



What's New in Ophthalmology Today?

Blood Sugar Levels and Diabetic Retinopathy

“Individuals who have higher blood glucose levels and poorer control of those levels over time (as measured by their HbA1c levels which is a measure of the blood glucose levels over time) appear more likely to develop eye-related complications (diabetic retinopathy) 10 years later” according to *Science Daily*.

The question is: what are the threshold numbers? There are patients who develop diabetic retinopathy that do not have “diabetes” as measured by their blood glucose levels. From this we conclude that there are other factors that contribute to the risk of developing diabetic retinopathy.

Pascale Massin, MD, PhD et al, presented an important paper this month's *Archives of Ophthalmology*. A group of 700 men and women, average age 52, were monitored for blood sugar and HbA1c levels. “(One third) had diabetes (defined as being treated for diabetes or having a blood glucose level of 126 or higher at least once; (one third) had impaired fasting glucose levels (110-125); and (one third) always had glucose levels within normal limits (less than 110).”

5% of the group developed diabetic retinopathy by year 10 of which almost 10% were diabetics, 10% impaired, and 1% were normal. Those who developed retinopathy had started the study with levels higher than the group's average.

They proposed a threshold of 108 for fasting blood sugar and HbA1c of 6.0. All patients above that number at the outset have the same higher risk of developing diabetic retinopathy after a decade. Yearly eye examinations are crucial for patients with Diabetes Mellitus as well as those with “impaired fasting glucose” levels as well. Please schedule yours with your eye doctor.

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