

What else can I do?

You should:

- continue to attend all your medical appointments;
- keep your blood glucose (HbA1c) at the levels agreed with your healthcare team;
- see your healthcare team regularly to check that your blood pressure is not raised;
- keep your blood fats (cholesterol) at the levels agreed with your healthcare team;
- get professional advice if you notice any new problems with your sight;
- eat a healthy, balanced diet;
- try to lose excess weight if you are overweight;
- take your medication as prescribed;
- exercise regularly;
- seek help to try to cut down or stop smoking, if you are a smoker. See www.stopsmokingni.info

Remember, you should continue to visit an optometrist regularly for your routine eye examination **as well as** attending your diabetic eye screening appointment.

Where can I find more information?

www.publichealth.hscni.net/desp

www.nhs.uk/diabeticeye

www.diabetes.org.uk

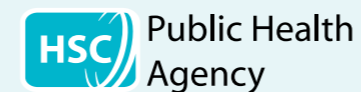
www.rnib.org.uk/northern-ireland

Alternatively you can contact the screening office:

Diabetic Eye Screening Programme

Belfast Health and Social Care Trust

Tel: 028 9615 7600



Public Health Agency
12-22 Linenhall Street, Belfast BT2 8BS.
Tel: 0300 555 0114 (local rate).
www.publichealth.hscni.net

Find us on:



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Diabetic Eye Screening

Digital photography surveillance



Your guide to digital photography surveillance

Who is this leaflet for?

This leaflet is for you if you have been referred from diabetic eye screening because you:

- need to be monitored more closely (in a surveillance clinic);
- need further tests or photographic imaging;
- are pregnant and have Type 1 or Type 2 diabetes.

Closer monitoring in a surveillance clinic

We need to monitor your eyes more closely in a surveillance clinic if you have any of the following:

- diabetic retinopathy that has progressed but does not yet require treatment (pre-proliferative retinopathy);
- previously successful treatment for sight-threatening retinopathy;
- diabetic maculopathy (damage to the macula at the back of the eye) that does not yet require treatment.

Closer monitoring in a surveillance clinic can be offered every 3, 6, 9, or 12 months depending on the type and progression of the changes to your eyes.

Screening in pregnancy

Screening is very important when you are pregnant because the risk of serious eye problems is greater.

You will be offered screening at, or soon after, your first antenatal clinic visit and also after 28 weeks of pregnancy. If early stages of retinopathy are found at the first screening, you will be offered another test between 16 and 20 weeks of pregnancy.

If serious retinopathy is found at any screening, you will be referred to an eye specialist.

How should I prepare for my surveillance appointment?

The photographs of your eyes are studied after you are screened. You should:

- bring your current glasses (spectacles and contact lenses) with you;
- bring a list of any medication you are taking;
- bring sunglasses with you to wear on your way home, as your eyes may be sensitive to bright light after your appointment;
- remember that you should not drive for up to four to six hours after your appointment as you may be given eye drops that can blur vision.

What happens next?

If images of your retina show signs of improvement, you may return to routine annual screening and will receive an invitation through the post.

If your diabetic eye screening test shows signs of worsening diabetic retinopathy, we need to refer you to a hospital eye clinic for further tests or treatment.

If your eyes are stable, you will be asked back to the surveillance clinic.