



*Diseases & Surgery of the  
Retina and Vitreous*

**Jeffrey D. Zheutlin, M.D.**  
**Frank W. Garber, M.D.**  
**Louis C. Glazer, M.D.**  
**Renee L. Williams, O.D.**

#### **VRA Grand Rapids**

2505 East Paris Ave.  
Suite 100  
Grand Rapids, MI 49546  
Phone (616) 285-1200  
Fax (616) 940-0864

#### **VRA Kalamazoo**

1080 North 10<sup>th</sup> Street  
Suite 100  
Kalamazoo, MI 49009  
Phone (269) 353-9700  
Fax (269) 353-8534

#### **VRA Muskegon**

3102 Glade Street  
Muskegon, MI 49444  
Phone (231) 830-1200  
Fax (231) 737-9008

#### **Clinical Trials**

Allergan Posurdex Implant for DME  
Alimera Iluvien Implant for DME  
ThromboGenics Microplasmin  
for Vitreo-Macular Traction  
Lpath-iSONEP for ARMD  
Regeneron VEGF-Trap for ARMD  
Genentech Lucentis for CRVO  
Genentech Lucentis for CRVO Ext.  
Regeneron VEGF-Trap for CRVO  
Novartis Aliskiren for DME  
DRCR Lucentis for Diabetic VH  
Regeneron VEGF-Trap for ARMD Ext.  
Alimera Iluvien Implant for DME Ext.  
GSK Oral Pazopanib for ARMD  
GSK Topical Pazopanib for ARMD  
Alcon ESBA 1008 for ARMD  
Santen DE-109 for Posterior Uveitis  
Allergan Ozurdex vs. Lucentis for DME  
Regeneron VEGF-Trap for BRVO  
Novartis LFG316 for Dry AMD  
Van Andel Institute Vitreous Sample  
DRCR Topical NSAID for DME  
Wilmer iDEAL for DME  
Saint Mary's Vitreous Sample

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## **Vitreo-Retinal Associates, P.C.**

### **Diabetes Threatens the Eyesight of Many Unsuspecting Americans**

An estimated 24 million Americans now have diabetes, with the number expected to grow at least 5 percent annually in future years. One serious consequence of the disease can be vision loss or blindness. VRA urges anyone who may be at risk for diabetes to see their ophthalmologist and primary care physician. The earlier diabetes is caught and appropriate lifestyle changes and treatment begin, the better the chance of avoiding vision loss and other health consequences.

Hispanic-Americans are especially at risk for diabetes and related eye problems, but most are unaware of their heightened susceptibility, several recent studies show. Among Hispanic-Americans older than 40, one in five is diabetic, and almost half of this group have diabetic retinopathy; abnormal blood vessel changes in the eye's retina and optic nerve area. Diabetic retinopathy is the leading cause of vision loss and blindness in this ethnic group.

Effective treatments, including annual eye exams, can reduce severe vision loss in diabetics by up to 94 percent. In the United States, one-third of those with diabetes are unaware of it. Some find out when their ophthalmologist notices changes in their retina – the light sensitive area at the back of the eye – during a dilated eye exam. Type 2 diabetes is much more common than Type 1; both types can affect eye health. Nearly 5.5 million Americans age 18 and older have diabetic retinopathy. In addition to controlling their blood sugar, people with diabetes should work with their primary care physician to control their blood pressure, since both are important to slowing the development of diabetic retinopathy. Diabetics are also more likely to develop glaucoma, a complex disease that damages the optic nerve, which relays images from the eye to the brain.

VRA and the American Academy of Ophthalmology recommend that people with Type 2 diabetes see an ophthalmologist (an Eye M.D.) at the time of diagnosis and annually thereafter. Those with Type 1 diabetes should see an ophthalmologist within five years of diagnosis and then yearly. Women who have either diabetes type should see an Eye M.D. before they become pregnant or early in the first trimester. Also the Academy now recommends that adults with no signs or risk factors for eye disease get a baseline eye disease screening at age 40, when early signs of disease and changes in vision may start to occur. Based on the results of the initial screening, an ophthalmologist will prescribe the necessary intervals for follow-up exams.

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### **Diabetes Threatens the Eyesight of Many Unsuspecting Americans (continued)**

#### **About Diabetic Retinopathy**

In the initial stages, people with diabetic retinopathy may not notice their vision changing. Diabetics sometimes experience rapid changes in blood sugar that can temporarily cause blurry vision even when retinopathy is not present. If a person notices a few specks or spots floating in his visual field, this may mean that he has developed proliferative diabetic retinopathy; the growth of abnormal new blood vessels on the retina and optic nerve. High blood sugar levels have been linked in studies to retinal blood vessel abnormalities. Blurred vision may occur when the macula – the small area at the center of the retina – swells as it fills up with fluid that has leaked from retinal blood vessel. Because damage to the eye often develops slowly, early detection of diabetes and control of blood sugar through diet and medications can make a crucial difference in saving vision.

Effective diabetic retinopathy treatments include laser photocoagulation for early to moderate stages and a microsurgery called vitrectomy for repair of eyes with extensive damage. Injectable and oral medications that act on abnormal blood vessels to control diabetic retinopathy before vision loss occurs are now in development. Early detection would be key to the effectiveness of these treatments, also.

**VRA is West Michigan's most experienced ophthalmology practice for highly specialized eye care with convenient locations in Grand Rapids, Kalamazoo, and Muskegon.**

Drs. Jeffrey Zheutlin, Frank Garber, and Louis Glazer, all board certified and renowned ophthalmologists, specialize in the diagnosis and treatment of conditions of the eye including macular degeneration, diabetic retinopathy, macular disease and retinal detachment.

As the area's leader in innovative eye research, we offer the latest advancements in diagnostic and surgical technologies.

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