## **EDITORIAL**

## GLAUCOMA—A MODERN VIEW

Several years ago there was a popular computer game called 'Gold'. The player hunted for treasure down a discarded mine in the Yukon. By trial and error, he learnt to avoid traps and blind alleys and eventually discover the hidden cache of Gold. Because the whole escapade took place in metaphorical if not literal darkness, progress could only be made if the strictest logic, combined with a full memory of the events that had gone before was employed. Research in ophthalmology in general, and in glaucoma in particular, has a certain similarity. For decades clinicians have been single-mindedly following one idea—namely that elevated intraocular pressure in glaucoma was the sole problem—to the exclusion of all others. Intellectual contortions were needed to conjure up an explanation if this approach failed to prevent progression of visual loss. It needed DeBono-like thinking to escape from the trough of this sterile ideology and generate fresh ideas. And in his recent Bowman lecture, printed in this issue, Stephen Drance has demonstrated this freedom. In his article he recalls a series of experiments in which he explored alternative reasons for visual loss in glaucoma. He has developed the concept of pressure sensitive and pressure insensitive disease as a result. He has given us clinicians reasons for the different expressions of glaucoma and has pointed the way towards therapies which do not rely on the lowering of intraocular pressure for their effect. All clinicians and researchers should read this article. The former to have the author as a guide with an explanation for those eyes which fail to respond to 'perfectly adequate treatment'; the latter as an example of an original sideways look, allowing fresh insights into an old problem resulting both in new approaches and new solutions.

**R** A HITCHINGS

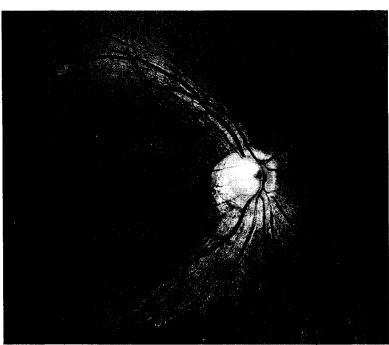


Illustration from the Bowman Lecture: Glaucoma—Changing Concepts by S. M. Drance p.338