Macular Degeneration Foundation

# The Magnifier

## **Book on CD**

"Macular
Degeneration,
"The Complete
Guide to Saving
and Maximizing
Your Sight" is
offered by Sight
Into Sound on
CD. Call 713622-2767 for a
free copy.

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Free Tapes to Live LIfe with Confidence and Dignity. Call: 800-843-6816

### **Free DVD**

Hallucinations: Am I going Crazy?

AMD and Charles Bonnet Syndrome. DVD available on request with detailed information! Call: 888-633-3937



ISSUE #111 Apr - Jun 2018

# **Annoyed by Floating Specks in Your Vision?**

Source: American Academy of Ophthalmology

Millions of people who put up with seeing annoying specks drift through their field of vision may now have a safe, high-tech solution to their problem. A study of patients who had laser treatment to vaporize these flecks and spots known as floaters, showed a very low complication rate, according to research presented at the 121st Annual Meeting of the American Academy of Ophthalmology. Additionally, most patients reported a significant improvement in their vision.

Eye floaters are a general term describing the specks, threads, cobweb-like images, or large clouds that can occasionally drift across the line of vision. Most floaters are bits of a protein called collagen. They're part of a gel-like substance in the back of the eye called the vitreous. As you age, the vitreous slowly shrinks and forms opacities of varying size and shape. What you see isn't the floater itself, but the shadow it casts onto the retina. Floaters can move as your eyes shift.

"The new laser technique is slowly growing in acceptance, and an increasing number of ophthalmologists are adopting it in Europe and the U.S.," said Dr. Singh. "We have also founded the International Ophthalmic Floater Society, which is open to ophthalmologists worldwide. It's aimed at studying the merits of this and other treatment options, sharing experiences and protocols, and raising awareness."

### Resources

MD Foundation Resource Director Dan Roberts 888-866-6148

Magnification Glasses Order Information 800-426-4846 www.americanreadingglasses. com

NFB Newsline 866-504-7300

Choice Magazine Listening 888-724-6423

National Library Service 888-657-7273 (Audio Books)

Free Low Vision Catalogs and Independent Living Catalog 800-537-2118

Maxi Aids 800-522-6294

Jewish Heritage for the Blind 800-995-1888

LS&S Low Vision Catalog 800-468-4789 Issproducts.com

EyeSmart http://www.geteyesmart.org/ eyesmart

# A Letter from Liz



Liz Traurnicht - Pres MD Foundation

In 1991 when the Macular Degeneration Foundation was founded, our primary mission was to raise awareness of a disease that few people had ever heard of. Over the suceeding years, thanks to your donations, we have had the privilege to fund worthy organizations doing basic research, support efforts of regional low-vision clinics and continue our efforts to educate all interested parties.

Along the way we have continued to look for new ways to accomplish our mission. About five years ago we began attending medical symposiums and annual meetings of such prestigous institutions as Harvard Medical School, the American Academy of Ophthalmology (AAO) and the Association for Research in Vision and Ophthalmology (ARVO).

Events like these invite scientist from around the world to make presentations on everything from basic research to cutting edge technologies designed to make life easier for those struggleing to make good use of their remaining vision.

Many of these dedicated people have allowed us to interview them to summarize their findings in terms we can understand. These exclusive video's are processed and posted in a timely manner to our website at MacularNews.org.

Today we have over 140 video's that are easy to find, simple to navigate, and free to all. We invite you to visit MacularNews.org and receive encouragement directly from those who are working for your benefit.



Margaret DeAngelis PhD Moran Eye Center

In addition, please note this is where we keep an archive of this newsletter in both visual (PDF) and audio formats.

# **Precise Eyedrop Delivery**

Researchers from Mount Sinai, NY are developing a new kind of eyedropper that can deliver tiny droplets of medication to treat the eye without waste and reducing dangerous side effects.

When drops are too big, the overflow is not only wasted, they overdose the eye with medication and toxic preservatives.

Statistical data is still being evaluated from additional clinical trials to begin during 2018.



# Please Share with Your Ophthalmologist

Vision rehabilitation is the standard of care for patients who are losing their vision and ophthalmologists are key to improving access to care for these patients. Recognizing this, Lighthouse Guild is offering ophthalmologists free access to an eLearning program titled, "Introduction to Vision Rehabilitation."

Dr. Alan R. Morse, President and CEO of Lighthouse Guild, says, "It is important that all ophthalmologists understand how vision rehabilitation can help their patients. Providing patients with information about vision rehabilitation options and initiating referral to services as early as possible in the treatment process is crucial to improving their quality of life."

