

OCULAR DISEASES IN GERIATRIC PATIENTS



See Well for Life, Get Your Eyes Examined Regularly

Age-Related Eye Disease Doesn't Have to Steal Your Sight

 As with other parts of the body, the eyes commence to undergo alters as they age

 In fact, vision problems are one of the initial signs of ageing

The most common ocular diseases in geriatric people are as follows:

Age-related macular degeneration (AMD)

Cataract

Glaucoma

Diabetic retinopathy¹

Adapted from:

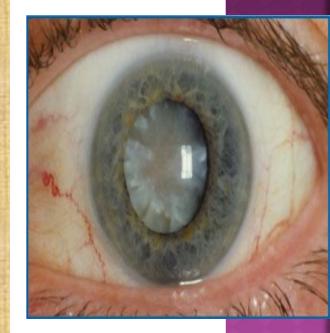
- 1. Gerontology. 2003 Jan-Feb;49(1):1-11
- 2. Am Fam Physician 1999;60:99-10
- 3. http://technocrat.net/d/2007/6/16/21627/



CATARACT

 Cataract is a common cause of vision impairment in the elderly and the most common cause of blindness worldwide¹

• The prevalence of cataracts in people aged between 65 and 74 years is 50% and it increases to 70% in those over the age of 75 years²

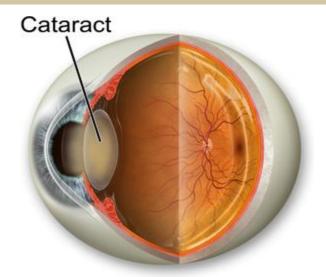


Adapted from:

- 1. Am Fam Physician 1999;60:99-10
- 2. SA Fam Pract 2006:48(7)

A cataract is a clouding of the lens in the eye that affects vision

- The lens of the eye is composed of water and protein
- The protein is arranged so that light can pass through and focus on the retina
- If the protein clumps together, however, it starts to cloud over a small area of the lens
- In time, this cloudy mass of protein called a cataract can grow larger, making it hard to see





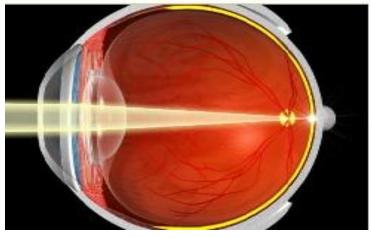
Adapted from: The NIH, The Word on Health, January 1999

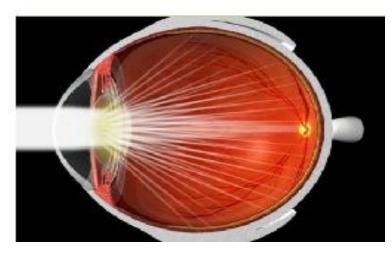
NORMAL VISION

VISION IN CATARACT









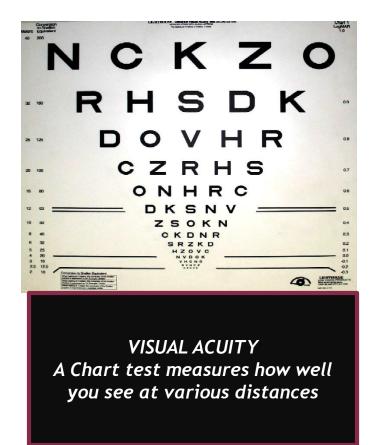
RISK FACTORS

- Certain diseases such as diabetes
- Personal behavior such as smoking and alcohol use
- The environment such as prolonged exposure to sunlight

SYMPTOMS

- Cloudy or blurry vision
- Colors seem faded
- Glare Headlights, lamps, or sunlight may appear too bright
- A halo may appear around lights
- Poor night vision
- Double vision or multiple images in one eye

DIAGNOSIS



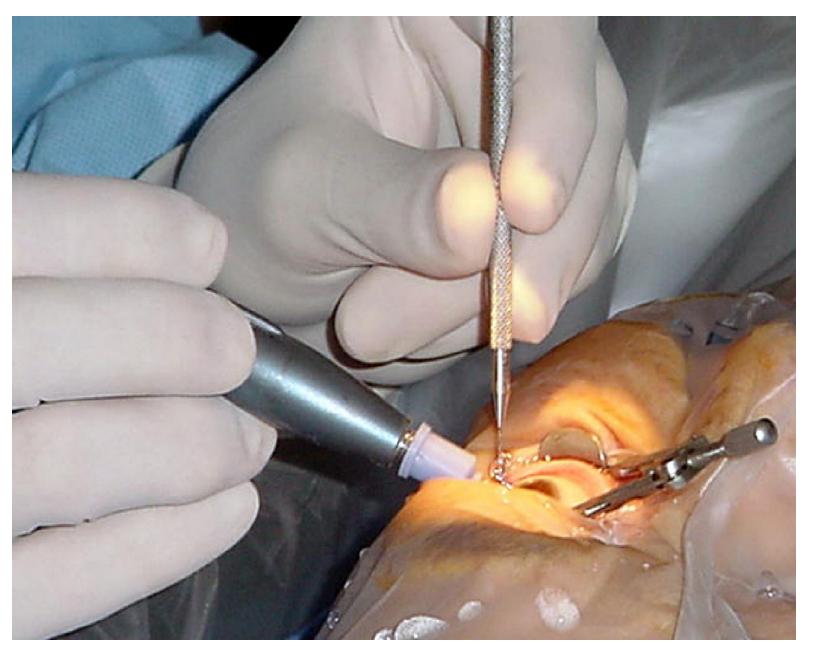


DILATED EYE EXAM

Drops are placed in eyes to widen, or dilate, the pupils. Eye care professional uses a special magnifying lens to examine the eye

TREATMENT

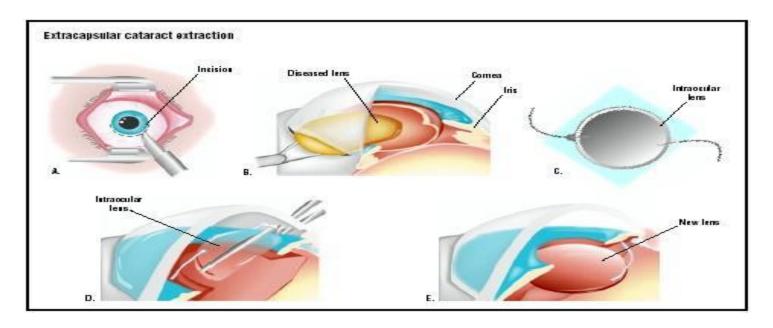
By the year 2020, there will be more than 12 million individuals in the 65 or older age group who will probably need treatment for cataracts



