

Viewpoint The MDNZ Newsletter

Issue 13 – April 2019

0800 MACULA (0800 622 852) | info@mdnz.org.nz

An oldie but a goodie

We are delighted to be given the opportunity to provide you all with access online to the film *Hook, Line & Sinker*, a film produced by Andrea Bosshard & Shane Loader in 2011.

Andrea and Shane recognise how relevant this film still is to people with Macular Degeneration and they have released it to MDNZ to feature on our website with no cost to view it. **Thank you Andrea and Shane.**

The story goes like this – PJ is a middleaged truck-driver. His partner Ronnie, her two teenage kids, singing at the pub and fishing with his best mate Jono, from the backbone of his modest existence. But when he fails an eye test (due to MD) and loses the job he loves, PJ's life unravels. In the face of his imminent future as a blind man, the ever pragmatic Ronnie upscales her wedding dress business to become the family breadwinner. But PJ, unable to accept the loss of his sight and the rapidly changing family dynamics, takes everyone on a tumultuous emotional journey before he is willing to accept a new place for himself in the world.



This NZ film takes a few weeks in the lives of a very believable Kiwi family, and puts them under the lens. In the leads, Rangimoana Taylor, Carmel McGlone and Geraldine Brophy turn in some bravura moments, with McGlone and Brophy particularly strong and credible as estranged sisters. This is a likeable, admirable, and hugely enjoyable film.

And we must not forget our own MDNZ Ambassador, Dame Kate Harcourt, who also features in this film.

Get yourself a cuppa, sit back and enjoy the film at <u>https://vimeo.com/40343407</u>

Frequently asked questions Supplements

Q Is it o.k. for me to take supplements for macular degeneration when I am taking blood-thinners like Warfarin? (or other prescribed drugs perhaps?)

A The recommended AREDS2 supplement for MD does not affect blood-thinning agents such as Warfarin, Pradaxa and other novel anticoagulants. However, omega-3 supplements, not part of the AREDS2 formula, can affect the action of blood thinners and affect blood pressure so it is best to consult your GP before commencing an omega-3 supplement.

Q It is not easy to know which of the Blackmores macular health products to use – how does one choose between these three products?

A Lutein and zeaxanthin are pigments that are concentrated in the macula and have been shown, in conjunction with vitamins and antioxidants, to slow the progression of MD.

Macu-Vision + Lutein Defence

are recommended for people with moderate to severe macular degeneration. To meet the full AREDS2 research formula you need to take Macu-vision 2 tablets and Lutein Defence 1 tablet daily. Lutein Defence is suitable for someone with a family history of MD or needs to supplement his or her diet with Lutein.

Lutein-Vision Advanced is also available and this contains omega-3 and selenium in addition to lutein and zeaxanthin.

The **Age Related Eye Disease Studies** (**AREDS 1 and 2**) are two major clinical trials conducted by the National Eye Institute in the USA. The formulation of supplements (vitamins and minerals) that play an important role in eye health are outlined in the ideal daily formula:

Zinc (as zinc oxide)	80 mg
Copper (as copper oxide)	2 mg
Vitamin E	400 IU
Vitamin C	500 mg
Lutein	10 mg
Zeaxanthin	2 mg

The MDNZ **Nutrition and Supplements** brochure provides further information, including the vitamin and mineral value of a range of foods.

If you would like to receive a copy by post please call us on

- **0800 MACULA (0800 622 852)** or
- 🗹) email <u>info@mdnz.org.nz</u>

Edna is an inspiration Growing old disgracefully

A blog written by Edna's daughter, September, 2018

I was at a barn party at the weekend. There was a band and my mother couldn't resist dancing. What annoyed me was that so many people were amazed to see her dance with gusto. She is 90 and blind. OK you are probably amazed too now...but why?

We assume that anyone over 80 will be a 'crock'! If that is true, we will all be in trouble in the next 20 years as the Baby Boomer generation turns 80...because there are so many of us. Will we all live up to (or down to) general expectations?

Now it simply isn't the case that my mother has lucky genes. She is legally blind with Macular Degeneration, has spent 10 years defeating diabetes, osteoporosis and asthma and has had all the usual 'old-age' issues: a knee replacement, foot operation, shoulder reconstruction, arthritis, Dupuytren's in her hands and a few odd falls with broken arms...but she has a very positive 'can-do' independent attitude that over-rides all of these. She also enjoys herself.

