

HERE COMES THE SUN!

Spring is here and summer is just around the corner. And while we all look forward to warmer temperatures and brighter days, one of the greatest enemies for the eyes is the sun.

Just like the skin, eyes are damaged by UV rays coming from the sun, whether it is overcast or a clear and sunny day. Sunglasses should always be worn in daylight hours when you are outside. Additionally, you need to be sure that the sunglasses you choose offer UV ray protection. There are many sunglasses sold which are just tinted glass and do not really protect your eyes, but simply offer shade from the brightness. Check the label on your sunglasses before you buy them. UV ray protection should be the first objective of any sunglasses purchase.

And once you have made the purchase – don't leave home without them!

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blurred vision and blind spots. But because it could be affecting only one eye you might not notice any problems seeing since your good eye is compensating for the weaker one. As with glaucoma, macular degeneration tends to affect older adults, age 50 and older. While macular degeneration doesn't cause blindness it can severely impact quality of life. Clear central vision is necessary for reading, driving, recognizing faces and doing any type of detail work.

It has been said that our eyes are the windows to the soul; in actuality, they are windows to some fairly significant health indicators and general wellbeing. Another asymptomatic illness that can be identified eye exam is high blood pressure; which typically is not associated with preventative eye care. If you see your family physician regularly, odds are that your blood pressure is checked as part of all routine office visits. However, not everyone goes to the doctor regularly and many people, unfortunately, have undiagnosed hypertension, which is the technical name for high blood pressure. High blood pressure, even without any symptoms, visual or otherwise, can already be damaging the retina. These changes can be seen when looking in the eye with an ophthalmoscope, which is part of every eye exam. Many times it is an eye doctor who is the first one to recognize that a person has high blood pressure which needs to be treated and brought under control.

Similarly, diabetes is another illness that can damage the retina and be identified via an eye exam before loss of vision occurs. As with high blood pressure, it's possible for someone without any symptoms and perfect vision not to know they have diabetes and to have it recognized for the first time through an eye exam.

The case for a regular eye exam is a compelling one – even if you have perfect vision. However, if you are one of the 7 out of 10 Americans who needs corrective lenses, an eye exam is mandatory in helping you see well, so you can live your life, fully and safely.

If you have not had an eye exam recently, make it a priority. Call our office and schedule an appointment today!



DIABETES & YOUR EYES

What is diabetes?

Diabetes, simply stated, is a disease that prevents your body from making or using insulin, which in turn leads to increased sugar levels in your bloodstream. It is estimated that 23.6 million people – or about 8% of the U.S. population, have diabetes. Diabetes is a disease of maintenance, as left unchecked can result in complications that can dramatically affect quality of life and eventually lead to death.

How does diabetes affect the eye?

Diabetes and its complications can affect many parts of the eye. Diabetes can cause changes in nearsightedness, farsightedness and premature presbyopia (the inability to focus on close objects). It can result in cataracts, glaucoma, paralysis of the nerves that control the eye muscles or pupil, and in decreased corneal sensitivity. Visual symptoms of diabetes include fluctuating or blurring of vision, occasional double vision, loss of visual field, and flashes and floaters within the eyes. Sometimes these early signs of diabetes are detected in a thorough optometric examination. The most serious eye problem associated with diabetes is diabetic retinopathy, an eye disease which nearly half of all diabetics will develop to some degree over their lifetime.

What is retinopathy?

Diabetic retinopathy occurs when there is a weakening or swelling of the tiny blood vessels in the retina of the eye, resulting in blood leakage, the growth of new blood vessels and other changes. If diabetic retinopathy is left untreated, blindness can result.

Can vision loss from diabetes be prevented? Yes. In a routine eye examination, your optometrist can diagnose potential vision threatening changes in your eye that may be treated to prevent blindness. However, once damage has occurred, the effects are usually permanent. It is important to control your diabetes as much as possible to minimize your risk of developing retinopathy.

How is diabetic retinopathy treated?

In the early stages, diabetic retinopathy is monitored through regular eye health examinations.

If necessary, it may be treated with laser therapy. A bright beam of light is focused on the retina, causing a burn which seals off leaking blood vessels. In other cases, surgery inside the eye may be necessary. Early detection of diabetic retinopathy is crucial, as treatment is much more likely to be successful at an early stage.

How can diabetes-related eye problems be prevented?

Monitor and maintain control of your diabetes. See your physician regularly and follow instructions about diet, exercise and medication. See your optometrist, an eye care specialist, for a thorough eye examination when you are first diagnosed as a diabetic, and at least annually thereafter.

There are several factors that will increase the risk of developing retinopathy. Following are some preventative things you can do to minimize your risk:

1. Keep your blood sugar levels under tight control. Studies have found that diabetics who controlled their blood sugar levels were 4 times less likely to develop retinopathy.
2. Control your blood pressure. If your physician has prescribed high blood pressure medication, make sure that you take your medication. High blood pressure makes eye problems worse.
3. Quit smoking.
4. Drink alcohol in very limited amounts, if at all.
5. See your eye care professional once every year for a dilated eye exam. Remember, only optometrists and ophthalmologists can detect signs of retinopathy.



