

## **Fighting Back Age-Related Eye Diseases**

By Lindsay Woolman, Featured in *South Coast Health Magazine*, 2008

Age-related eye diseases are the leading causes of visual impairment and blindness in the United States. Macular degeneration and cataracts are the leading causes. According to the National Eye Institute, approximately 1.7 million Americans suffer from macular degeneration and 1.5 million suffer from cataracts. Years ago, most people with age-related vision loss were limited in their treatment options. In recent years, however, improvements in eye care have allowed more Americans to keep their sight or prevent it from worsening.

For the past 28 years, South Coast Medical Center has been fortunate to have the expertise of Andrew Henrick, M.D. Dr. Henrick is a general ophthalmologist and oculoplastic surgeon. An ophthalmologist is a physician who specializes in the medical and surgical care of the eyes and visual system and in the prevention of eye disease and injury. An oculoplastic surgeon is one who performs cosmetic, corrective, and reconstructive surgery of the tissues or structures surrounding the eye, such as eyelids and tear ducts.

Dr. Henrick explains how macular degeneration, cataracts and glaucoma – another leading cause of vision impairment – affect aging Americans. While there is no cure for these diseases, there have been significant advancements in the past few decades.

### **Macular Degeneration**

Macular degeneration, also known as age-related macular degeneration (AMD), is the number one leading cause of blindness in people over age 60. This disease destroys the sharp, central vision and sufferers experience blurry or blind spots. AMD affects the macula, the part of the eye that allows people to see fine detail. The most common type of AMD is *dry* macular degeneration, when the cells within the macula gradually deteriorate. The other type, *wet* macular degeneration, occurs when there is abnormal, leaky blood vessel growth under the retina, causing more rapid vision loss.

“The latest and greatest new treatment for the prevention of blindness is injecting directly into the eye an antibody of a hormone called vascular endothelial growth factor (VEGF),” explains Dr. Henrick. “The injections stop the growth of abnormal blood vessels in patients who

have *wet* macular degeneration. The injections have made a big difference, not just in preventing worsening, but also in many instances *improving* vision.” The injections for wet macular degeneration are typically given once a month until vision stabilizes, then less frequently.

Unfortunately, the anti-VEGF treatment does not work for *dry* macular degeneration or for other eye diseases that do not show symptoms of abnormal blood vessel growth.

## **Cataracts**

People with cataracts experience a clouding in the natural lens of the eye. Typical symptoms include blurry, cloudy or foggy vision, lights appearing too bright, frequent changes in prescription glasses, and changes in the perception of colors. There are also optical changes that occur, such as becoming more near sighted or having a condition called second sight, where there is a temporary improvement in reading vision. When a cataract is in a more advanced stage, it will appear as if a person is looking through a waterfall. In fact, the word cataract is a Greek word, meaning waterfall.

Thirty years ago, patients who had cataracts were limited to wearing thick “coke bottle” glasses after surgery. Back then, the artificial intraocular lens was just beginning to be implanted and the surgery was more risky. These days, cataract surgery is the most common surgery billed to Medicare in the U.S. with over 2 million done each year. This procedure involves implanting a clear artificial lens into the eye, allowing the patient to see more clearly.

Since cataracts progresses so slowly, many patients are treated with stronger prescription glasses or contacts in the early stages. Dr. Henrick explains, “At some point, when glasses no longer help and the patient’s lifestyle is compromised, then surgery can be considered to remove the natural lens of the eye, which is a cataract extraction, and replace it with a clear plastic lens implant.” Due to the high success rate of the surgery, more patients are being given this option.

## **Glaucoma**

Glaucoma is many different diseases, but they all have the same end result: damage to the optic nerve causing a loss of peripheral vision with eventual tunnel vision and even blindness. The most common type is primary open-angle glaucoma.

“Primary open-angle glaucoma is a disease of decades, and it is silent,” says Dr. Henrick. By the time patients are aware of visual field loss, they’ve lost a huge amount, probably 90% of their optic nerve.” Early detection by an ophthalmologist is especially important because there are treatments to prevent this disease from worsening. Another form, angle-closure glaucoma results from a rapid increase in eye pressure. Patients with this condition experience a rapid decrease in vision with redness and severe pain in the affected eye. This condition requires immediate treatment to prevent permanent vision loss.

People in the early stages of primary open-angle glaucoma may prevent serious vision loss by the use of prescription eye drops that help to lower the baseline pressure of the eye. Other treatments include laser trabeculoplasty, a procedure that helps drain fluid out of the eye, incisional surgery, or a combination of these treatments. While these measures may save remaining vision, they do not improve sight already lost from glaucoma.

### **Prevention**

Dr. Henrick points out that there are steps a person can take toward prevention of these diseases. The recommendations are to always wear ultraviolet (UV) protective glasses outside, eat lots of dark green leafy vegetables, exercise regularly, and eat plenty of fatty fish or take fish oil supplements. But the most important step in prevention of vision loss from eye disease is regular examinations by an ophthalmologist. Children should have an eye exam prior to starting school at age 5, and thereafter as recommended by the ophthalmologist. After age 40, an exam should be done every two to three years if there are no diseases. After age 65, it is recommended to have an exam every year.

Surprisingly, in many cases these diseases do not affect vision until they are in a more advanced state. An early diagnosis could make the difference between a person keeping their sight vs. facing a more serious problem. The ophthalmologists at South Coast Medical Center are here to provide high quality, state-of-the-art treatment. Eyesight is a precious commodity, so why not give it the best care?