



Advanced Valley Eye Associates

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MACULAR DEGENERATION: USE OF THE AMSLER GRID

During our examination, you have been told that you have aging changes in the “back of the eye” known as macular degeneration. The light sensitive lining of the rear of the eye is known as the **RETINA**. The most central portion of the retina (and the most important for central vision) is the **MACULA**. Many processes can affect the structure and function of the macula. These may include trauma, infection, systemic disease, and deterioration due to aging. If the function of this delicate tissue is impaired, so is your vision. The deterioration (and subsequent loss of visual acuity) is known as **MACULAR DEGENERATION**.

This process may progress in two very different ways. The first, known as the “dry” form, progresses very slowly, sometimes taking 20-30 years to cause actual loss of vision. In fact, the entire picture may remain stable and never lead to significant loss of visual function. Our concern in macular degeneration is the “wet” form. This may progress rapidly and cause severe loss of central vision.

Therapy for “dry” macular degeneration (the slower, less serious form) is limited to vitamin supplements. Treatment for “wet” macular degeneration (the faster, more serious form) consists of various laser techniques, and injections of new drugs which can have profound benefits. While the success of treatment depends upon a great many factors, it is important that this more aggressive “wet” macular degeneration is diagnosed as soon as possible. Since your ophthalmologist cannot examine your eyes daily, it is up to you to report unusual symptoms which may indicate danger.

This is the purpose of the **AMSLER GRID**.

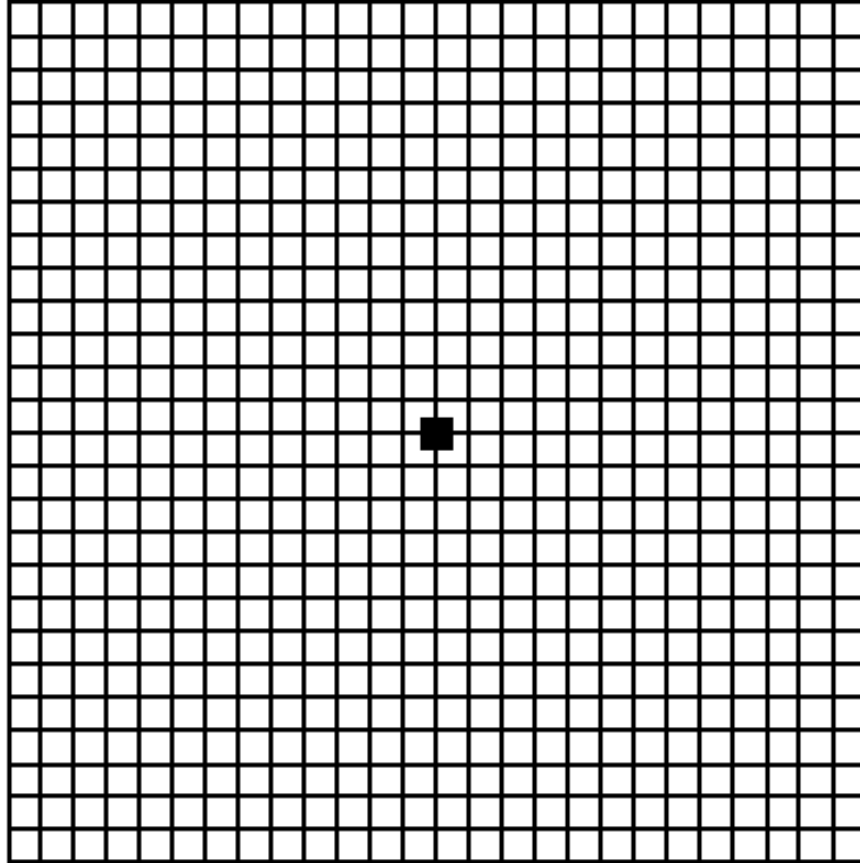
INSTRUCTIONS:

- 1) If you wear glasses for your reading, sewing, or other close-hand work, leave them on for the test.
- 2) With either your hand or a tissue placed under your eyeglasses, cover one eye. Be certain that you are only seeing with the one eye being tested.
- 3) Focus your attention on the black dot in the center of the graph-like pattern. This is where you must keep your gaze during this self-test. If you allow your eye to wander, the test is invalid.
- 4) Assess your view of the entire grid (graph-like pattern). While only focusing on the center dot, you should also see all four corners of the grid as well as the vertical and horizontal lines throughout the square. This assessment should take no more than 5-10 seconds.
- 5) The lines should appear straight, all angles should appear square, and the grid should appear equally illuminated.
- 6) **DANGER SIGNS:**
These may occur in only a small area of the grid, one corner, or an entire half of the pattern:
 - a) “Wavy” or “moving” lines.
 - b) “Darker” or “blurred” areas.
 - c) “Glared” or “missing” areas.
- 7) Repeat the entire process for your second eye.

The Amsler Grid self test is extremely sensitive. In fact, you may initially be concerned over “floaters” or other “on and off spots.” These are usually not a symptom of macular degeneration. The wavy lines or dark areas (as examples) from the “wet” macular degeneration will remain the same if rechecked a few hours later. As always, if there are **ANY** questions, you should consult your ophthalmologist immediately.

When you call, identify your problem by reading the title of this information sheet, mentioning both macular degeneration and that the Amsler Grid appears differently. An ophthalmologist is always available to help you whether or not this change significant.

Amsler Grid Monitoring Chart



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