Adapted from: Am Fam Physician 1999;60:99-10

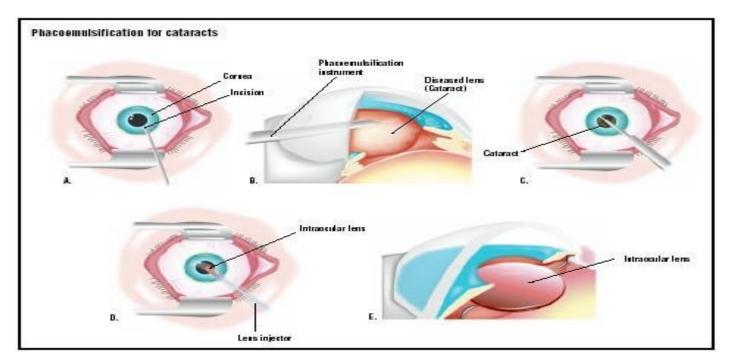
EXTRACAPSULAR SURGERY

- Incision is made between sclera and cornea
- Capsule containing lens is opened and nucleus of lens is removed
- Remaining portion is sucked out
- Next, an IOL is implanted



PHACOEMULSIFICATION

- Phacoemulsification represents the preferred method of lens removal
- It involves fragmentation of the lens using ultrasound and insertion of an artificial intraocular lens



HOW CAN I TELL IF I HAVE CATARACT?

- Changes in vision may be signs of cataract
- Milky or yellowish spot in the pupil
- Changing eyeglass prescriptions often

IS SURGERY THE ONLY TREATMENT?

YES

- Cataracts cannot be treated with medicines
- Eye drops or other drugs will not dissolve a cataract or slow its progress

HOW DO I KNOW IF CATARACT SURGERY IS RIGHT FOR ME?

- A cataract needs to be removed only when vision loss interferes with your everyday activities, such as driving, reading, or watching TV
- You and your eye care professional can make this decision together

WHAT HAPPENS AFTER SURGERY?

- After the operation, a patch may be placed over your eye
- You will rest for a while. Your medical team will watch for any problems, such as bleeding
- Most people who have cataract surgery can go home the same day

WHEN WILL MY VISION BE NORMAL AGAIN?

- You can return quickly to many everyday activities, but your vision may be blurry
- The healing eye needs time to adjust so that it can focus properly with the other eye, especially if the other eye has a cataract

WHAT CAN I DO IF I ALREADY HAVE LOST SOME VISION FROM CATARACT?

- If you have lost some sight from cataract or cataract surgery, ask your eye care professional about low vision services and devices that may help you make the most of your remaining vision
- Ask for a referral to a specialist in low vision
- Many community organizations and agencies offer information about low vision counseling, training, and other special services for people with visual impairments
- A nearby school of medicine or optometry may provide low vision services

WHAT CAN I DO TO PROTECT MY VISION?



Take good nutrition



Quit Smoking



Wear sunglasses





Glaucoma is the second leading cause of blindness in the world, according to the World Health Organization¹

8.4 million people will be blind from primary glaucoma by 2010, rising to 11.1 million by 2020²



GLAUCOMA: INDIAN PREVALENCE

- Second leading cause of preventable blindness in INDIA
- 12 million Indians will be affected by 2010, 16 million by 2020
- POAG in a ≥40-year-old south Indian urban population was 3.51%
- POAG in Central India was 3.68%
- >90% were not aware of the disease.



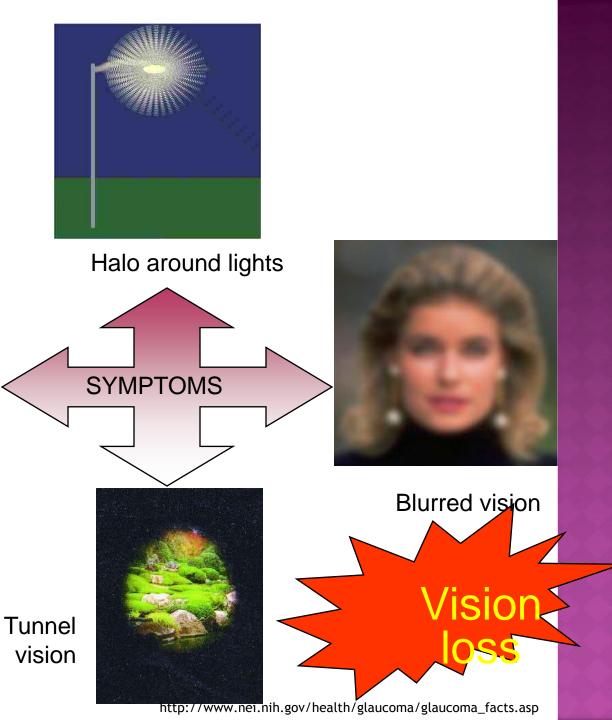
- 1. Indian J of Ophthalmology, vol 56 no (2), 2008: 97-98
- 2. Indian J. of Ophthalmology, vol 56, 2008: 56-72
- 3. Ophthalmology, Volume 115, Issue 4, Pages 648-654.e1, 2008

GLAUCOMA: HOW THE DEFINITON IS EVOLVED OVER THE YEARS

 Glaucoma was widely known as the disease related to the rise in intraocular pressure (IOP) > 21 mm Hg

And now what is the current definition of Glaucoma

 An optic neuropathy characterized by a specific pattern of optic nerve head and visual field damage characterized by acquired loss of RGC cells and optic nerve atrophy



Red eye, pain in the eye,

GLAUCOMA SYMPTOMS

EXTREME GLAUCOMA



ADVANCED GLAUCOMA



EARLY GLAUCOMA



NORMAL VISION



GLAUCOMA: SYMPTOMS



GLAUCOMA: RISK FACTORS



Glaucoma: The Disease

Normal Drainage
Picture

The Trabecular meshwork - is the eye's drain

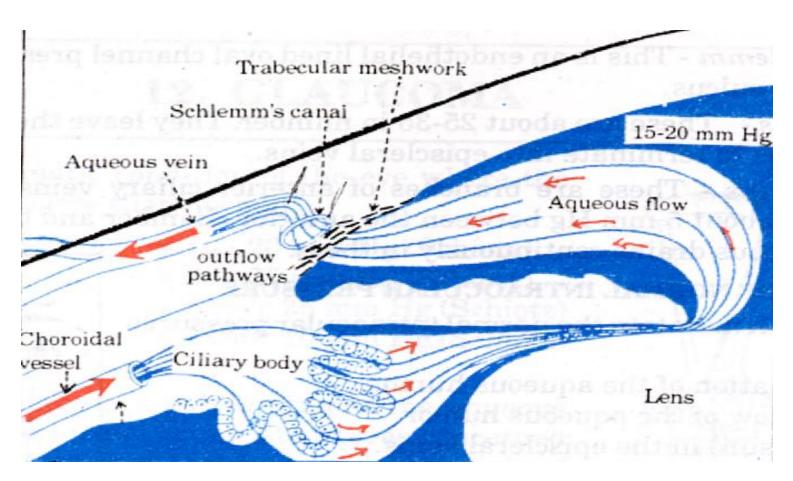
The Ciliary Body - is the eye's "faucet" or "tap" where fluid is made

