

FOCUS ON DIABETIC RETINOPATHY

Diabetic Retinopathy is the Leading Cause of Blindness in Adults Aged 20-74

All People With Type 1 or Type 2 Diabetes Are at Risk for Diabetic Retinopathy

People with diabetes have an increased risk of developing a number of serious health conditions, including diabetic retinopathy. Consistent high levels of blood glucose, along with high blood pressure and high cholesterol, are the primary causes of retinopathy.

Learn more below about prevention, symptoms and treatment of diabetic retinopathy.

01 | Cause

Diabetic retinopathy is caused by damage to the blood vessels of the retina. It occurs when the tiny blood vessels in the retina leak blood and other fluids, causing the retinal tissue to swell, leading to blurred or cloudy vision, and eventually blindness. It is a gradual condition that develops over time. The longer you have diabetes and the less controlled your blood glucose levels are, the more likely you are to develop diabetic retinopathy.

02 | Symptoms

When people who suffer from diabetes do not control their blood sugar levels, fluid accumulates in the lens inside the eye that controls focusing. This affects the curvature of the lens, resulting in blurred vision. Common symptoms of diabetic retinopathy include:

- Seeing spots or floaters
- Blurred vision
- Dark or empty spots in the center of vision
- Poor night vision
- Impaired color vision

When blood sugar levels are controlled, symptoms will improve. Patients who maintain their blood glucose levels better will slow the onset and progression of diabetic retinopathy.

03 | Detection and Treatment

Careful management of diabetes is the best way to prevent or minimize the progression of diabetic retinopathy. People with diabetes should have a yearly eye exam with dilation. During the visit, your doctor will perform a comprehensive examination of the eyes and check for the following:

- Abnormal blood vessels
- Swelling, blood or fatty deposits in the retina
- Growth of new blood vessels and scar tissue
- · Bleeding in the vitreous of the eye
- Retinal detachment
- Abnormalities of the optic nerve

If it is determined that you have mild to moderate nonproliferative diabetic retinopathy, you may not need treatment right away. Your ophthalmologist will closely monitor your eyes to determine when treatment may become necessary. If you have proliferative retinopathy or macular edema, surgery is recommended to slow or stop the progression of the disease.

For more information on diabetic retinopathy, please visit: https://www.aao.org/eye- health/diseases/diabetic-retinopathy-treatment

Did You Know?

1 in 3 people with diabetes will develop diabetic eye disease

References

http://www.mayoclinic.org/diseasesconditions/diabetic-retinopathy/basics/definition/con-20023311

http://www.aoa.org/patients-and-public/eye-andvision-problems/glossary-of-eye-and-visionconditions/diabetic-retinopathy?sso=y