

What are the risk factors that increase the risk of developing retinopathy?

- Having diabetes for a long time
- Often having high blood sugar levels
- Having high blood pressure
- Having high blood cholesterol levels
- Having hereditary factors
- Being pregnant, in the case of type 1 diabetes

Take action to reduce your risk of developing retinopathy or slow down its progress!

- Keep your blood sugar within target levels as much as possible.
- Monitor your blood pressure and blood cholesterol levels.
- Exercise on a regular basis.
- Eat a healthy and balanced diet.
- Stop smoking or vaping, if applicable.
- Have your eyes checked regularly by an optometrist or a doctor.

Resources

Association des optométristes du Québec aoqnet.qc.ca

Ordre des optométristes du Québec ooq.org

Questions about diabetes?

InfoDiabetes Service 514-259-3422 1-800-361-3504 infodiabete@diabete.qc.ca





diabete.qc.ca

Diabetes Uuébec

Eye health and diabetes

Understanding diabetic retinopathy



What is retinopathy?

Retinopathy is a condition that affects the retina. The retina is the membrane found at the back of the eye. When struck by light rays, the retina allows you to see.

Diabetic retinopathy occurs when often high blood sugar damages the blood vessels feeding the retina. Abnormal blood vessels can also grow along the retina. These anomalies prevent the retina from doing its job properly and can impair vision.



Why take action?

Diabetes can cause eye damage without any symptoms. If the situation progresses and nothing is done, there is a risk of vision loss.



Diabetes is the main cause of vision loss among adults aged 65 and younger.

What are the main symptoms?

- Blurry vision that can vary from one day to the next
- Sudden double vision
- Dry eyes
- Change in colour perception
- Sudden appearance of multiple "floaters" with or without flashes of light
- Vision loss (very blurry, as if seeing through fog)

Consult an optometrist right away if a change occurs in your vision.



Normal view

Retinopathy



Cataracts



Glaucoma

Diabetes also increases the risk of developing glaucoma and cataracts.

How is retinopathy diagnosed?

The exam for detecting retinopathy is the back-of-the-eye exam that usually uses drops to dilate the pupils. The results of this eye exam must be interpreted by an optometrist or an ophthalmologist.

The back-of-the-eye exam is usually done as part of a comprehensive eye-health examination. This also enables any other diabetes-related problem to be detected, preventing significant vision loss as a result.

Eye exam schedule

	First exam	Follow-up
Type 1 diabetes	5 years after being diagnosed with type 1 diabetes, for people aged 15 or older	Every year or when recommended by a professional
Type 2 diabetes	When diagnosed with type 2 diabetes	Every year, every two years or when recommended by a professional
Pregnancy with type 1 or type 2 diabetes	Before conception	During the first trimester, as needed during the pregnancy and once during the post-partum year

How is retinopathy treated?

The main treatment for retinopathy is laser treatment of the blood vessels of the retina by an ophthalmologist. This generally helps reduce the risk of major vision loss.