

REPORT

Better Health Through Research

February 2008



Glaucoma a Major Cause of Falls

Loss of peripheral vision raises likelihood of injury

The study authors speculate that the loss of peripheral visual field affects both posture and mobility, making it more difficult for people to maneuver around objects. Researchers do hold out hope, however, that mobility training could help visually impaired people navigate their environment more safely and lower their chances of falling.

The loss of peripheral vision is a primary factor in increasing the risk of falls for older adults, says a study published in *Investigative Ophthalmology and Vision Science*.

Researchers from Johns Hopkins School of Medicine's Wilmer Eye Institute surveyed 2,375 people over 20 months and found that, for each 10-percent loss in the peripheral visual field, the study participants were 8 percent more likely to fall, after adjusting for other risk factors. Those with bilateral glaucoma, for instance, lose on average 48 percent of their total visual field and consequently have a 46 percent higher chance of falling than people with healthy vision. By contrast, people who lose central visual fields are not at higher risk of falls.

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President's Corner

Getting the word out

The mission of National Glaucoma Research, as you know, is to promote new and better ways of fighting this terrible disease. But no treatment, however effective, can be of any use when people fail to seek it out.

According to findings detailed in this issue of **National Glaucoma Research Report**, almost a third of older Americans diagnosed with glaucoma are not getting the medical help they need. This trend is particularly alarming because early and consistent treatment is vital to averting blindness.

This makes it equally vital to give people the facts about this condition. We do our part through publications like this one, but I hope you will do your part, too. If you know someone suffering from glaucoma, please send them this newsletter. Or refer them to our web site — www.ahaf.org — where they can click on “National Glaucoma Research.”

We want people to know that help is out there — and that even more help is on the way.

Brian K. Regan, Ph.D.
President

Many Seniors Don't Get Treated for Glaucoma

Thousands of older Americans risk serious vision loss

Nearly a third of older Americans diagnosed with primary open-angle glaucoma are not receiving either medical or surgical treatment for their condition, according to a Duke University study released at the annual meeting of the Association for Research in Vision and Ophthalmology.

The study, which tracked a nationally

representative sample of Medicare patients from 1992 through 2002, found that some 30 percent of glaucoma sufferers did not use any medication or undergo any surgery.

This treatment gap has potentially serious health impacts, says lead researcher Joshua D. Stein, MD, MS. “We’ve known that consistent use of effective medical therapies

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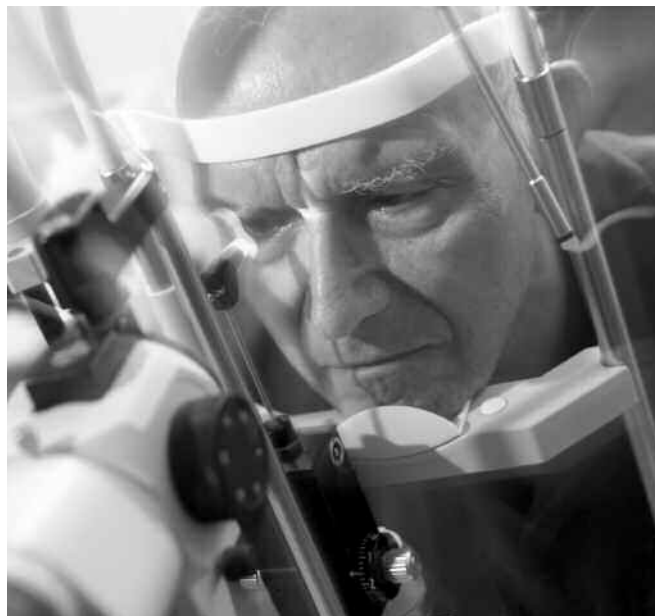
Learn more online at
www.ahaf.org

Simply click on the National Glaucoma Research link to learn more about what's new in the world of glaucoma research, as well as important information about risk factors for glaucoma and what you can do to help.

continued from Many Seniors Don't Get ...

reduces patients' risk for blindness due to glaucoma, yet we found that many patients are not benefiting from the availability of these increasingly effective therapies.

