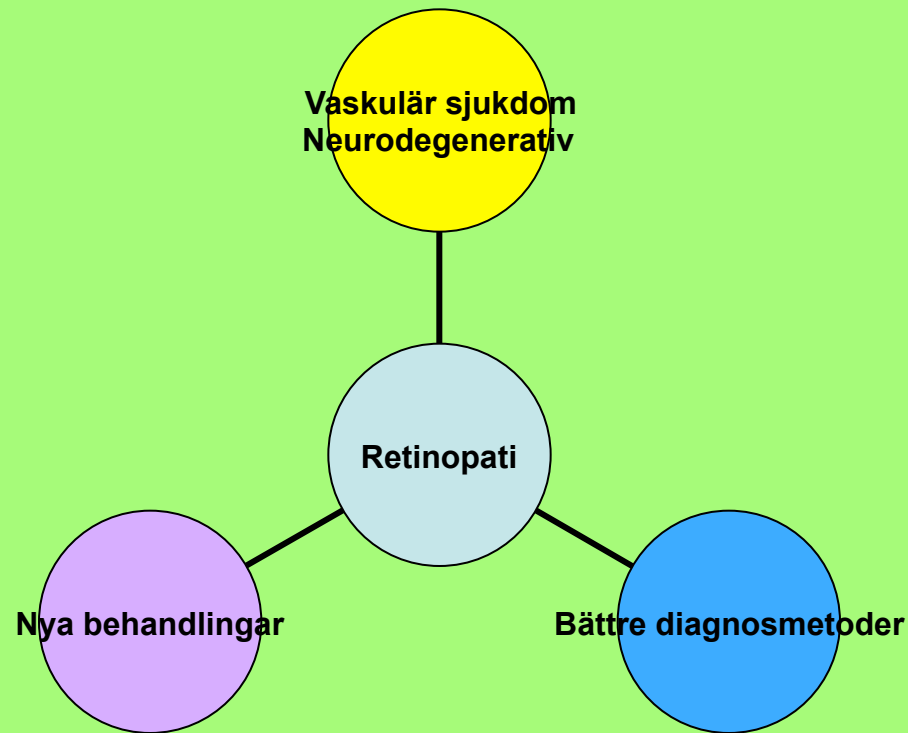
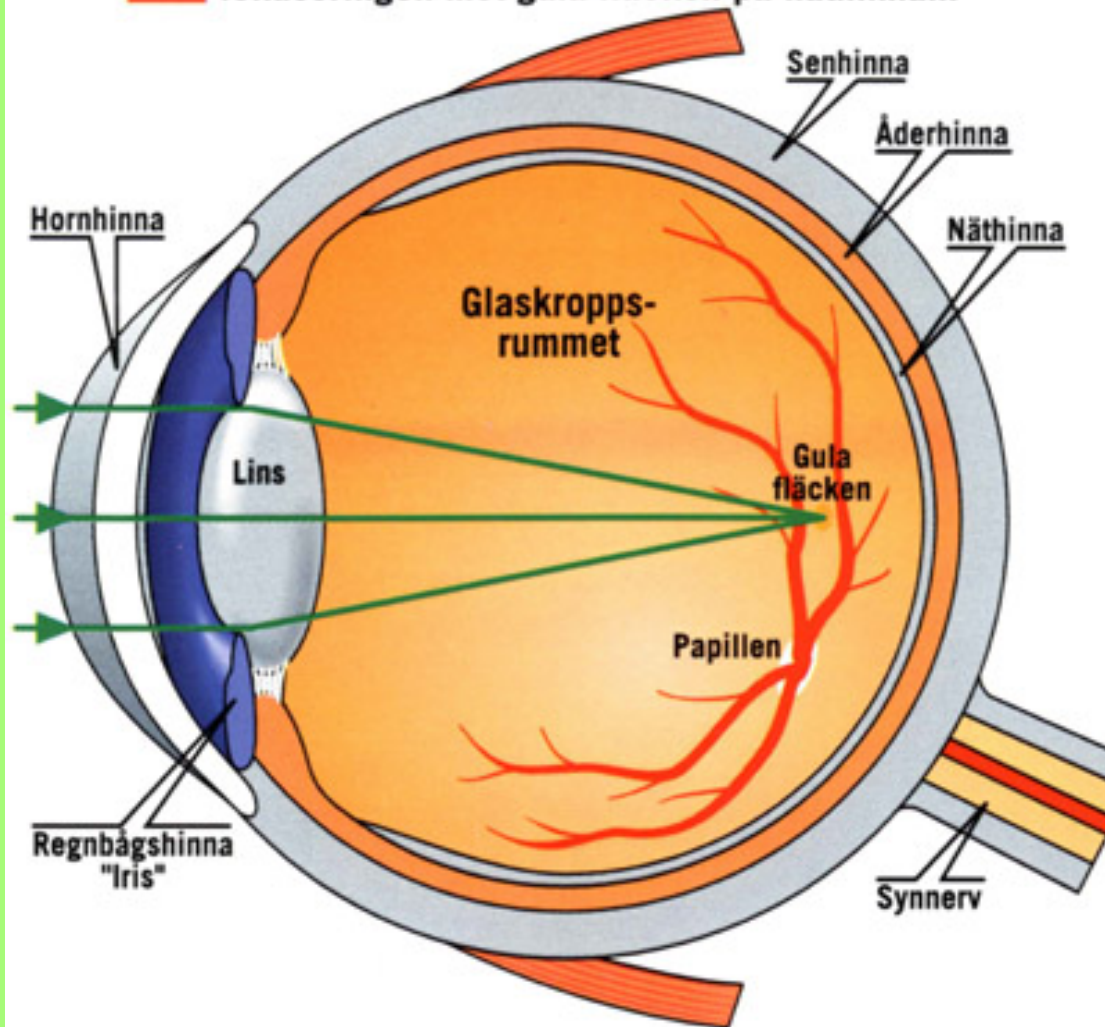


Diabetesretinopati idag-finns det något nytt?

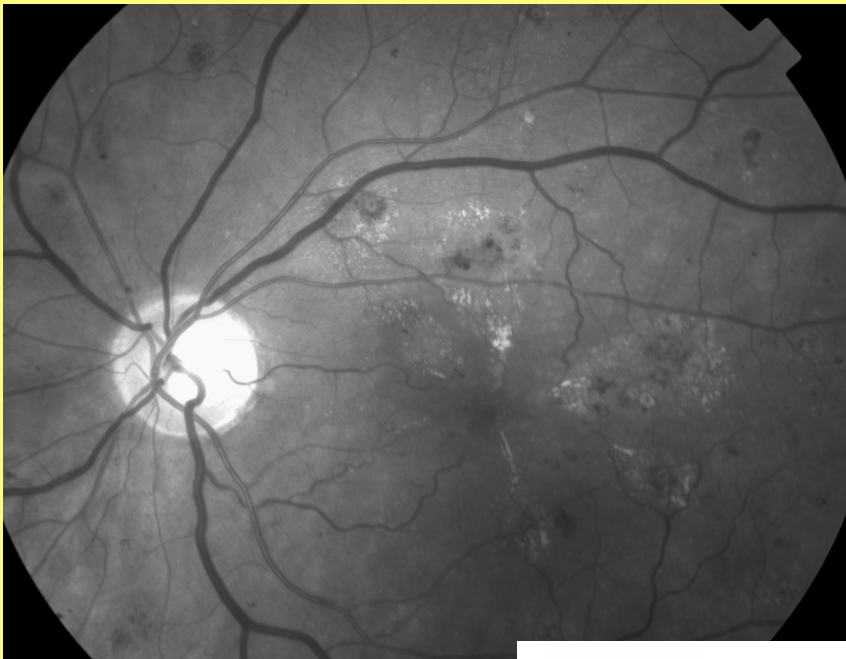


1 Ögat i genomsnitt visande ljusets väg och fokuseringen mot gula fläcken på näthinnan.

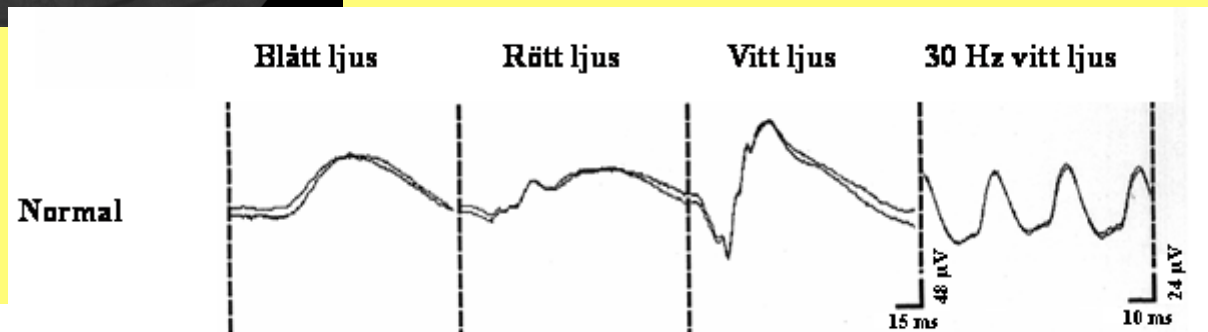


Hur mår syncellerna?

