

SCREENING AND MANAGEMENT OF EYE COMPLICATIONS

Complications: Retinopathy

- Diabetic retinopathy is the commonest cause of blindness in the 30-65 age group in the UK at the present time.
- Development or progression of retinopathy can be prevented by good glycaemic control, management of hypertension and avoidance of smoking.
- It is reasonable to aim for a target HbA1c of $\leq 7.0\%$ to limit development and progression of microvascular complications, including retinopathy.
- Laser treatment is indicated for proliferative diabetic retinopathy and maculopathy. It is more likely to be asymptomatic; therefore screening for retinopathy is vital.
- Laser therapy is not always effective in all patients.
- Retinopathy may be present in up to a third of newly diagnosed type 2 diabetic patients.
- Some degree of retinopathy will also be present in the majority of patients who have had diabetes for more than 20 years, and a significant number, particularly if poorly controlled, will develop retinopathy at an earlier stage.
- In Lothian, all patients should have annual screening by fundoscopy performed by
 - Accredited Optometrists if they are primarily looked after by GPs
 - Patients attending hospital diabetes clinics will have their retinal photography taken by the retinal screeners and a quality assured grading from Lothian & Borders Regional Diabetic Retinopathy Grading Centre will be provided from January 2005.
 - The results of the grading will be communicated to the patients, GPs and diabetologists.
 - Those patients who attend the diabetic eye clinics under the supervision of Dr Ken Swa at PAEP, do not need to be screen either by the optometrists or at diabetes clinics.
- All patients who need to be referred to the ophthalmology clinics are to be initiated by
 - The Lothian Diabetic Retinopathy Screening Service.
 - The Accredited Optometrist according the referral criteria directly or via their GPs.
- All Patients should still attend the optometrists annually for their refraction i.e. to have their prescription check for the glasses. The examination is free for people with diabetes.
- All other ocular emergencies should be referred to Acute Referral Clinic at PAEP and St John's hospital by the usual way.
- It is envisaged that Optometry based retinopathy screening will cease by March 2006.

All patients should have their eyes examined at least annually for detection of diabetic retinopathy.

[\(Hyperlink added here to retinopathy screening flow chart\)](#)