Iris

When this drainage of the fluid gets blocked, excess pressure is formed leading to Glaucoma

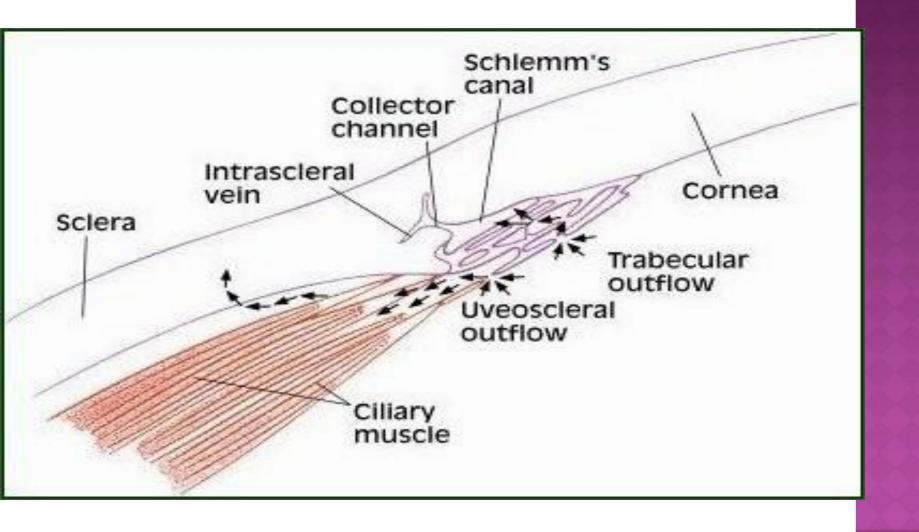
http://www.nei.nih.gov/health/glaucoma/glaucoma_facts.asp

AQUEOUS HUMOR: TRABECULAR MESHWORK FLOW



- □ 50% trabecular meshwork
- □ 50% Uveoscleral outflow

AQUEOUS HUMOR: UVEOSCLERAL OUTFLOW



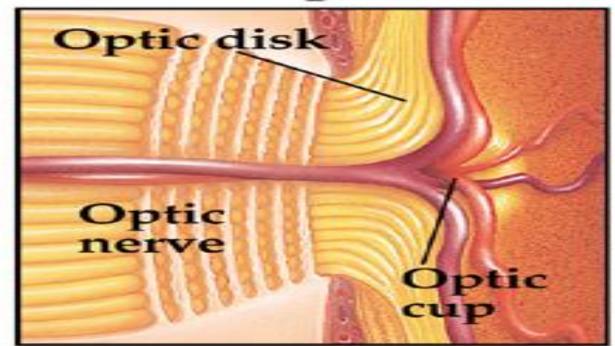
INTRAOCULAR PRESSURE

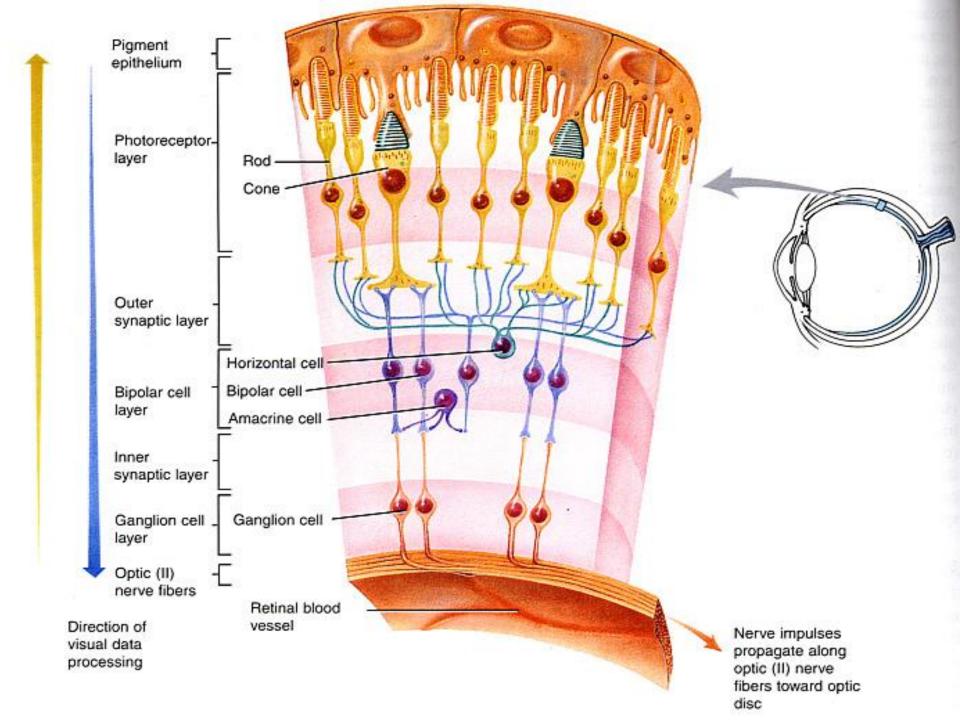
Definition

- □ Intraocular pressure (IOP) is the pressure maintained inside the eyeball under normal conditions, created by the volume of its liquid and solid contents (i.e. the aqueous humor and vitreous humor)
- □ Normal intraocular pressure = 10 -21 mm Hg

