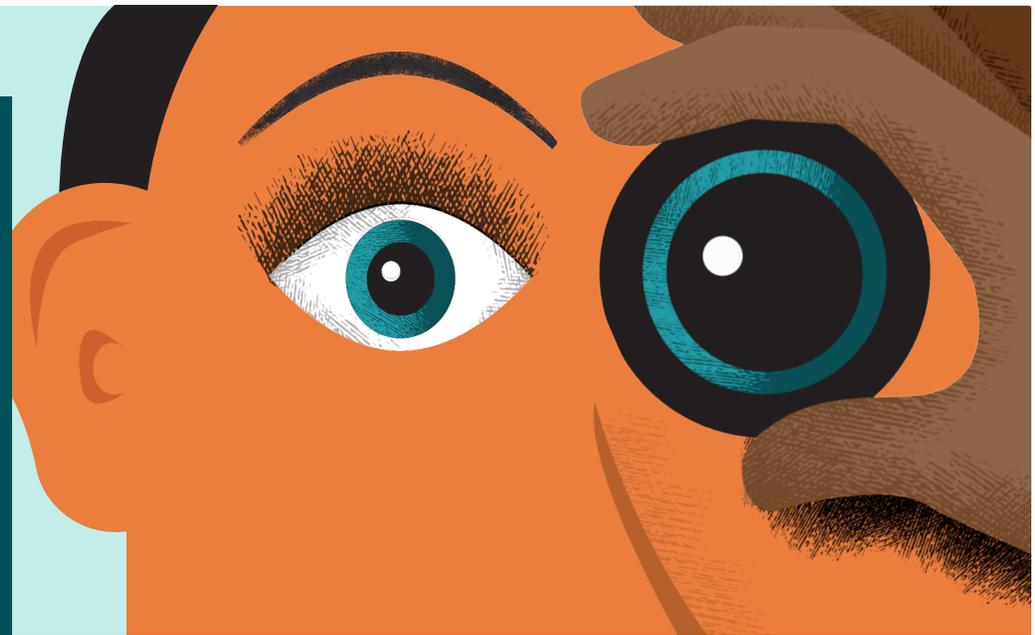


**WHEN WAS YOUR
LAST EYE EXAM?
IF IT'S BEEN MORE
THAN 11 MONTHS,
VISIT YOUR EYE
DOCTOR.**

DIABETES-RELATED
RETINOPATHY AFFECTS
APPROXIMATELY

1/3

OF ADULTS IN THE U.S.
WHO HAVE DIABETES



What can you do to take care of your eyes?



Make sure to get annual eye screenings

- People with diabetes-related retinopathy often don't have symptoms until they are at high risk for vision loss
- If you take medication for retinopathy, ask your doctor if it is the most safe and effective option



Keep blood glucose in target range

- High blood glucose is the main risk factor for retinopathy; make sure you know your time in range and A1C targets and how to reach them
- Avoid sugar and reduce carbohydrates to lower blood glucose
- 150 minutes of exercise a week or 10,000 steps per day is a great target for exercise
- Ask your healthcare professional if it would be helpful to lose weight



Manage blood pressure and cholesterol levels

- Lowering blood pressure can decrease retinopathy progression in people with type 2 diabetes. Aim for a systolic blood pressure under 130 mmHg
- The drug fenofibrate has been shown to slow the progression of retinopathy by elevating "good" cholesterol (HDL) and lowering "bad" cholesterol (LDL)



Pay attention to changes in your vision (eye pain, vision loss, floating shapes)



Do not smoke

- If you smoke, talk with your healthcare professional about a plan to quit

**RISK FACTORS: HIGH BLOOD PRESSURE | QUICK CHANGES IN
GLUCOSE LEVELS | FAMILY HISTORY OF EYE CONDITIONS**

WHAT IS DIABETES-RELATED RETINOPATHY?

Diabetes-related retinopathy is a diabetes complication where blood vessels in the eye become damaged from high blood glucose. This triggers your body to make more blood vessels—but the new vessels are fragile, which can lead to scarring in the eye that worsens vision. If untreated, diabetes-related retinopathy can progress from mild vision problems to blindness.