My mission is to change the assumption that we all become 'crock' as we age. Of course our physical body will change. My mother is not what she used to be at 40 or even 60, but she is energetic and positive and she loves a good dance! Isn't that the message here? Let's not decline gracefully;



let us decline disgracefully and have fun! Let us keep our minds as active, positive and productive as we can.

After all, isn't that so much better for us and for those who will need to look after us when we reach 90?

NOTE FROM THE EDITOR

We visited Edna and her daughter in December and what an inspiration she is. Edna lives in her own house. She knows where everything is, everything is kept in its place so she does not lose anything. Woe betide anyone who moves things from their place!

What was so noticeable about Edna was her positive attitude and determination to keep mentally and physically fit. Her daily housework (whether needed or not) keeps Edna physically fit and her daily crosswords (using her desktop magnifier) keep her brain sharp.





VISION FOR 2020: 18 months to go

MACULAR

DEGENERATION

NEW ZEALAND

The goal remains:

To increase awareness to 80% in >50 age group by 2020

Our Vision – No-one should be blind due to treatable Macular Degeneration

As reported in the last issue of Viewpoint we know that the Bay of Plenty outscored the national result and the results of all other regions in two measures:

- People >50 knowing what Macular Degeneration is –
 BOP 63%, national 59%
- People >50 residents have regular eye health checks –
 BOP 66%, national 56%

Following the successful model in the Bay of Plenty and with funding in place to recruit a Community Educator 15 hours a week, we have made presentations to 932 people at 31 community seminars. These have mostly been in Auckland, and this includes 5 out of Auckland totaling 234 people. We must be making a difference!

In March Dr Dianne Sharp fronted a public seminar in her old home town of Invercargill with 81 attending including the local Mayor, Sir Tim Shadbolt.

While in Invercargill between Dr Sharp and Gaye (our community educator) three community presentations were made catching another 117 people. We are fundraising to enable us to conduct more seminars around NZ.



No Kiwi should go unnecessarily blind from macular degeneration

We know early detection has the greatest impact when it comes to treatment and to changing some lifestyle habits. In May our media focus will be on encouraging people to use an Amsler Grid regularly to pick up any changes in vision and to act quickly when changes occur. We hope to secure – print, radio, TV, social media, Health 2000 stores, <u>www.grownups.co.nz</u> and more. Keep an eye out.

2019 Macular Degeneration Awareness Week 20 to 26 May The focus for this year's awareness week is **Own your eye health**

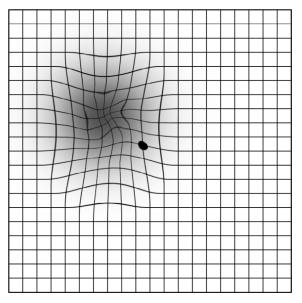
It's not a printing error, it's Macular Degeneration



Macular Degeneration can cause different symptoms in different people and can be hardly noticeable in its early stages.

Symptoms include:

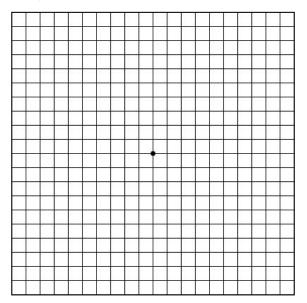
- Central or detailed vision with dark or empty spaces
- Images becoming blurry
- Straight lines appearing distorted or wavy
- Colours being hard to distinguish



The Amsler Grid can pick up early signs of vision loss. Try the simple test to see if you may be affected. Only an examination by a qualified eye care professional can properly diagnose MD, so please contact your doctor or optometrist if you notice symptoms of this condition.

Will you take the test?

Do you have Macular Degeneration?



Take this simple test

- 1. Do not remove glasses or contact lens you normally use for reading
- 2. Hold this grid at eye level, about 35cm from your face
- 3. Cover one eye with your hand and focus on the centre dot with your uncovered eye
- 4. Repeat with the other eye
- If you see wavy, broken or distorted lines, or blurred or missing areas of vision, you may be displaying the symptoms of Macular Degeneration. Contact your doctor or optometrist immediately

Take this simple test regularly so that you become familiar with what is normal vision for you. If you see sudden or definite changes contact your doctor or optometrist immediately.