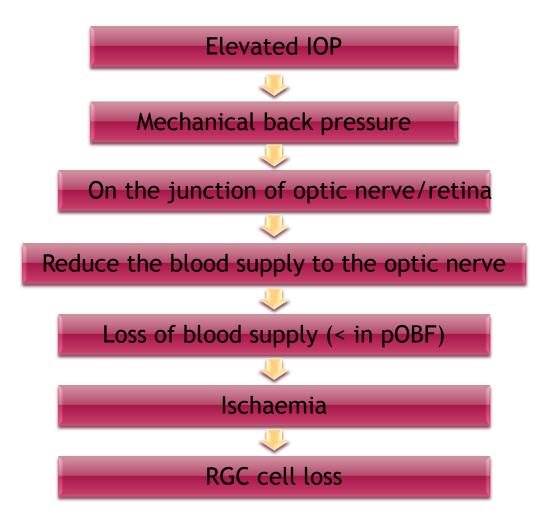
OPTIC DISC/OPTIC CUP/OPTIC NERVE

Normal optic nerve

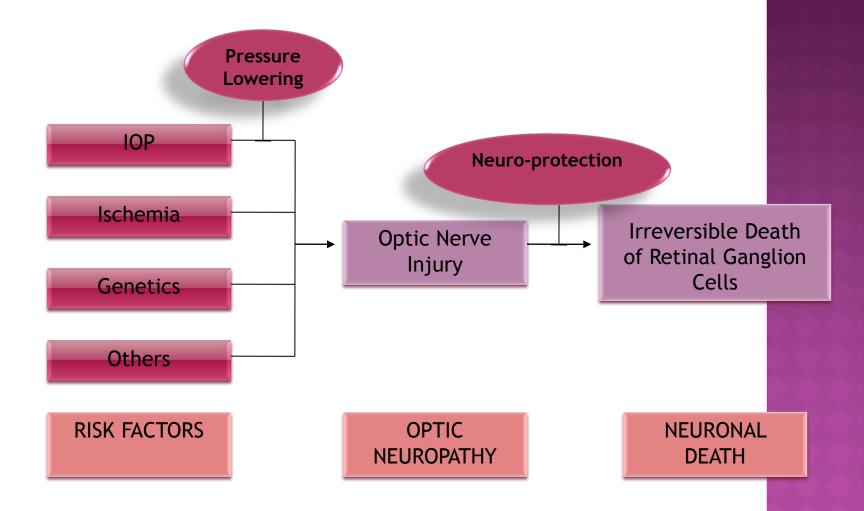




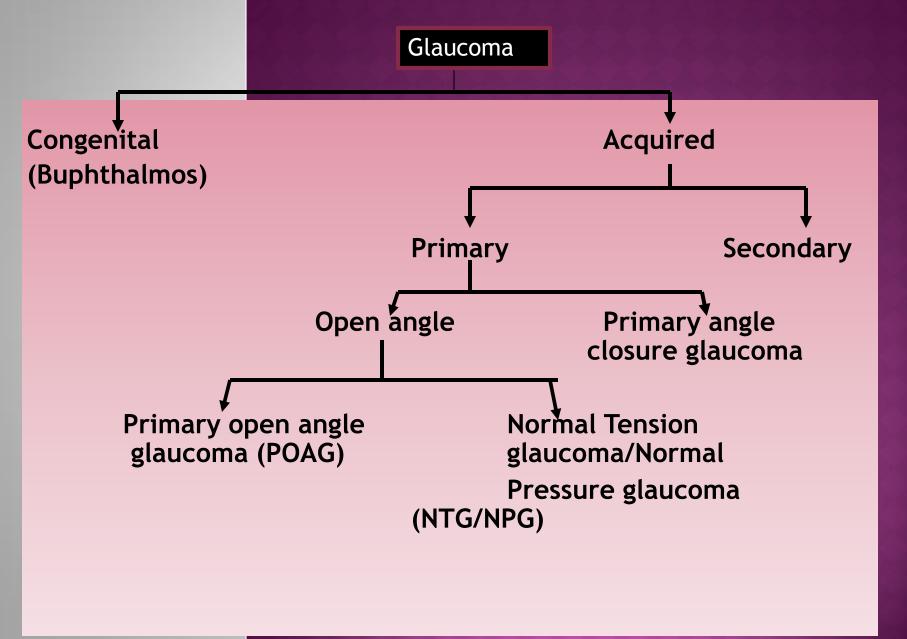
GLAUCOMA: OPTIC NERVE DAMAGE



HOW GLAUCOMA LEADS TO RGC DEATH

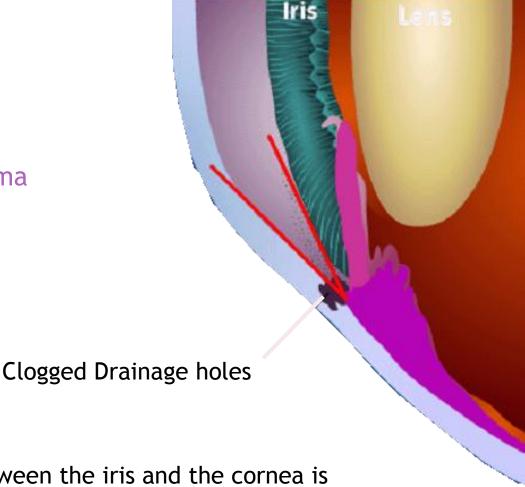


GLAUCOMA: CLASSIFICATION



Glaucoma: Types of Glaucoma

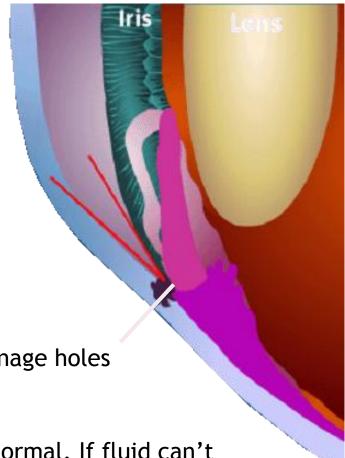
Chronic or Primary Open Angle Glaucoma



The angle between the iris and the cornea is normal, but the drainage holes get clogged from the inside.

Glaucoma: Types of Glaucoma

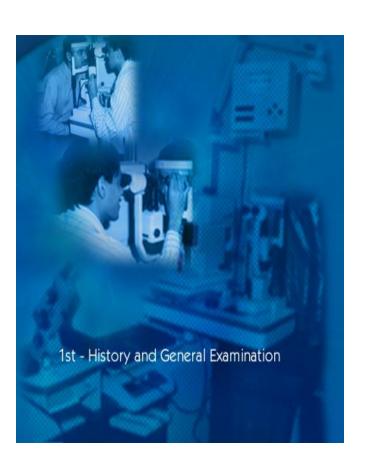
Acute Angle Closure Glaucoma



Blocked Drainage holes

The angle is narrower than normal. If fluid can't flow easily through the opening in the pupil, the iris pushes forward and blocks the drainage holes.

GLAUCOMA: DIAGNOSIS





Tonometry

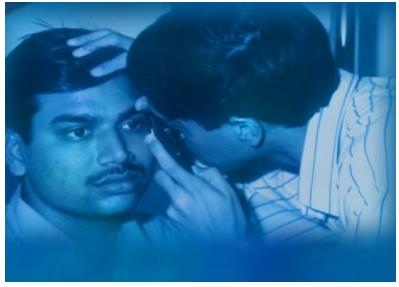
Measurement of I.O.P.

