**Purpose:** In the everyday clinical practice, we approach the treatment of glaucoma individually, in accordance with the principles of good medicine practice. How is our approach reflected on the nationwide scale? Are there differences between the prescriptions in the Slovak Republic (SR) and Czech Republic (ČR), which previously formed one state - Czechoslovakia?

**Method:** The authors analyze the available data by using the system IMS Health summarizing the quality and quantity of antiglaucoma drug prescriptions in the year 2010 in SR and ČR.

**Results:** In the Czech Republic, within the group of antiglaucoma drugs (SO1E), 1.23 million of units were distributed (22% of ophthalmic drug units totally), with the turnover of 600 million CZK. The largest amount of units: Azopt (211 thousand), Betoptic (89 thousand) + Betoptic S (122 thousand), Xalatan (97 thousand). In the Slovak Republic, there is a noticeable finding of a decrease in prescribing prostaglandins in monotherapy (Xalatan -22%, Travatan -8%) and a preference in fixed combined therapy (Cosopt +14%, Combigan +4%). The largest amount of prescribed units: Cosopt (109 thousand), Azopt (80 thousand), Xalatan (76 thousand). The authors present other various significant differences and provide expert commentary.

**Conclusion:** Although, in regards to geography, the structure of the glaucoma patients in these countries should be similar, there are significant differences in the glaucoma therapy. One of the main reasons could be the different marketing methods of pharmaceutical companies.