

Revolutionizing Glaucoma Care: Harnessing Artificial Intelligence for Precise Diagnosis and Management

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ABSTRACT

Glaucoma is a leading cause of irreversible blindness worldwide, necessitating early detection and effective management to prevent vision loss. Recent advancements in artificial intelligence (AI) have revolutionized glaucoma care by enhancing diagnostic accuracy, monitoring disease progression, and personalizing treatment strategies. AI models, including machine learning and deep learning algorithms, have demonstrated exceptional performance in analyzing fundus photography, optical coherence tomography, and visual field data, surpassing traditional diagnostic methods. Convolutional neural networks have shown high sensitivity and specificity in detecting glaucomatous changes, while vision transformers and hybrid AI models further refine risk assessment and prognosis. Additionally, AI-powered monitoring systems utilizing multi-modal data integration allow for more precise prediction of disease progression and the need for surgical intervention. The incorporation of AI into telemedicine and wearable intraocular pressure sensors extends glaucoma management to remote and underserved populations. Despite these advancements, challenges remain, including issues related to algorithm generalizability, data standardization, bias, and ethical concerns regarding AI-driven clinical decision-making. To maximize AI's potential in glaucoma care, further interdisciplinary research, regulatory oversight, and multi-center validation studies are needed. By addressing these challenges, AI can be effectively integrated into clinical practice, leading to improved early detection, enhanced treatment strategies, and more personalized patient care. The future of AI in glaucoma management holds great promise, paving the way for a more data-driven and patient-centered approach to combating this sight-threatening disease.

Keywords: Artificial intelligence; deep learning; diagnosis; glaucoma; management

INTRODUCTION

Glaucoma is a chronic, progressive optic neuropathy and the second leading cause of irreversible blindness worldwide, with estimates indicating 76 million cases by 2020 and a projected increase to 111.8 million by 2040.¹ Characterized by retinal ganglion cell degeneration and visual field defects, the disease often progresses silently until significant vision loss occurs.² The asymptomatic nature of early glaucoma and its varied clinical presentation pose challenges for early detection and effective management, necessitating the use of reliable diagnostic tools.³ Conventional diagnostic methods, such as optical coherence tomography (OCT) and visual field testing, require expert interpretation, are resource-intensive, and susceptible to interobserver variability.^{4, 5} Advances in artificial intelligence (AI),

particularly machine learning (ML) and deep learning (DL) algorithms, have shown potential to address these challenges by enhancing diagnostic precision, predicting disease progression, and automating clinical workflows.⁶ Convolutional neural networks (CNNs), for example, have demonstrated high sensitivity and specificity in analyzing imaging data such as fundus photographs and OCT scans.⁷ Recent studies have further validated AI's impact in glaucoma diagnostics. Chuter et al.⁸ reported that AI-assisted OCT analysis improved early glaucoma diagnosis rates by 30% compared to conventional methods. Similarly, Gong et al.⁹ highlighted that AI-powered screening tools enhanced sensitivity in detecting glaucomatous changes by 25%, particularly in early-stage disease cases.

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The integration of AI into glaucoma care is anticipated to revolutionize patient management by facilitating early detection, avoiding misdiagnosis, risk stratification, and personalized treatment strategies.¹⁰ For instance, Sidhu et al.¹¹ demonstrated that AI-assisted screening reduced misdiagnosis rates by 22% in a large-scale clinical trial. Moreover, Huang et al.¹² reported that AI algorithms trained on diverse datasets achieved an area under the curve (AUC) of 0.94 for early glaucoma detection, surpassing traditional diagnostic methods.

However, the implementation of AI in clinical settings remains limited by issues of model generalizability, interpretability, and ethical concerns regarding data privacy and bias.¹³ This review aims to provide a comprehensive overview of the current applications of AI in glaucoma management, highlighting its benefits, challenges, and future directions.

FUNDAMENTALS OF AI IN OPHTHALMOLOGY

AI refers to the simulation of human cognitive functions, such as learning, problem-solving, and decision-making, by machines.¹⁴ In healthcare, AI systems analyze complex datasets to support clinical diagnoses and management plans. A subset of AI, ML, enables systems to learn from data without being explicitly programmed.¹⁵ ML algorithms identify patterns in data and make predictions or classifications based on prior examples. DL, a branch of ML, utilizes artificial neural networks structured in layers to perform highly complex tasks, particularly in image and speech recognition.¹⁶ The advantage of DL lies in its ability to extract features automatically from raw input, making it particularly effective for analyzing ophthalmic images such as fundus photographs and OCT scans.¹⁷ These distinctions highlight the hierarchical nature of AI, with DL forming the backbone of many innovative diagnostic tools in ophthalmology.

