

CONFLICT OF INTEREST NO FINANCIAL RELATIONSHIPS OR CONFLICT OF INTEREST WITH THE MATERIAL PRESENTED 3









MEDICAL REVIEW OF ADULT DIABETES Forup of common metabolic disorders Caused by a complex interaction of genetics and environmental factors Lack of insulin > hyperglycemia Diagnostic criteria : Fasting plasma glucose 2 126 mg/dl, Hemoglobin A1C > 6.5% Type 1 DM - Insulin-dependent diabetes (IDDM) Results from pancreatic beta-cell destruction, usually leading to absolute or near total insulin deficiency Type 2 DM - Insulin-dependent diabetes (NIDDM) Variable degrees of insulin resistance and impaired insulin secretion, resulting in hyperglycemia and other metabolic derangements due to insufficient insulin action.













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 MACULA LEAKAGE OF A PERMEABILITY COMPOUND (<u>VASCULAR ENDOTHELIAR</u> <u>MACULA DEVIANO LOSS AND MINIMAL SPONTANEOUS RECOVERY</u>
 PEQUENCY OF DME INCERASES WITH DURATION AND SEVENTY OF DIABETES
 MACH DIAGONASED DIABETIC PATIENTS DEVELOP DME WITHIN 10 YARS OF ONSET OF DIABETES





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MACULA DEGENERATION SPECIAL DIAGNOSTIC STUDIES Fundus Photography Optical Coherence Tomography (OCT) Fluorescein Angiography

- ICG Angiography
- Visual Field (central and peripheral vision) testing
- Electrodiagnostics (ERG, EOG, VEP)





 Image: Strategy of the strategy













 FDA-APPROVED WET MACULA

 DEGENERATION

 REATMENT OPTIONS

 MURL 1980'S NO

 UNTIL 1980'S NO

 1980'S TO 2005 FOCALLASER

 VERSION

 1980'S TO 2005 FOCALLASER

 2005 TO TODAY

 INTRACCULAR INJECTION OF

 VISION