- Vaskulär sjukdom

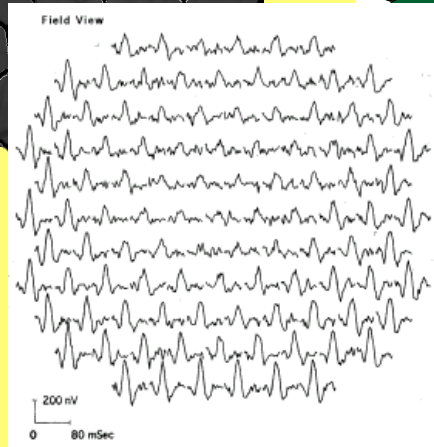
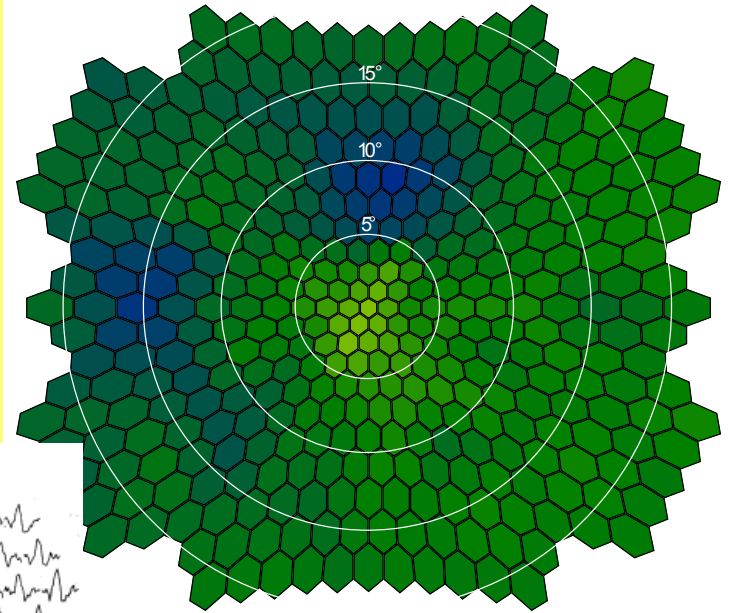
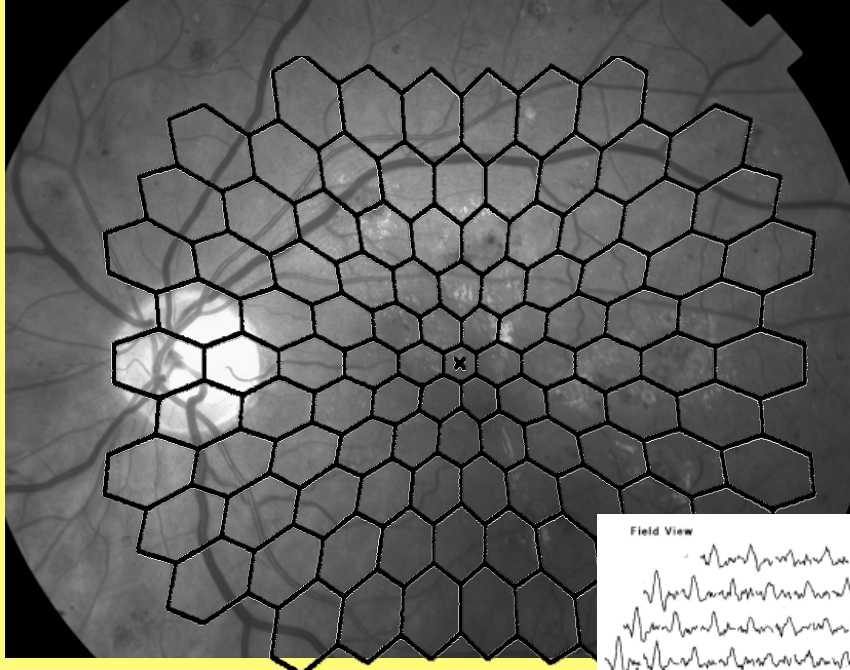


- Neurodegenerativ komponent???

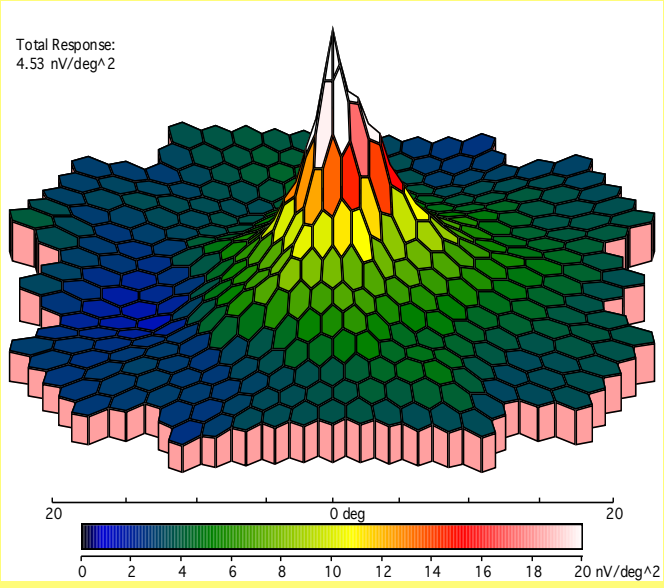
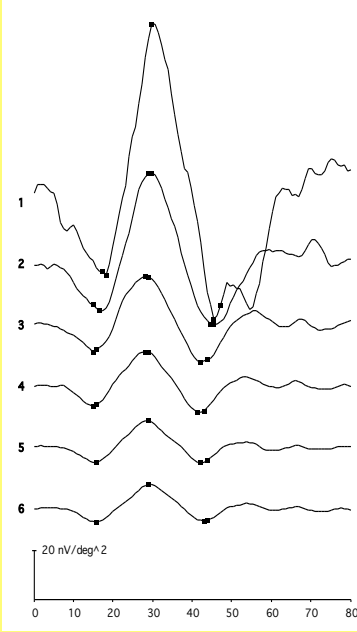
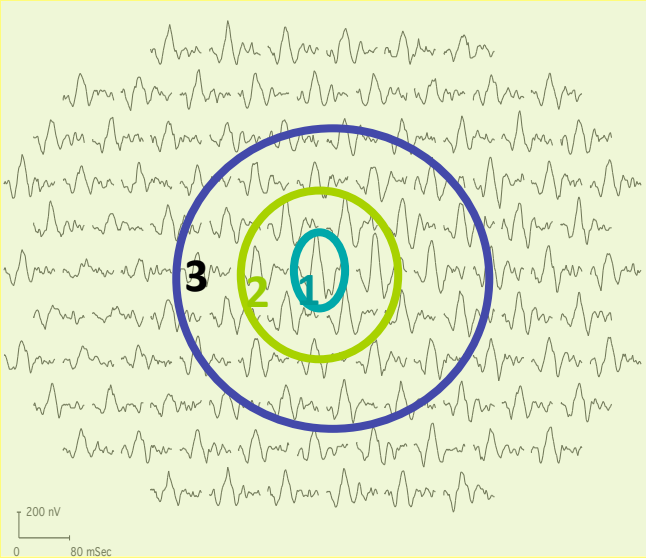


