Diabetes and the Eyes: Why You Should Get A Yearly Dilated Eye Exam

How Many People Have It?

According to the American Diabetes Association, 20.8 million Americans have Diabetes. Of that, about a third, or 6.2 million, are undiagnosed. There are different types of diabetes, the most prevalent being Type 2 Diabetes. Type 2 Diabetes is associated with obesity, a family history of diabetes, history of gestational diabetes, older age, impaired glucose metabolism, physical inactivity and race/ethnicity. Therefore, if you are at risk, you should be checked for diabetes by your family physician or internist. To take a Diabetes Risk Test, visit the American Diabetes Association’s website at www.diabetes.org.

In addition to increased risk for heart disease, stroke, high blood pressure, kidney disease, and other complications, diabetes can cause severe vision problems. If left untreated, the possibility of blindness is significantly increased. In fact, it is estimated that diabetes is the leading cause of new blindness among adults between the age of 20 and 74 years of age. Diabetic retinopathy causes 12,000 to 14,000 new cases of blindness each year.

What is Diabetic Retinopathy?

Over time, diabetes can weaken the small blood vessels that nourish the retina. The retina is the lining inside the back of the eye that allows vision. In a way, it can be compared to a film in a camera. Compromise of these retinal blood vessels can cause: leaking of blood, decreased oxygen, certain parts of the vessels to enlarge, and growth of new, weak blood vessels. This is called diabetic retinopathy. The formation of new, weak blood vessels, known as neovascularization, is the worst complication of diabetic retinopathy because it causes the most severe vision loss.

The Bad News

Beginning stages of diabetic retinopathy may have no symptoms at all or it may cause blurriness in central or side vision. As it progresses, one may notice cloudiness in vision, blind spots or floaters. In advanced stages, connective scar tissue formed in association with neovascularization can shrink causing a retinal detachment. Symptoms of retinal detachment include flashes of light, numerous floaters and a black curtain that comes over your vision from any direction.

Depending on the severity of the retinopathy, laser and other surgical treatments may be used to reduce the progression of the disease. Unfortunately, vision that has already been lost may not be able to be restored. If you do experience vision loss then you may be prescribed low vision aids, such as special magnifiers or telescopes, to aid in certain visual tasks (Note: many eye doctors do not prescribe low vision aids, so you will have to check with your doctor). The chance of developing diabetic retinopathy increases after having diabetes for several years, with coexisting high blood pressure and with smoking.

The Good News

The good news is that early detection and treatment of diabetic eye disease can reduce the development of severe vision loss by 50-60 percent!!! In order to detect diabetic retinopathy your eye doctor uses eye drops that make the pupils bigger. This allows a much more thorough evaluation of the retina. Then he or she uses instruments that light and magnify the inside of the eyes to look for signs of diabetes. It is recommended that, at minimum, those with diabetes should have a dilated eye exam every year.

To help prevent diabetic retinopathy take your medicines as instructed by your doctor to control blood glucose levels, follow a proper diet, and exercise regularly. By following these guidelines, you are much more likely to enjoy a lifetime of good vision and health.

© 2008. Janet Corbit-Drakulich is a Doctor of Optometry with her Master’s of Education Visual Function in Learning. She works at The See Center inside Eagle Medical Center at 2874 North Carson Street, Suite 210 and can be reached by calling 775-887-8866. Published Nevada Appeal- Health and Fitness 12/20/2005