

眼科部 Department of Ophthalmology

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Department of Ophthalmology

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Service Hours (By appointment only)

Monday to Friday: 9:00 am – 5:00 pm

Saturday: 9:00 am – 1:00 pm

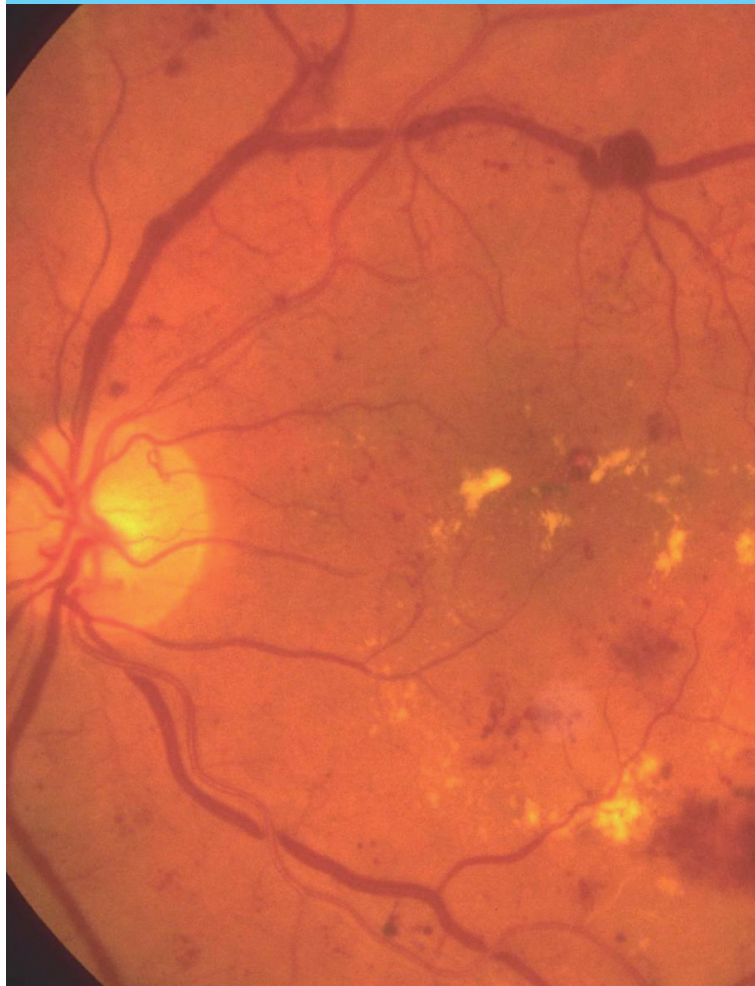
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Diabetic Retinopathy



養和醫院
Hong Kong Sanatorium & Hospital

眼科部

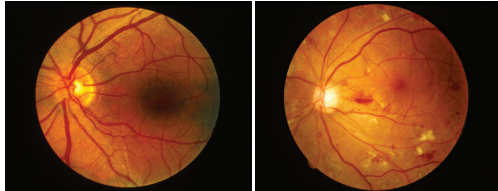
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Diabetic Retinopathy

Currently, around 10 to 15% of the adult population in Hong Kong suffers from diabetes mellitus (DM). The age of onset is getting younger in recent years. DM can affect multiple organs in the body including the eyes. It can cause diabetic retinopathy, cataract, glaucoma and retinal detachment. Depending on the duration and age of onset of DM, the incidence of diabetic retinopathy varies from 20 to 55%.

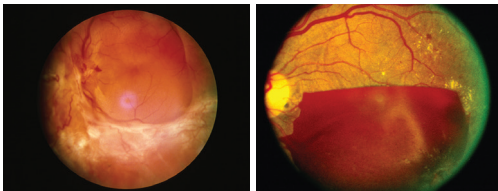
Signs and Symptoms

Early diabetic retinopathy is asymptomatic and patients enjoy normal vision without redness and pain in the eyes. However, blood vessels would dilate, leak serum and phospholipids and form microaneurysms in the retina. Retinal capillaries closure will then cause ischemia and lead to the growth of new blood vessels. These new blood vessels bleed into vitreous cavity easily. Patients would experience sudden onset of floaters or even sudden blindness.



Normal Retina

Retinal hemorrhages, cotton wool spots and laser scars



Retinal detachment

Vitreous hemorrhage

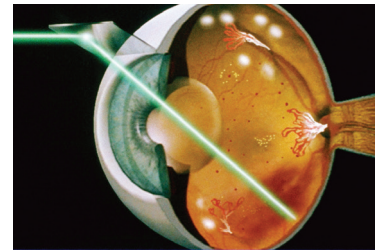
Examination and Prevention of Complication

Once DM is diagnosed, patients must regulate their diet, improve their life style and control their blood sugar with medications. Eye doctors should be consulted and a thorough examination of retina should

be arranged. Fundus fluorescein angiography and laser treatment can be done to improve vision when necessary. Regular eye examination is recommended every six months to one year. More frequent follow-up is necessary when the retinopathy progresses.

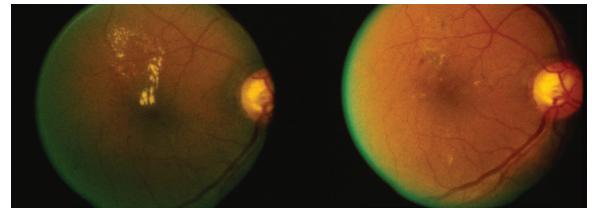
Latest Treatment

Regular eye examination by doctors and strict control of blood sugar, blood pressure and blood cholesterol are essential in protecting vision. When new blood vessels are detected, or when the macula are threatened by edema and exudates, intravitreal injection of anti-VEGF or laser photocoagulation can improve vision. In more severe conditions like retinal detachment, vitreous hemorrhage or refractory macular edema, vitrectomy is useful in restoring vision.



Laser treatment for diabetic retinopathy

Macular edema



Before treatment

After treatment

Conclusion

Prevention is the best cure. Regular eye check up, strict blood sugar control and laser or surgical treatment can protect vision and prevent blindness for most diabetic patients.