

Patient information factsheet

Referral for diabetic eye disease

Diabetic eye screening is a test to check for eye problems caused by diabetes. If left undiagnosed and untreated, diabetic eye disease can lead to sight loss.

We have given you this factsheet because you have been referred to us from the diabetic eye screening service. This is because your screening test showed signs of diabetic retinopathy.

To try and help preserve your vision and help prevent long-term problems with your sight, we will need to carry out further investigations and we may need to give you treatment. If you have any further questions, please speak to a member of your healthcare team who will be pleased to help you.

What is diabetic eye disease?

Diabetic eye disease is a group of eye problems that can affect people with diabetes. These conditions include diabetic retinopathy, diabetic macular oedema, cataracts and glaucoma.

What is diabetic retinopathy?

Diabetic retinopathy is a complication of diabetes, caused by high blood sugar levels damaging the small blood vessels on the retina (the light sensitive tissue that lies at the back of the eye). When this damage is severe, it is called 'sight-threatening'. Although your vision may still be good, you have a greater risk of losing your sight over the next few years if you are not assessed and treated, if needed.

There are two main ways in which diabetes can affect your vision:

Maculopathy

Leakage of fluid (or fats) into the central retina (macula). This can cause the central vision (used for reading, fine focusing and seeing faces) to become blurred.

Proliferative retinopathy

Growth of abnormal, fragile blood vessels on the retina. These can break and bleed into the jelly of the eye, which may result in floaters (spots in your vision) and occasionally sudden vision loss.

You may not realise you have diabetic retinopathy in the early stages, as leakage and abnormal blood vessel growth can be present with normal vision. Early detection and treatment is the best way to preserve good vision. If you start treatment after your vision is affected, the results may not be as good.

What do I need to do?

You need to come to the eye clinic for an assessment, so we can check to see if you require any treatment. Please contact us if you cannot make your appointment.

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What happens in the clinic?

When you arrive in the clinic, we will test your vision. We will then put some drops in your eyes to dilate (widen) your pupils. Please do not drive to your appointment, as these drops will blur your close vision for about four hours.

Once your pupils have been dilated, we will take an optical coherence tomography (OCT) scan of your retina. This is similar to having retinal photographs. The OCT scan is a special computerised scan that gives a 3D image of the retina. It can show if the diabetes is causing any fluid to leak in the retina.

A specialist eye doctor, called an ophthalmologist, will examine your eyes. They will explain the findings and give advice about further observation or treatment. They will discuss treatment options with you and the risks and benefits that are associated with them.

It is very important that you keep attending your eye clinic appointments, as they allow us to monitor your eyes and offer treatment if needed.

What can I do to help prevent my eyes from getting worse?

Keeping your diabetes, blood pressure and cholesterol well controlled will reduce the risk of your diabetic eye disease getting worse and may slow the rate at which any changes happen. Stopping smoking will also help protect your eyes. Please discuss this with the doctor or nurse you see for your diabetes.

Contact us

Diabetic eye disease team
Southampton eye unit
Southampton General Hospital

Telephone: **023 8120 6754**

Useful links

- www.niddk.nih.gov/health-information/diabetes/overview/preventing-problems/diabetic-eye-disease
- www.nhs.uk/conditions/diabetic-retinopathy
- www.diabetes.org.uk/guide-to-diabetes/complications/retinopathy

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For help preparing for your visit, arranging an interpreter or accessing the hospital, please visit **www.uhs.nhs.uk/additionalneeds**