

### Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/national-eye-institute/nei-blindness-prevention-initiative/seeing-a-way-forward-in-diabetic-retinopathy/13455/>

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### Patient Conversation: Seeing a Way Forward in Diabetic Retinopathy

Dan:  
Hello, Barry, how's it going?

Barry:  
Pretty well, Dan. What's up?

Dan:  
I wanted to ask you about getting eye injections. My doctor is recommending it. I don't want to do it. I'm kind of apprehensive. I don't even like getting a shot in my arm.

Barry:  
Well, you know, I've been getting these injections for about a year, actually in both my eyes. And I know exactly where you're at, at the very beginning. The thought of having a needle put in your eye is really kind of scary. But I think what you'll find out is what I found out, and that is the reality is far different. In fact, after I had my first injection, I looked at my ophthalmologist and I asked him, "Is that all there is to this?" because I thought it would be much different. I thought it'd be very painful, but it really wasn't.

Dan:  
So what was it like getting the shot in your eye? What happened? Was it painful? Was there any long-lasting effects?

Barry:  
Well, it's not painful. And it's not painful because your eye is numb. For me, I chose to get numbing drops in my eyes. And during the whole process, the technicians are putting drops in your eyes that are being injected. So when the time comes to actually get the injection, the ophthalmologist will put a few more drops in your eyes and will have you look up and to the side so that the larger portion of the white portion of your eye is showing. He usually marks where the injection will be and then just injects you. You really don't feel it. So it's nothing to really get excited about. And not at all what you're thinking about.

In fact, I have a really good idea. My ophthalmologist put together a video that really explains it much better than I could. So I think maybe you ought to take a look at that. I'll send it over to you. And after you look at it, maybe we can have a conversation again.

Dr. Wykoff:  
Hi, I'm Charles Wykoff, a retina specialist in Houston, Texas, and diabetes has affected the back of your eye. The key problem here is that diabetes causes damage to the small blood vessels throughout the back of the eye. And the back of the eye has a lot of blood vessels. What happens then is that the remaining blood vessels become leaky. And the blood vessels that remain, they leak fluid, they leak blood, they leak proteins and fats out into the retina. The retina can become swollen and dysfunctional. When that happens, people begin to notice visual decline and visual loss.

The good thing is in many cases, this is very treatable with repeated injections of medicines into the eye. And it sounds scary, and it is a little bit, it's injections of medicines directly inside of the eye. And I say it very clearly, because I want you to know exactly what we're doing. We're taking really small needles and putting them inside of your eye and injecting the medicine directly into the middle of the ball of your eye called the vitreous cavity. And that medicine then diffuses back into the retina and stops those blood vessels from leaking and will improve the fluid and improve the health of the back of the eye.

I know it sounds scary, but the vast majority of patients do very well with these injections. We numb the eye up ahead of time so you

will not have any pain. And you might have a little bit of irritation after the injection. And most of the time that is from a solution called Betadine that we use to sterilize and prevent any infection when giving these injections. Sometimes patients will have floaters and things that they see moving around inside their vision, those often also go away very quickly. And then finally, there can sometimes be a little red spot on the white part of your eye on the outside of your eye. Again, in most cases, this will go away very quickly.

It is worth knowing though every time we put a needle anywhere inside the body, there's a risk of infection. And, therefore, if you have any problems after the injection, new pain, new vision loss, anything you're worried about, always make sure that you feel comfortable reaching out to your doctor and your doctor's team at any time in case there is an infection that needs to be treated emergently.

And finally, let me just say that I'm glad that you're engaging in your care. Treatment for diabetic retinopathy and diabetic macular edema are highly effective. These medicines really work to prevent vision loss and improve vision in many patients. I'm glad that you're engaging.

And the last point to remember is this is a long-term treatment pattern. These are not cures. They're highly effective. So please make the effort to get to know your doctor and their team, because I hope that you'll be seeing them regularly over the many months and years to come so you can enjoy the best vision possible. Thank you. Good luck.

Dan:

I still don't know. It's a shot in my eye. But I will think about it.

Barry:

Well, let me put it to you this way. Quite frankly, the alternative that you would face is likely a greater chance of going blind. What effect do you think that would have on your family, your children, and your grandchildren?

Dan:

You think that could happen? I could go blind?

Barry:

I think you could definitely go blind. If not totally blind, you would lose portions of your sight.

Dan:

Well, thank you, Barry. I think with everything that you said, I think I'm going to be talking to my doctor. Thank you.

Barry:

That sounds great. Let me know what happens, Dan.

Dan:

I will.

Barry:

Take care.