



The Magnifier

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New Program Gives Independence To South Floridians

For More Info: 305-443-4011 Reporter Jorge Estevez

Coral Gables @ Home, a new South Florida program, is giving some elderly residents a new opportunity for independence. It is a great program for Reiss, who is 92-years-old, and very active except for her extreme vision loss. With the help of Coral Gables, Reiss can concentrate on what she can do instead of what she cannot do.

Residents in South Florida now have a number to call for various errands and everyday tasks. A yearly fee helps with transportation, referrals, and other services. This is a relief for family members.

NEW SERVICES FOR VETS

A new clinic is offering special services for veterans that have vision loss from macular degeneration. The Sioux Falls VA Medical Center has a new clinic offering low vision evaluations, activities of daily living assessment, and supply and education of low vision devices such as magnifiers, special lighting, and closed circuit televisions. For more information or to schedule an appointment, you may contact 1-800-316-8387, ext. 5924.

Macular Degeneration Foundation

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Henderson, NV 89053

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www.eyesight.org

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1-888-633-3937

WHAT'S THE STORY ON EGGS: TO EAT OR NOT TO EAT?

Parts of this article are published from the author, Professor Bruce Griffin from The University of Surrey and also from the publication Sun Health

Eggs have notoriously been on the list of "do not eat foods" if you have high cholesterol. Sky-high blood cholesterol levels may put you at risk of stroke and heart attack. However, many experts agree that the cholesterol we eat has little affect on our blood cholesterol. It's the same for other foods rich in the body chemical, such as prawns and liver. Eating these won't significantly affect your levels either. It's the cholesterol our livers make when we eat too much saturated fat that clogs up our arteries and puts us on a path to heart disease.

Despite the "ban" on eggs being lifted in 2005, still almost half of us think we should eat no more than three a week, according to a new report from the British Nutrition Foundation. Its author, Professor Bruce Griffin from the University of Surrey, says: "This ingrained misconception linking egg consumption to high blood cholesterol and heart disease must be corrected."



From SUN HEALTH: "Not only will eggs NOT push up cholesterol levels, eating two a day could help you lose pounds and lower those levels, according to the Surrey University study. Published in the European Journal of Nutrition, it found that overweight people on a diet which included two eggs a day

lost more weight and had lower cholesterol levels than those on the same diet without eggs.” Research in the US also found that eggs help boost levels of heart-healthy HDL cholesterol.

EYE HEALTH: The yellow yolks are packed with the antioxidants lutein and zeaxanthin, which Canadian researchers have found reduce the risk of cataracts and age-related macular degeneration.

DIABETES: Eggs contain lutein, which appears to help stabilize blood-sugar levels, which could be crucial in warding off the onset of diabetes.

ENERGY BOOST: Eating eggs increases iron intake. Iron is needed to make hemoglobin, the oxygen-carrying part of red blood cells, and a lack of oxygen circulation makes you tired.

BETTER BRAIN: Scientists have discovered choline in eggs boosts neurotransmissions in your brain. A lack of choline in the womb is linked to poor memory.

SPINACH: A LIFE SAVER!

There are tests that are being developed to provide an early diagnosis for genetic macular degeneration. There are other early detection devices that have been on the market for more than a year. Once a patient has shown a possible predisposition for an age-related eye disease, the early intervention process recommends eye supplements, diet, and exercise. My question is: Why wait for an alert? Take the opportunity now to improve your lifestyle. This article about spinach, written by Dr. Syed Muneeb Younus, gives many reasons why adding spinach to your diet is one way to reduce risk factors for many age-related diseases.



Did you know that it was 1929 when Popeye was first screened as a sailorman who consumed a can of spinach to become an instant muscleman? Actually, the iron content of spinach was overrated at the time (decimal point error), however, the fact remains that “calorie for calorie” compared to other vegetables, nothing is as nutrient dense as spinach”. “It is loaded with such antioxidants as Vitamins A,C, E, K B1, B6, minerals like potassium, calcium, zinc, and so much more.” The word is STEAM not BOIL for veggies. Boiling veggies (even for 4 minutes) can decrease nutritional value by as much as 50%. But wait, there is more! “Spinach is packed with over a dozen phytonutrients. These phytonutrients are potent substances that have properties that can fight cancer. More and more, a substance called homocysteine is believed to be just as an important marker of heart disease and high levels are also associated with elevated risks of stroke. However, one of the components of spinach nutrition is folate. Folate can help neutralize harmful homocysteine.” Spinach contains neoxanthin, a carotenoid, which can slash the risk of prostate cancer for men and breast cancer for women. “Do you suffer from arthritis?” Spinach also harbors anti-inflammatory nutrients.”

“Are you worried about macular degeneration and other common eye diseases people get as they age? Spinach has lutein, which is a nutrient that has been extensively shown in government studies to protect against not only macular degeneration but also cataracts. To get optimal spinach nutrition, you should thoroughly wash it and eat it raw. It works well in salads.”

THE BEAVER DAM EYE STUDY

Ronald Klein, MD, MPH; Michael D. Knudtson, MS; Kristine E. Lee, MS; Barbara E. K. Klein, MD, MPH Arch Ophthalmol. 2009;127(2):193-199.

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Objective: To examine the associations of the serum cystatin C level and chronic kidney disease with the incidence of macular degeneration (MD) over 15 years.

