Radio Production Guide

Diabetic retinopathy - importance of eye check ups and treatment for people with diabetes

1. Fact Sheet

What is diabetic retinopathy?

- Diabetic retinopathy is a condition that occurs as a result of damage to the blood vessels of the retina in people who have diabetes
- Diabetic retinopathy can develop if you have type 1 or 2 diabetes and a long history of uncontrolled high blood sugar levels
- While you may start out with only mild vision problems, you can eventually lose your sight

(Healthline)

Types of diabetic retinopathy

- **Nonproliferative diabetic retinopathy (NPDR)**
  - NPDR is also known as early diabetic retinopathy and is more common. It’s called “nonproliferative” because the eye doesn’t make new blood vessels during the early stages of diabetic retinopathy.
  - During the early stages of retinopathy, damaged blood vessels often leak blood and fluid into the eye. In some cases, the center of the retina, or macula, begins to swell. This causes a condition called macular edema.
  - The three stages of NPDR are mild, moderate, and severe, which may progress to the other type, or fourth stage, proliferative diabetic retinopathy.

- **Proliferative diabetic retinopathy (PDR)**
  - Proliferative diabetic retinopathy or advanced retinopathy, is the stage of retinopathy in which new blood vessels begin to grow within the retina. These new blood vessels are usually abnormal and grow in the center of the eye.

(Healthline)

Did you know?

- People with **untreated** diabetes are 25 times more at risk for blindness than the general population
● The longer a person has had diabetes, the higher the risk of developing diabetic retinopathy
● Fortunately, with regular, proper eye care and treatment when necessary, the incidence of severe vision loss has been greatly reduced
● If you have diabetes, your ophthalmologist can help to prevent serious vision problems
● If you are pregnant and have diabetes it is important to be seen by an ophthalmologist during your first trimester because pregnancy can accelerate the progression of diabetic retinopathy

(Kellogg Eye Center)

Symptoms of diabetic retinopathy:
● Blurred vision
● Sudden loss of vision in one eye
● Seeing rings around lights
● Dark spots or flashing lights
● Dark or empty areas in your vision
● Fluctuating vision
● Impaired color vision

While some of these symptoms may not necessarily mean that you have diabetic retinopathy, if you experience one or more of these symptoms, contact your ophthalmologist for a complete exam.

**IMPORTANT:** A child should be evaluated with a dilated eye exam by an eye doctor for diabetic retinopathy immediately after a diagnosis of diabetes and should be routinely examined per direction of your ophthalmologist.

(Kellogg Eye Center, Mayo Clinic, FamilyConnect)

What can be done!
Treatment is geared to slowing or stopping progression of the condition, and depends largely on the type of diabetic retinopathy you have and how severe it is.

● Early diabetic retinopathy - If you have mild or moderate nonproliferative diabetic retinopathy, you may not need treatment right away. However, your eye doctor will closely monitor your eyes to determine when you might need
treatment. Work with your primary doctor to determine if there are ways to improve your diabetes management.

- **Advanced diabetic retinopathy** - If you have *proliferative diabetic retinopathy*, you'll need prompt surgical treatment. The type of surgery the doctor recommends will depend on the specific issues with your retina. Surgery often slows or stops the progression of diabetic retinopathy, but it's not a cure. Because diabetes is a lifelong condition, future retinal damage and vision loss are still possible.

**Prevention** - You can't always prevent diabetic retinopathy. However, regular eye exams, good control of your blood sugar and blood pressure, and early intervention for vision problems can help prevent severe vision loss. If you have diabetes, reduce your risk of getting diabetic retinopathy by doing the following:

- **Manage your diabetes.** Make healthy eating and physical activity part of your daily routine. Try to get at least 150 minutes of moderate aerobic activity, such as walking, each week. Take oral diabetes medications or insulin as directed.
- **Monitor your blood sugar level.** You may need to check and record your blood sugar level several times a day — more-frequent measurements may be required if you're ill or under stress. Ask your doctor how often you need to test your blood sugar.
- **Ask your doctor about a glycosylated hemoglobin test.** The glycosylated hemoglobin test, or hemoglobin A1C test, reflects your average blood sugar level for the two-to-three-month period before the test. For most people, the A1C goal is to be under 7 percent.
- **Keep your blood pressure and cholesterol under control.** Eating healthy foods, exercising regularly and losing excess weight can help. Sometimes medication is needed, too.
- **If you smoke or use other types of tobacco, ask your doctor to help you quit.** Smoking increases your risk of various diabetes complications, including diabetic retinopathy.

Remember, diabetes doesn't necessarily lead to vision loss. Taking an active role in diabetes management can go a long way toward preventing complications.

**(Mayo Clinic)**

**Resources**

- [What is diabetic retinopathy?](#)
- [Diabetic retinopathy: symptoms and causes](#)
- [What causes diabetic retinopathy?](#)
Vision Facts about Children with Diabetes
Remember to check out local resources: newspapers, community-based organisations and medical providers!

2. Mini Radio Guide and Formats

Preparing for the show

Different ways to talk about diabetic retinopathy
- Ways to identify signs and symptoms of diabetic retinopathy
- Causes and types of diabetic retinopathy
- How to treat and prevent diabetic retinopathy
- Myths and traditional remedies

Choose an angle

-----> Ways to encourage prevention and treatment of diabetic retinopathy

Different ways to talk about encouraging prevention and treatment of diabetic retinopathy
- What are the signs of diabetic retinopathy?
- What to do when you or someone you know is experiencing symptoms
- Where do you go for examines and treatment?

FORMATS

Interview

Interviews aim: To ask the interviewee/s questions and have a discussion around the show topic. Keep an eye on the time! Try to keep interviews to about 6 minutes.

Who do you talk to: An eye doctor or doctor from a local clinic
Suggested questions for your interview with someone who knows about diabetic retinopathy and eye health (local eye doctor, clinic doctor or nurse):

★ What is diabetic retinopathy?
★ What are the symptoms of diabetic retinopathy?
★ Can children and youth get diabetic retinopathy?
★ What are signs of diabetes and diabetic retinopathy in babies and children that adults can look out for?
★ What are the consequences of babies and children not being treated for diabetic retinopathy early?
★ What are the procedures to treat diabetic retinopathy in babies and children?
★ What are the procedures to treat diabetic retinopathy in adults?

Please see interview questions in “How to present your show”

PSA

The aim of a PSA: To create a public awareness message. Keep your PSA short and sweet! Allot about 30 seconds and do not exceed 45 seconds for a PSA.

Voice 1: Joseph! Are you ready to go to the eye doctor?
Voice 2: [Groans] But, Mom, why do I have to go? I can see fine!
Voice 1: My darling, we’re going to the eye doctor because after your doctor’s appointment this week we learned that you have diabetes. That puts you at risk of diabetic eye diseases. Now that doesn’t mean you’ll definitely get those diseases. But we want to make sure you’re getting regular check ups to keep you and your eyes healthy!

Character: If your child is diagnosed with diabetes, schedule a complete eye examination with your eye doctor as soon as possible and at least once a year thereafter. Your eye doctor will recommend more frequent eye examinations if needed. Remember, permanent vision loss can be prevented through a combination of early detection, treatment, and good control of diabetes.