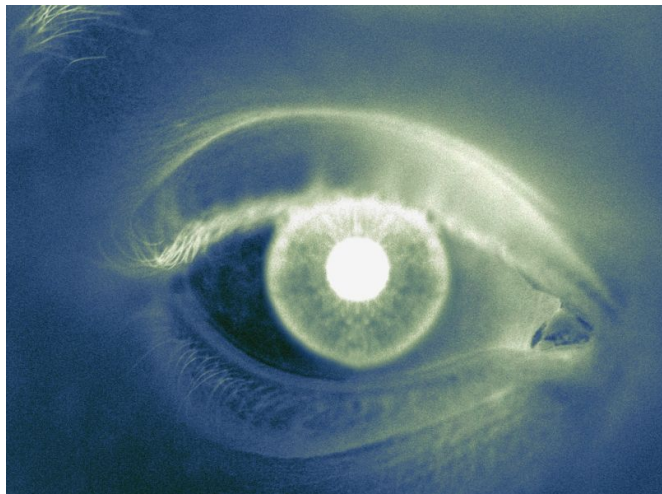


# Moderate interobserver agreement for glaucoma software

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software, intraobserver agreement was substantial to almost perfect (overall  $\kappa$ , 0.59 to 0.87 and 0.59 to 0.85, respectively). Among the five specialists, interobserver agreement was moderate for VF progression software ( $\kappa$ , 0.48) and for OCT progression software ( $\kappa$ , 0.52). In images classified as having no progression, interobserver agreement was substantial, while agreement was only fair in those classified as having questionable glaucoma progression or progression. Regarding questions about glaucoma progression and consideration about treatment changes, interobserver agreement was fair ( $\kappa$ , 0.39 and 0.39, respectively).

"These data suggest that these glaucoma progression [software packages](#) are insufficient to obtain high interobserver agreement in both devices except in patients with no progression," the authors write.

(HealthDay)—There is moderate interobserver agreement among glaucoma specialists using two glaucoma progression software packages, according to a study published online Feb. 23 in *JAMA Ophthalmology*.

Javier Moreno-Montañés, M.D., Ph.D., from the Universidad de Navarra in Spain, and colleagues examined agreement in visual field (VF) and [optical coherence tomography](#) (OCT) software among five glaucoma specialists. The printout pages from VF and OCT progression software for 100 patients were randomized and evaluated by specialists; images were classified as having no progression, questionable progression, or progression. The specialists assessed whether the glaucoma damage had progressed and whether treatment change was needed using both software packages. The patients were reevaluated one month later in a different order to determine intraobserver reproducibility.

The researchers found that for VF and OCT

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