People With Diabetes Can Prevent Vision Loss

You can’t feel it. You can’t see it—until it’s too late. Diabetic retinopathy, the most common form of diabetic eye disease, is the leading cause of blindness in adults age 20–74. It occurs when diabetes damages blood vessels in the retina.

Diabetic retinopathy affects 7.7 million Americans, and that number is projected to increase to more than 14.6 million people by 2030.

The longer a person has diabetes, the greater the risk for diabetic eye disease. Once vision is lost, it often cannot be restored.

People with diabetes should have a comprehensive dilated eye exam at least once a year to help protect their sight.

Keeping diabetes in control is key to slowing the progression of vision complications like diabetic retinopathy. There are important steps people with diabetes can take to keep their health on TRACK:

- Take your medications as prescribed by your doctor.
- Reach and maintain a healthy weight.
- Add physical activity to your daily routine.
- Control your ABC’s—A1C, blood pressure, and cholesterol levels.
- Kick the smoking habit.

Early detection, timely treatment, and appropriate follow-up care can reduce a person’s risk for severe vision loss from diabetic eye disease by 95 percent.

Dr. Paul Sieving, director of the National Eye Institute (NEI), says, “Only about half of all people with diabetes get an annual comprehensive dilated eye exam, which is essential for detecting diabetic eye disease early, when it is most treatable. Newer and better treatments are available for the first time in decades, making early detection even more important.”
With no early symptoms, diabetic eye disease—a group of conditions including cataract, glaucoma, and diabetic retinopathy—can affect anyone with type 1 or type 2 diabetes. African Americans, American Indians/Alaska Natives, and Hispanics/Latinos are at higher risk for losing vision or going blind from diabetes.

“More than ever, it’s important for people with diabetes to have a comprehensive dilated eye exam at least once a year. New treatments are being developed all the time, and we are learning that different treatments may work best for different patients. What hasn’t changed is that early treatment is always better,” says Dr. Suber Huang, chair of the Diabetic Eye Disease Subcommittee for NEI’s National Eye Health Education Program (NEHEP) and member of the NEI-funded Diabetic Retinopathy Clinical Research Network (DRCR.net). “There has never been a more hopeful time in the treatment of diabetic retinopathy,” he adds.

Remember, if you have diabetes, make annual comprehensive dilated eye exams part of your self-management routine. Living with diabetes can be challenging, but you don’t have to lose your vision or go blind because of it. To help friends and loved ones reduce their risk, please share this article.

For more information on diabetic eye disease, tips on finding an eye care professional, or information on financial assistance, visit https://www.nei.nih.gov/diabetes or call NEI at 301–496–5248.

NIH leads the federal government’s research on the visual system and eye diseases. NEI supports basic and clinical science programs to develop sight-saving treatments and address special needs of people with vision loss. For more information, visit https://www.nei.nih.gov/

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