



This factsheet at a glance



Eye checks – Get your eyes checked regularly, even if your vision seems fine.



Your diabetes – Keep blood glucose, blood pressure, and cholesterol in check.



Healthy habits – Eat well, stay active, and avoid smoking.



Treatment journey – Early treatment can help save sight. Most people need several eye injections, but not forever.

What is diabetic macular oedema?

Diabetic macular oedema – sometimes written as diabetic macular edema – is a condition that can develop as a result of diabetic retinopathy. Diabetic retinopathy is a complication of diabetes caused by damage to the small blood vessels in the retina at the back of the eye.

Diabetic macular oedema occurs when the damaged blood vessels leak fluid and cause swelling of the macula, the area of the retina that is responsible for detailed central vision. It can occur at any stage once you've been diagnosed with diabetic retinopathy. Diabetic macular oedema is the most common reason that people with diabetic retinopathy lose their vision. Your risk of developing diabetic macular oedema is related to how well you manage your diabetes.

Symptoms

Early Diabetic macular oedema may have no symptoms, and it can cause progressive damage to your macula before you notice any changes in your vision.

If you do notice symptoms, the main symptom of diabetic macular oedema is blurry or wavy central vision. Diabetic macular oedema often impacts both eyes, but if only one is affected, you may not notice any blurriness until the condition is well advanced.

You might also notice that colours appear washed out or faded, or there are dark spots or gaps in your vision.

If you have any symptoms, whether or not you've been diagnosed with a diabetes-related eye condition of any kind, you should get your eyes checked straight away as early treatment of diabetic macular oedema can help save your sight.

Importance of regular eye exams

Along with managing your diabetes, regular eye exams are vital to protect yourself from vision loss caused by diabetes. Eye exams can help identify problems before vision loss has occurred.

Your eye care provider will want to know:

- How long since you were first diagnosed with diabetes.
- Your most recent HbA1c result (average blood sugar level).
- Any medications you're taking.

Even if your results have been normal in the past, it is important to continue having regular eye exams. Try to avoid cancelling or delaying eye exam appointments.

Diagnosis

Eye health professionals use a range of tests to diagnose and monitor diabetic macular oedema:

- **Visual acuity testing:** Measures how well you see and tracks changes in your vision over time. Bring your glasses or contact lenses to ensure accurate results.
- **Dilated eye examination:** Eye drops are used to enlarge your pupils, allowing a clearer view of the retina to check for signs of diabetic retinopathy. Your vision may be blurred for a few hours afterward, so avoid driving.
- **Retinal photography:** High-resolution images of the retina help document and monitor changes related to diabetic retinopathy.
- **Optical coherence tomography (OCT):** A non-invasive scan that provides cross-sectional images of the retina and macula. It can detect swelling or fluid that may indicate disease progression.
- **Fluorescein angiography:** If fluid or leaking blood vessels are suspected, your ophthalmologist may perform this procedure. A dye is injected into a vein in your arm, and a special camera captures images of the retina to highlight areas of leakage or poor blood supply.



Management and treatment

Managing controllable risk factors

To slow down the progression of diabetic macular oedema, it's important to manage your controllable risk factors.

- **Healthy lifestyle:** Regular physical activity helps insulin to work better, lowers blood pressure, and helps reduce weight, which are all important in reducing the risk of diabetic retinopathy and diabetic macular oedema.
- **Blood glucose:** People who have persistently high blood glucose levels are at risk of serious vision loss and blindness.
- **High blood pressure:** People with diabetes and high blood pressure are more likely to experience faster progression of diabetic macular oedema.
- **Blood lipids:** Elevated blood lipids, including cholesterol, can be managed with diet and in many cases medication.
- **Smoking** causes damage to blood vessels in the body, including the eye, and also increases the risk of developing cardiovascular disease and other long-term health conditions.

Treatment

Intravitreal (eye) injections are now the mainstay of treatment for diabetic macular oedema and have greatly improved the chances of preventing major vision loss from diabetic macular oedema, especially if it is caught early.