To receive a copy of an Amsler Grid card with a magnet on the back to affix to your refrigerator please call us on

0800 MACULA (0800 622 852) immediately.

An Optometry student in practice

My name is Alethea Lim and I am an Optometry student in my fifth and final year of the University of Auckland (UOA) Bachelor of Optometry degree.

As Optometry students in our final year we see real patients in the Grafton Optometry Clinic. Registered Optometrists supervise our exams, assess our performance and provide feedback. Patients provide Optometry students with an opportunity to learn with a slower paced eye exam, while the patient is looked after by both an Optometry student and a registered Optometrist.

The most rewarding part of being an Optometrist is the social interaction with patients. I enjoy chatting to my patients as I am noting down test results and I take pride in seeing my patients happy and satisfied.

At a recent course workshop on Low vision, people with low vision spoke candidly about their experiences. It was inspiring to see how people moved beyond their low vision status living normal lives. Their frankness taught me that our interaction with people with low vision need not be awkward, so long as we remain considerate and understanding. I would like those with macular disease to know that your decision to engage with Optometry students in the Grafton Eye Clinic is invaluable to students who are learning to assist people through our careers.

A Low Vision Enhancement and Rehabilitation appointment at the UOA



Alethea Lim with patient, Benny Foar.

Optometry clinic costs \$65 (including 6 months unlimited visits) or \$25 with a Supergold card. This involves a full eye health check and learning how to perform visual tasks that are difficult to accomplish with new techniques, visual aids and non-optical solutions such as contrast and lighting.

For appointments, mention Macular Degeneration NZ and contact: The UOA Optometry Clinic,

Level 3, Building 505, 85 Park Road, Grafton, Auckland. Phone: 09 923 9909.

🖂 graftonclinic@auckland.ac.nz

www.optometryclinics.auckland.ac.nz

Ask reception about the available parking, when you call.

Public seminars planned for 2019

Planning is underway, with some seminars confirmed and others to be confirmed.

Please call us on 0800 MACULA (0800 622 852) to register your interest.

And please tell people who you know may be interested in those areas.

Anyone on the MDNZ mailing list will receive advice closer to the time of the event.



Dr Dianne Sharp and Sir Tim Shadbolt at the public seminar in Invercargill.

Confirmed seminars

25 May, 10am – Dr David Worsley Distinction Hotel, **Hamilton**

25 May, 10am – Dr John Ah-Chan Copthorne Hotel, Palmerston North

29 June, 10am – Dr David Squirrell Venue tbc, **Orewa**

17 August, 10am – Dr Ainsley Morris Hotel Ashburton, **Ashburton**

Other possible seminars this year include:

Rotorua and/or Taupo, Auckland central and/or west, Wellington or Kapiti Coast, Northland.

In order to finalise seminars around the country we must have the following in place and confirmed: Funding; a suitable venue; a volunteer commitment by a busy local Ophthalmologist and timing to suit an MDNZ person to attend.

These seminars are usually held at weekends.

Community seminars

Our Community Educator, Gaye Stratton, is filling her calendar with commitments primarily in Auckland, although when she travels elsewhere for public seminars she aims to deliver talks to local groups (retirement villages, clubs, groups and societies) when these can align. In May Gaye is finalising logistics for three or four in the Wellington region.

Please call us on

C 0800 MACULA (0800 622 852) to register your interest in hosting a community seminar.



Community seminar Invercargill March 2019.

MDNZ Professional Friend Programme



Since its inception in 2009, MDNZ has enjoyed a valuable relationship with eye health professionals across New Zealand and our combined efforts have saved the sight of many thousands of New Zealanders.

With effect from 1 April 2019, MDNZ offers an additional opportunity to Ophthalmology and Optometry Practices to join as a practice, thereby having the practice receive the same benefits as an individual.

Benefits of becoming a Professional Friend include:

- Highlighted listing as a Professional Friend in the MDNZ web-based national directory.
- Listing in the MDNZ Viewpoint Newsletter, upon joining and annually thereafter

- At least one post per annum on MDNZ Facebook page
- Professional Friend Certificate to display in your practice(s).
- Printed patient resources at no additional cost.

