



Four Tonometers and their correlation- A comparative study

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Abstract

Background: Early identification of Ocular Hypertension is needed to prevent and control the life threatening glaucoma.

Objectives

1. To compare the Intra ocular pressure assessed by using GAT, Schiottz, Tonopen and Non Contact Tonometer (NCT)
2. To correlate the Schiottz, Tonopen and NCT tonometers with GAT in measuring the IOP

Materials and Methods: Cross-sectional study conducted in Ophthalmology department of SSSIHMS, Andhra Pradesh for a period of 2 months. 112 study participants were included in the study and their IOP was assessed using GAT, Schiottz, Tonopen and NCT tonometers and the readings were compared. Statistical analysis was done using Pearson correlation and p value

Results: The mean age of the participants was 53.20 ± 13.03 years. Most of them are males 66(58.9%), illiterates 50(44.7%) and they belonged to Class I socio-economic status 49(43.7%). The average intra ocular pressure was high in females than males. There was a difference in average IOP between Right eye and Left eye measured using the 4 different tonometers. The mean IOP in left eye was high compared to Right eye, measured using NCT, Tonopen and Schiottz. However the GAT measurement in contrary showed high IOP in Right eye comparing the left eye Pearson correlation showed a moderate positive correlation between the 4 tonometric assessments, having r value of 0.577 and it was statistically significant.

Conclusion: Positive correlation between the tonometric readings gives the future consideration in using various tonometers for IOP measurements.

Keywords: Schiottz tonometer, GAT, NCT, Tonopen, Glaucoma.

Introduction

Ocular hypertension is the important modifiable risk factor of a life threatening disease called glaucoma.¹ Globally millions of people were affected with glaucoma, every year.² Decrease in Intra ocular pressure (IOP) can delay the damage caused by

glaucoma.³ Thus assessment of IOP has a vital role in diagnosis, treatment and even in control of the complications of glaucoma.^{1,3} Tonometers are the instruments used for measuring IOP. Among the various tonometers, Goldmann Applanation tonometry (GAT) is considered as the gold standard for measuring IOP.⁴ However Applanation

Tonometry has known limitations like influence of Central Corneal Thickness (CCT) and corneal curvature, necessity to support the upper lid during measurement, use of topical anaesthesia and fluorescein staining of the tear film, hence it is often unsuitable for field surveys settings.⁵ Various other tonometers available are Schiottz, Tonopen and Non Contact Tonometer (NCT). Schiottz tonometer is a prototype of indentation tonometer. It is portable, sturdy, relatively inexpensive and easy to operate.

The non-contact tonometer applanates the cornea by a jet of air, so there is no direct contact between the device and the surface of the eye, but, the disadvantage is that it cannot be used for the measurement of irregular corneas.⁶ The Tono-Pen tonometer was developed for use in patients who present with the sort of measurement problems that are often associated with children. The instrument is easy to handle, portable, light weight, and does not require the use of fluorescein.⁷

With the above background the study aims at comparing 3 different types of tonometers namely Schiottz, NCT and Tonopen against the gold standard Goldmann applanation tonometer (GAT) in measuring the IOP and to assess the correlation between them.

Objectives

1. To compare the Intra ocular pressure assessed by using GAT, Schiottz, Tonopen and Non Contact Tonometer (NCT)
2. To correlate the Schiottz, Tonopen and NCT tonometers with GAT in measuring the IOP

Materials and Methods

This study is a part of DNB ophthalmology thesis. It is a cross-sectional study, conducted in outpatient section of Department of Ophthalmology, Sri Sathya Sai Institute of Higher Medical Sciences (SSSIHMS) Prasanthigram, Anantapur district, Andhra Pradesh, India. Only those patients reported to the outpatient department from April 2011 to April 2012 were included in the study. The study

population included where those, patients presenting to the eye clinic of SSSIHMS, aged above 15 years, without any active intraocular inflammation having normal intraocular pressure, without any systemic illness.

Results

Out of 112 study participants, maximum number of participants were aged > 50 years (57.2%), the mean age of the participants was 53.20±13.03 and most of them were males 66(58.9%). It was also noted that nearly half of them were Illiterate (44.7%) and only less than 5% of them were graduated. According to modified kuppusamy scale classification, most (43.7%) of them belonged to Class I socio-economic status [Table 1]

The average intra ocular pressure was high in females than males, the IOP values close to that measured by GAT was that measured with Schiottz, The IOP measured with GAT, Schiottz, Tonopen and NCT in females and males are 15.14 mm of Hg,14.99mm of Hg,13.71 mm of Hg,12.64 mm of Hg and 15.02 mm of Hg,14.36 mm of Hg,12.94 mm of Hg and 12.37 mm of Hg respectively[Figure 1]

There was a difference in average IOP between Right eye and Left eye measured using the 4 different tonometers. The mean IOP in left eye was high compared to Right eye, measured using NCT, Tonopen and Schiottz. However the GAT measurement in contrary showed high IOP in Right eye comparing the left eye [Table 2]

All the three tonometers namely NCT, Tonopen and Schiottz had positive correlation in measuring the Intra ocular pressure as with IOP measured using GAT. The r value determined showed positive correlation. The r value found out for measuring IOP using NCT ,in relation to GAT assessment was high compared to those measured with Tonopen and Schiottz and it was found statistically significant having a p value of < 0.001.[Table 3]

Table 1: Distribution of participants based on socio-demographic variables (n=112)