- -Schiotz tonometry
- -Applanation tonometry
- -Non contact tonometry

GLAUCOMA: DIAGNOSIS



Applanation Tonometry



OphthalmoscopyExamination of optic disc

GLAUCOMA: DIAGNOSIS



GonioscopyMeasurement of anterior chamber angle



Perimetry
Actual measurement of visual field looking for any dark areas in field of vision

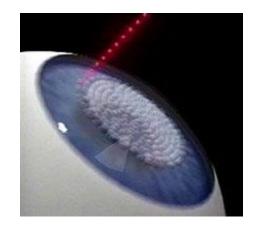
TREATMENT



Eye drops



Pills



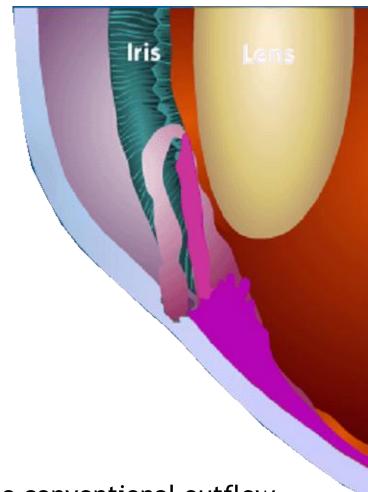
Laser surgery



Eye operations

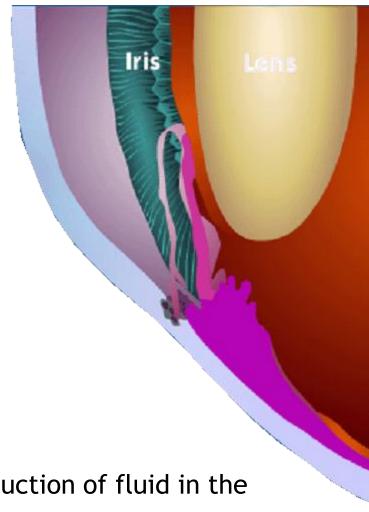
Combination method

MEDICAL



Drugs increase conventional outflow.

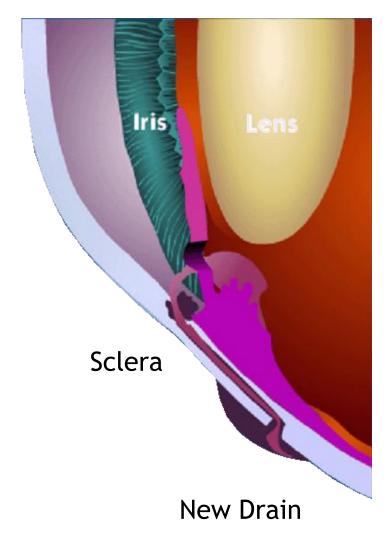
MEDICAL



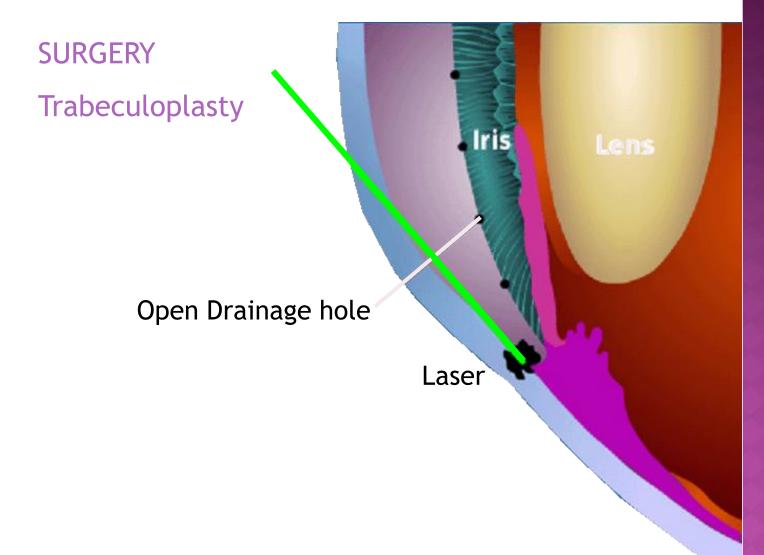
Drugs reduce production of fluid in the eye.

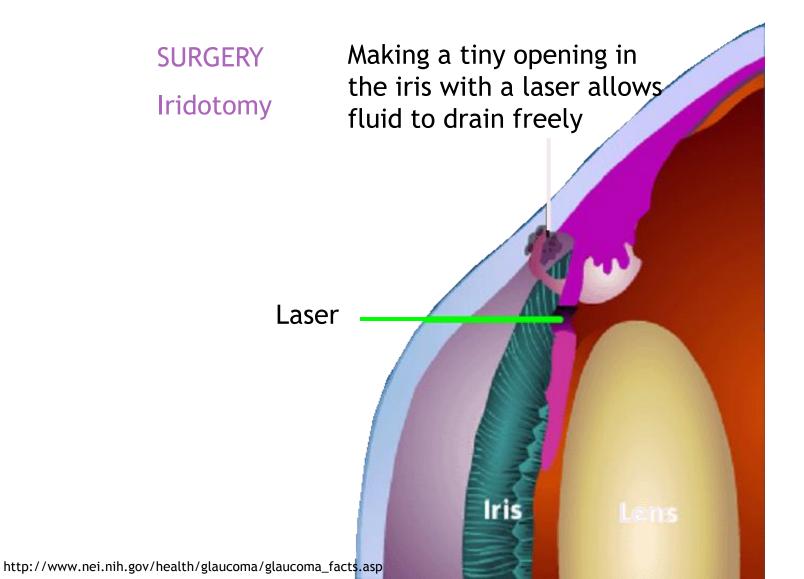
SURGERY

Trabeculectomy



http://www.nei.nih.gov/health/glaucoma/glaucoma_facts.asp







AGE RELATED MACULAR DEGENERATION (AMD) Takes Centerstage

4

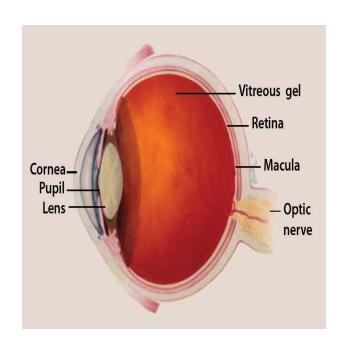
The prevalence increases from 1.6% in 52-64 years to 11% in 65-74 years and 27.9% in more than 74 years²

Adapted from:

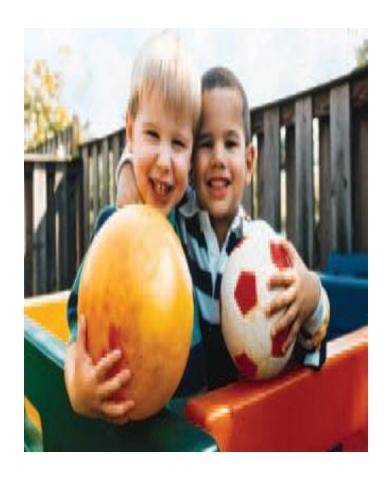
- 1. The NIH, The Word on Health, January 1999
- 2. http://www.bhj.org/journal/2002_4403_jul/md_318.htm

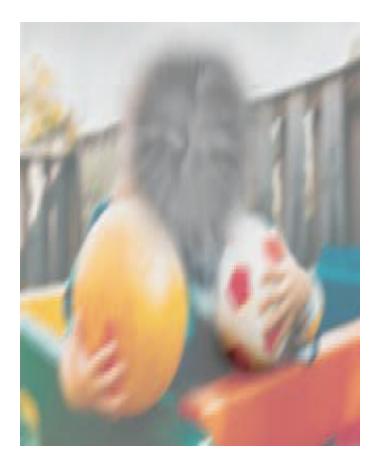
AGE RELATED MACULAR DEGENERATION (ARMD)

- AMD is a common eye condition among people age
 50 and older
- It is a leading cause of vision loss in older adults
- It gradually destroys the macula, the part of the eye that provides sharp, central vision needed for seeing objects clearly



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Normal vision

Vision in AMD

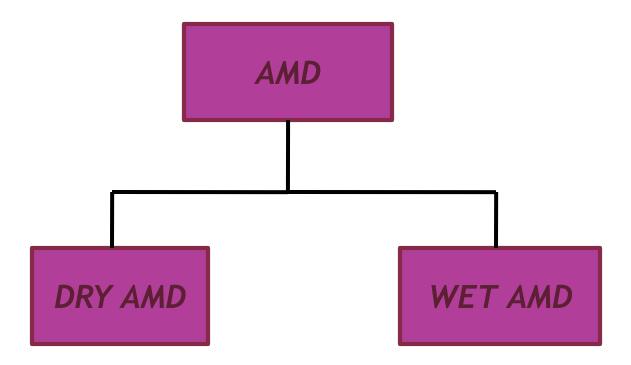
RISK FACTORS

 Smoking - Research shows that smoking increases the risk of AMD two-fold.

 Race - Caucasians are much more likely to get AMD than people of African descent.

• Family history - People with a family history of AMD are at higher risk.

FORMS OF AMD



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DRY AMD

- Dry AMD is the most common form of AMD in its early or intermediate stages.
- It occurs in about 90 percent of the people with the condition
- Dry AMD happens when the lightsensitive cells in the macula slowly break down, gradually blurring central vision in the affected eye.
- As dry AMD progresses, a blurred spot in the center of vision is seen



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SYMPTOMS IN DRY AMD





Blurred vision

Trouble recognizing faces

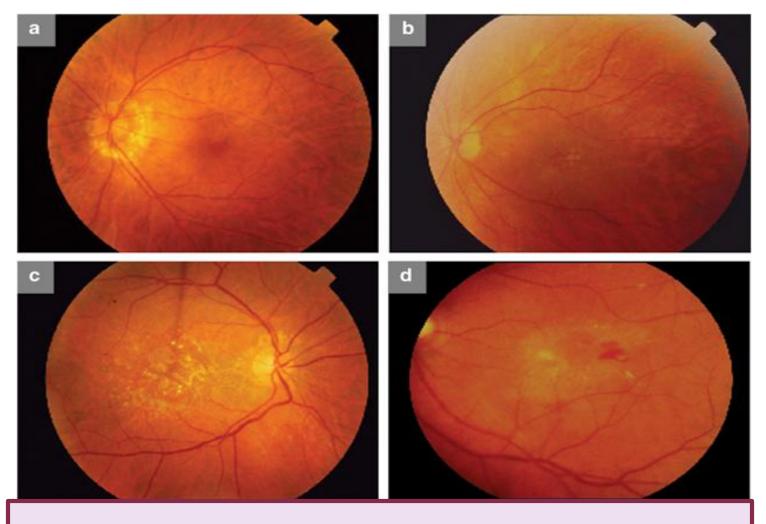
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WHAT IS DRUSEN?

- Drusen are another early sign of dry AMD
- They are yellow deposits under the retina
- They can be small or large in size
- People with large drusen are at risk of developing a more severe form of AMD, which results in severe vision loss



Stages of Dry AMD



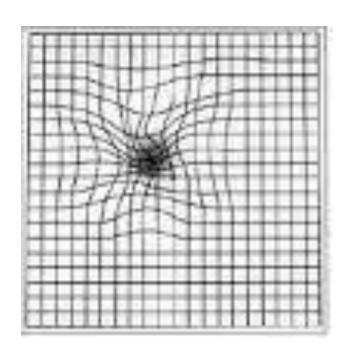
(a) Healthy subject, (b) early AMD with small drusen, (c) intermediate AMD (d) advanced AMD

WETAMD



- Affects about 10 percent of all people with AMD
- More severe than the early and intermediate stages of the dry form
- Wet AMD happens when abnormal blood vessels behind the retina start to grow under the macula.
- These new blood vessels can be fragile and leak blood and fluid
- The blood and fluid cause the macula to swell and damage occurs rapidly

SYMPTOMS IN WET AMD





Straight lines appear wavy

Blind spot in the centre

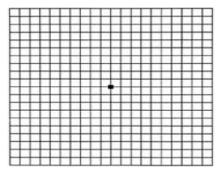
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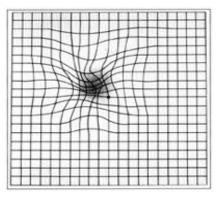
DIAGNOSIS

Visual acuity test

Amsler Grid test

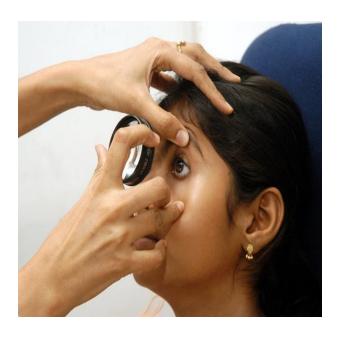
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DIAGNOSIS

