

















دبي: ص.ب. ٤٨٥٧٧، النهدة، إ.ع.م. هاتف: ٢٦٧٨٨٦٦ ٤٠ الشارقة: ص.ب. ٤٥٧، الناصرية، إ.ع.م. هاتف: ٢٦٨٨٦٦ ٥٠

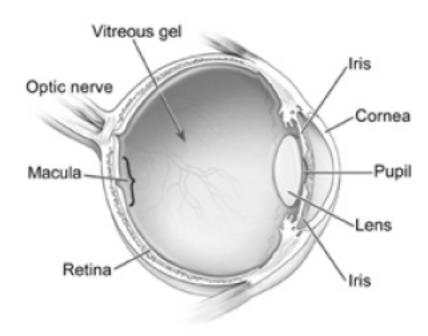
E-mail: info@zulekhahospitals.com www.zulekhahospitals.com



DUBAI: P. O. Box 48577, Al Nahda, U.A.E. Tel: 04 267 8866. SHARJAH: P. O. Box 457, Al Nasserya, U.A.E. Tel: 06 565 8866.

E-mail: info@zulekhahospitals.com www.zulekhahospitals.com

What is diabetic eye disease?



Diabetic eye disease refers to a group of eye problems that people with diabetes may face as a complication of diabetes. All can cause severe vision loss or even blindness.

Diabetic eye disease may include:

- Diabetic retinopathy damage to the blood vessels in the retina.
- Cataract clouding of the eye's lens. Cataracts develop at an earlier age in people with diabetes.
- Glaucoma increase in fluid pressure inside the eye that leads to optic nerve damage and loss of vision. A person with diabetes is nearly twice as likely to get glaucoma as other adults.

What is diabetic retinopathy?

Diabetic retinopathy is the most common diabetic eye disease and a leading cause of blindness in adults. It is caused by changes in the blood vessels of the retina.

In some people with diabetic retinopathy, blood vessels may swell and leak fluid. In other people, abnormal new blood vessels grow on the surface of the retina. The retina is the light-sensitive tissue at the back of the eye. A healthy retina is necessary for good vision. If you have diabetic retinopathy, at first you may not notice changes to your vision. But over time, diabetic retinopathy can get worse and cause vision loss. Diabetic retinopathy eventually affects both eyes.

Who is at risk for diabetic retinopathy?

All people with diabetes-both type 1 and type 2-are at risk. That's why everyone with diabetes should get a comprehensive dilated

eye exam at least once every six months. The longer someone has diabetes, the more likely he or she will get diabetic retinopathy. Between 40 to 45 percent of people diagnosed with diabetes have some stage of diabetic retinopathy. If you have diabetic retinopathy, your eye specialist can recommend treatment to help prevent its progression.

To protect vision, every pregnant woman with diabetes should have a comprehensive dilated eye exam as soon as possible.

What can I do to protect my vision?

If you have diabetes get a comprehensive dilated eye exam at least once every six months and remember:

- Proliferative retinopathy can develop without symptoms. At this advanced stage, you are at high risk for vision loss.
- Macular edema can develop without symptoms at any of the four stages of diabetic retinopathy.
- You can develop both proliferative retinopathy and macular edema and still see fine. However, you are at high risk for vision loss.
- Your eye care professional can tell if you have macular edema or any stage of diabetic retinopathy. Whether or not you have symptoms, early detection and timely treatment can prevent vision loss.

If you have diabetic retinopathy, you may need an eye exam more often. People with proliferative retinopathy can reduce their risk of blindness by 95 percent with timely treatment and appropriate follow-up care.

The Diabetes Control and Complications Trial (DCCT) showed that better control of blood sugar levels slows the onset and progression of retinopathy. The people with diabetes who kept their blood sugar levels as close to normal as possible also had much less kidney and nerve disease. Better control also reduces the need for sight-saving treatment.

Other studies have shown that controlling elevated blood pressure and cholesterol can reduce the risk of vision loss. Controlling these will help your overall health as well as help protect your vision.