The program is designed to provide ophthalmologists with an introduction to vision rehabilitation and basic strategies to help their patients. It is self-paced, divided into ten modules, and can be completed in approximately two hours.

The ten modules review terminology, the impact of vision loss, and highlight the importance of vision rehabilitation services. The program also discusses optical principles and selection and use of low vision devices. The program is accessible on the One Network of the American Academy of Ophthalmology (AAO) website. https://www.aao.org

MD Support and Prevent Blindness America Establish New On-Line Resource

The new resource provides an extensive list of searchable resource directories, a database of 1,500 municipal paratransit services, a library of self-help guides and workbooks, and up-to-the-minute news.

This marks
the first time in
Internet history
that two major
organizations
have joined in
such a dramatic
way to bring both
education and
support to
the entire global
low vision community.

See lowvision. preventblind-ness.org or mdsupport.org

## Are You Missing Out on Benefits?

April Issue of AARP by Joan Rattner Hellman

If you're struggling to pay for health care, food, or utilities, help may be closer than you realize.

Older Americans miss out on more than \$20 billion worth of benefits every year. A nationwide campaign launched by the National Council on Aging and the National Association of **Area Agencies** on Aging aims to help older adults learn about two easily accessed resources that can connect them to needed support.

BenefitsCheckUp (benefitscheckup. org)

Eldercare Locator (1-800-677-1116 or eldercare.gov)

# **Blind Spots**

by Dr. Joe Fontenot - CLVT Medical Director

### What is a "blind spot" or scotoma?

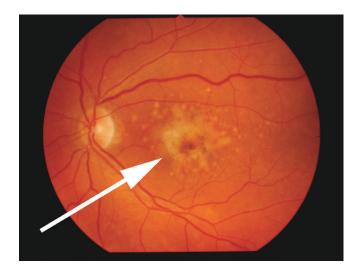
A scotoma is a "blind spot" in one's vision. It is defined in the Miriam-Webster dictionary as: "scotoma or scotomata: a spot in the visual field in which vision is absent or deficient".

#### What causes scotoma?

Blind spots in vision may be caused by eye disease, problems with the optic nerve, brain or even psychological problems. Migraines may also cause temporary blind spots. However, most blind spots are caused by eye disease that is limited to one part or one spot in the eye (like macular degeneration) which causes a localized, non-functioning area that results in a blind spot or scotoma in the center of the visual field.

### Scotoma in Age Related Macular Degeneration (ARMD)

The scotoma of ARMD are usually described by those affected as being a cloudy, ill-defined area rather than discrete and well demarcated. They are rarely absolutely black, but rather gray or off-white. They may have different shapes or colors in different lighting conditions. The normal retinal tissue is replaced by the degenerative lipid and fibrous process of macular degeneration. This occurs in an irregular and sometimes incomplete fashion. No image or an incomplete image is transmitted to the brain from the affected areas, resulting in a "blind spot" or scotoma.



Arrow indicates the pale yellow areas of macular degeneration which can cause a scotoma (blind spot).



#### When are the scotoma first noticed?

Scotoma are often not noticed if they involve only one eye. The other eye fills in the gap. Even if both eyes have scotoma in the same location, the loss of vision in a small area may not be noted. The brain unconsciously fills in the blind spot with images from the surroundings. This is a process called "perceptual completion".

### **Charles Bonnet Syndrome**

Some people see images in their blind spots. This is called "Charles Bonnet Syndrome" and is generally thought to be the result of the brain's unconscious effort to put something into the area where nothing is perceived. These images may occur frequently and may be concerning or alarming. People usually are relieved once the nature if the images are explained to them. They usually occur at rest and may be dispelled by becoming active, getting up and moving about. The images usually become less frequent and disturbing over months or years.

# **Continued on Page 6**

# Latest Audio Newsletters and Video's from the MD Foundation

Visit MacularNews. org

# **Talking Books**

The National Library Service provides qualifying individuals a bimonthly large print catalog of recorded books and magazine at no charge.

Patrons may order talking books by contacting their local cooperating library. Contact information is online at www.loc. gov/nls/find.html or call 1-888-657-7323

# Chaplains on Hand

Chaplainsonhand. org for spiritual support or call toll free 1-844-242-7524

### **Definitions**

### **Ophthalmologist**

a practitioner in the medical science of surgery and care of the eye and its related structures. An M.D. degree is required.

### **Retina specialist**

a medical doctor trained as an ophthalmologist, who has received additional training in diseases and surgery of the retina and vitreous.

### **Optometrist**

a degreed (O.D.), independent, primary health care provider skilled in the co-management of eye health and vision care, including examination. diagnosis, treatment, management of diseases/ disorders, prescription of eyeglasses/contact lenses, and provision of low vision aids and therapy.