An eye injection involves the injection of a treatment into the eye, usually a medication that acts against vascular endothelial growth factor (VEGF), often referred to as anti-VEGF injections. Anti-inflammatory steroids are also injected in some cases. For many people, these injections can stabilise or even improve vision.

It's important to know that eye injections usually need to be repeated often, sometimes every month, for many months to ensure the best outcomes.

In some cases, laser treatment may also be used.

Treatment frequency and duration varies depending on individual needs.

DIABETIC MACULAR OEDEMA

Monitoring

In between check ups it is important to monitor any changes to the macula at home using an Amsler grid (which you will find in this pack). If you notice any new symptoms or any changes in your vision, make an appointment to see your eye health professional as soon as possible.

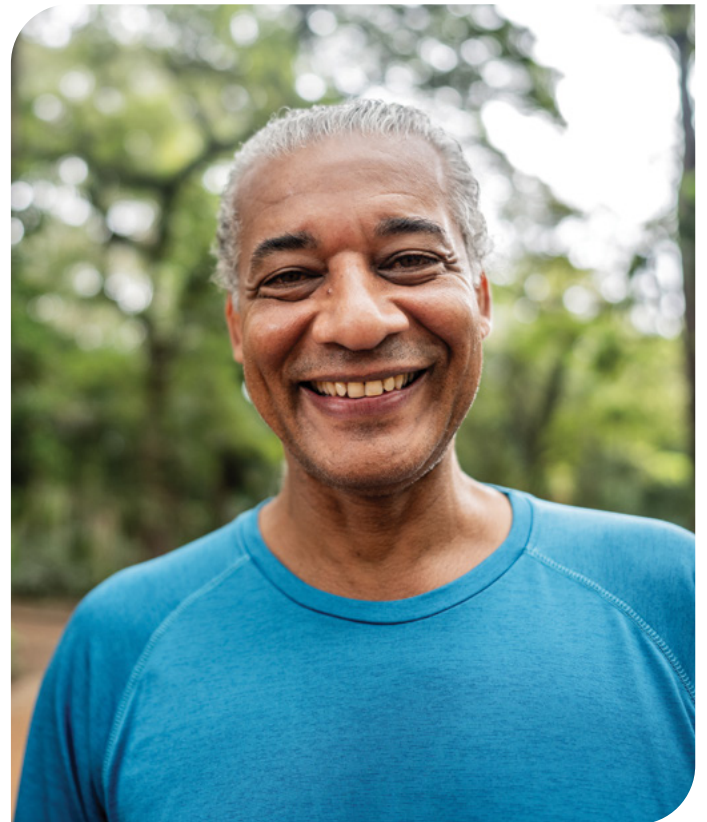
Even if your macula oedema improves or resolves, it's vital to keep managing your diabetes and attend regular eye exams. Remember diabetic macular oedema is a complication of diabetic retinopathy, which still needs to be monitored. We will be sending you information on diabetic retinopathy in the future, but if you'd like more information sooner, please get in contact with our team.

KeepSight

KeepSight is a national diabetes eye screening program encouraging people with diabetes to get their eyes checked.

By registering with KeepSight, you'll receive important information and alerts. You can sign up for KeepSight at www.keepsight.org.au.

Help is available. Diabetes is a long-term, complex health condition requiring multidisciplinary care. A diabetes care team may include your general practitioner or endocrinologist, diabetes educator, podiatrist, eye health professional (optometrist and/or ophthalmologist), and dietitian.



Need more information?

Contact us today.

T 1800 111 709 (free call)

E info@mdfoundation.com.au

W www.mdfoundation.com.au

Disclaimer: Information in this publication is considered by Macular Disease Foundation Australia to be accurate at the time of publication. While every care has been taken in its preparation, medical advice should always be sought from a doctor and individual advice about your eye health should be sought from your eye health professional. MDFA cannot be liable for any error or omission in this publication or for damages arising from it, and makes no warranty of any kind, either expressed or implied in relation to this publication.