- Vaskulär sjukdom

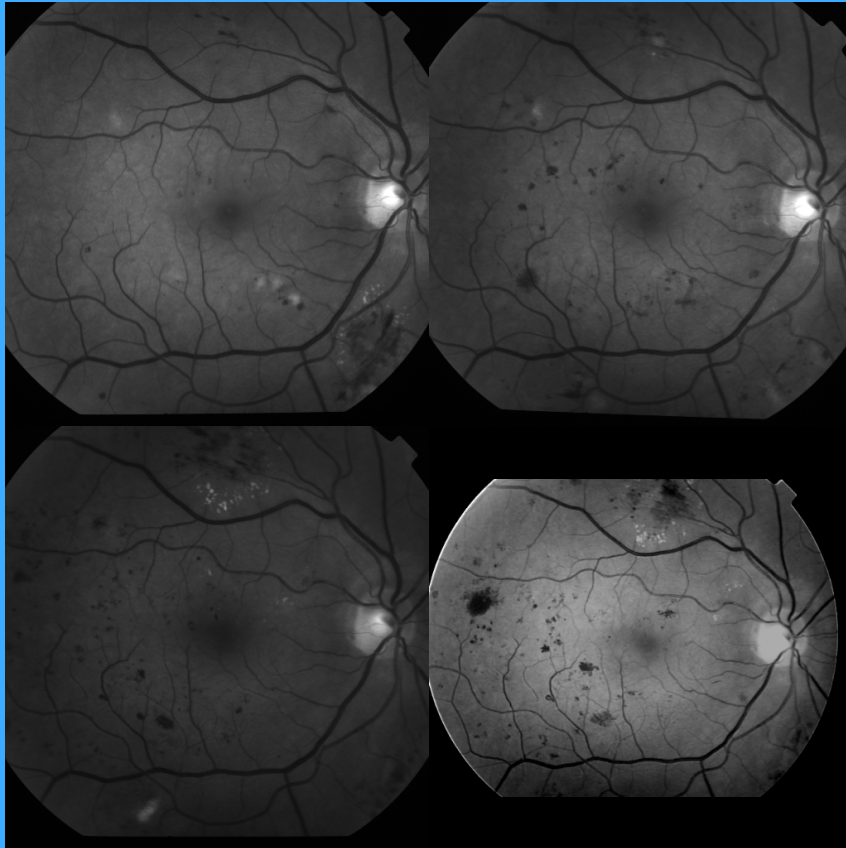
- Neurodegenerativ komponent



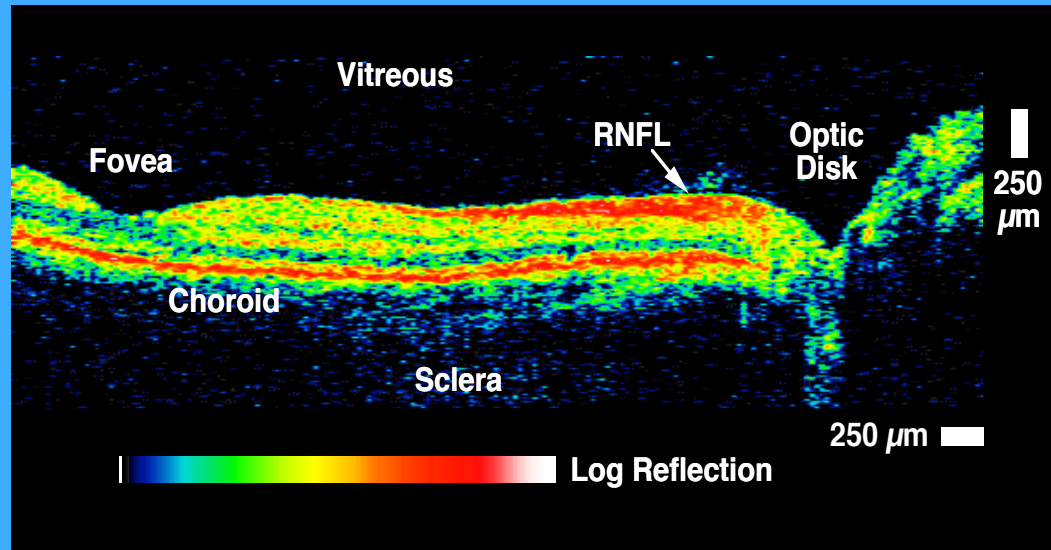
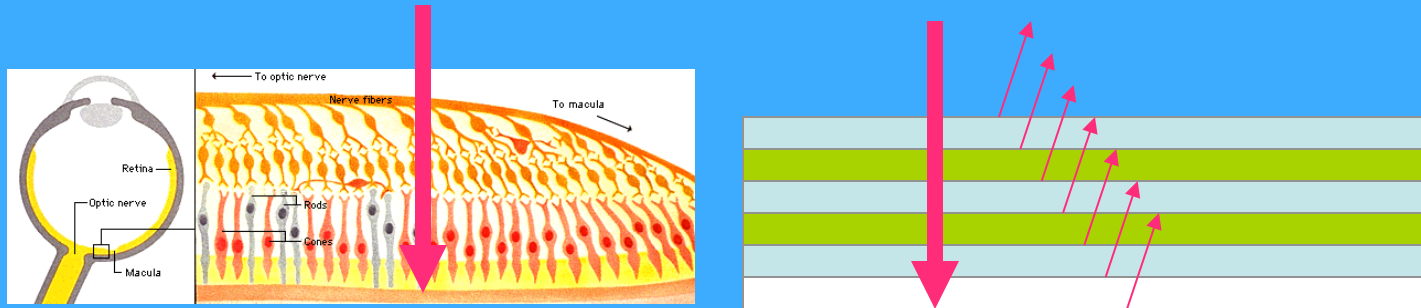
Metod: multifokal ERG



Bättre möjligheter att undersöka retina!

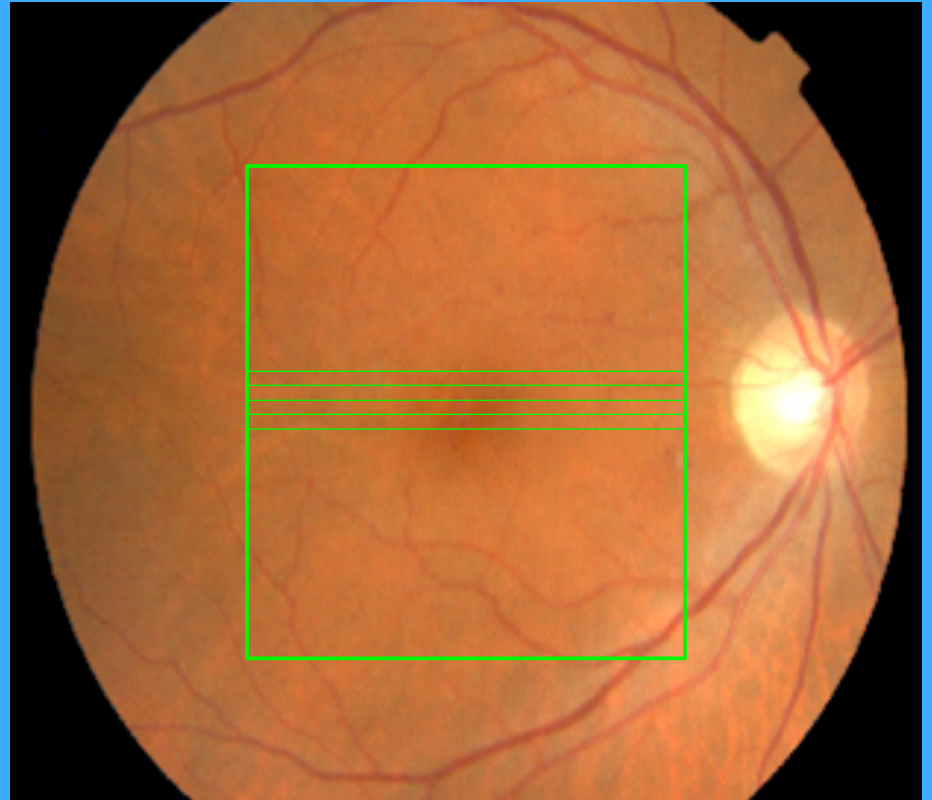
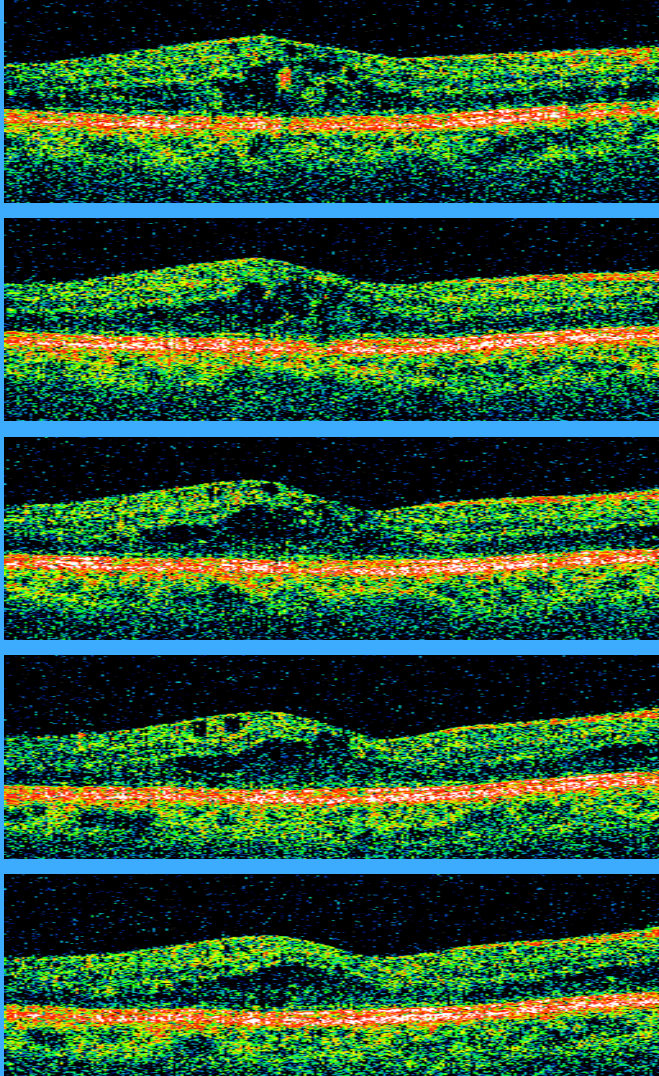


