

Save our Sight

Welcome to Save Our Sight 2008 the public awareness campaign for eye health.

In each year since 2002, the New Zealand Association of Optometrists has headed a month-long eye health promotion campaign called **Save Our Sight**. The fact that regular eye examinations can save our sight is the simple key message.

Aims of Save our Sight 2008

To communicate to New Zealanders that a regular eye examination by an optometrist can save their sight.

To communicate to New Zealanders that eye health is an essential part of maintaining personal health and wellbeing.

To educate people about the realities of living with low vision and ways that optometrists can help.

You only get one pair of eyes – look after them

More than 70,000 New Zealanders age 40 and older have glaucoma. At least half do not know they have it. Untreated, glaucoma will cause loss of sight.

Twenty-five thousand New Zealanders have already lost sight due to Age Related Macular Degeneration (ARMD) and a further 2,000 are developing the disease each year.

Smoking and dietary factors are related to the progression of the disease.

ACC process more than 17,000 claims for eye injury accidents most years. US analysis of hospital treatments for eye injuries indicates that around **90% of all eye injuries are preventable**.

Around **81,500 New Zealand adults and 13,200 children** are legally blind or have a sight impairment that cannot be corrected by glasses or contact lenses. Early detection and correction of sight problems in children is essential because development of the visual system is complete by the age of nine.

People need to:

- Stop smoking (whatever your age)
- Eat for eye health
- Remember that early detection saves sight – regular eye exams recommended

The symbol of the Save our Sight campaign is the variegated Tulip. The variegated Tulip signifies “Beautiful Eyes”.

Timeframe

The Save our Sight campaign runs for the month of August. This year there is a single theme of LOW VISION from which the messages about causes, early detection, eye health for life, and seeing your optometrist for regular eye exams all flow seamlessly.

Eye Health for Life. The focus is on the importance of protecting vision, from childhood to old age. The messages are about living with low vision and the links to depression, loss of independence, higher need for institutionalised care, and negative impact on general health.

Glaucoma. The message here is all about early detection and regular eye exams to avoid unnecessary loss of vision. Glaucoma is one of the leading causes of preventable blindness in the western world.

Diabetes and AMD. Key conditions associated with loss of sight have a major impact on our ageing population. Awareness of threats to sight will be highlighted together with the need for good vision as a basis for independent living. Life-long protection of eye health is a key message. People will be advised to eat for eye health and quit smoking. Smoking is the major preventable cause of the most common type of blindness in New Zealand.

Low vision aids. Focus on the opportunities of the Low Vision equipment kits funded by the Ministry of Health. This is an opportunity to let people in your community know they can trial a selection of low vision equipment and find what works best for them.

The NZAO has distributed kits to optometrists in most areas of New Zealand and National Office can provide contact details if you want to refer a patient to a practice that has a low vision trial kit.

Call the NZ Association of Optometrists for more information

CALL THE NZAO ON 04 473 2322



Fast Facts for Eye Health

Cataracts

These are the result of chemical changes in the lens of the eye and cause the clear lens to turn cloudy. Cataracts are the leading cause of vision loss.

Cause: Advancing age, heredity, injury, or disease.

Symptoms: Blurred or hazy vision, increased sensitivity to glare or the feeling of having a film over the eyes.

What you can do: Don't smoke and avoid over-exposure to bright sunlight.

Good News: Most people who undergo cataract surgery have significantly better vision afterwards. Optometrists can assess cataract and monitor the condition. At some stage surgery will be indicated but until then changes to spectacles or contact lenses can help people get the most out of their remaining eyesight.

Age-Related Macular Degeneration (AMD)

AMD is the leading cause of blindness and is caused by deterioration of cells in the macula (the part of the retina that is responsible for clear, sharp vision). Vision that is lost as a result of AMD cannot be restored.

Cause: Mainly heredity but smoking is also a contributing factor. There is increasing evidence that diet and high levels of exposure to bright sunlight may also play a part.

Symptoms: The gradual loss of ability to see clearly, distorted vision, a gradual loss of colour vision and a dark or empty area appearing in the centre of vision.

What you can do: Have regular eye examinations so as to be aware of any development of degenerative disease. Don't smoke. Eat a healthy diet containing fruits and vegetables high in vitamin C, vitamin E, beta-carotene, lutein and zeaxanthin. Keep overall fat intake low and eat lean meats and fish – omega 3 fatty acids are best. Milk, wholegrains and wheat germ will also provide zinc, which is also important. Smokers should avoid taking supplements containing beta-carotene but spinach is good for everyone.

Good News: There are now treatments for some forms of wet AMD and new research is pointing to treatments for the dry forms being developed as time goes on.

Glaucoma

Glaucoma NZ report that 10% of people over 70 will have glaucoma. Loss of vision occurs because of damage to cells in the retina.

