

DIABETES

About 700,000 Australians, or four per cent of the population, have diabetes. Of these, 98 per cent will develop some form of damage to their vision, a condition known as diabetic retinopathy, within 15 years of diagnosis. Optometrists play a fundamental role in diagnosing these conditions in their early stages when they respond best to treatment.

Eye changes in diabetics

Diabetes sometimes causes the focusing ability of the eye to weaken or to fluctuate from day to day. This characteristic often has led to optometrists diagnosing diabetes in their patients. The problem eases when blood sugar levels are controlled by a doctor.

Diabetic retinopathy

After diabetes has been present for some years changes may occur at the back of the eye in the retina. Your optometrist uses an instrument called an ophthalmoscope to check for these changes.

These changes are known as diabetic retinopathy. There are two types of this condition: background (sometimes called simple) retinopathy and proliferative retinopathy.

The risk of developing retinopathy increases with the length of time you have been diabetic. The risk is also increased by poor control of blood sugar levels.

• Background retinopathy

This condition rarely causes any vision to be lost and therefore does not require treatment. Occasionally a swelling of the retina may cause hazy vision or straight lines to appear bent. Your optometrist may instruct you in a simple procedure to carry out at home so that you can test your eyes for this condition. If vision is affected in this way your optometrist can confirm its cause and will refer you for appropriate treatment.

• Proliferative retinopathy

This condition is more serious and requires early treatment to prevent serious vision loss. Your optometrist can recognise signs that this condition might develop or detect it in its early stages. Once proliferative retinopathy has been diagnosed your optometrist will refer you to an eye surgeon for further appraisal and probable laser treatment. Treatment of this condition has a better chance of success if it is applied very early.

• Managing diabetic retinopathy

There is little known about prevention of any of these complications, so the best management is to have regular eye examinations so that changes can be detected and treated early.

It is advisable for all diabetics to have yearly eye examinations. People who have been diagnosed as having retinopathy should have eye examinations more frequently than once a year.

Diabetes and other vision conditions

• Double vision

This is a distressing but rare complication of diabetes. The condition is usually temporary, although it often lasts for a few months. An optometrist can help treat it while it has effect. Diabetes is not the only cause of double vision.

• Glaucoma

The eye disease glaucoma is slightly more common in diabetics than in non-diabetics. Glaucoma is a condition in which the nerve cells which transmit information from the eye to the brain become damaged, often caused by pressure due to a build-up of fluid in the eye. If untreated, glaucoma can cause blindness.

• Cataract

Cataracts are more likely to occur in diabetic people at an earlier age than in non-diabetics. A cataract is a cloudiness that can form in the lens inside the eye. If present, glaucoma and cataract are readily detected at

your regular eye examination when your optometrist will advise the best management strategy for the condition.

You and your optometrist

Your optometrist is trained to provide you with the best vision care and advice. Optometrists can help overcome any vision problems caused by diabetes and provide further information about diabetic vision management. Regular visits to an optometrist are essential because any complication needs to be detected early to ensure effective treatment or referral to a medical practitioner. Diabetics often have a history of diabetes in their family. Be sure to tell your optometrist if this is the case in your family.

This brochure is produced by the Australian Optometrical Association
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Unique Optical: Shop 14, Manuka Village. Cnr Bougainville & Furneaux Sts, Manuka ACT 2603 ph 02 6295 0137