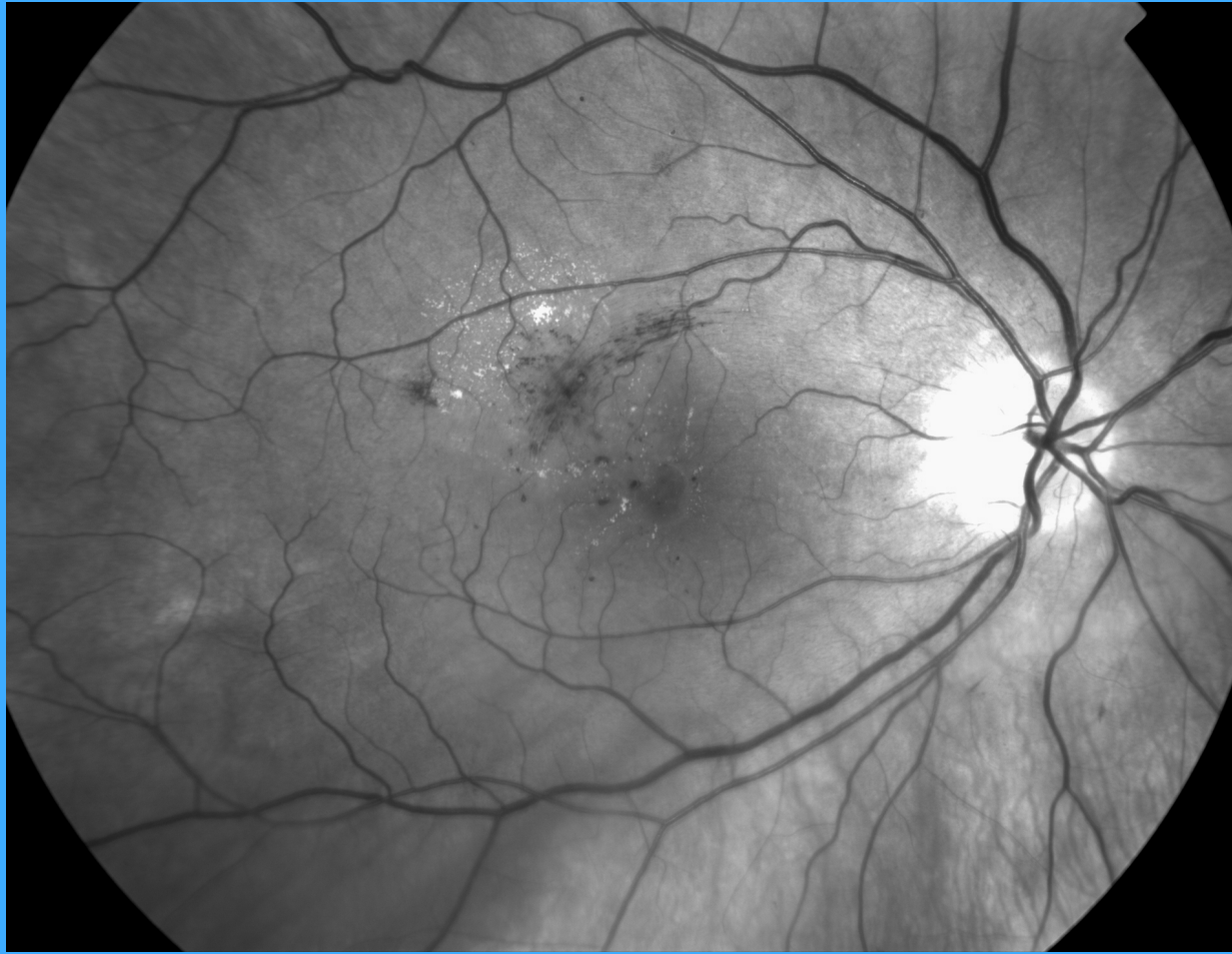
Principle of OCT



Optical coherence tomography image of the retina

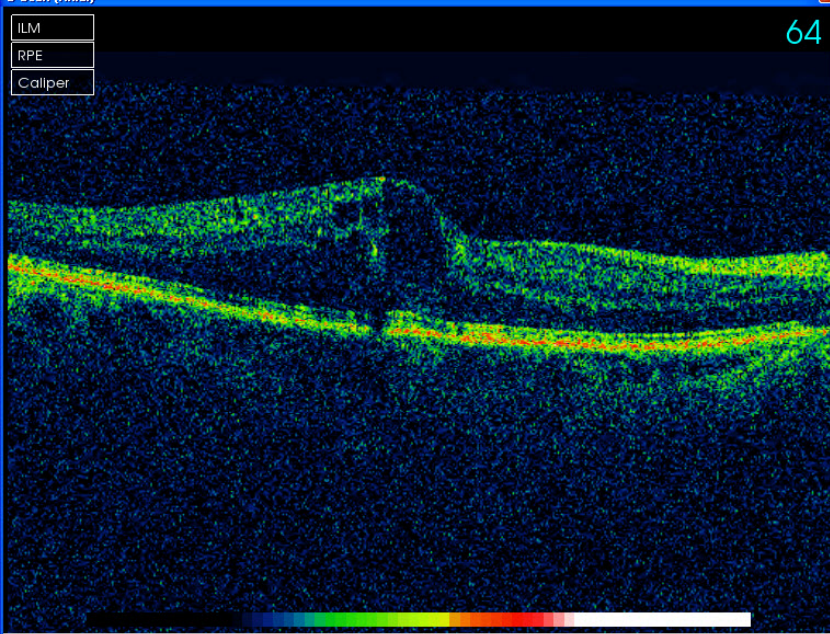
B-scans





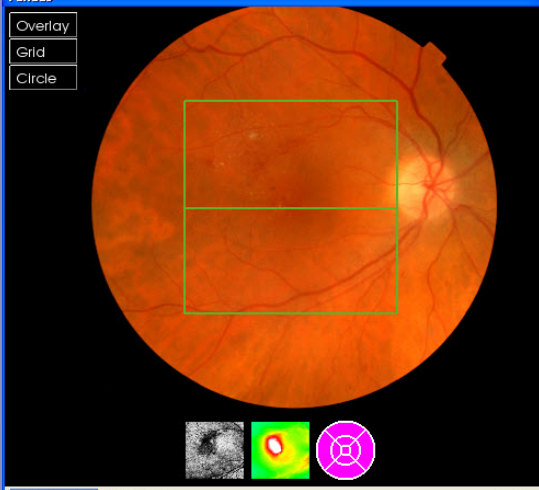
B-Scan (Axial) 64

ILM
RPE
Calliper



Fundus

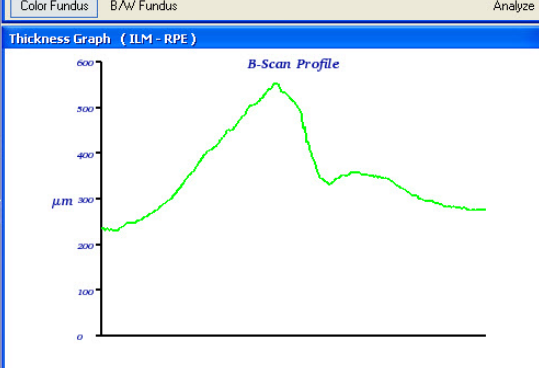
Overlay
Grid
Circle



Color Fundus B/W Fundus Analyze

Thickness Graph (ILM - RPE)

B-Scan Profile



Horizontal Position (µm)	Thickness (µm)
0	250
100	350
200	450
300	550
400	350
500	380
600	350
700	300
800	280

