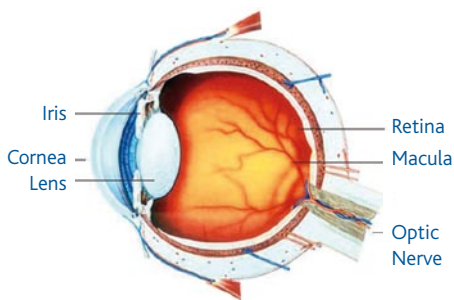


# Diabetic Retinopathy

**Diabetic retinopathy is a complication of diabetes mellitus that damages blood vessels inside the retina at the back of the eye. It commonly affects both eyes and can lead to vision loss if it is not treated.**

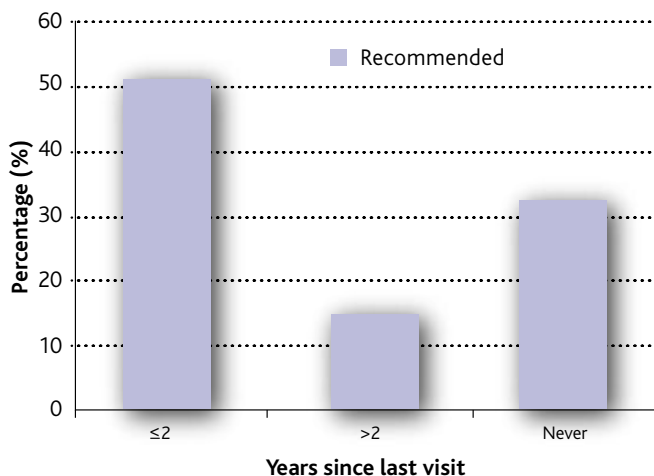
There are three forms of diabetic retinopathy:

- > 'Non-proliferative' retinopathy is an early form of the disease, where the retinal blood vessels leak fluid or bleed.
- > 'Macular oedema' is a swelling of the macula, caused by the leakage of fluid from retinal blood vessels. It can damage central vision.
- > 'Proliferative' retinopathy is an advanced form of the disease and occurs when blood vessels in the retina disappear and are replaced by new fragile vessels that bleed easily, that can result in a sudden loss of vision.



## How common is diabetic retinopathy?

People with diabetes mellitus (Type 1 and Type 2) have a higher prevalence for developing diabetic retinopathy.



Only half of the people with diabetes have a regular eye exam, and one-third have never been checked.

- > People with diabetes have a 25 times increased risk of vision loss over non-diabetics
- > All with diabetes are at risk of developing retinopathy

## What are the symptoms?

There are no early-stage symptoms of diabetic retinopathy. Vision loss may not occur until the disease is advanced.

Late-stage diabetic retinopathy symptoms include:

- > Blurred vision
- > Eye strain
- > Headaches

## What are the causes?

Diabetic retinopathy is a complication of diabetes mellitus.

## Can I prevent diabetic retinopathy?

Effective management of diabetes mellitus, including better control of blood sugar levels, blood pressure and cholesterol, will help delay the development of retinopathy. When diabetes is first diagnosed, regular eye examinations are recommended. Early diagnosis and treatment can prevent up to 98% of severe vision loss.

## What treatment is available?

Your doctor can assist manage diabetes mellitus and diabetic retinopathy.

Macular oedema and proliferative retinopathy are treated with laser treatment. The laser seals leaking blood vessels and can be used to reduce growth of new fragile vessels, helping prevent vision loss. Surgery may be required for severe cases of diabetic retinopathy that do not respond to laser treatment.

## Diabetic retinopathy research

At the Centre for Eye Research Australia, the Retinal Vascular Imaging Centre and the Health Services Research Unit are jointly leading research into better management options for diabetic retinopathy. Under leadership from Professor Tien Wong and Dr Ecosse Lamoureux, CERA has established collaborations with the Diabetes Centre for Clinical Research Excellence at St Vincent's Institute, with the Baker IDI Heart and Diabetes Institute and other leading research groups in this field. Information on work in progress is regularly updated at [www.cera.org.au](http://www.cera.org.au)

To support our diabetic retinopathy research with a donation, please call (TOLL FREE) 1300 737 757.