The Facts: Age-related Macular Degeneration (AMD)
If you’ve been diagnosed with age-related macular degeneration (commonly abbreviated as AMD), you’re not alone. More than 10 million people in the US are affected by this condition. In fact, it’s the leading cause of blindness in people over the age of 65.

What is age-related macular degeneration (AMD)?

Age-related macular degeneration is a degenerative eye disease that causes damage to the macula, the area at the center of the retina responsible for central vision. When the macula is damaged, blurriness or distortion of images can occur, and potentially, loss of central vision. Typically, changes in the macula from AMD are gradual, but in some cases, vision loss is faster and more noticeable.

There are two forms of AMD: dry and wet.

About 90% of people diagnosed with AMD have dry AMD. This condition occurs when the tissues of the macula begin to age and thin. Dry AMD is also associated with tiny yellow deposits called drusen that form beneath the retina. People with dry AMD typically experience a less severe degree of vision loss, and it develops slowly. Early AMD always starts out as dry, but in about 10% of cases it can develop into wet AMD.

Wet AMD occurs when delicate, abnormal blood vessels form under the retina. These fragile vessels leak blood and fluid beneath the retina, causing it to distort or scar. This is the reason for loss of sharp vision in people with wet AMD. Wet AMD progresses far more rapidly than dry AMD, with more severe effects—potentially including complete central vision loss.

How does AMD affect vision?

AMD causes damage to the macula, a part of the retina that gives us the sharp central vision we need to perform activities that require high-definition, straight-ahead vision. So, what you see up close or at a distance may be blurry or hazy. Brighter light may be needed when reading or it may be difficult to adapt from bright light to low light.

As the disease advances, there may be dark or blank spots in vision or faces may become blurry. Other signs include visual distortions, such as straight lines appearing wavy or objects appearing larger or smaller than they really are.

What causes AMD?

While a lack of nutrients reaching the macula can contribute to AMD, the exact cause is unknown. There are several risk factors—some can be modified and some cannot.

Genetic factors

Age: The greatest risk factor for AMD is age. Risk of AMD is only 2% at age 50, but jumps to 37% by age 75.

Family history: The risk of AMD is three times higher if an immediate family member has the condition.
Skin/eye color: People with light-colored skin and eyes are more likely to develop AMD.

Risk factors you can control

Smoking: Smokers are three to four times more likely to develop AMD compared to nonsmokers.

Diet: A diet low in certain antioxidant vitamins and minerals, such as vitamins C, E, lutein, and zinc, may be a risk factor. These nutrients can be found in some fruits, nuts, and dark leafy greens.

Obesity, high blood pressure, and high cholesterol: These risk factors all contribute to the development of advanced AMD. Try to exercise regularly and be sure to get your blood pressure and cholesterol levels checked.

Excessive exposure to sunlight: Protect your eyes from ultraviolet (UV) rays by wearing sunglasses and wide-brimmed hats.

Monitor your vision

AMD is a condition that should be monitored closely. You can check your vision with an Amsler grid, a tool that helps you watch out for subtle changes in your vision. To print an Amsler grid, visit JoyofSight.com.

However, some changes in your AMD may only be detected by an eye care professional, so it is important to keep your eye doctor appointments as directed.
About the Age-Related Eye Disease Studies

The landmark Age-Related Eye Disease Studies (AREDS® and AREDS2®), conducted by AMD experts at the National Eye Institute (NEI), provide positive news.

These studies showed that taking a supplement with high levels of specific antioxidants and zinc can reduce the risk of progression in people with moderate-to-advanced AMD.1,2 These supplements are commonly referred to as the “AREDS formula.”

The levels of vitamins and minerals in the AREDS formulas are difficult to achieve from diet, standard multivitamins, and even other eye vitamins. This is why taking an AREDS supplement daily is recommended.

Updated NEI recommendation

As a result of the 2013 AREDS2 study, the following antioxidant and zinc formula is now recommended by the NEI:

**Per day:**

- Vitamin C (500 mg)
- Vitamin E (400 IU)
- Zinc (80 mg)
- Copper (2 mg)
- Lutein (10 mg)
- Zeaxanthin (2 mg)

To learn more from the NEI about AREDS and AREDS2, visit [www.nei.nih.gov/amd](http://www.nei.nih.gov/amd).
Only PreserVision AREDS 2 Formula contains the exact levels of clinically proven nutrients recommended by the National Eye Institute based on the AREDS2® study*†

PreserVision AREDS Formula
Original clinically proven AREDS Formula* (antioxidants and zinc) in a soft gel

PreserVision Lutein Formula
Lutein replacing beta-carotene

Joy of Sight™ is a free program that strives to be your partner in the fight against AMD. We believe that the more informed you are about AMD and what you can do to help preserve your gift of sight, the better you’ll feel.

As a member you’ll receive:
• Valuable coupons
• Expert advice and information
• Tips to help reduce your risk of progression

Join now, at JoyofSight.com or call 1-866-HOPE-AMD (1-866-467-3263)

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Ask your doctor which Bausch + Lomb PreserVision formula is right for you.

*To help reduce the risk of progression in people with moderate-to-advanced macular degeneration.

†These statements have not been evaluated by the Food and Drug Administration. This product is not intended to diagnose, treat, cure or prevent any disease.
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