

Caring For Your Eyes

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My sister Mary Sue developed diabetes 43 years ago. I'd never known anyone with diabetes before, so I knew absolutely nothing about it. That changed quickly: I saw how demanding life with diabetes could be, and how challenging it was to keep blood sugars close to normal to avoid complications. The list of those dreaded complications was always in my consciousness, and the list always began and ended with blindness - my sister losing her vision was the complication that scared me most. Many people with diabetes did go blind in those days.

My sister has had diabetes-related eye problems, but she can still see well enough to do most things (except feel comfortable driving at night) thanks to a lot of hard work on her part and to advances in diabetes treatment over the years. New tools for managing and monitoring glucose levels make good glucose control a possibility for many people with diabetes, albeit a mighty challenging one. And when it comes to protecting your vision, we now know just how important it is to meet that challenge: ***reducing your A1C level*** (a measure of long-term control) 1% (for example from 8% to 7%, or about 40 mg/dL average on your home monitor) ***reduces*** by 30-35% ***your risk of developing diabetic retinopathy***, the most common diabetes-related eye problem. Improved control has similar benefits for people who already have retinopathy: it slows or even stops the progression.

Laser photocoagulation therapy can also help people who have retinopathy and other diabetes-related eye problems from blindness. So there is lots of good news when it comes to keeping your eyes healthy, but when you have diabetes it still takes lots of work to protect your vision. Read on for the facts on diabetes-related eye problems and treatments, as well as some tips on what you can do to protect your vision.

The facts about diabetes-related eye problems and treatments

People with diabetes are more likely to have a variety of eye problems (besides retinopathy which is the most common); these problems include glaucoma, macular edema, and cataracts; diabetes increases a person's risk of going blind four times, and diabetes is still the leading cause of blindness in the United States.

- Your retina is in the back of your inner eye; it works like a movie screen, so your retina is where you see what you see.
- If you have retinopathy the blood vessels in your retina become weak and some get blocked.
- To make up for this, new blood vessels form, but they are so fragile they break and leak blood into the area in front of the retina; this can cause vision loss.

- Most people who have diabetes eventually develop some retinopathy: more than half within 10 years and more than 90% within 15 years.
- Laser therapy is an effective treatment for retinopathy. The treatment involves bombarding the retina with hundreds of tiny laser bursts, patching leaky vessels and slowing the growth of new ones. Some necessary forms of laser therapy can leave people with partial loss of peripheral or night vision.
- If a lot of blood has leaked into the area in front of the retina or if the retina has become detached, a procedure called a vitrectomy can be done to remove the blood or reattach the retina.

What you can do to avoid eye problems

- Keep your blood glucose levels as close to normal as possible. Protecting your sight is just one more good reason to work toward this goal. And remember, *any* sustained improvement in glucose control reduces your risk of eye problems; big improvements are wonderful, but even small improvements make a difference. Plus, avoiding high blood sugars can have an immediate benefit for your vision, since many people find their vision gets blurry when their blood sugars have been high for a while.
- Get your eyes checked regularly! If you have early stage (called non-proliferative) retinopathy you will not know it. The only way to diagnose retinopathy early, when it is most treatable, is to get your retinas examined by a doctor. So please, make an annual eye exam part of your diabetes care plan.
- Call your health care provider immediately if you have any changes in your vision. Your problem could be as minor as temporary high blood sugars, but it makes sense to be sure that whatever is going on, it gets taken care of.

If you have eye problems

- You have extra things to deal with. Some things, like reading or using your blood glucose monitor, are harder to do, and others, like driving at night, may be impossible. You may also carry an extra burden of worry about the future.
- Each person copes with the extra burden in his or her own unique way. The key for many seems to be somehow making peace with the loss and the added burden. A patient of mine lost the sight in her right eye from retinopathy. She was a young woman, had not yet met her life's partner, and believed the fact she was blind in one eye meant she was disfigured and that she never would meet the love of her life. She worked for several months to gain another perspective on her loss, and finally succeeded. One day, smiling for the first time since I had met her, she said, "Instead of telling myself I'm disfigured, I've started saying that the eye I lost was a spare. Somehow that focuses me on what I have instead of what I've lost. I'm ready to get on with my life."

- Make your life easier. If it is hard to read, do paperwork, watch television, or monitor your blood sugar, there are devices to help. My father has had very limited vision for more than 20 years from a condition unrelated to diabetes. He is still an avid reader and active scientist at age 85, and he uses a machine that magnifies the letters on a printed page many times, so he can keep up with his interests. Talk to your health care provider about your needs. Diabetes educators are often good sources of information on ways to make life easier when your vision is limited. The American Association of Diabetes Educators has a specialty practice group of health care providers who focuses on generating resources for people with diabetes who are visually impaired. Contact the AADE at www.aadenet.org or 1.800.338.3633.
- Reach out. Talk to other people dealing with some of the same issues you are. See if there are diabetes support groups at your local hospital, and check the web for support and information on diabetes and vision. Start with the site for the American Diabetes Association, www.diabetes.org or call 1.800.DIABETES.

Your vision is precious; get all the help you need to protect it!