

## Eye Health: Expert Interview with Dr. Kevin Blinder

“Regardless of your A1C, you need an annual diabetes eye exam,” says Ophthalmologist, Dr. Blinder.

“We start diabetes eye exams in young children with diabetes because we want to instill how important it is,” explains **Kevin Blinder, MD**, ophthalmologist at The Retina Institute and professor of clinical ophthalmology & visual sciences at the Washington University School of Medicine.

“Even though it’s very unlikely we’d pick up anything at that young age, it’s about getting into the habit,” adds Blinder, who performs free eye exams for campers, counselors, and volunteers every year at the **American Diabetes Association®’s summer camp in St. Louis, MO.**

**Recent polls** indicate that one in four people are putting off their annual eye exams due to the COVID-19 pandemic. With how quickly your eye health can change, skipping your annual exam means potentially missing an opportunity to catch and treat the start of diabetes-related eye diseases.



“The most common cause of vision loss in people with diabetes is diabetic macular edema [DME],” explains Blinder.

DME is when the macula in your eye begins to swell as blood vessels leak fluid. The swelling and leaking fluid decrease your ability to see properly.

“Our goal is to try and stop the leaking vessels,” says Blinder. “In the old days, we did this with laser treatments, but it can leave a lot of scarring.”

Today, Blinder says anti-VEGF injections are now the first treatment method. They work by preventing the growth of leaky blood vessels and reducing the built-up fluid in both your retina and macula. Your eyes are thoroughly numbed before the procedure to make it as comfortable as possible.

Catching DME sooner rather than later is important, reminds Blinder. The more DME progresses, the less treatable it becomes.

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## Can an A1C below 7 percent prevent diabetes eye diseases?

“Ultimately, it’s a matter of time,” explains Blinder. “Even if you’re still managing your diabetes as best you can, the longer you’ve had diabetes, the more likely you are going to develop an issue in your eyes.”

Blinder refers to the well-known DCCT (Diabetes Control and Complications Trial) study that determined maintaining an A1C below 7 percent or 6.5 percent significantly delays and reduces your risk of developing diabetes-related eye complications.

“Approximately 80 percent of people with diabetes will develop some type of diabetic eye disease,” says Blinder. “It may be 40 years from now with good management, but regardless of your A1C, you should be scheduling eye exams every year.”

“But there’s something else going on that we don’t understand—when people who’ve had diabetes for 40 or 50 years have no signs of retinopathy. We don’t know why, and it’s rare.”

While the idea of having a doctor examine your eyes can be daunting, especially if a diagnosis is made and it requires further treatment, Blinder says the treatment options are evolving quickly.

“The sooner you come in, the sooner we can treat any issues and protect your vision.”