



Diabetes and Your Eyes

Approximately 16 million Americans have diabetes. Diabetes can affect your eyes. More than one-third of those diagnosed with diabetes don't get the recommended vision care. Five million may lose their vision because they didn't know they had the disease.

Diabetic eye disease includes diabetic retinopathy, cataracts and glaucoma. The most common of these is diabetic retinopathy, the leading cause of new cases of blindness among working age people in the United States. People with diabetes are more likely to get cataracts at a younger age and are twice as likely to develop glaucoma.

What is diabetic retinopathy?

Diabetic retinopathy is a potentially vision-threatening condition in which the blood vessels inside the retina (the area of light-sensitive cells that line the back of the eye) become damaged. These damaged vessels can then leak, bleed or scar and cause retinal detachment, hemorrhaging or swelling, conditions that can damage vision. The longer you have diabetes, the greater your chance of developing diabetic retinopathy.

Recommended Care

If you are diagnosed with diabetes, schedule a complete dilated eye examination with your ophthalmologist (Eye M.D.) at least once a year. (During a "dilated" exam, your doctor uses eye drops to widen your pupil, making it easier to exam your retina.) Your ophthalmologist will recommend more frequent examinations if problems are detected.

Women with diabetes also should be examined if they are planning to become pregnant, are early in the first trimester, and every one to three months during pregnancy because diabetic retinopathy can worsen much more rapidly during pregnancy.

Studies show that self-monitoring blood sugar levels and controlling blood sugar levels with medications, multiple daily insulin injections or using an insulin pump can slow the development of diabetic retinopathy and other complications of diabetes. As always, early diagnosis of diabetes and diabetic eye disease can prevent complications.

Symptoms

There are often no symptoms in the early stages of diabetic retinopathy and your vision may not be affected until the disease worsens. This is why you should have a routine exam once a year. You also should see your ophthalmologist immediately if you experience new floaters or blurred vision that lasts more than a few days.

Treatment

An effective partnership between you, your primary care physician and your ophthalmologist is necessary to make sure proper eye care and treatment is provided. The best treatment is of course prevention by controlling blood sugar levels. Other treatments specifically for the eye include eye drops, medications injected into or around the eye, laser procedures, or surgery. Your ophthalmologist is the best source of information on diabetic eye disease and whether any of these treatments would be recommended for you.

If you have any questions or concerns, contact your ophthalmologist at:



2929 McFarland Rd. • Rockford, IL 61107 • 815-654-2020 • www.6542020.com