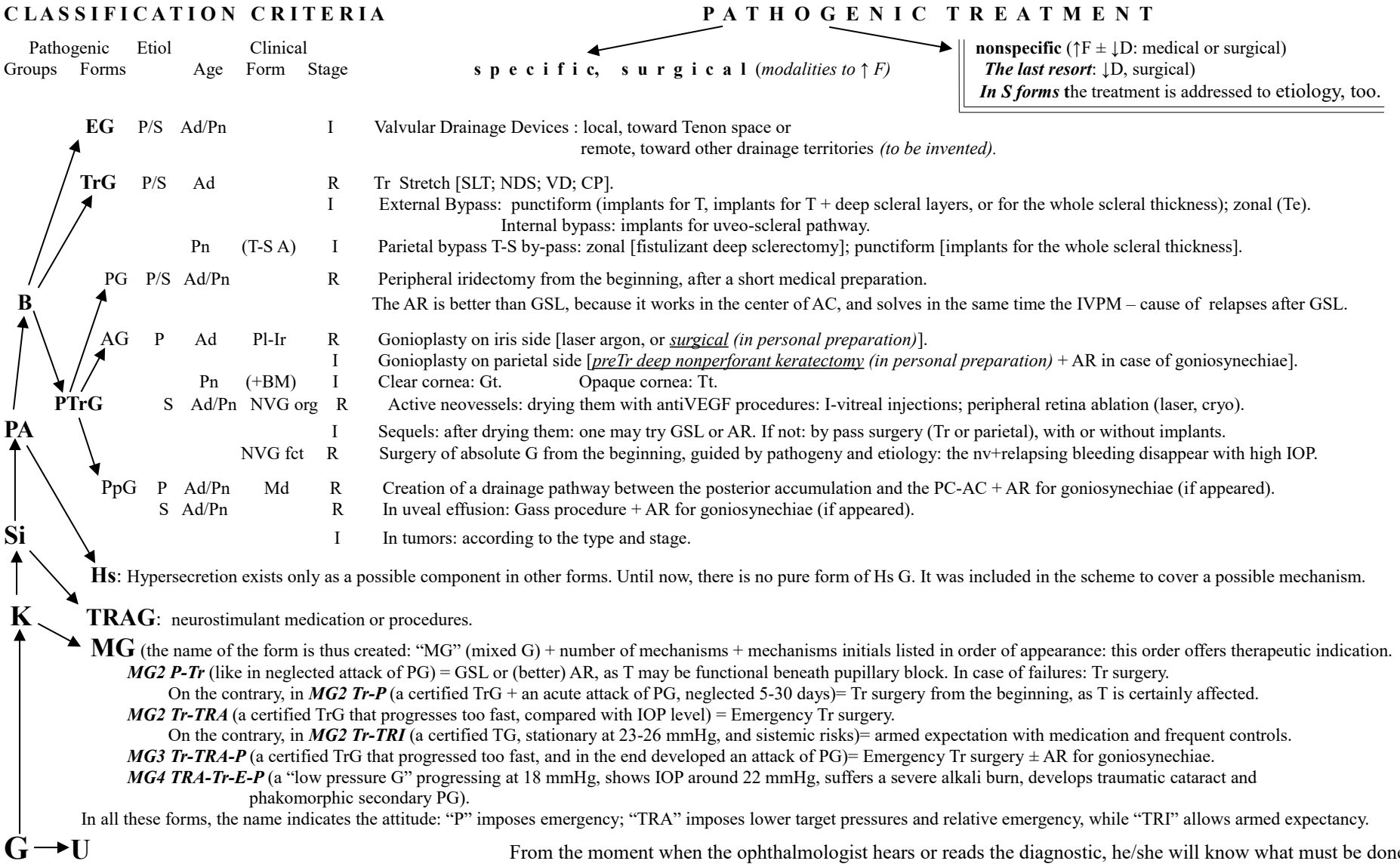

Fig 1: The pathogenic classification of glaucoma and its direct therapeutic references. Each crossing separates one group (further detailed) and one form.
Glaucoma (**G**) may have known (**K**), or unknown (**U**) pathogeny. The known pathogeny may be simple (**Si**) or complex, mixed (**M**). The simple pathogeny G may be by pressure aggression (**PA**), or by tissue resistance alteration (**TRA**). The PAG may be by block (**B**) or hypersecretion (**Hs**). The Block G (**BG**) may be exogenous (**EG**), trabecular (**TrG**), and pretrabecular (**PTrG**). After the action site of pretrabecular block, the PTrG may be pupillary (**PG**), angular (**AG**), and posterior push (**PpG**). Final pathogenic forms: **EG; TrG; PG; AG; PpG;** (Hs component); **TRAG; MG.**

Other abbreviations: AC: anterior chamber; **Ad/Pn**: Adult/Perinatal; **AR**: Angle Repermeation; **BM**: Barkan's membrane; **CP**: canaloplasty; **D**: debit; **F**: aqueous outflow; **GSL**: goniosynechia lysis; **Gt**: goniotomy; **I**: irreversible; **IVPM**: iris vicious position memory; **Md**: misdirection; **NDS**: nonperforant deep sclerectomy; **NVG org**: organic neovascular G (retinal ischemia caused by vascular pathology); **NVG fct**: functional neovascular G (retinal ischemia caused by the compression of normal vessels by durably high levels of IOP); **PC:** posterior chamber; **P:** primary; **Pl Ir**: plateau iris; **R**: reversible; **S**: secondary; **SLT**: selective laser trabeculoplasty; **T**: trabeculum; **Tr**: trabecular; **Te**: trabeculectomy; **Tt**: trabeculotomy; **TRI**: tissue resistance increase; **T-S**: trabeculo-schlemmal; **T-S A**: trabeculo-schlemmal agenesy; **VD**: visco-dilation.