 to 21 years. Each patient had the data of refractive status and axial length. anterior chamber angle examined with a Scheimpflug'image technique. The four anterior chamber angle (superior, inferior, masal, temporal) were calculated and analyzed

Results Data showed that the width of four anterior chamber angle, except temporal angle, are not correlated with the increasing of refractive errors or axial lengths. Temporal angle was slightly correlated with the increasing of myopia and axial length, this result was more specific to the group less than -6.0D (i = 0.34). As well, there was

significant wider in the group of high myopes (>-8.0D) than the group of low myopes (>-3.0D) (p=0.015). Conclusions The width of temporal side of atterior chamber angle was slightly wider in high myopic eye. This result suggested that the more profound the angle derangement in high myopia, the higher incidence of the glaucoma may evolve

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