

# Macular Degeneration



THE COLLEGE  
OF OPTOMETRISTS

# Overview

The macula is an area at the back of your eye that you use for seeing fine detail such as reading a book. Macular degeneration (MD) covers a number of conditions which affect the macula. The conditions affect your ability to do certain tasks such as reading and watching television, but do not affect your ability to walk around as your side vision is not affected.

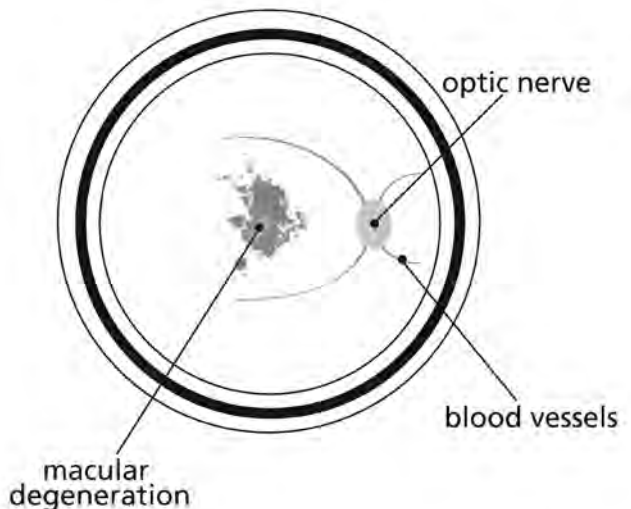
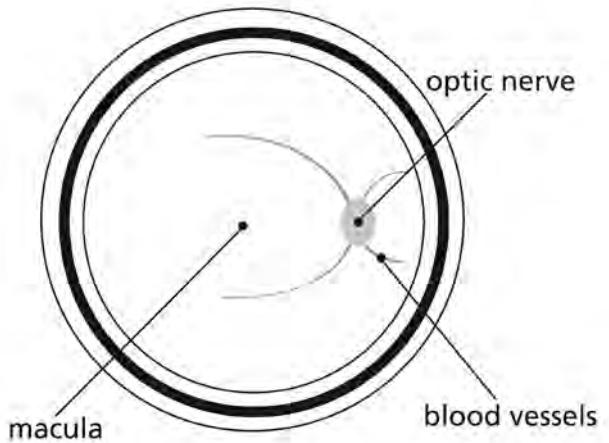
One of the most common symptoms of MD is noticing that straight lines appear wavy. You may not notice this if it happens in one eye as your other eye will compensate, so it is important to regularly check your vision in each eye separately. You can do this by looking with each eye separately at the straight lines on a door frame or venetian blind. If you notice the lines are distorted, you should see your optometrist straight away.

If you have any concerns about the health of your eyes please visit your local optometrist. Optometrists are the eye-health specialists on the high street. An eye examination is a vital health check and should be part of everyone's normal health care.

### What is macular degeneration?

Macular degeneration (MD) happens when the macula at the back of the eye becomes damaged. This can make it harder to see fine detail, such as recognising faces or to read or watch television. However, this does not normally affect your ability to walk around as the edge of your vision should not be affected.

*“Harder to see fine detail such as recognising faces or reading or watching television, but does not normally affect your ability to walk around”*



### **Does it cause blindness?**

MD is the leading cause of blindness in the UK. However, most people with MD still have their peripheral (side) vision and so can see well enough to get around. However, they may not be able to see well enough to read without strong magnification.

### **Does it happen more as you get older?**

The most common forms of MD happen more as you get older and are known as age-related MD (AMD). Around one in 10 people aged 65 or older show some signs of MD. Some younger people may have MD caused by a genetic condition but this is less common than AMD.

Normal Vision



Early stages of wet AMD



Advanced stages of AMD (wet and dry)



## Can I do anything to protect myself from getting AMD?

Smoking is known as a major risk factor for developing MD so if you smoke try to stop. It is also believed that having a diet that is rich in oily fish and coloured fruit and vegetables (for example, kale, broccoli and prunes) may reduce your risk of developing MD.

Other factors that increase your risk of developing MD include having a family history of the condition, obesity and having blue eyes. It also happens more in white people and is slightly more common in women than men. It is possible that exposure to ultraviolet light may be linked to MD so we recommend that you wear UV-absorbing glasses when you are going to be outside for long periods.