In glaucoma research, several AI models have demonstrated exceptional efficacy in improving diagnostic and prognostic accuracy. CNNs have emerged as a gold standard for image-based tasks due to their ability to detect fine structural details in ophthalmic images, such as optic nerve head changes and retinal nerve fiber layer (RNFL) thinning.¹⁸ Support Vector Machines excel in binary classification tasks, making them suitable for distinguishing glaucomatous eyes from

healthy ones.¹⁹ Bayesian Networks integrate probabilistic reasoning, allowing the combination of multiple diagnostic factors to assess glaucoma risk.²⁰ Random Forests, which utilize multiple decision trees, have been effective in analyzing large datasets to predict disease outcomes and progression.²¹ Recent clinical studies have further validated these models in real-world applications. Upadhyaya et al.²² reported that AI-based fundus image analysis demonstrated an 89% accuracy rate in detecting glaucomatous changes, significantly improving early diagnosis. Similarly, Ravindranath et al.²³ highlighted that deep learning models integrating structural OCT data achieved a sensitivity of 92% in distinguishing between glaucoma and normal eyes. These models collectively enhance glaucoma research by offering robust classification and prediction capabilities that supplement clinical workflows.

A significant area of development in ophthalmic AI is Explainable AI (XAI), which focuses on making AI models transparent and interpretable for clinicians.²⁴ While traditional DL models function as “black boxes,” producing results without clear explanations, XAI frameworks aim to elucidate the rationale behind predictions. For instance, attention maps can visually highlight the regions of an OCT scan that influenced a model’s decision, helping clinicians understand the decision-making process.²⁵ Surya et al.²⁶ demonstrated that XAI models improved clinician confidence by 35% when interpreting AI-generated glaucoma diagnoses, reinforcing the importance of model transparency in clinical adoption.

This interpretability is crucial for increasing trust in AI systems and fostering their adoption in clinical settings. XAI also ensures accountability by enabling clinicians to detect potential errors or biases within the model.²⁷ As regulatory frameworks evolve, the emphasis on XAI is expected to grow, making it a cornerstone for the safe and effective integration of AI into glaucoma care.

AI FOR GLAUCOMA SCREENING AND EARLY DETECTION

Early detection of glaucoma is crucial for preventing irreversible vision loss, as the disease often progresses silently before significant symptoms arise.² The effectiveness of glaucoma management relies on the timely identification of structural and functional changes in the

optic nerve. Conventional screening methods, such as intraocular pressure (IOP) measurement and visual field tests, are often insufficient for early detection due to their variability and limited sensitivity.³ In contrast, AI-powered screening tools offer a more consistent and efficient approach by automatically identifying subtle changes that might be overlooked during manual assessments.¹⁰ In a large-scale study by Huang et al.¹², AI-assisted screening achieved an 87% sensitivity and 91% specificity in detecting early-stage glaucoma, significantly outperforming traditional diagnostic methods. These AI-assisted systems enable large-scale population screenings and early identification of high-risk individuals, particularly in underserved regions where ophthalmic specialists may be scarce.⁴ By enhancing diagnostic precision and improving accessibility, AI has the potential to significantly reduce the global burden of glaucoma-related blindness.

Fundus photography is a widely used, non-invasive imaging technique for capturing detailed images of the retina and optic nerve head. AI algorithms trained on fundus images have demonstrated impressive performance in detecting glaucomatous changes, such as optic disc cupping and RNFL thinning.⁶ CNNs have been particularly effective in analyzing these images, achieving high sensitivity and specificity rates in identifying early glaucomatous damage.⁷ Sidhu et al.¹¹ found that AI-based fundus photography analysis reduced false-positive rates by 19%, improving screening efficiency in large-scale programs. Other studies have shown that AI models can achieve area under the receiver operating characteristic (AUC) values exceeding 0.90 when distinguishing between healthy and glaucomatous eyes.¹⁸ Moreover, AI-assisted fundus photography has been integrated into telemedicine platforms, enabling remote screening and early detection in rural or resource-limited settings.²⁸ Tao et al.²⁹ demonstrated that AI-enhanced telemedicine applications improved glaucoma detection rates by 28% in regions with limited access to specialized eye care. This integration not only increases diagnostic coverage but also enhances efficiency by prioritizing referrals for further clinical evaluation.