### **Optician**

a person who designs or manufactures ophthalmic appliances or optical instruments ("ophthalmic optician") or deals in prescriptions ("dispensing optician").

## **Blind Spots: ... continued**

### **Eccentric Viewing and Preferred Retinal Locus**

If you have a scotoma in the center of your visual field and look straight ahead, you will not be able to see what you are looking at. You will have to look to one side or another, or up or down to get your blind spot out of the way. This is "eccentric viewing", and the place on your retina that you habitually direct the image to is the "preferred retinal locus". Techniques for making the most of eccentric viewing can be taught by Occupational Therapists (OT's) to achieve the best reading skill possible despite having scotoma.

### What to do if you have a scotoma?

- 1. See your eye doctor. Some of the scotoma may improve and become smaller with treatment by Anti-VEGF (injection) therapy, or at least kept from enlarging.
- 2. Check your vision frequently with an Amsler grid
- 3. Understand and use eccentric viewing techniques

# **Apellis Entering Phase 3 Trials for Dry Macular Degeneration**

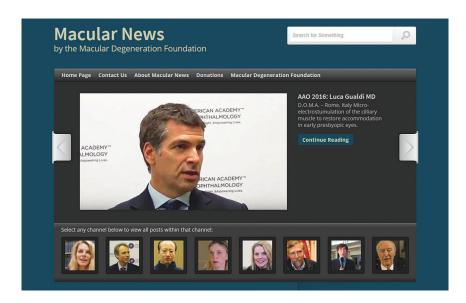
Apellis Pharmaceuticals has announced that it has finalized the trial design for its planned Phase 3 program evaluating APL-2 for the treatment of patients with geographic atrophy (GA), aka dry macular degeneration.

"Our Phase 3 trial design is intended to address a patient population similar to the one we studied in Phase 2, which we believe is representative of the general population of patients with GA in the United States," said Cedric Francois, MD, PhD, founder and chief executive officer of Apellis.

"Currently there are no approved treatments for the approximately one million patients suffering from GA in the US. We believe that by slowing down the rate of degeneration of retinal tissue through broad C3 inhibition, we may be able to delay or prevent the progression to blindness in these patients."

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# **Exclusive Online Videos Featuring World's Leading Eye Researchers**



The Macular Degeneration Foundation interviews the world's foremost scientists, medical practitioners and inventors. Visit **MacularNews.org** for the latest news and register to receive an email notice when new videos are first posted.

## **Donations**

The Macular Degeneration Foundation, Inc. is a tax-exempt, non-profit organization.

Please visit our website at eyesight.org to make a tax deductable donation.

Checks may be mailed to:

Macular Degeneration Foundation, Inc., P.O. Box 531313, Henderson, NV 89053

Call: 888-633-3937 (USA) Call: 702-450-2908 (Intl) Email: liz@eyesight.org

Disclaimer - Articles in the Magnifier are for information only and are not an endorsement by the Macular Degeneration Foundation editorial staff.

# Organizations That Can Help

National Eye Institute 800-411-1222 www.nei.nih.gov

Community Services for Vision Rehabilitation (AL & MI Areas) csvrlowvision.org 251-476-4744 228-760-0788

American Council of the Blind (800) 424-8666 acb.org

Second Sense (Chicago Area) 312-236-8569 second-sense.org

Prevent Blindness America 800-331-2020 preventblindness. org

MD Support 816-761-7080 MDsupport.org

Bible on Tape Aurora Ministries 941-748-3031



# Clinical Trial Information

Nat'l Eye Institute 800-411-1222 or www.nei.nih.gov

Clinical trials have guidelines called "inclusion" and "exclusion" criteria. These criteria (age, gender, type and stage of disease, etc.) keep participants safe and ensure researchers will be able to answer the questions they plan to study.

# FDA Approves First Gene Therapy for Inherited Retinal Dystrophy

The FDA has recently approved Luxturna, a new gene therapy developed by Spark Therapeutics, to treat an inherited form of vision loss that can result in blindness. The most prevalent inherited retinal dystrophies are retinitis pigmentosa (RP), Leber congenital amaurosis (LCA) and Stargardt disease (SD), all of which have in common a mutation of the RPE65 gene. Patients with Leber congenital amaurosis will be the first beneficiaries of retinal gene therapy, with RP and SD to follow after further study.

"I believe gene therapy will become a mainstay in treating, and maybe curing, many of our most devastating and intractable illnesses," said FDA Commissioner Scott Gottlieb, M.D.

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