

MEDICAL



ASK THE EYE DOCTOR

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Diabetic Retinopathy

Diabetic retinopathy is a complication of diabetes that weakens the blood vessels that supply nourishment to the retina (the light-sensitive lining in the back of the eye where vision is focused). When these weak vessels leak, swell or develop thin branches, vision loss occurs. Laser surgery is the treatment of choice.

Focal laser coagulation may be recommended for patients with clinically significant macular edema (CSME) - swelling of the central retina, called the macula. The laser coagulates, or dries up, the fluid that is causing the swelling. A similar procedure called scatter laser photocoagulation (also known as pan-retinal photocoagulation or PRP) destroys abnormal blood vessel growth in patients with proliferative diabetic retinopathy (PDR). If there is blood in the eye obscuring the laser, a vitrectomy (Vitreoretinal surgery) may be performed to drain the blood in preparation for photocoagulation.

Fortunately, diabetic retinopathy is preventable. People with diabetes are most susceptible to developing it, but your risk is reduced if you follow your prescribed diet and medications, exercise regularly, control your blood pressure, and avoid alcohol and cigarettes. Regular eye exams are an integral part of making sure your eyes are healthy.

Although damage caused by diabetic retinopathy cannot be corrected, patients diagnosed with the condition can be treated to slow its progression and prevent further vision loss. Treatment modalities include laser and surgical procedures. Treatment modalities include:

- Laser surgery
- Vitreoretinal surgery

Medications

Q: What is diabetic retinopathy?

A: Diabetic retinopathy is an eye disease that affects people with diabetes. Diabetic retinopathy harms the blood vessels in the retina, which is located in the back of the eye. These small blood vessels become weak and breakdown, leak, or bleed.

If this occurs, your vision can become distorted or clouded. Scars from healing blood vessels can cause the retina to pull away from the back of the eye. The retina can then tear or become detached. This can lead to serious vision loss or blindness.

Q: Am I at risk for diabetic retinopathy?

A: Anyone with diabetes is at risk for diabetic retinopathy. Diabetic retinopathy affects more than 5.3 million American age 18 and older. The longer you have diabetes, the greater risk you have of developing diabetic retinopathy.

Q: What is my best defense against diabetic retinopathy?

A: If you are a diabetic, there are three important steps you can take to prevent vision loss from diabetic retinopathy:

1. Watch and control your blood sugar levels.
2. Take care of yourself.
3. See an eye doctor at least once a year for a dilated eye exam.

Q: What treatments are available for diabetic retinopathy?

A: There are different types of treatment for diabetic retinopathy.

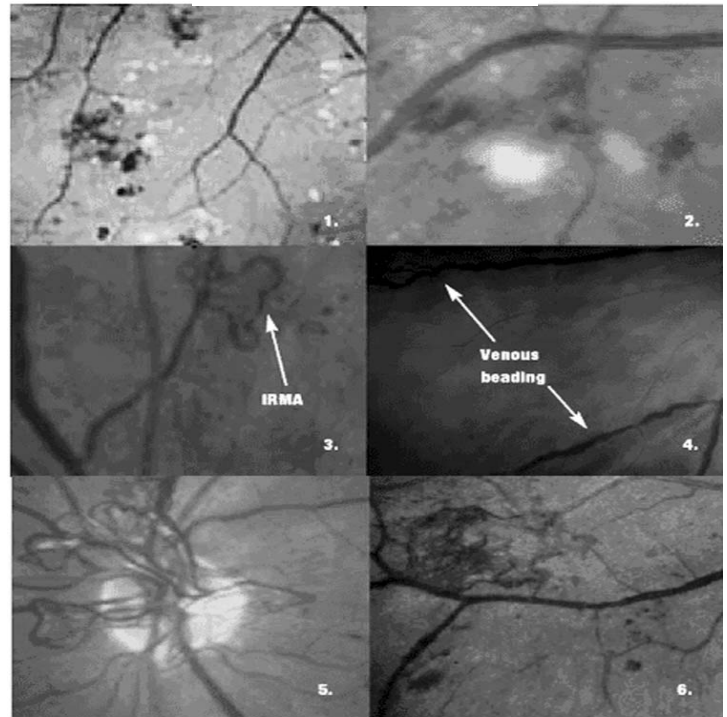
Laser therapy: A doctor may use a laser to seal leaking or bleeding vessels. This treatment is called photocoagulation.

Vitreotomy: A doctor uses a small suction tool to take out the vitreous jelly inside your eye. This treatment will remove blood and scar tissue floating in the vitreous as well. The doctor then uses fluid to replace the vitreous. Although laser has been used for several years with good success, more recent treatments utilized to combat diabetic retinopathy include vitreous injections of various pharmaceutical agents as well as oral medications under research.

Diabetic visual loss and blindness is an unfortunate event, however, in the majority of cases this can be prevented by better management of the disease, proper eye examinations, and timely treatment.

Diabetic Retinopathy

signs of diabetic retinopathy



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