I appreciate EyeNet’s article “MIGS: Expanding Options for Glaucoma Treatment” (Feature, February) and how aptly it addresses the evolution of MIGS procedures in glaucoma. However, an important MIGS procedure (in fact, the first MIGS procedure), excimer laser trabeculostomy (ELT), was unfortunately not included in this otherwise comprehensive article. Readers would certainly have benefited from this information. Excimer laser-based MIGS glaucoma surgery has been in clinical use for more than 2 decades in Europe.

**History.** In the late 1980s, Michael S. Berlin, MD, invented a new technique for bypassing outflow obstruction of the trabecular meshwork/inner wall of Schlemm’s canal. This “trabeculostomy” procedure uses an excimer laser to non-thermally ablate channels connecting the anterior chamber to Schlemm’s canal for the treatment of glaucoma. Known as ELT, this method minimizes scarring of the adjacent tissue, which thereby enables longevity of IOP lowering. Although similar to the canal-based MIGS procedures discussed in the article (which theoretically treat the pathology at the known site of outflow obstruction), ELT requires no implantation of foreign bodies and does not evoke a significant healing response, resulting in a longer duration of IOP lowering postoperatively.

ELT, used clinically in Europe, has a verified, long-lasting efficacy for reducing IOP. Data for more than 8 years of post-op follow-up has been evaluated, confirming the sustained IOP-lowering effect of ELT.

For the sake of completeness, it is appropriate to mention ELT and credit Dr. Berlin, the first person to conceptualize and successfully clinically apply lasers capable of nonthermal photoablation in glaucoma surgery. Excimer lasers do and will enable much improved glaucoma surgical options.

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1 Berlin M et al. Excimer laser trabeculostomy, MIGS procedure using no implants while lowering intraocular pressure over 8 years, alone and with phaco. In: Proceedings of the ASCRS Annual Meeting; May 5-9, 2017; Los Angeles. ASCRS submission number: 30587.