OCT is another essential tool in glaucoma diagnostics, providing cross-sectional images of the retinal layers. AI models have been developed to automate the interpretation of OCT scans, identifying structural abnormalities such as

RNFL thinning and optic nerve head deformation.¹⁷ These models, particularly those based on DL, can detect minute structural changes that precede visual field defects, offering a more objective assessment of disease progression. Gong et al.⁹ reported that AI-driven OCT analysis achieved a predictive accuracy of 93% for detecting glaucomatous damage before clinical symptoms manifest. Moreover, research has demonstrated that AI-driven OCT analysis can achieve AUC values above 0.95 for detecting glaucoma, with sensitivity and specificity rates comparable to those of experienced clinicians.⁵ Furthermore, hybrid AI models that combine fundus imaging and OCT data have shown improved diagnostic accuracy, leveraging the strengths of multiple imaging modalities.¹⁰ Surya et al.²⁶ found that combining AI-assisted OCT and fundus imaging improved diagnostic precision by 31%, making it a valuable approach for early glaucoma screening.

Several studies have validated the performance of AI models using diverse datasets, with some achieving sensitivity rates of over 95% and specificity rates exceeding 90%.¹¹ However, the generalizability of these models remains a significant challenge. Many AI algorithms perform well on the datasets they were trained on but show reduced accuracy when applied to external datasets.²⁴ This issue arises from variations in imaging equipment, population demographics, and clinical protocols. Efforts to address this limitation include training AI models on diverse, multi-center datasets and using data augmentation techniques to improve robustness.³⁰ Upadhyaya et al.²² demonstrated that AI models trained on multi-center datasets achieved a 27% improvement in cross-population diagnostic accuracy, reinforcing the importance of diverse training data. Cross-validation across different geographic and ethnic populations is essential to ensure that these models can be effectively deployed in real-world clinical environments.

Another critical challenge in AI-assisted glaucoma screening is the potential for bias in algorithm training. If the training data is not representative of the broader population, the model may produce biased outcomes, potentially misclassifying certain subgroups of patients.²⁷ For example, differences in optic nerve anatomy related to ethnicity may lead to discrepancies in diagnostic accuracy. Additionally, variations in image quality and data labeling can affect the model's performance. Addressing

these issues requires standardized imaging protocols and comprehensive datasets that capture the full spectrum of patient characteristics.¹⁰ Ensuring transparency in AI development and conducting external validations can help build trust in AI systems and pave the way for their widespread adoption in clinical practice.

AI IN GLAUCOMA DIAGNOSIS

The diagnosis of glaucoma traditionally relies on a combination of clinical assessments, such as IOP measurements, visual field testing via standard automated perimetry, and optic nerve evaluations using imaging tools like fundus photography and OCT.³¹ However, these methods have limitations, including interobserver variability and patient-related factors such as fatigue during visual field tests, which can lead to inconsistent results.³² AI-based diagnostic tools offer a promising alternative by automating the detection of glaucomatous changes with high precision and minimal user bias.⁶ Unlike conventional methods that require subjective interpretation, AI systems, such as those employing CNNs, analyze large datasets to detect subtle structural and functional changes, improving diagnostic accuracy.³³ Recent clinical evaluations have confirmed the effectiveness of AI-based glaucoma diagnosis. Chuter et al.⁸ reported that AI-assisted diagnostic models achieved a sensitivity of 93% and specificity of 89% in differentiating glaucomatous from non-glaucomatous eyes. Additionally, Djulbegovic et al.³⁴ found that AI-enhanced diagnosis reduced misclassification rates by 21% compared to traditional diagnostic approaches.

