

# DRY AGE-RELATED MACULAR DEGENERATION

## WHAT IS AGE-RELATED MACULAR DEGENERATION?

Age-related macular degeneration (AMD) is a deterioration of the macula, the central part of the retina, which allows us to read, drive, and recognize faces. AMD is the leading cause of irreversible, painless vision loss among people older than 50 years. Although AMD can lead to legal blindness, in some cases, it advances so slowly that those affected notice little change in their vision. Other patients may experience a faster disease progression. The vision loss is primarily central; peripheral vision is spare. Those who have advanced AMD in one eye are at especially high risk of developing it in the other eye.

## WHAT CAUSES DRY AMD?

The exact cause of AMD is poorly understood, but the condition develops as the eyes age. Research indicates that the development of AMD is related to a combination of factors, including a person's age, health, environmental exposures, and genetic predisposition.

## WHAT ARE RISK FACTORS FOR AMD?

Risk factors for AMD include age > 50 years, cigarette smoking, family history, Caucasian race, female gender, light iris color, far-sightedness, heart disease, high blood pressure, high cholesterol, sunlight exposure, low dietary fish intake, and obesity.

## WHAT IS DRY AMD?

AMD is typically classified as being one of two varieties - dry or wet. Each type affects vision differently and is therefore treated and managed differently. Most cases of AMD originate in the dry form, which is characterized by the aging of macular tissues. Byproducts of retinal metabolism collect under the retina in clumps known as drusen, which accumulate over time and interfere with the delivery of nutrients to the retina. The retina slowly begins to thin and sustains varying amount of damage in response to the drusen. This condition typically results in mildly decreased vision, although some people do experience moderate or even severe visual loss with dry AMD.

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## HOW IS DRY AMD DIAGNOSED?

Dry AMD is most often detected during a comprehensive eye exam by your eye care professional. Your retina specialist will examine the macula for signs of AMD (including drusen). Additional tests are often performed that further evaluate findings detected on clinical examination, such as optical coherence tomography (OCT) and fluorescein angiography (FA).

## HOW IS DRY AMD TREATED?

- **VITAMIN SUPPLEMENTS**—If your doctor notes signs of AMD during the exam, he or she is likely to recommend you start taking special eye vitamins that have been found to reduce the likelihood of disease progression and vision loss.
- **AMSLER GRID**—An Amsler grid is a square of horizontal and vertical lines. It is used at home daily as a tool to monitor your vision. If you notice any changes, such as missing squares or wavy lines, you should report these changes immediately to your doctor. Any slight change could signal the transition from the dry to the wet form of AMD.
- **LIFESTYLE CHANGES**—Patients are strongly encouraged to engage in lifestyle modifications such as a diet rich in leafy green vegetables, smoking cessation, weight loss, and tighter blood pressure control.

## HOW CAN I IMPROVE MY VISUAL ABILITY?

If you have experienced loss of vision from AMD, your eye care professional may refer you to a low vision specialist. He or she can recommend a combination of low vision services and devices that may help you make the most of your remaining vision.

Improving lighting and contrast while performing tasks is critical for patients with AMD. Adding magnification through the use of optical or electronic devices can also be extremely effective in maintain independence.

