

Pregnancy and Diabetes

If you are planning a pregnancy: It is recommended to have your diabetic eye exam completed prior to the pregnancy to establish a baseline.

Once you have confirmed your pregnancy: It is recommended to have your eyes examined within the first trimester of your pregnancy, and again in your final trimester to ensure that the stress of pregnancy has not affected your eye health.

How could pregnancy affect my eye health?

Pregnancy can increase the pressure on your blood vessels throughout your eyes, which increases your risk of diabetes-related eye conditions. This risk is increased further if you had signs of eye damage prior to your pregnancy.

Mick E. VandenBosch, MD

American Board of Ophthalmology
Board Certified Ophthalmologist

Scheduling: (712) 737-5241



1000 Lincoln Circle SE Suite 200 Orange City, IA 51041

MOB1 (West end of hospital campus)



Diabetic Eye Exams at our Ophthalmology Clinic



Orange City Area
Health System

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- Gift Garden ~ 737.5350
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- Sports Medicine ~ 707.6076
- Volunteer Services ~ 737.5349
- Walk-In Clinic ~ 707-6070
- Wound, Ostomy, Continence ~ 737.5380

Sources

1. The American Diabetes Association

www2.diabetes.org/sites/default/files/2022-04/FOD-Annual-Exam.pdf

2. National Eye Institute

www.nei.nih.gov/sites/default/files/2023-03/DED_Consumer_English_Color.pdf

Orange City Area Health System Ophthalmology Clinic wants to know...

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Why should I have my vision checked yearly if I am diabetic?

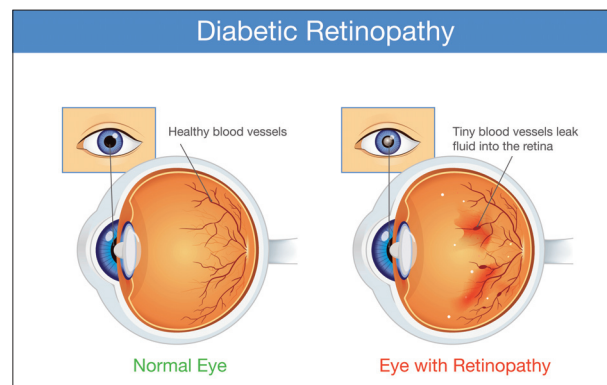
According to the American Diabetes Association, early checks are the best way to determine if your blood sugar levels are influencing your eye health. Even if your vision seems normal and your eyes feel fine, you could miss early stages of diabetic related eye conditions.

Getting your yearly eye exam is one of the best ways you can protect your eyes and help prevent future vision loss or blindness.

What does the Ophthalmologist look for during your diabetic eye exam?

During your yearly eye exam, Dr. VandenBosch will assess you for five conditions which in general can be prevented:

Retinopathy: Leakage, bleeding, and abnormal growth in the blood vessels of your retina that can cause blindness.



Macular edema: Swelling and fluid build-up in the macula of your eye. The central part of the light-sensitive retina, often occurs with retinopathy and can lead to severe vision loss.

Cataracts: Cloudiness of the lens of your eye that can cause vision loss.

Glaucoma: Increased fluid pressure in your eyes that can damage your optic nerve, which will result in blindness if not treated.

Dry eye: People with diabetes are twice as likely to develop dry eye, which typically causes blurred vision that improves with blinking, excessive watering (from your eye trying to compensate for the dryness), and a severe stinging or burning sensation in your eyes. Elevated blood sugar levels increase the risk of infection if you are diabetic and suffer from dry eye disease. Additionally, high blood sugar levels and several common medications

Who is most likely to get diabetic eye disease?

Anyone who has diabetes can get this disease. The longer you have been diagnosed, the more likely you are to develop diabetic eye disease.

What does the Ophthalmology Team do to assess my eyes for diabetic complications?

Visual acuity testing: Using an eye chart, our nursing team will assess your vision

Tonometry: Using a tonometer device, our nursing team will measure the pressure in your eye. Altered eye pressure can indicate that you are at risk for one of the many types of glaucoma.

Dilated eye exam: Our team will apply eye drops that enlarge your pupils. This will allow our Ophthalmologist to be able to look into the back of your eye to detect any swelling of the retina, leaking blood vessels, nerve damage, cataracts, and other eye diseases that could occur in patients with diabetes. This is the most important test for our diabetic patients.

What are the symptoms of diabetic retinopathy?

In the early stages of this disease, you may not experience any symptoms or pain. As your blood vessels begin to get weak and leak fluid or bleed, your vision may begin to blur.

What can I do to help prevent or slow diabetic retinopathy disease?

People with diabetes can make an impact by slowing the progression or even preventing the development of diabetic retinopathy by keeping their blood sugar, blood pressure, and blood cholesterol under control and having regular eye exams to assess for eye diseases.

I was recently diagnosed with Type 1 diabetes, now what?

You need to have a dilated eye exam within five years of being diagnosed and then yearly after your initial exam.

Your first exam will include a dilated eye exam. Depending on your results, your Ophthalmologist may approve waiting one to two years before you need another. If you are diagnosed with an eye disease, the Ophthalmologist may recommend seeing you more frequently.

I was recently diagnosed with Type 2 diabetes, now what?

You should have a dilated eye exam soon after receiving this diagnosis. This is because for many patients with type 2 diabetes, you could have been living with this disease for several years unknowingly. This means your eyes were at risk for damage without you or your physician's knowledge.

Your first exam will include a dilated eye exam. If you are diagnosed with an eye disease, your eye doctor may recommend seeing you more frequently.