Anterior segment imaging has also seen significant advancements with the incorporation of AI. Traditional gonioscopy, the gold standard for assessing the anterior chamber angle, is a manual technique that depends heavily on clinician expertise and is prone to variability.³⁵ AI-powered anterior segment imaging tools, such as those using anterior segment OCT and ultrasound biomicroscopy, enable automated angle analysis and the classification of angle closure mechanisms.³⁶ These systems can quantify key anatomical parameters, such as trabecular iris space area and angle opening distance, to differentiate between open-angle and angle-closure glaucoma with high sensitivity and specificity.³⁷ Additionally, AI-assisted gonioscopy offers a 360° view of the iridocorneal angle, facilitating the detection of subtle angle abnormalities that may go

unnoticed during conventional gonioscopy.³⁸ Surya et al.²⁶ reported that AI-integrated gonioscopy identified angle abnormalities with a sensitivity of 91%, significantly improving early detection rates.

The use of big data in training these AI models further enhances their diagnostic performance by enabling the recognition of complex anatomical variations.

Recent innovations in DL architectures, such as vision transformers (ViTs), have further improved glaucoma diagnostics in challenging cases, such as those involving high myopia. Myopic eyes often present with elongated axial lengths and atypical optic disc configurations, complicating conventional assessments.³⁹ CNNs have shown high accuracy in distinguishing glaucomatous changes in these cases, but ViTs offer an additional advantage by processing global image features rather than focusing solely on local details.⁴⁰ This capability enables ViTs to detect nuanced structural abnormalities in complex cases more effectively. A study by Ravindranath et al.²³ highlighted that ViT-based AI models improved diagnostic precision for highly myopic glaucoma cases by 32%, outperforming traditional CNN-based models. Other comparative studies have demonstrated that ViTs achieve superior performance in distinguishing glaucomatous optic neuropathy in highly myopic patients, with AUC values often exceeding 0.90.⁴¹ The combination of ViTs and hybrid DL models incorporating both fundus and OCT data represents a significant step forward in improving the diagnostic accuracy for atypical presentations, reinforcing the role of AI as an indispensable tool in glaucoma care.

AI IN MONITORING GLAUCOMA PROGRESSION

The assessment of glaucoma progression requires careful monitoring of both structural and functional changes over time, which often involves repeated visual field tests and optic nerve imaging.³⁵ However, VF tests are subject to variability due to factors such as patient fatigue and testing conditions, making consistent interpretation challenging.³³ AI-based tools have demonstrated considerable potential in enhancing the precision of glaucoma monitoring by identifying subtle VF changes that may indicate disease progression. Advanced ML algorithms can detect progression patterns in VF data more

accurately than traditional trend analysis methods, such as linear regression.³⁶ AI models trained on large datasets can recognize complex spatial-temporal changes in VF results and differentiate between true progression and fluctuations due to noise.³⁷ By improving the reliability of VF assessments, these systems offer clinicians more confidence in evaluating disease stability and making timely management decisions.

In addition to visual field data, AI applications have been developed to track structural changes in the optic nerve and RNFL using OCT.¹⁷ Longitudinal studies have shown that DL models trained on sequential OCT scans can predict disease progression with impressive accuracy. For example, DL algorithms could predict future VF deterioration based on baseline OCT scans, achieving an AUC of 0.92 for detecting progression within a five-year timeframe.⁵ Similarly, some AI models combine OCT-derived RNFL thickness measurements with demographic data and clinical history to predict rapid progression, outperforming conventional statistical methods.³⁰ Djulbegovic et al.³⁴ reported that AI-assisted longitudinal OCT analysis improved the early identification of rapid progressors by 34%, allowing for more timely intervention.

Multi-modal AI models that integrate OCT imaging, VF data, and electronic health records (EHRs) provide even greater prognostic power.³⁵ By synthesizing information from multiple data sources, these systems can generate comprehensive risk profiles for individual patients. For instance, some AI models utilize longitudinal clinical records to account for variables such as IOP fluctuations, treatment history, and systemic health factors.¹⁰ Studies have shown that multi-modal approaches achieve higher predictive accuracy compared to single-modality models, with AUC values exceeding 0.95 for identifying patients

at risk of rapid progression.³⁸ Additionally, AI systems that incorporate OCT angiography data have demonstrated superior performance in detecting microvascular changes linked to glaucomatous damage, further enhancing the precision of disease monitoring.⁴⁰ Upadhyaya et al.²² highlighted that AI-assisted OCT angiography analysis detected microvascular alterations with a sensitivity of 90%, reinforcing its value in monitoring disease progression. These multi-faceted tools highlight the importance of comprehensive data integration for improving individualized glaucoma management and advancing the field of precision medicine. **Table 1** summarizes the AI performance in glaucoma care in different studies.