Retinal Examination



Fluorescein angiography

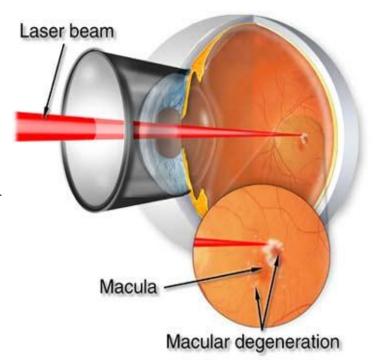


MANAGEMENT

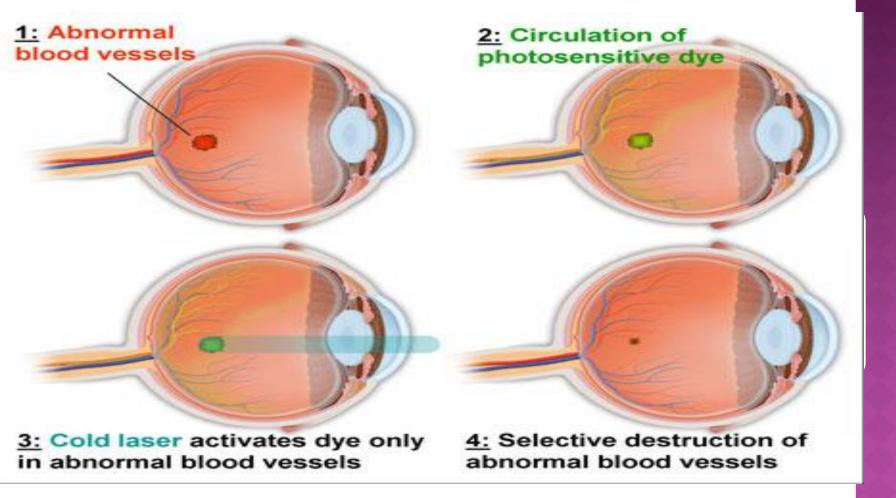
LASER SURGERY

- Uses a laser to destroy the fragile, leaky blood vessels
- High energy beam of light is aimed directly onto new blood vessels and destroys them

Laser Treatment of Wet Macular Degeneration



MANAGEMENT



PATIENT AWARENESS

WILL AMD AFFECT MY QUALITY OF LIFE?

AMD will have its impact on



Reading



Watching TV



Shopping



Cooking

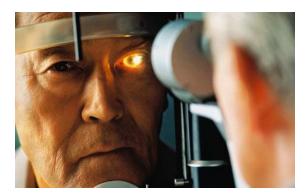
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CAN MY AMD BE TREATED?

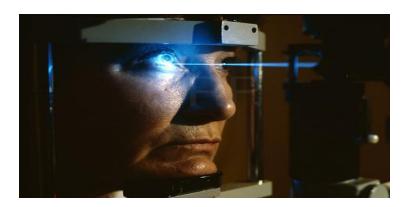
YES



Anti - VEGF injection



Laser therapy



Photodynamic therapy

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Tips to prevent AMD

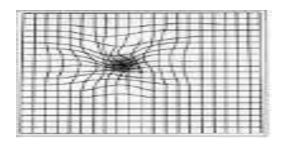
VISIT EYE DOCTOR REGULARLY

 Above 65 yrs, a complete eye exam must be done every one or two years even in case of normal vision



LEARN & WATCH THE SIGNS & SYMPTOMS OF AMD

- Check the central vision in both the eyes everyday
- Report any changes to the eye doctor









TAKE CARE OF YOURSELF



EAT HEALTHY



STAY ACTIVE



QUIT SMOKING

TIPS FOR LIVING WITH ARMD

MAKE THINGS BRIGHTER

Many people with AMD see better in bright light



Paint rooms & ceilings white to add extra brightness



Pull back curtains to allow more sun into the room

CHOOSE THE RIGHT LIGHT



Make sure that light doesn't shine directly into eyes



Add lights or spotlights around dark areas of house



While cooking, there should be enough light around the stove, gas



www.preventblindness.org

USE LOW - VISION AIDS



Talking books on cds, cassettes





Large print books & magazines



Closed circuit TV's



Large screen computers

EATING HABITS



- •Eat dark colored fruits & vegetables an important source of antioxidants
- •Antioxidants provide health benefits & are likely to reduce the risk of AMD



DIABETIC RETINOPATHY (DR)

Timely Treatment Is Key

The final major age-related eye disease whose symptoms are often ignored is diabetic retinopathy¹

Diabetic retinopathy is the most common and serious ocular complication

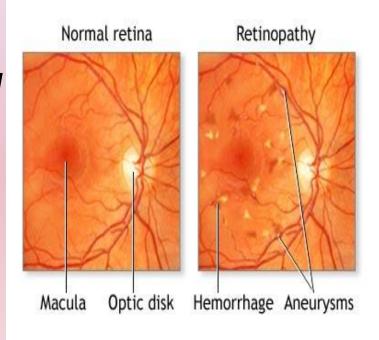
Of the 246 million people with diabetes, about a third have signs of diabetic retinopathy, and a third of these might have vision-threatening retinopathy²

Adapted from:

- 1. The NIH, The Word on Health, January 1999
- 2. Lancet 2010; 376: 124-36

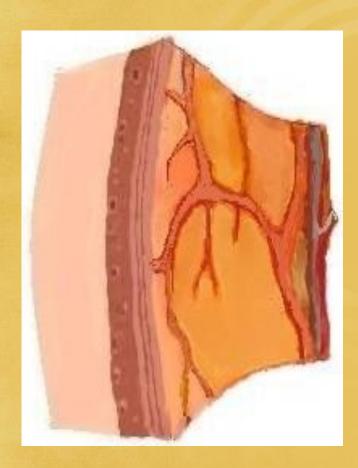
DIABETIC RETINOPATHY (DR)

- The most common eye disease among people with diabetes
- High blood sugar levels and high blood pressure (BP) can damage the tiny vessels (capillaries) in the back of eye (retina)
- In some people, fluid leaks through the damaged vessels, injuring the retina and causing loss of vision

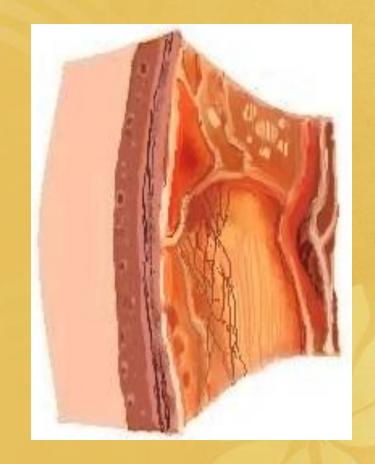




Changes in Diabetic Eye



Healthy Eye



Diabetic Eye

SYMPTOMS



Blurred vision



Double vision





Normal vision



Vision with diabetic retinopathy

RISK FACTORS

All people with diabetes-both type 1 and type 2

 During pregnancy, diabetic retinopathy may be a problem for women with diabetes

Hyperglycaemia



Pericyte loss, basement membrane thickening, vascular leakage, alterations in blood flow, tissue hypoxia

Pre-proliferative diabetic retinopathy

Hypoxia, oedema, microaneurysms, soft exudates, venous beading

Proliferative diabetic retinopathy

Angiogenesis, fibrovascular ridge, retinal detachment, blindness

Stages of vascular dysfunction in diabetic retinopathy

Expert Reviews in Molecular Medicine ©2004 Cambridge University Press

Healthy Retina Periphery Optic nerv Macula Front view of a healthy retina Diabetic Retina Neovascularization Neovascularization Neovascularization Cotton wool spots

Damaged capillaries can interfere with vision.