PARAMETERS	FREQUENCY (%)
AGE (in years)	
<30	3(2.6%)
30-50	45(40.2%)
>50	64(57.2%)
Mean ± SD: 53.20±13.03	
SEX	
Males	66(58.9%)
Females	46(41.1%)
EDUCATION	
Illiterate	50(44.7%)
Primary/Secondary	32(28.6%)
High school/Higher Sec	25(22.3%)
Graduates and above	5(4.5%)
Socio-economic status	
Class I	49(43.7%)
Class II	21(18.7%)
Class III	17(15.1%)
Class IV	25(22.3%)

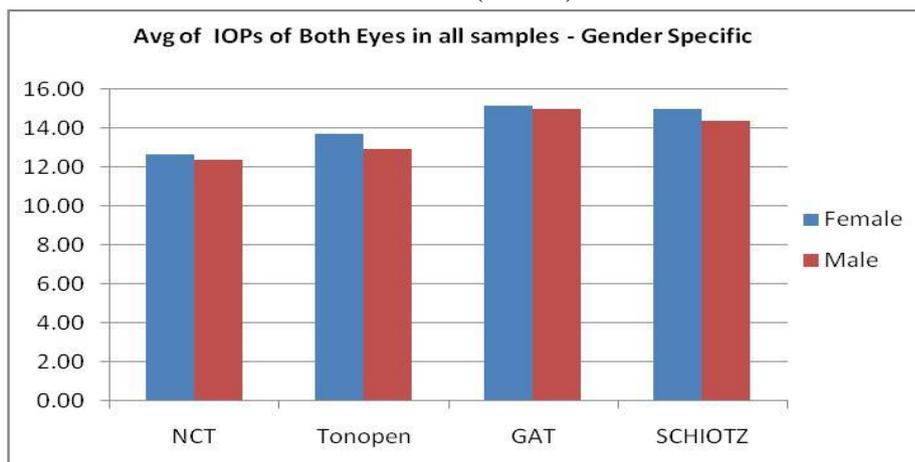
Table 2: Comparison of IOP measurements between Right Eye and Left Eye using GAT, SCHIOTZ, NCT and TONOPEN tonometers (n=112)

	Measurement1	Measurement2	Measurement3	Average
Right eye				
□ NCT	12.25±2.86	12.31±2.80	12.44±2.68	12.33±2.68
□ TONOPEN	13.03±3.68	12.93±3.29	13.07±3.77	13.01±3.16
□ GAT	14.99±3.12	15.21±2.98	15.52±3.06	15.24±3.00
□ SCHIOTZ	14.29±3.44	14.06±3.24	13.88±3.33	14.04±3.24
Left eye				
□ NCT	12.54±3.22	12.66±3.26	12.69±3.12	12.63±3.10
□ TONOPEN	13.29±3.69	13.31±3.83	13.90±4.00	13.50±3.49
□ GAT	14.68±3.29	14.95±3.19	15.06±3.27	14.90±3.17
□ SCHIOTZ	14.70±3.63	14.48±3.82	14.53±3.65	14.58±3.54

Table 3: Correlation and paired t test interpretation

	Pearson Correlation	P value
NCT vs GAT	0.593	<0.001**
TONOPEN vs GAT	0.567	<0.001**
SCHIOTZ vs GAT	0.577	<0.001**

Figure 1: Comparison of IOP between males and females (n=112)



Discussion

Ocular hypertension being an important indicator of Glaucoma, has to be identified at the earliest. This study compares IOP measured using 4 different tonometers. The mean IOP measured using the goldstandard tonometric assessment was 15.24±3.00 in Right eye and 14.90±3.17 in left eye respectively. In a study conducted by Schreiber W et al⁸ the mean IOP (GAT) was 13.2+/-3.0 mmHg, which was less compared to our present study findings

Hessemer V etal⁹ compared a new hand-held tonometer, Tono-Pen with the Goldmann tonometer and found that TONOPEN slightly overestimated the IOP by a maximum of 1.48 mm Hg. We observed that there was statistically significant difference in the values of intraocular pressures between Tonopen and GAT.

Schiotztonometer often generated a relatively high reading of IOP and in that case the patient must be assessed using GAT, before diagnosing them to have high intra ocular pressure.¹⁰ In our present study, Schiotztonometric IOP reading is less than

the IOP reading obtained by using GAT. The mean IOP measured in Right and Left eye using GAT (15.24±3.00 mm of Hg and 14.90±3.17 mm of Hg) and schiötz in Right and left eye are 14.04±3.24 mm of Hg and 14.58±3.54 mm of Hg respectively. This study finding was in agreement with the previous study conducted by Armalayetal¹¹

Jonathan SP, in his study, mentioned that, for either gender, the absolute mean level of IOP remains little altered from childhood into and throughout adulthood. However the physiological basis for these observations remains obscure. In this study also the intra ocular pressures in female subjects were found to be more than males. The above study is in perfect agreement with our study.¹²

In a study done by Vinayak et al, 248 eyes of 60 healthy subjects, 31 patients with POAG, 16 patients with PACG & 17 patients with OHT underwent IOP evaluation with NCT, GAT & Schiötz tonometer). Finally they concluded that IOP as recorded by the three tonometers was not statistically significantly different from each other,

so any of these tonometers can be safely used for routine glaucoma workup. This study was in perfect agreement with our study.¹³

Rateb M et al¹⁴ in their study concluded that there was no significant correlation between the IOP measurements done using different tonometers, this was contrary to our present study finding, which showed a significant positive correlation between the measurements

Conclusion

Glaucoma being an eye threatening condition, has to be identified earlier. GAT, is the gold standard assessment tool for IOP measurement, however an alternate method has to be available to overcome its limitation.

Present study, infers that the IOP difference measured using GAT and Schiötz is insignificant, which concludes that Schiötz can also be used as a standard IOP assessment instrument and also the significant positive correlation between the various tonometric readings gives a positive insight on using the various tonometers for measuring IOP.

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