Cause: The cause is not fully understood but high pressures in the eye and poor blood supply to the optic nerve are part of the condition. Genetics and age are also thought to be important factors.

Symptoms: Usually glaucoma progresses gradually and painlessly without symptoms. Rarely, glaucoma may occur rapidly with blurred vision, loss of side vision, coloured halos around lights and painful or red eyes.

What you can do: Have regular eye exams and if there is a family history of glaucoma see the optometrist for an eye examination every year. During the eye examination the optometrist will measure the internal pressure of both eyes and examine the health of the optic nerve.

Good News: If detected early, glaucoma can be managed and loss of vision prevented to a greater extent. Unfortunately, at least half the people with glaucoma are not having treatment because they do not know they have glaucoma. If glaucoma is not detected, it can lead to permanent blindness.

Diabetes related retinopathy

People with diabetes are at risk of blindness and loss of vision because of the disease. There are at least 200,000 people with diabetes in New Zealand.

Cause: Diabetes causes changes in the cells of the retina that result in weakness in the walls of the blood vessels. These tiny blood vessels at the back of the eye begin to bulge and leak oozing blood into the eye. Cellular changes can also cause fats and fluid to leak into the surrounding tissues. Resulting damage to the eyes can lead to permanent loss of vision.

Symptoms: Although there may be no obvious signs in the early stages of the disease as it progresses people will notice rapid changes in vision and may have difficulty in achieving stable vision. They may also experience sensitivity to glare and reduced night vision.

What you can do: It is important for people with diabetes to keep their blood glucose levels under control, maintain a healthy weight, and get regular exercise. They need to be enrolled in the annual diabetes get checked program and take part in yearly screening for eye disease. If eye screening is not available then they should see their optometrist every year for a full eye exam.

Good News: People who maintain a healthy lifestyle and control blood glucose levels are less likely to develop diabetes related retinopathy. With annual screening any threats to sight that do develop can be detected and treated promptly minimizing the risk of permanent loss of vision.

Eye injuries

20,000 New Zealanders suffer eye injuries each year. A significant proportion of these injuries cause severe visual impairment or even blindness.

Cause: 35-40% of the more severe injuries actually occur in the home and garden. Some injuries are caused by unexpected things like plants, twigs, pliers, screwdrivers and even lawnmowers! Many are also caused by more familiar risks such as sharp nail or metal fragments produced by DIY tools like hammers, chisels, electric saws. Chemical splashes from paint strippers, acids/alkalis or concrete may also produce blinding damage to the surface of the eye.

Symptoms: Pain and trauma.

What you can do: Around 90% of these accidental eye injuries could be prevented by the use of simple safety spectacles or goggles.

Good News: People with enthusiasm for do-it-yourself activity are coming to realise that losing an eye over it is a bit much. A good example is being set by the experts on DIY and home improvement shows on the television where safety glasses or goggles are always used.

Enhancing Low Visual Performance

Functional vision may be enhanced for the visually impaired person by:

- Increasing the image brightness [luminance]
- Increasing contrast [black/white]
- Enlarging the retinal image

Increasing the brightness of the image


As our hearing is reduced, we need more noise! Similarly visual function may be enhanced by stimulating the eye and optical system with a very bright image. Nobody can read in the dark, however the naturally aging eye needs more light to see as we get older. The lens of the eye gradually loses transparency. About twice the light is required by 50yrs of age, 3 times at 60yrs and maybe 10 times at 80Yrs. This is 'normal' - no pathology need be present.

Obviously it is wasteful cranking up the light levels 10 times brighter over the whole room. That why it is so important and efficient to consider task lighting as we get older.

Contrast

Contrast may be enhanced by photocopying or other electronic enhancement, or simply selecting media that is printed on good quality paper in black, bold font. Coloured/pastel print on poor quality paper such as newsprint should be avoided. Organisations providing services for the elderly including banks, Local Body Authorities and Government Departments, should be counseled to avoid funky information pamphlets and forms, cluttered with unnecessary graphics and information, with poor contrast and small fonts.

Magnification



When the eye practitioner is looking at strategies to assist the person with Low Vision, they begin carefully refracting the eyes to focus the image on the retina with the appropriate optical correction, either in the form of spectacles or contact lenses. Even if the central vision is severely affected a clear image on the peripheral retina may be appreciated.

If there are areas of the retina that have **relative** or **absolute** loss that cannot resolve the image even if it is in focus, then functionality may be assisted by magnification. This may be achieved by using:

- larger and bolder print,
 - optical magnification e.g. telescopic aids,
 - electronic magnification, or
 - focusing on the print at a close working distance.
- Your local optometrist can assist your patients with low vision to find the method that works best for them.

For the best care of your patients consider requesting an optometry report for detailed ophthalmic findings

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