Methods: In this population-based cohort study of 4926 individuals aged 43 to 86 years at baseline,

3779 participated in 1 or more follow-up examinations. Age-related macular degeneration was determined by grading photographs of the macula. Individuals were defined as having mild or moderate to severe chronic kidney disease based on a value of more than 45 mL/min/1.73 m² to 60 mL/min/1.73 m² or less and 45 mL/min/1.73 m² or less, respectively, according to the Modification of Diet in Renal Disease Study equation.

Results: While controlling for age and other risk factors, the level of serum cystatin C at baseline was associated with the incidence of early MD (odds ratio per log standard deviation [95% confidence interval], 1.16 [1.01-1.35]) and exudative MD (1.42 [1.03-1.96]) but not geographic atrophy (0.89 [0.56-1.41]) or progression of MD (1.02 [0.88-1.18]). Mild chronic kidney disease was associated with the 15-year cumulative incidence of early MD (odds ratio per log standard deviation, 1.36 [95% confidence interval, 1.00-1.86]) but not the incidence of other MD end points.

Conclusion: There is a relationship between the level of serum cystatin C and chronic kidney disease with the incidence of MD. The underlying biological processes remain to be determined.

LET THERE BE LIGHT

Fifteen percent of dry macular degeneration patients progress into the wet or exudative form. This process is accompanied by physiological changes in the retinal tissue and cells. One of the changes which take place is the reduction of oxygen used by the retina or hypoxia.

Hypoxia initiates a cascade of events that result in the formation of new blood vessels behind the retina (angiogenesis) as an attempt to supply the needed oxygen. These arteries grow into the retina and in time begin to leak fluid or rupture and hemorrhage. Bleeding causes much greater visual acuity problems.

Among other types of cells, the retina contains two types of photoreceptor cells, rods (for night vision), and cones (for day vision). Each eye contains approximately 140,000,000 rods, and 6,000,000 cones. Because of this numerical difference in rods vs. cones, the retina consumes much more oxygen in darkness than in light.



Several researchers, (referenced below), have demonstrated that the high demand for oxygen during dark adaptation can be alleviated simply by using a night light, and not sleeping in total darkness. Even during sleep, sufficient light is able to pass through the closed eyelid and keep the rod cells quiescent.

The exact amount of light needed for a specific size bedroom is somewhat subjective. It is suggested by Dr. G.B. Arden¹ that 1-10 cd/m² is required. This would be interpreted as one 4 watt nightlight in a 12'X14' room, the light not being blocked by furniture.

1. Henry Wellcome Laboratories, Applied Vision Research Centre, Department of Ophthalmology and Visual Science, City University, London, UK.
2. Dr. G.B. Arden, et al, "Spare the Rod and Spoil the Eye", British Journal of Ophthalmology 2005;89:764-769
3. Ophthalmology, University of Iceland / Landspítali - University Hospital, Reykjavik, Iceland
4. Dr S. H..Hardarson, et al, "oxygen Saturation in Human Retinal Vessels is Higher in Dark than in Light",

Invest Ophthalmology Visual Sci. 2008 Dec. 30.

PUMPING IRON

Having plenty of iron in our systems has been drummed into us for many years. We're the, "Geritol" and "Iron-Deficiency-Anemia", generation, things that are fortified with iron are naturally better for us, aren't they?

Recent studies are implicating iron as a potential source of oxidative damage in AMD. According to Dr. H. Chen in the Jan. 2009 issue of Investigative Ophthalmology and Visual Science, "excess iron can accumulate in the RPE cells of the retina. The iron decreases the cells ability to digest and recycle waste proteins from the photoreceptor cells. This stress could also lead to damage of the cells DNA."

While iron is a necessary nutrient, it is needed only in small amounts. We get most of our iron through beef, liver, and pork, but it is also found in multi-vitamins, fortified-breakfast cereals, and sometimes in our drinking water.

Men seem to store iron more than women. Females are also able to reduce their iron levels with normal menstrual bleeding, after menopause this ceases.

The level of iron in your system can be determined by a simple blood test. To correct a high-iron level a change of diet would be the first course of action. If this fails, the next most conservative measure would be a simply blood donation. If iron is still at the dangerous level, researchers at the University of Pennsylvania have demonstrated the effectiveness of iron chelation to remove deposits in the RPE cells of the retina.

Questions concerning this topic can be directed to 1-800-924-4393.
Print-outs of references are available upon request.

CONTACTING MDF

To speak to a support representative directly, you may call 1-888-633-3937. If you reach our voice mail, please speak slowly and distinctly.

MAKING CONTRIBUTIONS:

Please make checks payable to Macular Degeneration Foundation, Inc., P.O. Box 531313, Henderson, Nevada 89053, or you may use your credit card on our web site <http://www.eyesight.org>. Your contributions make our services available as a support system for macular degeneration patients in the following ways:

1. We provide toll-free lines for personal contact assistance.
 2. We mail brochures and other printed materials upon request.
 3. We support an award-winning web site that provides the latest up-to-date information.
 4. We fund research proposal grants to provide therapies for both the wet and dry form of AMD.
- Contributions marked "research" are used 100% for research.

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MDF was founded in 1992 by Edmund J. Aleksandrovich Ph.D (a victim of macular degeneration). It provides MD patients and their families with the information necessary to understand the disease, the latest news concerning ways to cope with the disease, and supports the efforts of researchers to find a cure.