Graph Map

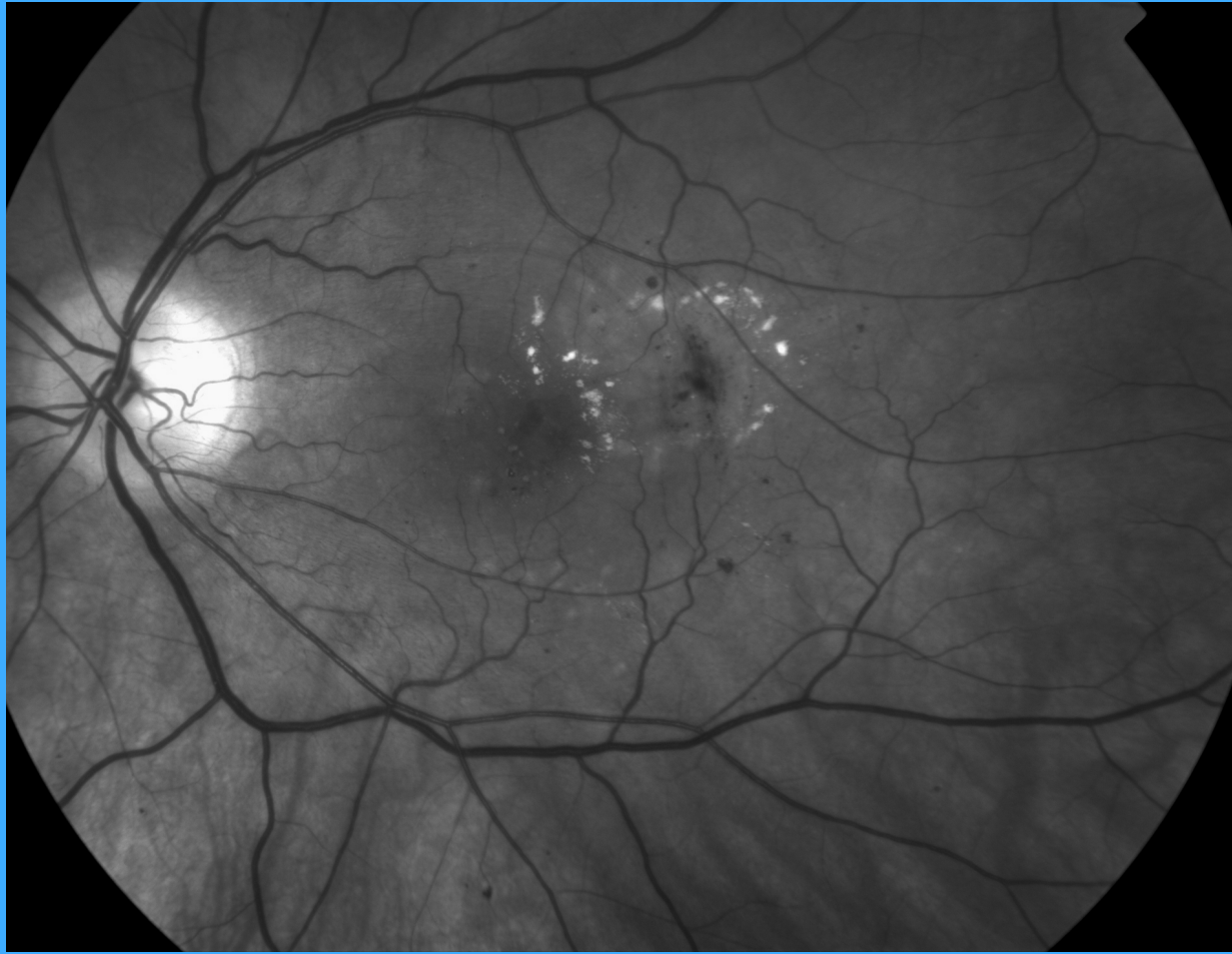
Thumbnails

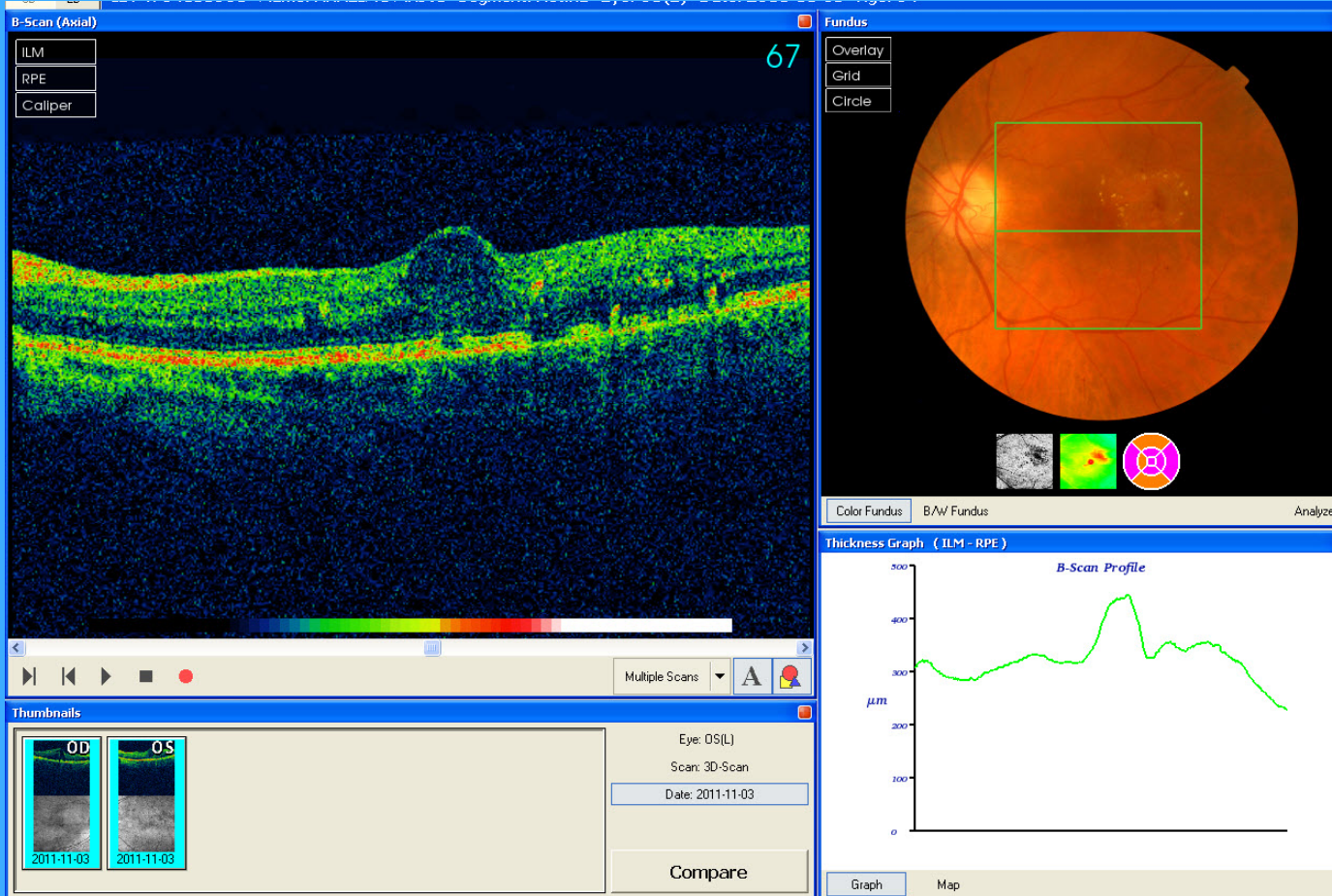
OD OS

2011-11-03 2011-11-03

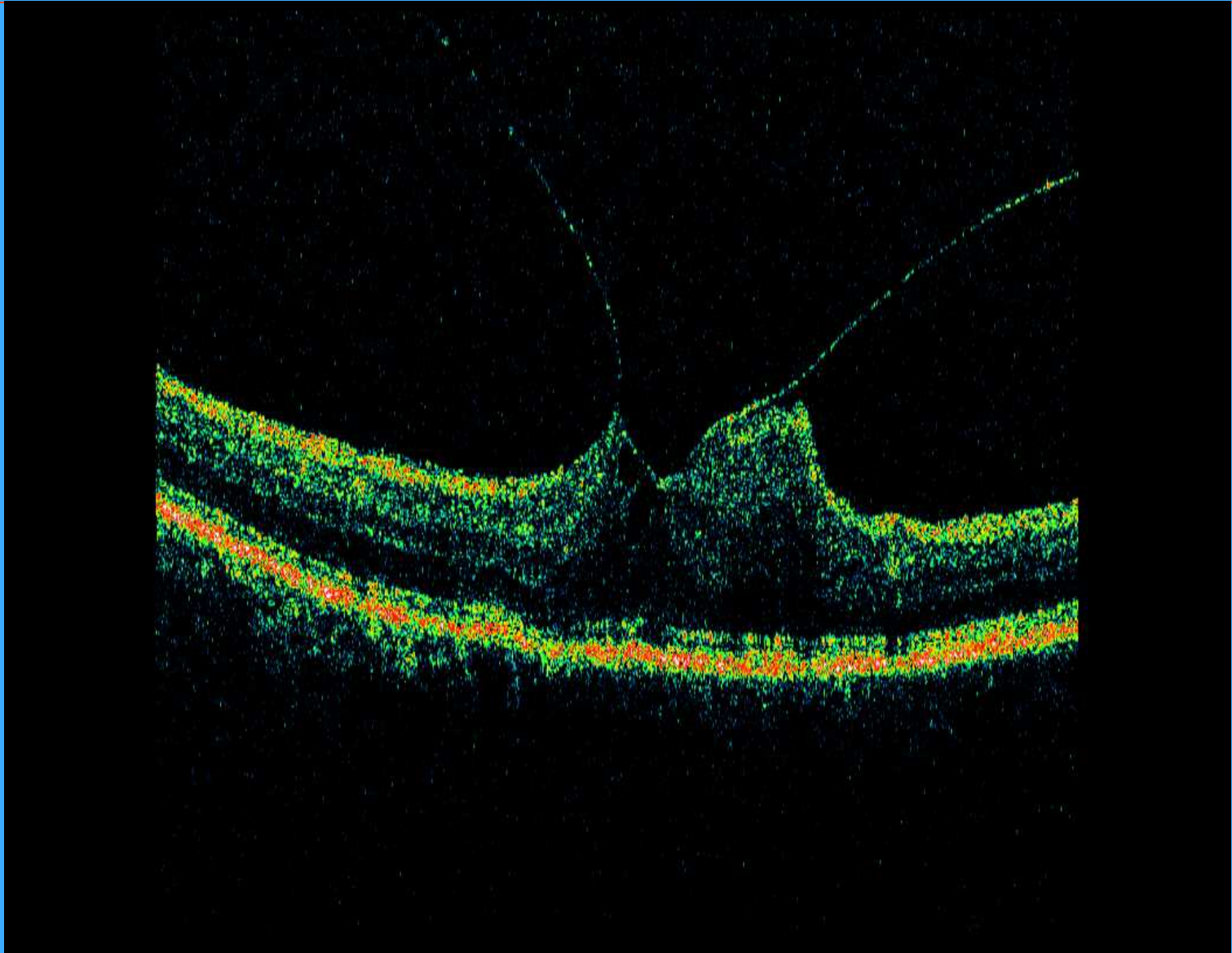
Eye: OD(R)
Scan: 3D-Scan
Date: 2011-11-03

Compare

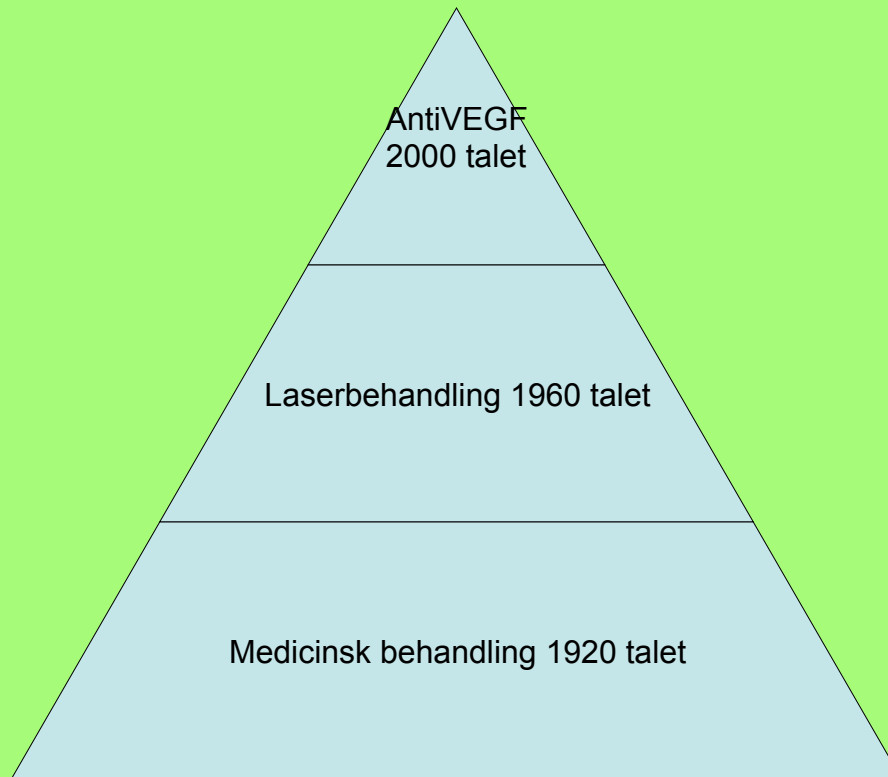




Traktions ödem



Hur behandla diabetesretinopati?



Linköping studie

- Minskande incidens av svår retinopati (laserkrävande) över de senaste 5 decennierna hos pat med 25-30 års duration.
 - Efter 25 år
 - 1961-65; 47%
 - 1966-70 28%
 - 1971-75; 24%
 - Efter 30 år
 - 1961-65 53%
 - 1966-70; 44%
- **Authors:** Nordwall, M.; Bojestig, M.; Arnqvist, H. J.; Ludvigsson, J.
Journal: Diabetologia **Year:** 2004 **Volume:** 47 **Issue:** 7 **Pages:** 1266-1272 **Provider**

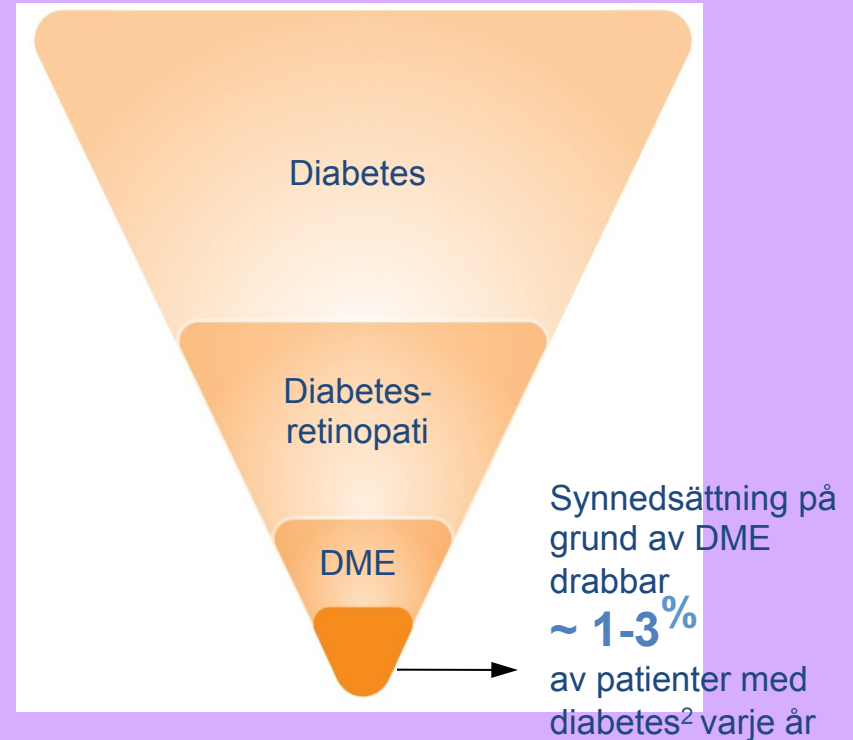
Behandling

- God metabolisk kontroll
- Antihypertension
- Laserbehandling
- Anti VEGF?

