RETINAL VEIN OCCLUSION

What is a Retinal Vein Occlusion?

Arteries carry blood into the eye and veins carry blood out. When a retinal vein becomes blocked, it cannot drain blood from the eye. This leads to hemorrhaging and leakage of fluid into the area of the retina that is affected by the blockage. The affected retinal area often does not function as well causing symptoms of blurred vision, especially if the most important part of the retina, called the macula, is involved. If the main vein leaving the eye becomes blocked, it is called a Central retinal vein occlusion (CRVO). If one of the smaller veins becomes blocked, it is called a Branch retinal vein occlusion (BRVO).

Why do I have a Retinal Vein Occlusion?

Most people develop vein occlusions because of chronic damage to the retinal vessels, and occur most often after the age of 50. Retinal vein occlusions are more common in patients with a history of:

- Diabetes
- High Blood Pressure
- High Cholesterol
- Glaucoma

If a vein occlusion occurs in a young healthy patient, further laboratory testing may be indicated to look for a clotting disorder.

Assessment of a Retinal Vein Occlusion

We are able to detect a retinal vein occlusion during an eye examination. Often additional diagnostic testing is performed to help determine how much damage the vein occlusion has caused to the eye and to help develop an appropriate treatment plan. This testing often includes Optical Coherence Tomography (OCT) and Fluorescein Angiography (FA).

What Treatment is Available?

Appropriate treatment will depend on whether you have a BRVO or CRVO, how severe the occlusion is, and whether the vein occlusion has caused secondary macular edema (swelling in the central retina), retinal ischemia (poor blood flow to retina) or neovascularization (abnormal blood vessel growth). Common treatments include:

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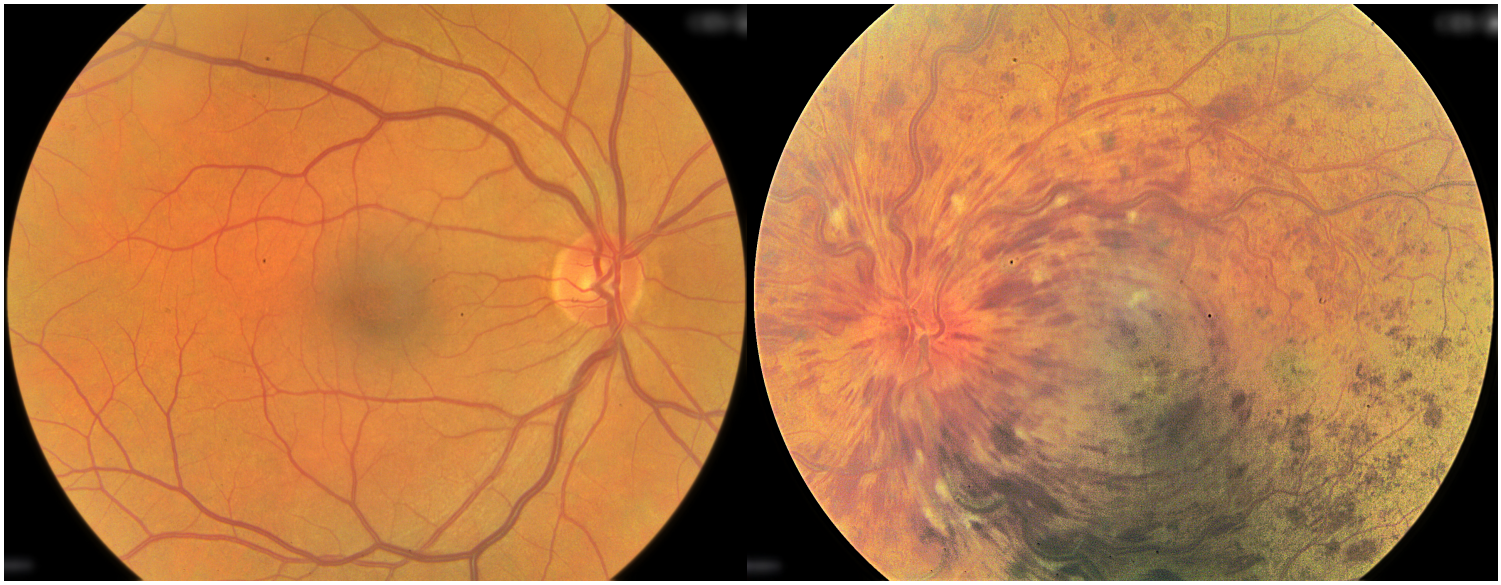
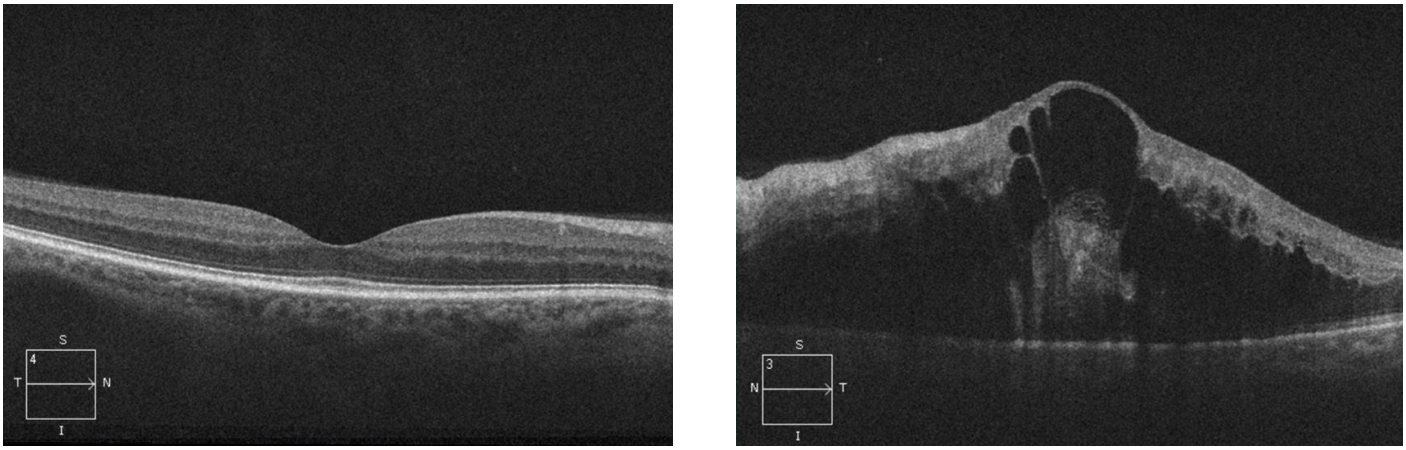
- Intravitreal injection of anti-vascular endothelial growth factor (VEGF) drugs (Avastin, Lucentis, Eylea)
- Intravitreal injection of steroids (Ozurdex, Kenalog)
- Focal laser treatment
- Pan-retinal photocoagulation laser treatment

Often multiple injections or a combination of the above therapies may be needed to stabilize the vein occlusion and maximize the vision in your eye.



Fundus photo of a normal eye (left) compared with a CRVO in the fellow eye (right)



Above patient comparing normal OCT (left) with OCT of fellow eye with macular edema from a CRVO (right)

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What can I do to prevent another Retinal Vein Occlusion?

If you have had a retinal vein occlusion, it is very important for you to stay as healthy as possible to help your eye heal and decrease your risk of developing another occlusion. This includes maintaining optimal blood pressure control, keeping your cholesterol levels within normal range, and good blood sugar control if you are a diabetic. We will send a letter to your primary care doctor so you can work with them to optimize your health. We may also advise to start taking a daily baby Aspirin.

Further Information

If you have any questions or concerns regarding this or any other information please call our office at 614-464-3937.

We also have information on our website at www.theretinagroup.com

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