LETTER

Efficacy and tolerability of preservative-free tafluprost 0.0015% in Korean patients with glaucoma

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Dear editor

I read with interest the article entitled "Preservative-free tafluprost in the treatment of naive patients with glaucoma and ocular hypertension" by Lanzl et al. I have also experienced similar treatment outcomes in Korean patients. In Korea, preservative-free tafluprost (Taflotan-S; Santen Pharmaceutical Co, Ltd, Osaka, Japan) was introduced to the ophthalmic market in October 2012. Thus far, no data have been published on the efficacy and tolerability of preservative-free tafluprost in Korean patients. Thus, I investigated the intraocular pressure (IOP)-lowering efficacy and safety of preservative-free tafluprost in treatment-naïve Korean patients with glaucoma.

This study included 58 Korean primary open-angle glaucoma patients who had not undergone previous glaucoma treatment. Preservative-free tafluprost was prescribed to the primary open-angle glaucoma patients and the patients were scheduled to visit the clinic after 1, 3, and 6 months of treatment. The mean (standard deviation) IOP of 58 eyes in 58 patients at the baseline visit was 20.0 (4.6) (range, 12–32) mmHg. After treatment with preservative-free tafluprost, the mean IOP decreased to 15.5 (2.5) mmHg (4.6 mmHg [23.0%] reduction from baseline) at 1 month after treatment, to 14.9 (2.8) mmHg (5.1 mmHg [25.5%] reduction from baseline) at 3 months after treatment, and to 15.1 (2.6) mmHg (4.9 mmHg [24.5%] reduction from baseline) at 6 months after treatment, respectively. No significant difference was found in IOP among 1, 3, and 6 months of treatment (P>0.05). Irritation/stinging/burning sensation, itching, tearing, and dryness were reported by 5 (8.6%), 2 (3.4%), 2 (3.4%), and 9 (15.5%) patients, respectively, during the treatment period. None, mild, moderate, and severe conjunctival hyperemia was observed in 43 (74.1%), 13 (22.4%), 2 (3.4%), and 0 (0%) eyes after treatment, respectively. No eye showed corneal staining during the treatment period.

According to my clinical experience, preservative-free tafluprost was both well tolerated and effective for IOP reduction in treatment-naïve Korean glaucoma patients. Therefore, I think that preservative-free tafluprost may be a good treatment regimen for glaucoma in Korean patients.

Disclosure

The author reports no conflicts of interest in this correspondence.

References

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