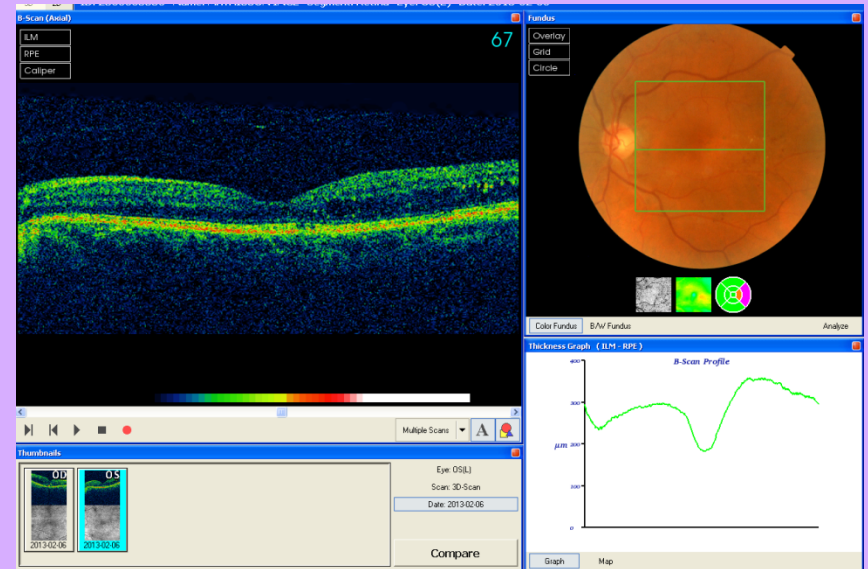
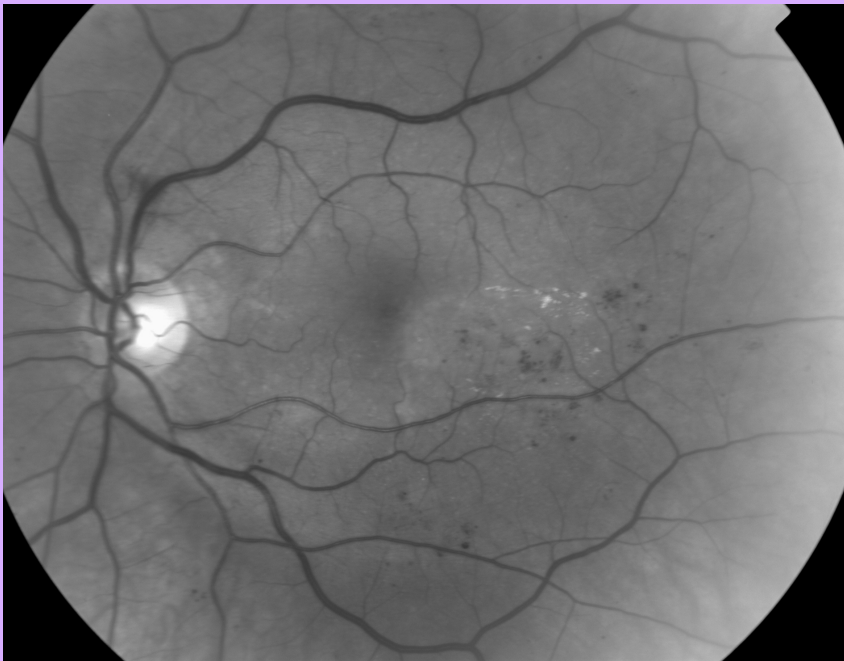
DME kan leda till synnedsättning

Diabetesretinopati, kan leda till makulaödem (DME) med synnedsättning, vilket är en betydande orsak till blindhet hos personer i arbetsför ålder¹

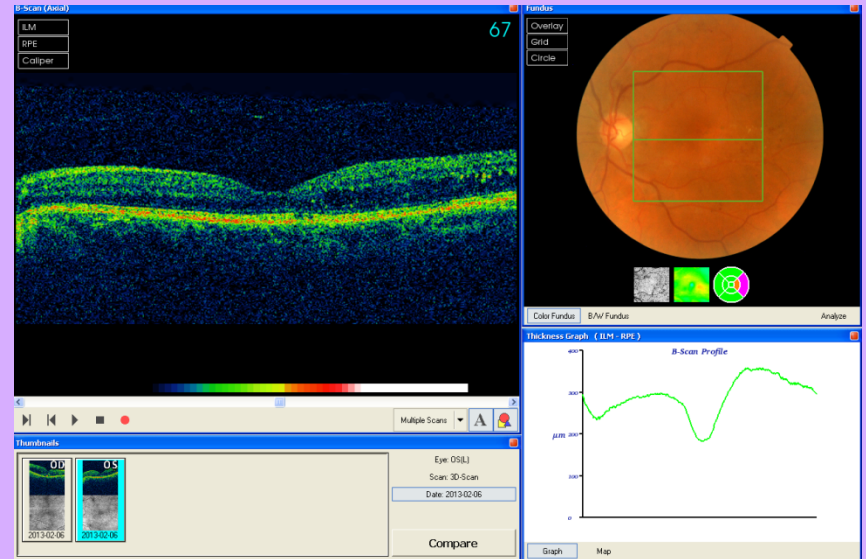
Den vanligaste orsaken till synpåverkan vid diabetes är ödem och hårda exudat i makularegionen, som i avancerade fall kan leda till mycket kraftig synnedsättning och social blindhet (synskärpa $\leq 0,1$)³



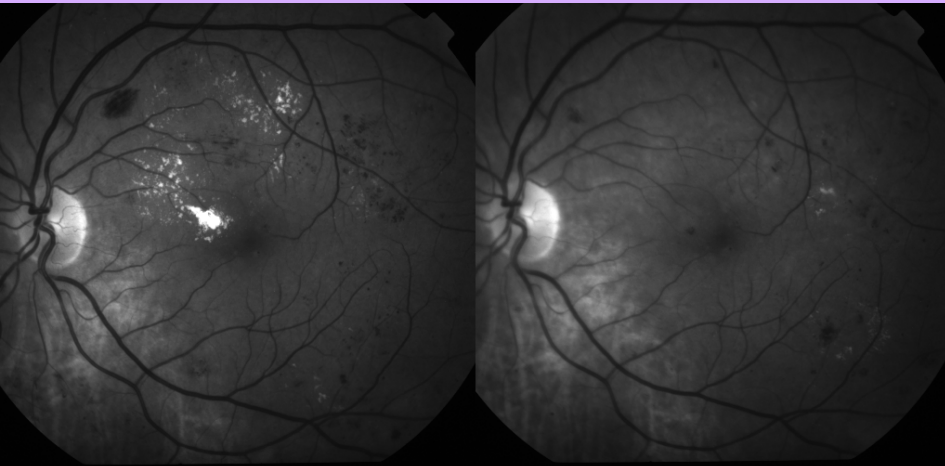
Detta går att laserbehandla



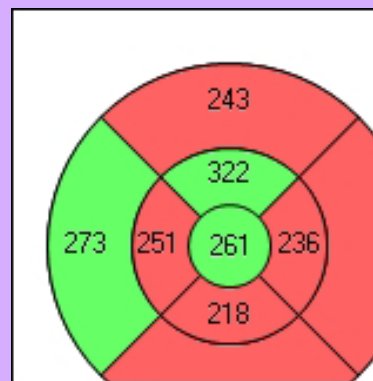
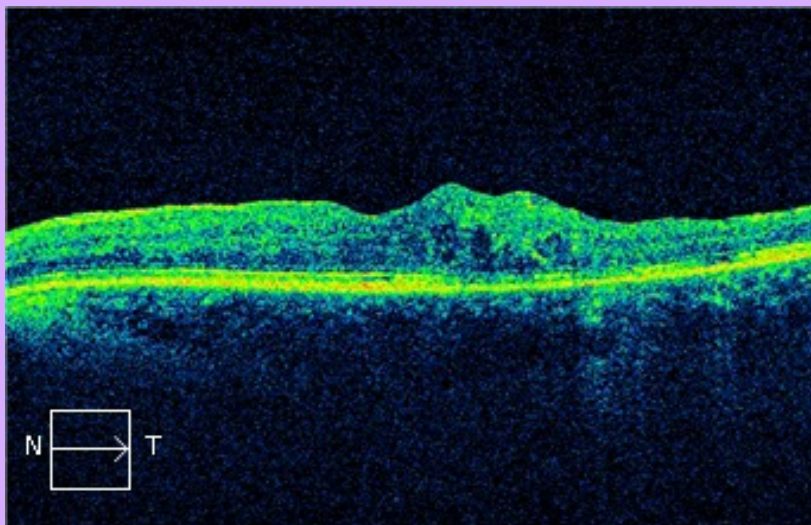
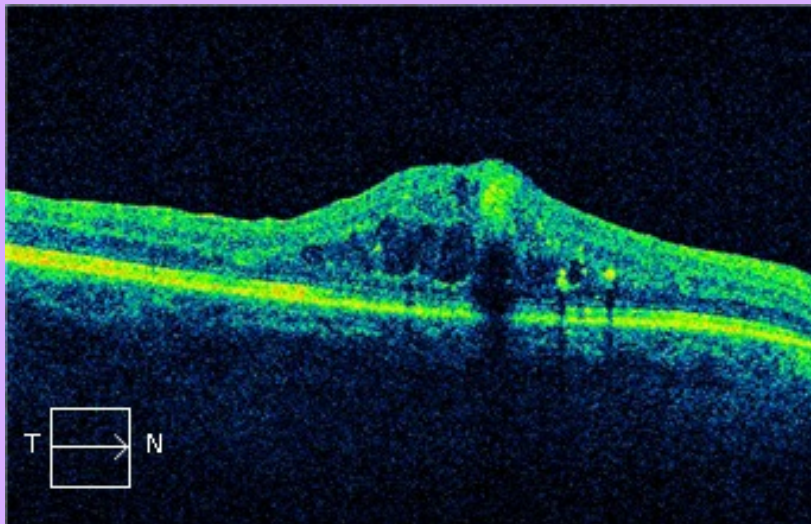
Detta går att laserbehandla



