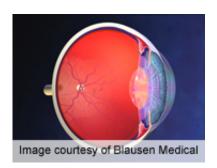


Fewer ophthalmologists equals less diabetic eye care

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outcomes were significantly tied to optometrist availability quartiles.

"Adequate access to ophthalmologists is necessary to ensure that this large number of individuals at high risk of and already affected by diabetic retinopathy or ARMD have the best visual health outcomes possible," Gibson writes.

More information: <u>Abstract</u> <u>Full Text (subscription or payment may be required)</u>

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(HealthDay)—In areas with less access to ophthalmologists, fewer individuals with diabetes, diabetic retinopathy, and age-related macular degeneration (ARMD) receive care, according to a study published in the April issue of *JAMA Ophthalmology*.

Diane M. Gibson, Ph.D., from Baruch College-City University of New York in New York City, utilized data from the 2005 to 2008 National Health and Nutrition Examination Survey to identify 1,098 individuals with diabetes, 345 with diabetic retinopathy, and 498 with ARMD (all ?40 years of age).

The researchers found that individuals who lived in a county in the highest ophthalmologist availability quartile were less likely to be unaware they had diabetic retinopathy (predictive margin [PM], 66.1 versus 84.1 percent). They were also less likely to have vision-threatening diabetic retinopathy (PM, 1.4 versus 2.6 percent), compared to individuals who lived in a county in the lower three quartiles of ophthalmologist availability. Those living in a county in the lowest quartile of ophthalmologist availability were more likely to be unaware they had ARMD (PM, 93.8 versus 88.3 percent), compared to those living in a county in the higher three quartiles of ophthalmologist availability. No



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