

Manchester Royal Eye Hospital Macular Services

Information for Patients

Age Related Macular Degeneration

What is age-related macular degeneration?

Age-related macular degeneration is a common eye condition that affects the central part of the vision in one or both eyes. There are two types of age-related macular degeneration called 'dry' form and 'wet' form.

What causes age-related macular degeneration?

The underlying cause is a malfunction of the macula, which is the central part of the retina. The retina is a thin layer at the back of the eye that acts in some ways like the film of a camera, converting light into electrical signals that are sent to the brain.

The 'dry' form is a result of aging, where the macula ceases to function normally.

The 'wet' form is a result of unhealthy blood vessels that may bleed and scar, growing into the macula.

Macular degeneration does not cause complete blindness, because the retinal area surrounding to the macula continues to function normally. This means that you can still see, but not nearly as well as when the macula is working properly. We use the macula to see fine details.

The peripheral retina is normally used for navigation purposes so you can usually move around freely. Furthermore, with the assistance of low vision aids, the peripheral vision can be used to perform many of the tasks normally undertaken by the macula.





What are the signs and symptoms?

Macular degeneration makes it difficult to read, recognise people, drive, or perform tasks that require the use of very accurate central vision.

What is the treatment?

Unfortunately, most cases of age-related macular degeneration are untreatable. There is no treatment for the 'dry form'. The more severe 'wet form' of age-related macular degeneration is sometimes treated with laser or photodynamic therapy (cold laser) in order to decrease the amount of visual loss.

In order to determine whether 'wet' age-related macular degeneration is treatable, it is usual to undergo an investigation called a fluorescein angiogram. This diagnostic photographic test uses an orange dye (known as fluorescein) which is injected into your arm to give a detailed view of the back of your eye. This assists your doctors in deciding on the best treatment for you.

Even if your age-related macular degeneration is untreatable, there are things you can do to help.

- If you smoke and have one eye affected or a mild form in both eyes, you
 may decrease the risk of progression by stopping smoking.
- If you do not smoke, sometimes taking vitamin supplements can help to prevent progression. Your ophthalmologist will advise you on this.

Often low visual aids can be very helpful and if appropriate arrangements will be made for you to try these. Support and further information can be obtained from the following organisations and websites:

Macular Society Helpline: 0300 3030 111; General Enquiries: 01264 350551 www.macularsociety.org

Henshaws within the Eye hospital: (0161) 276 5515 or 0300 222 5555

General Enquiries: 0300 222 5555

Web: www.henshaws.org.uk Email: info@manchester.org.uk

RNIB: 0303 123 9999 www.RNIB.org.uk



