

## When to Schedule an Eye Exam

People with diabetes should schedule examinations at least **once a year**. More frequent medical eye examinations may be necessary after a diagnosis of diabetic retinopathy.

If you need to be examined for eye glasses, it is important that your blood



sugar be consistently under control for several days before you see your eye doctor.

Eye glasses that work well when blood sugar is out of control will not work well when blood sugar is stable. Rapid changes in blood sugar can cause fluctuating vision in both eyes even if retinopathy is not present.

You should have your eyes checked promptly if you have visual changes that:

- ◇ Affect either one or both eyes
- ◇ Last more than a few days
- ◇ Are not associated with a change in blood sugar

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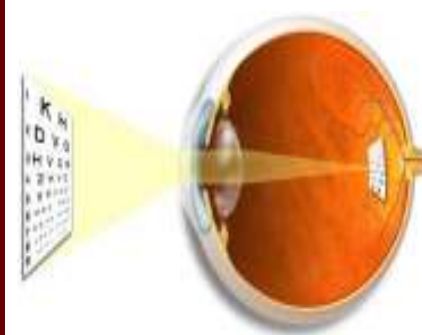
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Vision with action can  
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## Diabetic Retinopathy



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# Diabetic Retinopathy

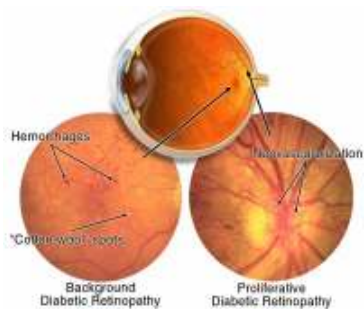
## What is diabetic retinopathy?

If you have diabetes, your body does not use and store sugar properly. High blood sugar levels can damage blood vessels in the retina, leading to the eye disease known as diabetic retinopathy.

## Symptoms

Often there are no symptoms in the early stages of diabetic retinopathy. Don't wait for symptoms to have a comprehensive eye exam.

Nonproliferative diabetic retinopathy, also known as background retinopathy, is an early stage of diabetic retinopathy. In this stage, tiny blood vessels within the retina leak



blood or fluid. The leaking fluid causes the retina to swell or to form deposits

called exudates.

If you suddenly see a few specks or spots floating in your vision, this may indicate

proliferative diabetic retinopathy, the growth of abnormal new blood vessels on your retina and optic nerve.

## Tests/Diagnosis

A medical eye examination is the best way to detect changes inside your eye. An Eye doctor can often diagnose and treat serious retinopathy before you are aware of any vision problems. The doctor dilates your pupil and looks inside of the eye with an ophthalmoscope.

If your Eye doctor finds diabetic retinopathy, he or she may order color photographs of the retina.

Your doctor may also order a special test called fluorescein angiography to find out if you need a treatment. In this test, a dye is injected into your arm and photos of your eye are taken to detect where fluid is leaking.

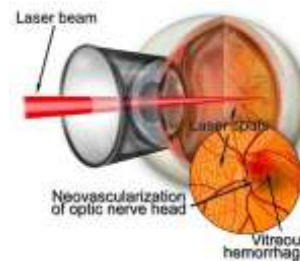
## Treatment

Prevention is the best treatment for diabetic retinopathy. Strict control of your blood sugar will significantly reduce the long-term risk of vision loss.

If retinopathy has caused macular edema, laser surgery may prevent further loss of vision. The

macula is the small area in the center of the retina that allows us to see fine details clearly. The laser will be focused on the damaged retina near the macula to decrease the fluid leakage.

If abnormal blood vessels have grown on the retina



(proliferative diabetic retinopathy), laser surgery can be effective in

shrink those abnormal blood vessels caused by proliferative diabetic retinopathy.

shrinking those vessels and preventing

them from growing in the future. Multiple laser treatments over time are sometimes necessary. Laser surgery does not cure diabetic retinopathy and does not always prevent further loss of vision.

If there is advanced damage to the eye because of retinopathy, a microsurgery called vitrectomy may help. During this procedure, your Eye doctor can remove eye fluid that has become filled with blood and replace it with a clear fluid.