“An important lesson emerges from this research: We need to do a better job of educating patients and their physicians, as well as health policymakers and insurance-industry leaders, of the benefits of consistent glaucoma therapy. If we do not learn this lesson, glaucoma will continue to be a leading cause of blindness in older populations.”



Alzheimer's Drugs Might Prevent Glaucoma

Scientists uncover startling linkages between two conditions

While having glaucoma does not mean that you will get Alzheimer's disease, treatments developed for Alzheimer's disease could pay unexpected dividends for glaucoma sufferers, according to research from University College London's Institute of Ophthalmology. The findings raise the possibility that similar biological mechanisms underlie both diseases.

Researchers led by Dr. Francesca Cordeiro found that the beta-amyloid protein that causes plaque buildup in the Alzheimer's brain also causes nerve damage in the retina. The researchers then went on to show that a combination of three drugs aimed at reducing beta-amyloid buildup also successfully treated glaucoma in animals.

“We are trying a new approach which has never been tried before, not even to treat Alzheimer's disease,” says Dr. Cordeiro. “Our success in treating glaucoma in the lab by combining different Alzheimer's treatments represents a brand new strategy,” she adds, one that does not involve treating intraocular pressure.

Previous research led by Dr. Cordeiro had already suggested that Alzheimer's disease could be diagnosed by studying nerve-cell death in the retina.

“Many, even within medicine, fail to realize that the retina is actually an extension of brain tissue, traveling down the optic nerve into the back of the eye,” says Dr. Cordeiro. Optical scanners, she says, provide a much clearer window into the brain than such high-tech brain scanners as the MRI and CAT. As a result, her team was able to find for the first time “a clear link between what causes Alzheimer's disease and one of the basic mechanisms behind glaucoma.”

Glaucoma has a number of risk factors, and Dr. Cordeiro cautions that not everyone with Alzheimer's disease will develop glaucoma or vice versa. But the findings of Cordeiro's team do hold out hope for treating both diseases. “Since we have shown that drugs for Alzheimer's can tackle glaucoma, then potentially we could use retina damage to screen Alzheimer's drugs that target beta-amyloid buildup.”

Leave a Legacy of Help and Hope

Consider including National Glaucoma Research in your will

If you have ever thought about playing a leadership role in the fight against glaucoma — one that will further our research without affecting your current income — you may want to consider a bequest to National Glaucoma Research.

One of the great advantages to leaving a bequest in your will is that it does not affect your current lifestyle at all. You simply decide how much you would like National Glaucoma Research to receive when you pass on.

Your gift can be in the form of stocks or bonds, securities, real estate, cash — whatever you choose. You can leave a specific amount (\$5,000 or \$10,000 as an example) or a portion of your estate (such as 5% of your estate after all taxes and fees have been paid).

Because everyone needs to plan for the future, we urge you to consult an estate planner, accountant, or tax attorney to help you draft a will and set up an estate plan. We can also provide you with some assistance, if you like.

Call Gayle Handiboe, Manager of Development, at 1-800-437-2423 or email her at gandiboe@ahaf.org. She'll be happy to give you more information on leaving a legacy gift to National Glaucoma Research.

And if you have already included us in your will, please let us know so that we can acknowledge your generosity!

Thank you for thinking of National Glaucoma Research!

Questions to Ask Your Eye Doctor

Take control of your eye health

Open-angle glaucoma has no symptoms. It causes no pain. And vision stays normal. That is why it's so important to get regular eye check ups — and see your eye care specialist immediately if you are experiencing any loss of vision or blurred vision.

We strongly urge everyone to take an active interest in eye health by working with an eye care professional to protect your vision. If it will help you to remember the conversation during your eye exam, take notes or bring along a tape recorder. And don't be afraid to ask questions!

If you are diagnosed with glaucoma, you may want to know the following:

- What is my diagnosis?
- What caused my condition?
- How can my glaucoma be treated?
- How will it affect my vision?
- What can I do to retain my vision?

If your doctor recommends treatment, learn all you can about what it entails, asking such questions as:

- When will treatment start?
- How long will it last?
- What are the benefits of this treatment and how successful is it?
- Are there any side effects?

Remember, only you can take responsibility for the health of your vision. To learn more, visit us online at www.ahaf.org. Or visit the National Eye Institute at www.nei.nih.gov.

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