PERSONALIZED TREATMENT STRATEGIES WITH AI

AI plays a pivotal role in enhancing personalized treatment approaches by recommending tailored management strategies based on patient-specific data.³ Conventional glaucoma treatments often follow standardized protocols that may not account for individual variations in disease progression, response to medication, and risk factors.³¹ In contrast, AI-based systems can process vast amounts of clinical data, including demographics, genetic information, and longitudinal IOP measurements, to create predictive models that guide personalized therapy. For example, ML algorithms can identify patients likely to respond well to specific drug classes, allowing for a more targeted approach to medication selection.⁶ These personalized recommendations help minimize adverse effects and ensure optimal control of IOP, ultimately improving adherence and patient outcomes. AI-driven systems can also update treatment recommendations dynamically based on new data, supporting clinicians in making informed, data-driven decisions.

Table 1. AI Performance in Glaucoma Care				
Study	AI Application	Sensitivity (%)	Specificity (%)	Accuracy (%)
Huang et al. ¹²	AI-assisted screening	87	91	88
Gong et al. ⁹	AI-driven OCT analysis	93	92	93
Surya et al. ²⁶	AI-assisted fundus & OCT imaging	91	89	91
Djulbegovic et al. ³⁴	AI-enhanced diagnosis	89	86	89
Upadhyaya et al. ²²	AI-based OCT angiography	90	88	90
Tao et al. ²⁹	AI-based telemedicine screening	88	85	87

Predicting the need for surgical intervention is another area where AI has made significant advancements. Decisions regarding when to escalate to surgical options, such as trabeculectomy or glaucoma drainage devices, have traditionally relied on clinical judgment and evidence of sustained disease progression.³⁷ However, AI models trained on longitudinal datasets can predict the likelihood of surgical necessity with remarkable accuracy. For instance, algorithms utilizing OCT scans, VF test data, and treatment history have demonstrated AUC values above 0.90 in forecasting the need for surgery within specified time intervals.³⁶ By integrating information from multiple data points, these models provide early warnings of aggressive disease progression, allowing clinicians to prevent irreversible optic nerve damage. This predictive capability enables healthcare providers to prioritize high-risk patients for surgical evaluation and improve resource allocation within busy ophthalmology clinics.³⁵

AI-assisted evaluation of treatment outcomes and adherence monitoring has further transformed glaucoma care by offering real-time insights into patient progress and treatment effectiveness. Non-adherence to prescribed glaucoma medications is a significant barrier to disease control, with studies indicating that nearly half of patients do not adhere to their regimen.³¹ AI-enhanced systems, such as those integrated with smart dispensers and wearable IOP monitoring devices, can track medication use and detect patterns indicative of non-compliance.⁴⁰ Additionally, post-surgical monitoring has been improved through AI-based image analysis tools that objectively assess changes in bleb morphology and drainage function after procedures like trabeculectomy.⁴¹ These systems compare pre- and post-operative images to detect signs of surgical failure, enabling timely interventions. By automating adherence tracking and outcome evaluation, AI empowers clinicians to provide personalized follow-up care and improve long-term disease management, fostering better patient engagement and clinical outcomes.

INTEGRATION OF BIG DATA IN GLAUCOMA AI MODELS

The integration of big data into glaucoma AI models has significantly enhanced the potential for precision diagnostics, personalized treatment, and predictive analytics in clinical practice.⁴² Big data encompasses diverse sources,

including imaging databases, EHRs, genomic data, and patient-reported outcomes, creating a comprehensive view of disease progression and response to therapy.⁴³ By training algorithms on such large, heterogeneous datasets, AI models can identify subtle patterns and correlations that may be overlooked in smaller-scale studies.⁴⁴ This approach improves the generalizability and robustness of AI systems, enabling their application across various populations and clinical settings.⁴⁵ Furthermore, big data integration allows for the development of more accurate risk stratification models, enabling clinicians to predict disease outcomes and recommend proactive interventions tailored to individual patients.³⁵ This advancement supports the transition from generalized care protocols to precision medicine, where treatment plans are adapted based on comprehensive, real-world patient data.³⁰

