


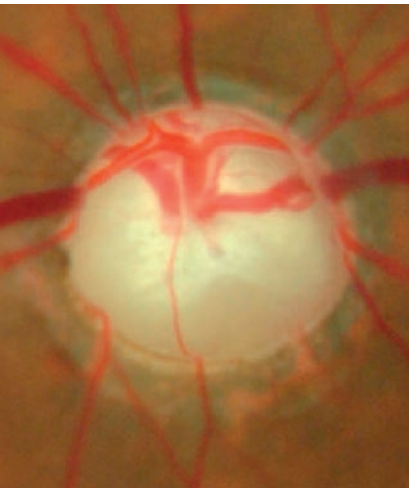


Diseases at the back of the eye

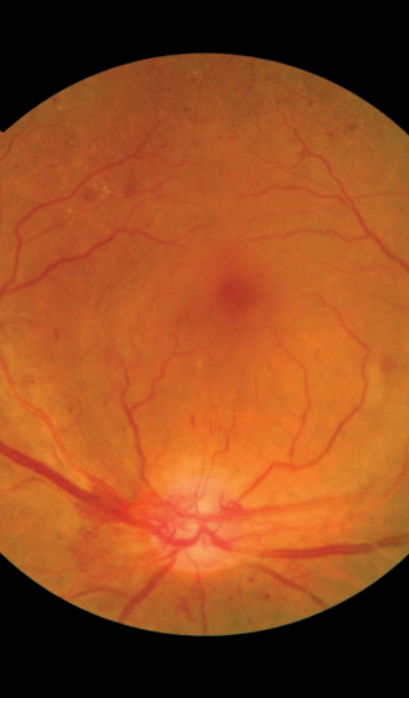
HISTORY	<p>Age-related macular degeneration (AMD)</p> <p>Exudative AMD. Distortion, rapid loss of central and reading vision</p> <p>Atrophic AMD. Gradual loss of central vision</p>	<p>Open-angle glaucoma</p> <p>Initially no symptoms, then gradual loss of the peripheral field of vision which can lead to loss of central vision</p>	<p>Diabetic retinopathy (DR)</p> <p>Initially no symptoms, then:</p> <p>Maculopathy. Gradual loss of central vision</p> <p>Proliferative DR. Sudden or gradual loss of vision</p>
EXAMINATION	<p>Exudative AMD. Blood, or exudate, or scarring at macula</p> <p>Atrophic AMD. Atrophy of choroid and retinal pigment at macula</p>	<p>Pale and cupped disc, constricted visual fields, may have elevated intraocular pressure (IOP)</p>	<p>Maculopathy. Exudates near macula</p> <p>Proliferative DR. New vessels or vitreous haemorrhage</p>
 <p>Exudative AMD</p>	 <p>Early cupping</p>	 <p>Diabetic maculopathy</p>	



Early atrophic AMD



Cupped disc



Diabetic new vessels (proliferative DR)

MANAGEMENT

Exudative AMD. Refer for intravitreal injections (if available) if:

- Symptoms are present for less than three months
- Vision is better than counting fingers (CF)

Atrophic AMD. No treatment is available, but patients may benefit from low vision aids

Treatment cannot improve sight, so refer only if the patient still has useful vision
 Aim to reduce IOP using:

- Daily eye drops
- Surgery
- Laser

Maculopathy. Refer for laser or intravitreal injections if vision is 6/60 or better
Proliferative DR. Refer for laser if any new vessels or vitreous haemorrhage. May need vitrectomy if there is vitreous haemorrhage and/or poor vision

INFORMATION FOR PATIENTS

All three conditions are chronic, and cannot be completely cured. We expect anti-VEGF injections to improve vision in exudative AMD and diabetic maculopathy in most – but not all – patients. In glaucoma and proliferative DR, treatment will only prevent the condition getting worse. In order to manage these chronic and incurable disorders effectively, patients must attend the clinic regularly for the rest of their lives

Exudative AMD. If suitable for treatment, patients will require three injections over three months. They are likely to need more injections after the initial three. Even if no further treatment is needed, they will need to attend the clinic every two months

The sight will not be improved by treatment, which aims to prevent further loss of vision.
 Eye drops must be used every day, and continued indefinitely.
 Surgery or laser may lower the IOP permanently but will require frequent examinations for the first three months

Maculopathy. The injection treatment is the same as for exudative AMD. Laser may lead to a more permanent cure, but still requires examination every 3-4 months
Proliferative DR. After laser, examine the patient every three months for the first year