Laser fortfarande effektivt

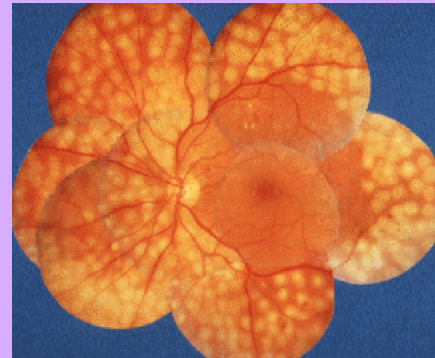
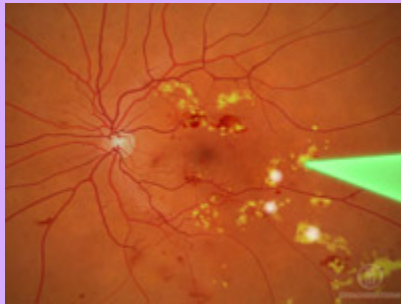


Effektivt på ödemet!

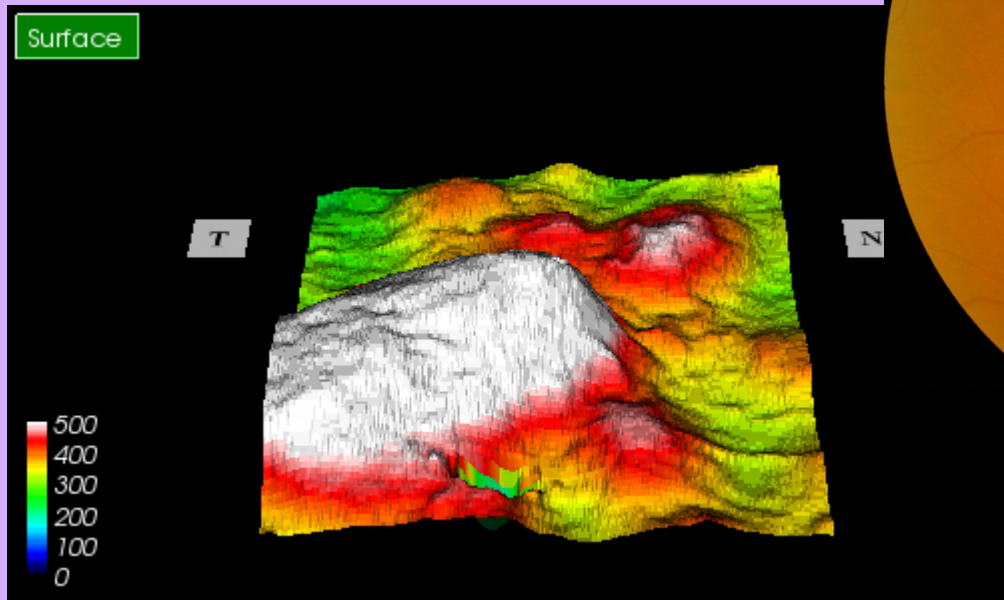


Laserbehandling

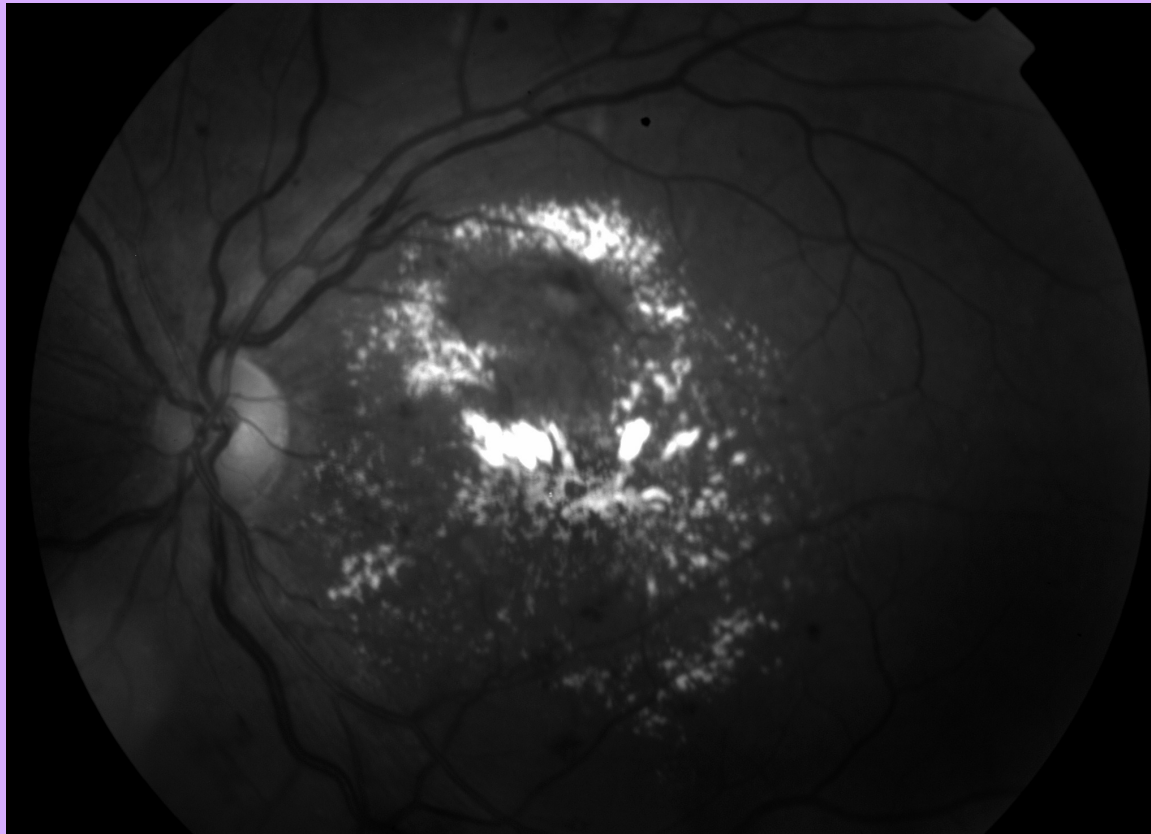
- Minskar synförlust med ca 50%
- Visusförbättring ses hos ca 16%



När finns det indikation för anti-VEGF behandling?