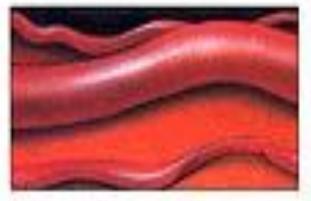
Reduce the amount of blood nourishing the retina.

Reduced blood flow causes weak new capillaries to grow on the retina

As diabetic retinopathy progresses, vision loss can get worse.

Progression of Diabetic Retinopathy







Leaking vessels

Tiny blood vessels, bulge swell and ultimately leak

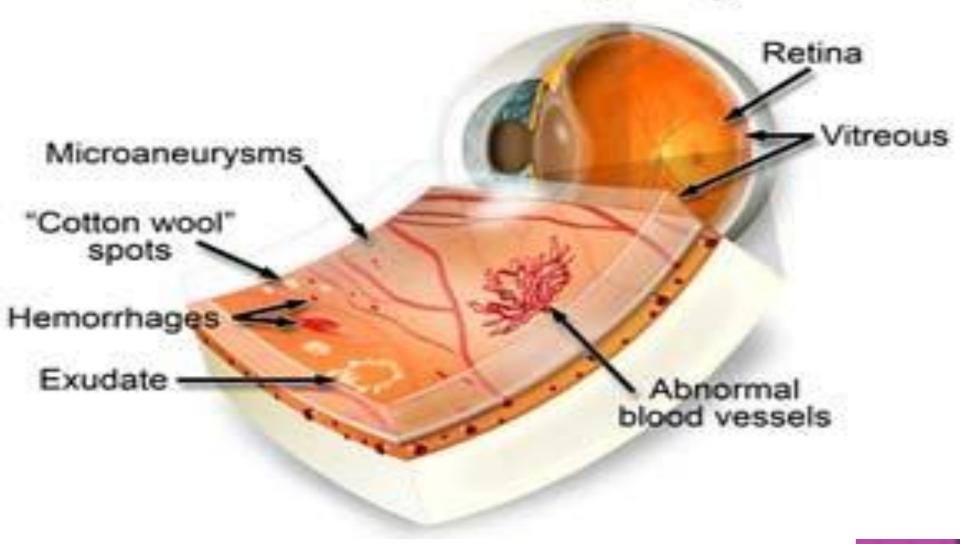
Closed vessels

Lack of oxygen causes ischemic conditions leading to sealing and closing of blood vessels

Weak, new vessels

Growth of weak fragile capillaries lead to easy bleeding of the same leading to hemorrhage and vision loss

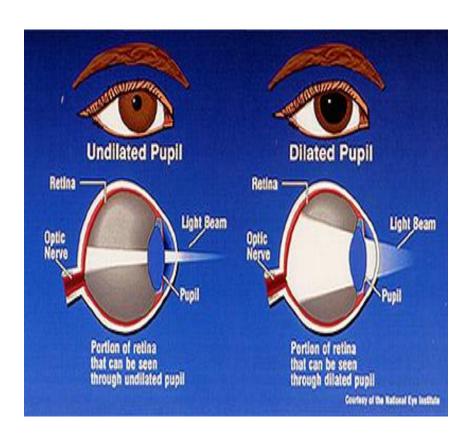
Diabetic Retinopathy



DIAGNOSIS

Dilated eye exam

Visual acuity test

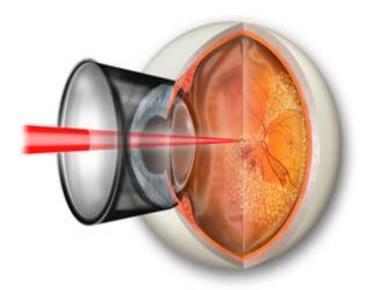


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TREATMENT

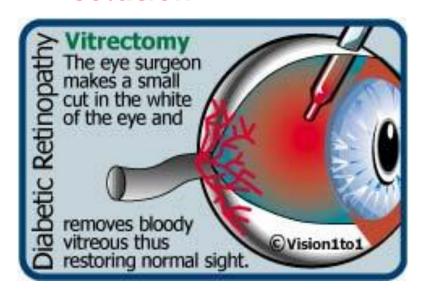
Laser photocoagulation

 Laser shrinks the abnormal blood vessels



Vitrectomy

- Vitreous gel filled with blood is removed
- It is replaced with salt solution



HOW SUCCESSFUL IS DIABETIC RETINOPATHY TREATMENT?

- Diabetic retinopathy treatment has a high success rate
- Laser photocoagulation is not intended to improve vision, but is successful at preventing further vision loss
- Undergoing Vitrectomy surgery will improve vision for most diabetic retinopathy patients who are good candidates for the procedure

ARE THERE ANY OTHER EYE PROBLEMS THAT CAN HAPPEN TO DIABETICS?

CataractGlaucoma

WILL I GO BLIND IF I SUFFER FROM DIABETIC RETINOPATHY?

Yes

If the disease progresses & is not treated, there is a chance of vision loss

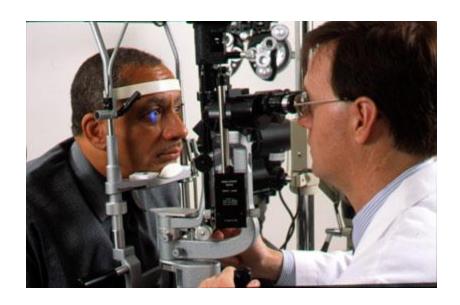
WHAT CAN I DO IF I HAVE DR?

 Keep your blood glucose and blood pressure as close to normal as you can



CONTD...

 Have an annual eye exam, and call your eye doctor between exams if you have any problems or questions



CONTD....

 Eat a healthful diet, watch your weight, and exercise according to your health care provider's recommendations









Quit smoking



THANK - YOU