However, the integration of big data into glaucoma AI models also presents significant challenges, particularly in terms of data standardization, interoperability, and ethical considerations.⁴⁶ Variability in data formats, imaging protocols, and diagnostic criteria across institutions can hinder the pooling of datasets and limit the scalability of AI models.³⁶ For instance, inconsistencies in OCT scan parameters or VF testing methods can introduce bias and reduce the accuracy of AI predictions when applied to external datasets.³⁷ Addressing these challenges requires the development of standardized data collection protocols and interoperable platforms that facilitate seamless data exchange across healthcare systems.³⁸ Additionally, ethical concerns regarding data privacy and security must be addressed to ensure that patient information is protected.¹⁰ Robust governance frameworks and transparent consent processes are essential to maintain public trust and ensure that data is used responsibly. By tackling these issues, the ophthalmology community can fully leverage the potential of big data to enhance AI-driven glaucoma care while upholding ethical standards.

CHALLENGES AND LIMITATIONS

Despite the advancements in AI applications for glaucoma care, significant challenges remain, particularly concerning the generalizability of AI models across diverse populations. Many AI algorithms are trained on datasets that predominantly represent specific demographic groups, which can result in reduced performance when applied to

populations with different genetic backgrounds, lifestyles, or clinical presentations.⁴⁰ This limitation underscores the need for external validation using multi-center, ethnically diverse datasets to ensure the broad applicability of these models.⁴¹ Additionally, the deployment of AI in clinical decision-making raises ethical and legal concerns related to accountability and transparency.⁴² In cases where AI-assisted diagnoses lead to adverse outcomes, questions arise about the responsibility of the healthcare provider versus the AI system.⁴³ Addressing these concerns requires XAI frameworks that enhance the interpretability of AI predictions, thereby fostering clinician trust and informed patient care.²⁴ Furthermore, bias in algorithm development, stemming from imbalanced training data or flawed feature selection, can perpetuate health disparities and affect diagnostic accuracy.⁴⁴ Robust regulatory frameworks and independent validations are essential to mitigate bias and uphold fairness, ensuring that AI-driven glaucoma tools enhance, rather than undermine, equitable healthcare delivery.

FUTURE DIRECTIONS AND RESEARCH OPPORTUNITIES

The future of AI in glaucoma care is poised for significant advancements, driven by emerging trends such as ViTs and hybrid models that combine multiple data sources for enhanced diagnostic accuracy. ViTs, which excel at capturing global image context, have shown promise in ophthalmology by outperforming traditional CNNs in identifying complex structural abnormalities in optic nerve imaging. Hybrid models that integrate data from OCT scans, visual fields, and clinical records can provide a more comprehensive view of disease status, paving the way for more accurate risk assessments and personalized treatment recommendations. Additionally, the integration of AI with telemedicine and wearable IOP monitoring devices holds the potential to transform remote glaucoma management, particularly in underserved regions. Real-time data from wearable sensors can be analyzed by AI systems to detect IOP fluctuations and notify clinicians of early warning signs, facilitating timely interventions. Future research should focus on developing robust, generalizable models through collaborative efforts involving multi-center datasets and interdisciplinary partnerships. Increased emphasis on data transparency, algorithm interpretability, and ethical

considerations will be essential to build trust and foster the safe and effective implementation of AI-driven solutions in clinical practice.

CONCLUSION

In summary, AI has demonstrated significant potential to transform glaucoma care by enhancing early detection, diagnosis, progression monitoring, and personalized treatment. AI-driven models, such as DL algorithms and hybrid frameworks, have shown superior accuracy in analyzing complex datasets, improving clinical decision-making, and enabling more efficient resource allocation. However, despite these advancements, challenges related to model generalizability, data standardization, and algorithm transparency must be addressed to ensure equitable and reliable patient care. Future research should prioritize large-scale, multi-center clinical trials and foster interdisciplinary collaborations to develop robust and inclusive AI systems. Additionally, ethical considerations, including data privacy, bias mitigation, and explainability, are critical for maintaining public trust and ensuring that AI applications align with the goal of improving patient outcomes. By balancing technological innovation with ethical responsibility, the integration of AI in glaucoma management can lead to a new era of precision medicine that benefits both patients and healthcare providers.

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