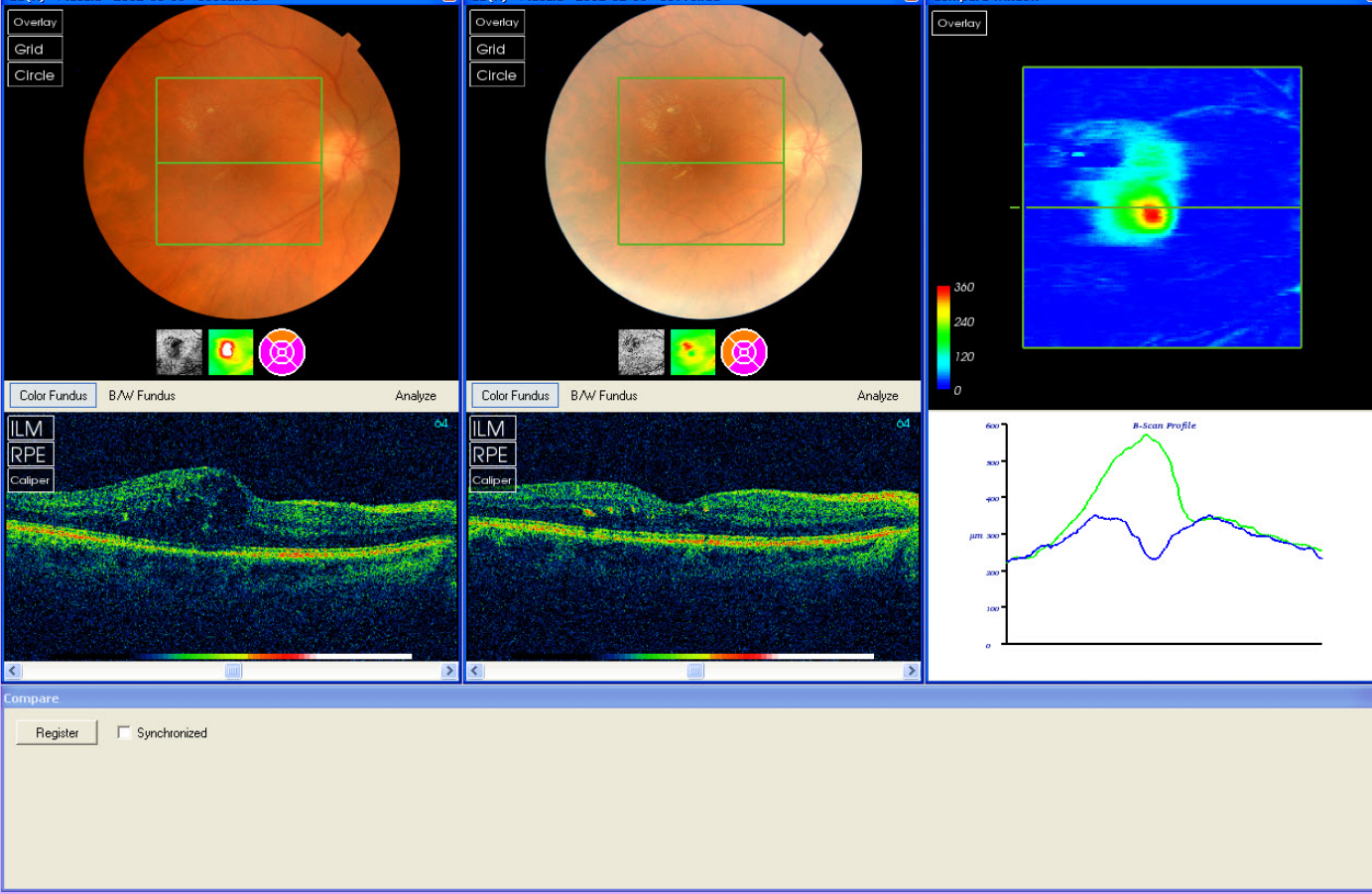
Uttalat centralt maculaödem



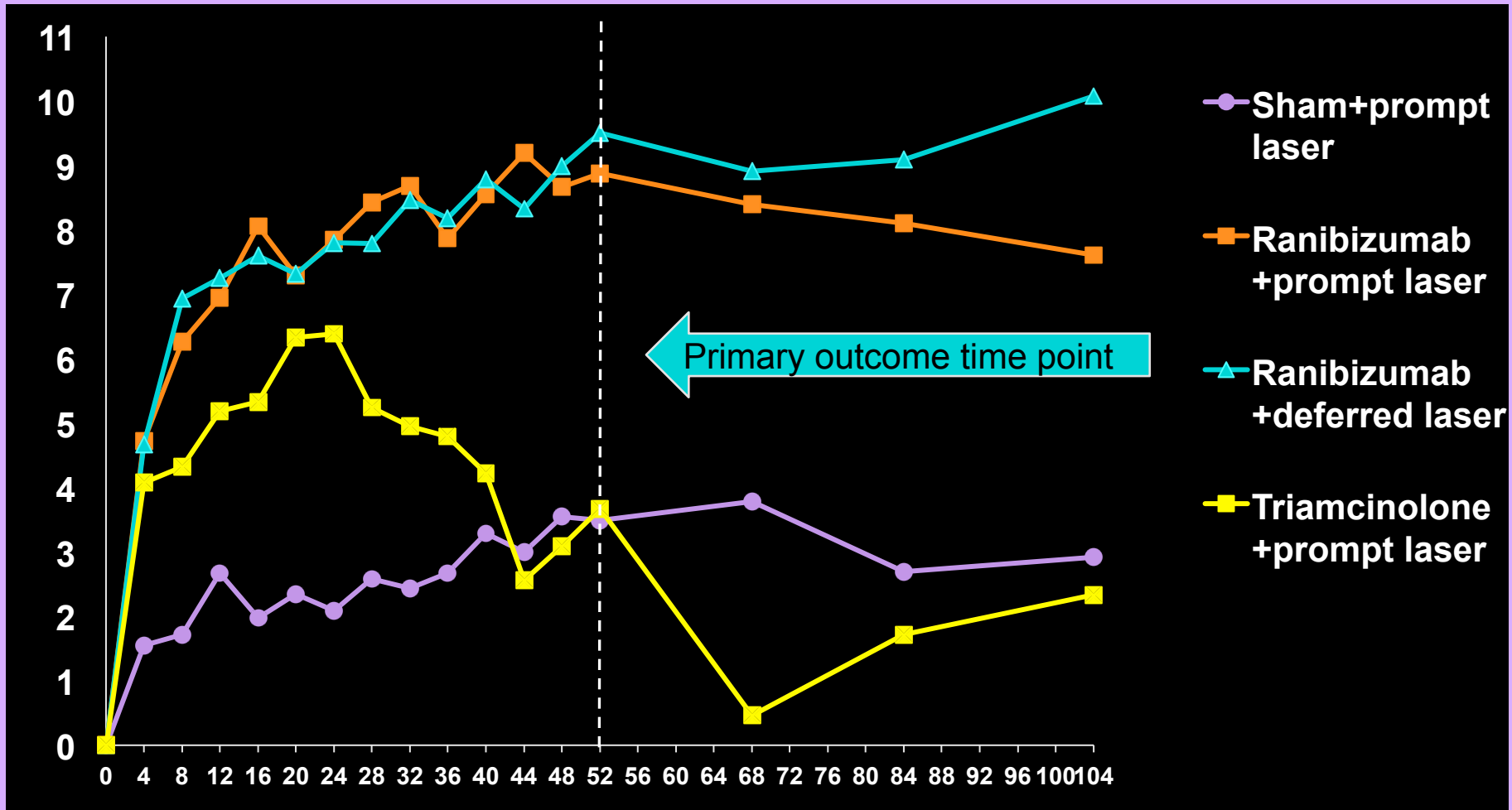
Intravitreal injektioner



Före/efter Lucentis injektion



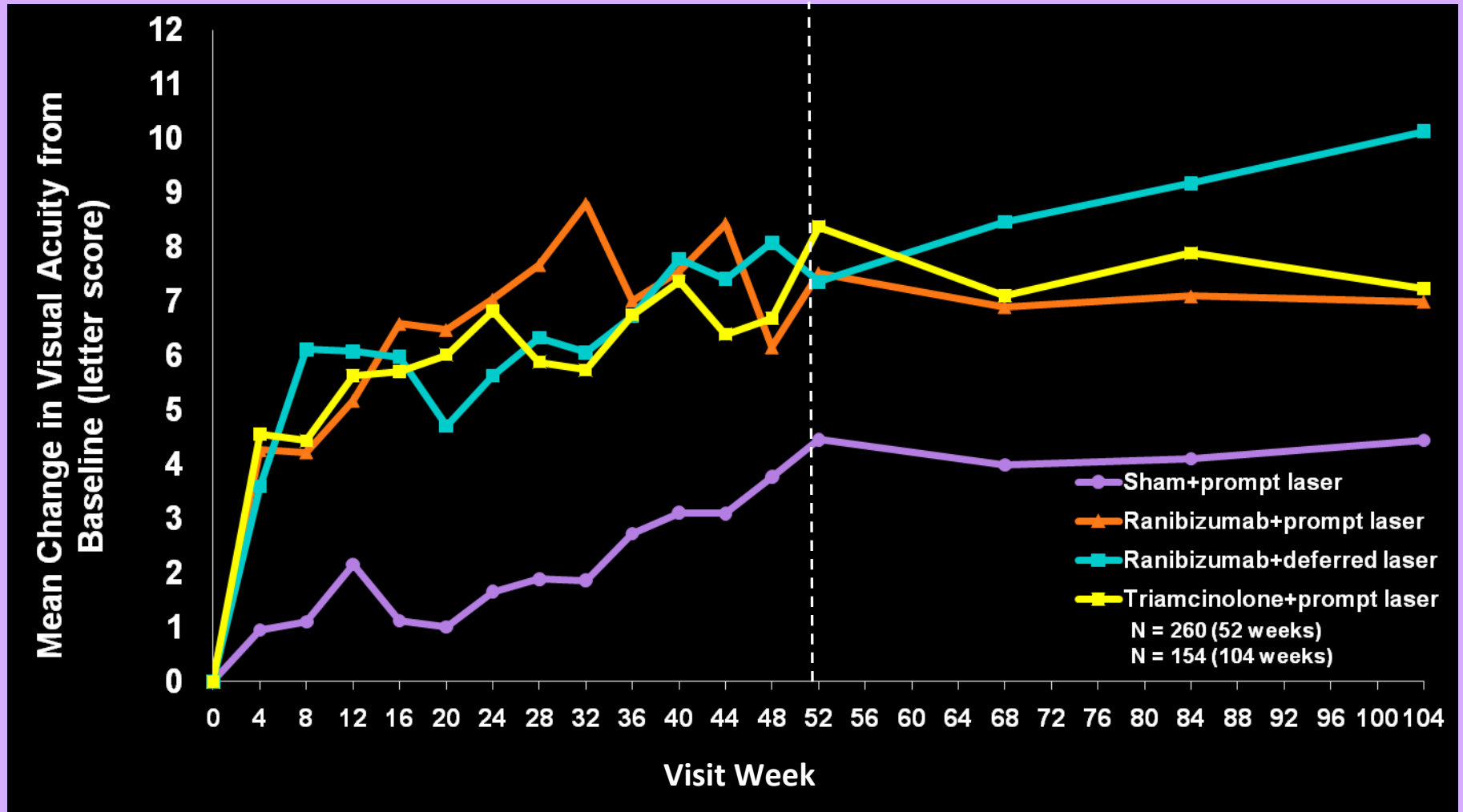
Mean Change in Visual Acuity* at Follow-up Visits



* Values that were ± 30 letters were assigned a value of 30

P-values for difference in mean change in visual acuity from sham+prompt laser at the 52-week visit: ranibizumab+prompt laser <0.001; ranibizumab+deferred laser <0.001; and triamcinolone+prompt laser=0.31.

Mean Change in Visual Acuity at Follow-up Visits among Eyes that were Pseudophakic at Baseline*



* Values that were ± 30 letters were assigned a value of 30

Fall

- 72 årig man
- Diabetes sedan 1982
- Insulinbehandlad
- HbA1c kring 7
- Bltr ok

Ögonen nov 2011

- Hö
- Laserbehandlad
- Visus 0.3; Lix 8p
- Vä
- Laserbehandlad
- Visus 0.7; 4 p

2012

Jan; visus 0.25; Lix 7pktr

Dec. visus 0.4