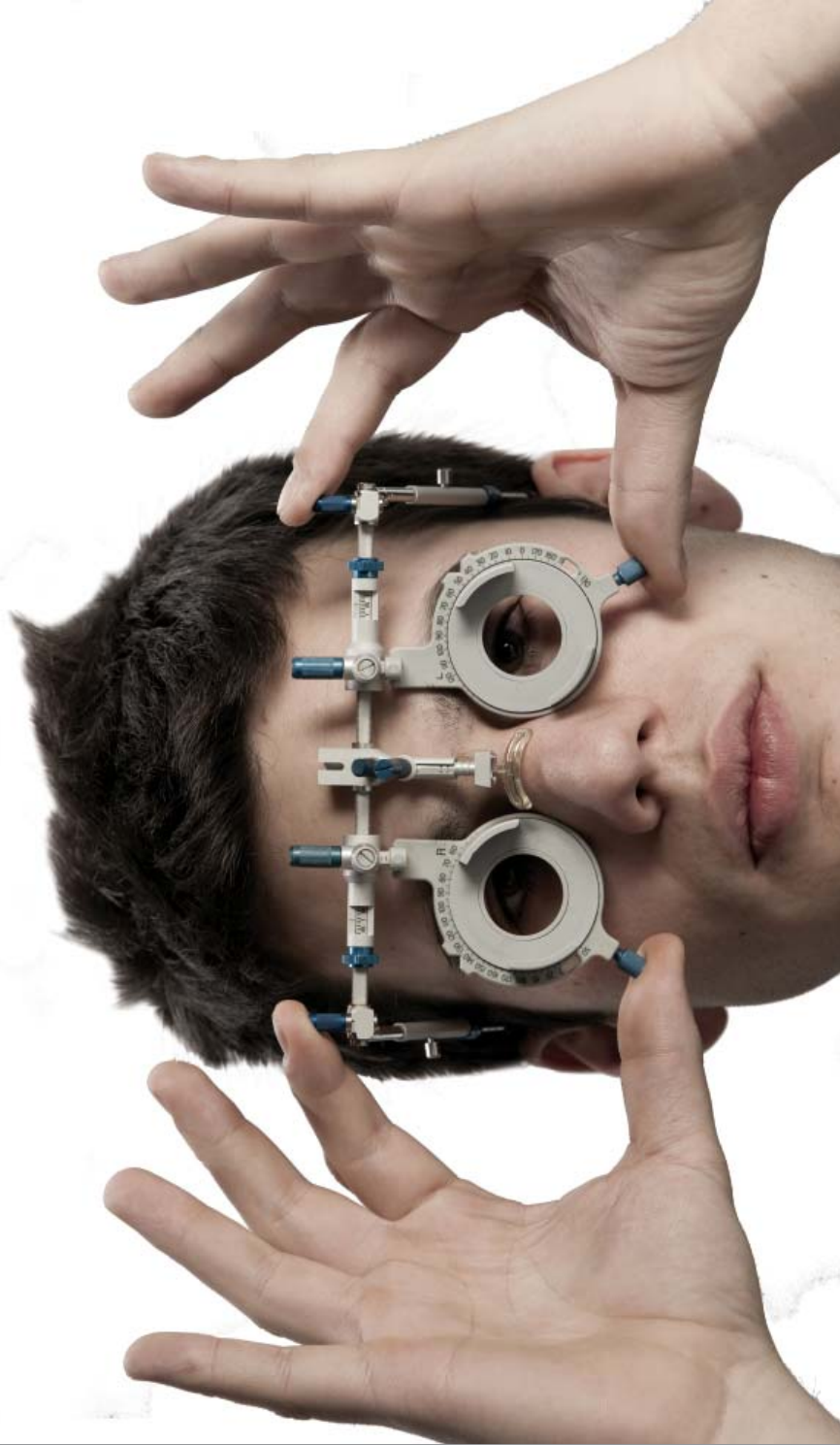
If you are diabetic and any of the following signs occur, call our office and schedule an appointment immediately. Your eyesight is far too precious to lose!

- * your vision becomes blurry
- * you have trouble reading signs or books
- * you see double
- * one or both of your eyes hurt
- * your eyes get red and stay that way
- * you feel pressure in your eyes
- * you see spots or floaters
- * straight lines don't look straight
- * you can't see things at the side of your eyes, like you used to

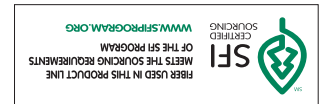
EYE- OPENING...

- ▶ 47% of Americans worry more about losing their eyesight than losing their memory, or their ability to walk or hear.
- ▶ Highly educated Americans are more likely to wear corrective lenses. 82% of those with postgraduate degrees need corrective lenses, as compared to 68% of those with only a high school education.
- ▶ Liberals are less likely to wear corrective lenses than conservatives.
- ▶ 90% of people over age 49 wear glasses.
- ▶ Blinking helps to protect our eyes by keeping them wet. When we blink we spread tears from one side of our eye to the other to stop them from drying out. The average person blinks 12 times per minute – about 10,000 blinks in an average day.
- ▶ The most eye injuries are caused by baseball, followed by basketball, water sports and racquet ball.

Our practice grows from referrals from our valued patients. If any of your family members or friends need an eye exam, we thank you in advance for thinking of us.



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