



## **Guide to essential care for dry age-related macular degeneration (dry AMD)**

Keep this checklist so that you know what care you should have at each stage of your AMD.

1. If you or your GP suspect you have any form of AMD you should have an urgent appointment with an optometrist at your local optician's practice or be referred to a retinal specialist at a hospital.
2. You may not need a hospital appointment if your optometrist or GP diagnoses the early stages of dry AMD as your vision may not be significantly affected.
3. You should be referred to a retinal specialist at a hospital if your optometrist or GP believes an eye doctor needs to confirm the diagnosis.
4. If your vision can no longer be improved with spectacles alone you should be referred to a low vision service. In some areas you will need to be referred to the low vision service by your ophthalmologist and so will need a hospital appointment. This should happen before you lose a lot of vision as it is much easier to learn how to make the most of your sight while it is still reasonably good.
5. You should be referred to hospital if your sight is poor and you would like to be registered as sight impaired or severely sight impaired as only a consultant ophthalmologist (eye doctor) can issue the Certificate of Visual Impairment which is needed for registration.
6. If you have low vision you should be referred to your local social care team for a low vision assessment to find out what you need to help support you in your home and get about safely.

**Helpline 0300 3030 111**

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7. If you smoke you should be advised to stop and signposted to services which can help you. Smoking makes AMD worse.
8. Your optometrist or eye clinic should advise you on how to protect your eyes from uncomfortable glare, for example by the use of anti-glare glasses or by adjusting the lighting in your home.
9. Your optometrist or eye clinic should advise you on good diet and the possible benefits of specific vitamin supplements which have been shown in a large clinical trial to be helpful. This trial was called AREDS2, so the vitamins are marketed as AREDS2 vitamins. Some family doctors can offer them on prescription but this varies by region. Some components of these supplements are found in green leafy vegetables and eggs.
10. Either your optometrist or your hospital doctor should tell you how to monitor your vision in case it changes. You may need low vision advice later or your dry AMD may become wet in which case it would need urgent treatment. Signs of wet AMD include distorted vision, for example when straight lines become wavy.
11. You should be told how to get an urgent appointment at a hospital retinal clinic if your vision changes suddenly.
12. You should be told about the possibility of seeing visual images known as Charles Bonnet Syndrome. These are called visual hallucinations and affect many people with sight loss. They are not a sign of a mental illness.
13. If you are distressed by the diagnosis of AMD you should be offered emotional support or signposted to a service which can help, for example the Macular Society counselling service.
14. You should have regular eye tests at your optometrist. If you are over 60 or registered as sight impaired this test is free.

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Join the Macular Society for regular updates on research into macular disease, new therapies and information on living well with dry AMD. For more information about joining or about AMD contact our Helpline 0300 3030 111

These guidelines are drawn from published NICE guidance and from the Royal College of Ophthalmologists Age-Related Macular Degeneration: Guidelines for Management 2013.

#### Sources

Royal College of Ophthalmologists

Age-related macular degeneration: Guidelines for Management 2013

NHS Choices

Living with low vision

Free eye examinations

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