Between April 2007 and March 2009, glaucoma was managed by general practitioners at a rate of 1.8 contacts per 1000 encounters in the BEACH (Bettering the Evaluation and Care of Health) program, extrapolating to about 200,000 times per year nationally. This was marginally higher than in April 2000 to March 2002 (1.4 per 1000). We compared results from the two data periods to establish what changes had occurred.

There were no significant changes in overall methods of management of glaucoma between the two data periods. In 2007–2009, general practitioners prescribed 70 medications per 100 glaucoma problems managed, made 33 referrals per 100 (31 being to specialists), and ordered very few pathology tests (Figure 1).

However, the types of medications prescribed changed significantly between 2000–2002 and 2007–2009. Prostaglandin analogues (e.g., latanoprost) have superseded older medications (e.g., pilocarpine, a parasympathomimetic and plain timolol, a beta blocking eye drop). Table 1 shows changes in medication type, but note that the World Health Organization Anatomical Therapeutic Classification (ATC) index includes new eye drop combinations containing beta blocking agents in the beta blocker group. These combinations made up more than 40% of beta blocking agents in 2007–2009, and thus masked the decrease in the prescription of beta blockers as a single substance.

Glaucoma represents a range of high intraocular pressure conditions. International recommendations for current treatment include a shift from beta blockers to prostaglandin derivatives as the first line drug class of choice. BEACH results show that Australian GPs’ prescribing patterns follow latest guidelines based on scientific evidence.

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