

# Prevalence of diabetic macular edema varies by test

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based on MESA definitions for monocular fundus [photographs](#), which were greater than DME prevalence based on OCT (21.1 percent). Based on NHANES definitions, DME and CSME prevalences from monocular fundus photographs (28.5 and 21.0 percent, respectively) were similar to OCT prevalence (21.1 percent). For eyes without DME on OCT, 58.2 and 18.0 percent were diagnosed as having DME on monocular fundus photographs based on MESA and NHANES [definitions](#), respectively.

"Caution is suggested when extrapolating prevalence of eyes that may benefit from anti-vascular endothelial growth factor therapy based on epidemiologic surveys using photographs to diagnose DME," the authors write.

Several authors disclosed financial ties to the pharmaceutical and ophthalmic industries.

(HealthDay)—Diabetic macular edema (DME) is more often diagnosed using monocular fundus photography than optical coherence tomography (OCT) central subfield thickness (CST), according to a study published online Dec. 30 in *JAMA Ophthalmology*.

Yu T. Wang, from the Johns Hopkins University School of Medicine in Baltimore, and colleagues compared DME prevalence from monocular fundus photography and OCT images in a retrospective cross-sectional study involving 246 eyes from 158 participants. The presence of DME was assessed using definitions from the Multi-Ethnic Study of Atherosclerosis (MESA) and the National Health and Nutrition Examination Survey (NHANES). Diabetic Retinopathy Clinical Research Network eligibility criteria thresholds of CST were used to identify the presence of DME on OCT.

The researchers found that the prevalences of DME and clinically significant macular edema (CSME) were 61.4 and 48.5 percent, respectively,

**More information:** [Abstract](#)  
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