

Dr. Bruce Johnson  
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Dr. Jay Whitehead

Spring 2010

# SIGHTLINES

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Dr. Don Martin



**Q.** I have diabetes – should I be concerned about my sight?

**A.** Diabetic retinopathy is a sight-threatening eye problem that people with diabetes may develop. The disease damages blood vessels in the retina, the tissue at the back of the eye that translates light into electrical impulses. The brain then interprets these electrical impulses as vision. Many people with diabetic retinopathy have no early symptoms such as pain, inflammation, or blurred vision. In fact, many do not encounter any visual impairment until the disease has advanced. At this point, the vision that has been lost cannot be restored.

Only early detection, timely treatment, and regular monitoring can reduce your risk of severe vision loss or blindness from diabetic eye disease. I recommend you have a complete eye exam to detect these problems before they impair your vision, and let me know about any vision or eye health matters that concern you. ▢

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# Hate eye drops?

## Contact lenses may soon deliver your eye medication

Dry-eye sufferers and glaucoma patients may soon be able to trade their messy eye drops for a contact lens that delivers medication gradually.

Although eye drops account for 90 percent of all eye medication, they can be a challenge to use effectively. Doctors estimate that only one to seven percent of the medication is absorbed into the eye, while the rest drips down the cheeks or into the back of the throat.

Many patients also simply forget to take their prescribed drops. For example, up to 59 percent of glaucoma patients regularly skip their drops, even though untreated glaucoma can lead to blindness.

### Pita pocket design

Researchers have been working for nearly a decade on drug-dispensing contact lenses that could deliver eye medication more effectively. Now, scientists report that they've created a contact lens that can deliver a high concentration of antibiotic at a constant rate for more than 30 days.

"The main way our lens differs is that it can provide large amounts of drug released at constant rates for long periods of time, which previous discoveries have not been able to do," said researcher Daniel Kohane of Harvard Medical School. Past lenses have only been able to release a small amount of drug over a long period of time, or a substantial amount of drug for a day or two.



The Boston researchers describe their new design like a pita pocket, with a big wad of drug in the middle of a hydrogel exterior. Because the drug-containing portion of the lens is shaped like a doughnut, it shouldn't affect the wearer's vision, Kohane said.

So far, the group has only tested the diffusion properties of the lens in a lab dish. But they have high hopes for the future: "It's just a matter of when we'll be able to get lenses that are high-quality enough to use in a human eye." ▢

From *Wired*

**Crisp, clear vision**

here here and here

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# Everyday situations put your eyes at risk!

You've heard that ultraviolet (UV) rays from the sun present a risk, but did you know human-made sources can also do harm?

The Canadian Centre for Occupational Health and Safety says that workers most at risk include welders, construction workers, hair stylists, lab workers, lighting technicians and farmers, to name a few.

Many employers and workers don't realize their eyes are being jeopardized. Long-term UV exposure can cause premature ageing of the eyes. As the population grows older, that exposure creates even bigger problems. According to the Canadian Association of Optometrists, macular degeneration is the leading cause of blindness in North Americans over age 55.

## Heed the warnings

In addition to a welder's flash or "flash burn" (burning of the cornea), other conditions from UV exposure include:

- Cataracts – permanent clouding of the lens. A comprehensive eye exam is the only way to determine if you have a cataract.
- Photokeratitis – causes watering eyes and blurred vision from an inflammation to the cornea.
- Conjunctivitis – an inflammation of the membrane that covers the inside of the eyelid. An optometrist can determine whether some other disease is causing the appearance of conjunctivitis.

## Working outdoors? Protect yourself!

- Wear properly fitted sunwear with 100 percent UV protection.
- UV risk is highest from 11 am to 4 pm so try to limit the amount of time you work outdoors in the direct sun. Know your risk: check The UV Index, issued daily by Environment Canada at [www.weatheroffice.gc.ca](http://www.weatheroffice.gc.ca) > Text Bulletins.
- The risk of UV radiation is even greater when reflected off sand and water. UV levels also increase at high altitudes.

Pay attention to the warning signs: inflammation, aversion to light, and immediate but temporary pain.

Don't take potential damage from UV rays lightly. Ask us if you're at a greater risk. ▢



“My peripheral vision was getting worse and so I decided to see my optometrist. It ends up my retina was detached. I needed immediate surgery or I would have lost the vision in my right eye.”

Jodie  
Calgary



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# Run for your eyes!

Add one more to the list of body parts that benefit from running: your eyes! Findings from the *National Runners' Health Study* that has tracked 55,000 runners since 1991 suggests that running lowers your risk of glaucoma, cataracts and macular degeneration.

The farther you run each week and the faster your 10K time, the lower your risk. For glaucoma, risk decreased by five percent for every km. in the average daily run. Those who ran 10K in under 37 minutes were half as likely to get glaucoma as those whose time was over 47:30.

According to Paul Williams of the Lawrence Berkeley Lab in California, the lower glaucoma risk might be from a decrease in "intraocular pressure," the fluid pressure behind the eye.

So run like the wind and do your eyes a favour! ▢

From *Canadian Running Magazine*



**MICHAEL  
MICHAEL KORS**