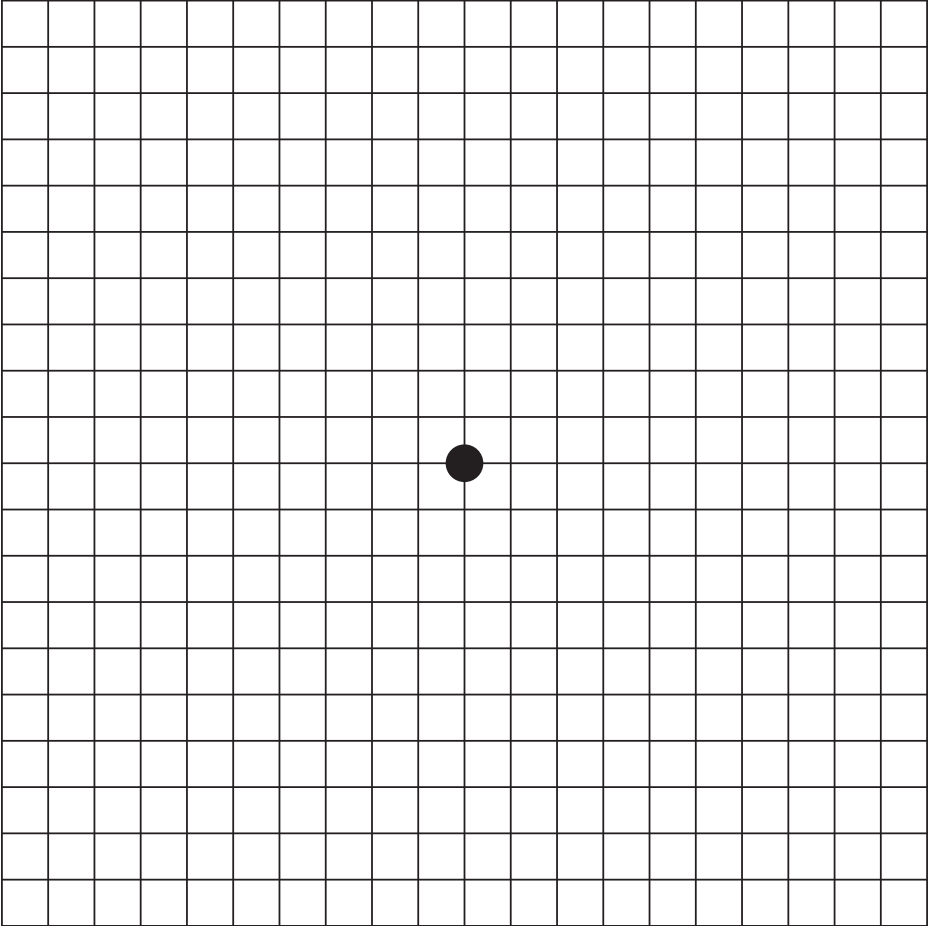
*“a diet rich in oily fish and coloured fruit and vegetables may reduce your risk of developing macular degeneration”*

## I have heard that AMD can be 'wet' or 'dry' – is this right?

**Dry MD** is much more common than wet MD and is when yellow deposits, known as drusen, build up behind the macula. This may, in time, affect your vision, though this normally happens slowly. No treatment has yet been developed for dry MD.

**Wet MD** happens when abnormal blood vessels begin to grow behind the macula and leak fluid. This pushes the macula away from its blood supply at the back of the eye and causes a rapid loss of vision. It is usually associated with you noticing distorted vision (straight lines become wavy, or you have a blank spot in the centre of your vision). You can check this yourself by looking at straight lines such as door and window frames or venetian blinds. Or, you can look at a grid of squares printed on paper, called an Amsler chart. Your optometrist will be able to advise you on this. It is important to do this with each eye separately and while wearing your glasses, if you need them. **If you notice these symptoms, you need to see your optometrist straight away.**

The Amsler chart





***“If you notice any changes to your vision it is important to act quickly. Rapid treatment could save your sight”***

### **The Amsler test**

- If you wear reading glasses or contact lenses, use them to do the test. Do not wear your varifocals or distance glasses for this test.
- Hold the chart about 30cm (12 inches) away from your face.
- Cover one eye, and look at the black dot in the middle of the chart. Are the lines all straight? Do you see any broken, wavy or blurred lines?
- Check the other eye.
- If lines are wavy, broken or missing, you should contact your local optometrist straight away.

## Is there any treatment for AMD?

There is currently no treatment for dry MD. If the dry MD is interfering with your ability to see fine details, your optometrist can advise you on special magnifiers which can help you. Organisations like RNIB or the local social services can provide you with equipment that can help you manage your day-to-day tasks. Your optometrist or GP will give you advice on contacting these services.

Wet MD can often be treated if it is caught early enough and this is normally done by injecting a drug into the gel inside your eye. This shrinks the new blood vessels that are pushing the macula away from the back of your eye. You may need to have this repeated every few weeks for a few months. This will be provided on the NHS. It is important to spot any changes early by checking the vision in each eye separately and contacting your optometrist immediately if your vision suddenly becomes distorted or you have a blank spot in your vision.

If you have wet MD, your optometrist will refer you to a specialist eye doctor, known as an ophthalmologist. The ophthalmologist will decide if you need special treatment by taking some special photographs of the back of your eye to show the thickness of the retina. They may also inject you in your arm with some special dye to see how this travels through the back of your eye, while taking a series of flash photographs of the inside of your eye.

***“Wet MD can often be treated if it is caught early enough and this is normally done by injecting a drug into the gel inside your eye”***

## After treatment

If you find you are struggling to see things because of poor vision, ask your doctor or optometrist for details of your local low vision service. RNIB can also give you advice on the help that is available. Contact the RNIB Helpline on 020 7388 2525 or 0845 766 9999

Email: [helpline@rnib.org.uk](mailto:helpline@rnib.org.uk).

Website: [www.rnib.org.uk](http://www.rnib.org.uk)

For support in your local area, and more information about MD contact the Macular Disease Society

Website: [www.macular-disease.org](http://www.macular-disease.org)

Tel: 0845 241 2041

**For more information please talk to your local optometrist.** This leaflet is produced by The College of Optometrists. We are the professional, scientific and examining body for optometry in the UK. People who are our members agree to meet the highest clinical and ethical standards. Look for the letters MCOptom or FCOptom to see if your optometrist is a member.

Please visit [www.lookafteryoureyes.org](http://www.lookafteryoureyes.org) for more information.

This information should not replace advice that your optometrist or relevant health professional would give you.

Your local optometrist:

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