

What is Diabetic Retinopathy?

Diabetic Retinopathy is the leading cause of new blindness in people ages 20 to 74. It is a complication of diabetes caused by the deterioration of the blood vessels that nourish the retina at the back of the eye. These damaged blood vessels may leak fluid or blood.

The longer a person has diabetes, the greater the risk of retinopathy. However, it can appear within the first year or two after the onset of the disease. For some people, retinopathy is one of the first signs that they have diabetes. There are two types of retinopathy: non-proliferative and proliferative.

What is Non-Proliferative Diabetic Retinopathy?

This represents an early stage of the disease in which small blood vessels in the retina leak fluid into the surrounding tissue. Abnormal blood vessels may also hemorrhage or leak fats and proteins, which form deposits. If fluid collects in the area of central vision, diminished or blurred vision will result. However, if it occurs in the outer edges of the retina, no symptoms may be noticed.

What is Proliferative Diabetic Retinopathy?

In this more advanced stage of the disease, new abnormal blood vessels grow over the retina and may grow into the clear vitreous gel portion of eyes. This causes bleeding, blocking light from reaching the retina, and causing vision to become cloudy. Connective tissue growing along with these blood vessels may contract and cause a retinal detachment, pulling the retina off its underlying structures. Proliferative retinopathy affects approximately 5% of all diabetics and, left untreated, can lead to blindness.

How is Diabetic Retinopathy Diagnosed?

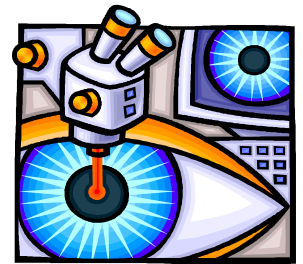
A comprehensive eye exam is the best protection against the progression of diabetic retinopathy.

How is Diabetic Retinopathy Treated?

Treatment depends on the location of disease and the degree of damage to the retina. Laser treatment can be used to form tiny scars on the retina that will reduce abnormal blood vessel growth and help bond the retina to the back of the eye in proliferative retinopathy or to seal blood vessels that have leaked serum in background retinopathy. Laser treatment may not halt the disease entirely but can help reduce further visual loss in many cases. Laser treatment is usually done on an outpatient basis.

What is the Best Defense Against Diabetic Retinopathy?

Early treatment of retinopathy often improves the potential for saving sight. Every person with diabetes should receive regular care from a healthcare provider and closely follow the prescribed treatment plan, including diet, exercise and medications.



It is also very important to visit an eye care professional (Ophthalmologist) regularly even before any visual symptoms appear. For anyone with diabetes an eye examination with dilated pupils should be repeated at least once a year for life. Eye care visits should be scheduled more frequently after diabetic retinopathy is diagnosed.

Remember, early detection and intervention is the key. "Keep an eye on your sight."

For information about Diabetes classes and resources that Facey Patient Education Department offers call toll free 866 837-5605.