A population-based epidemiological study of glaucoma recently completed in Tajimi in central Japan revealed that prevalence of open angle glaucoma (OAG) in Japanese aged 40yrs was 3.9%, and that of OAG with apparently normal pressure (normal tension glaucoma, NTG) 3.6%, both being much higher than that previously assumed. Undoubtedly, treatment of NTG is the most important clinical problem for glaucoma subspecialists in Japan. Thus, among the results of glaucoma randomized controlled trials (RCTs) recently published, the result by Collaborative NTG Study Group that IOP reduction from baseline by 30% or more is beneficial in retarding the progression of NTG has the greatest impact in Japan. Our retrospective review revealed, however, treatment with latanoprost and \(\alpha\)-blocker or dorzolamide could reduce IOP by 30% or more only in about 25% of Japanese NTG patients for 1 year, and trabeculectomy with use of 0.04% MMC only in about 60% of them for 1 year, which suggests that more potent ocular hypotensive drugs are needed to put what we have learnt from the above study into daily practice. To establish a guideline for the treatment of Japanese NTG patients with their average IOP of about 15 mmHg, RCTs are absolutely necessary.

Possible problems are: Pharmaceutical and Medical Safety Bureau in Japan, which corresponds to FDA in USA, is awfully understaffed (1/100 of FDA!) and because of recent economical recession, it is difficult to raise government-sponsored or other public funds. Even fund for Japan Clinical Oncology Group directing RCTs of cancer therapy is about 1/10 of that in USA or Europe. Immaturity of infrastructure in Japan in this field is absolutely attributable to understaffedness of Pharmaceutical and Medical Safety Bureau and statisticians, data manager, research nurses and etc. To improve situation at least in the field of glaucoma, Japan Glaucoma Society (JGS) is now planning to establish a data center for its own and site visit audit system.

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