New Professional Friends since the December issue of Viewpoint:

Ophthalmologists

Dr Bheema Patil	Hamilton
Dr Logan Robinson	Christchurch

Practices

Auckland Eye,	
Ophthalmology	Auckland
McLellan, Grimmer, Edgar,	
Optometry	Wellington

NOTE FROM THE EDITOR

Apologies to our Professional Friends who were not included in the full list of Professionals in Viewpoint Issue #12 in December.

Informing and sharing – MDNZ Symposium



On 30 March 90 ophthalmologists, eye nurses and technicians from around NZ gathered in Auckland to be treated with a day of sharing and learning in a symposium full of insights and experiences. Guest speakers Assoc. Professor Dr Andrew Chang from Sydney, Drs Dianne Sharp, David David Squirrell and Ainsley Morris did not disappoint with their insightful presentations. Thank you all. Special thanks to Bayer NZ for sponsoring this symposium.

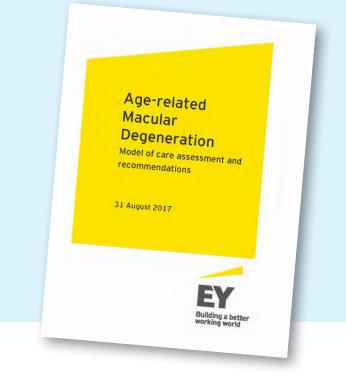
Model of Care

After a number of years consulting with the sector regarding a model of care for eye health, the Ministry of Health commissioned Ernst and Young (EY) to compile a report titled "Age-related Macular Degeneration – Model of Care assessment and recommendations". The report was finalised in August 2018 and covers 3 broad areas:

- 1. Prevention, early detection and risk stratification
- 2. Intravitreal anti-VEGF Treatment
- 3. Low vision rehabilitation

Macular Degeneration NZ (MDNZ) has worked closely with the Ministry of Health throughout the report process and is pleased to see a number of the 20 recommendations already being implemented. For example, PHARMAC has approved the use of Eylea as a second line agent when specific PHARMAC imposed criteria are met. This is great news for patients with MD unresponsive to Avastin. Furthermore, the Ministry of Health has adopted diagnostic and treatment guidelines that are being rolled out across all District Health Boards (DHB) in NZ.

However, there is still work to do. MDNZ currently awaits a commitment to increased awareness, prevention and early detection of MD. MDNZ continues to influence the development and implementation of the



one free eye check policy adopted by the coalition government that should assist early detection of MD. Until such time as the government financially supports awareness and education activities the level of awareness of MD in NZ will remain low (currently 59%). This contrasts starkly with an awareness level of greater than 90% in Australia.

Recently, several independent organisations and individuals with an interest in Low Vision rehabilitation, including MDNZ, consulted extensively with the Ministry of Health in order to better define additional work that needs to be undertaken in this area. Collectively, we continue to await outcomes from this consultation.

MDNZ encourages you to take a look at the report. Please let MDNZ know what you think, in particular any ways in which we can continue to advance progression on the model of care to support people living with MD.

To read the full report go to http://www.mdnz.org.nz/resources/ news-and-media-releases/

How you can make healthy choices

You may think your eyesight is at the mercy of your genetics, and there is some truth to that. However, there are ways you can protect your eyesight and even improve it, and one of those ways is by eating the right foods.

All Hail Kale: Kale is the top combo of both lutein and zeaxanthin, which are healthy for your eyes.

Dangling the Carrot: Carrots are most definitely good for your eyes. Carrots are topped with vitamin A, along with C and E, which help reduce both cataracts and agerelated macular degeneration.

Not a Corny Choice: Corn contains the carotenoids lutein and zeaxanthin.

Positive Spin on Spinach: Is filled with vitamin C, beta carotene, lutein, and zeaxanthin. These are natural sunscreen for the eyes.

Brave the Broccoli: Not only is broccoli rich in dietary fibre, it also contains Vitamin C.

Appealing Oranges: Most people associate oranges with a way to fight off colds. They're full of Vitamin C and a natural antioxidants for the eyes. **Crack Open an Egg:** Eggs contain lutein, Vitamin E, and Omega 3 fatty acids.

Ring in the Bell Peppers: Colourful peppers can help you avoid age-related macular degeneration, which can lead to partial or complete blindness.

Go Fish: Cold-water fish varieties such as salmon, tuna, and sardines can deliver a healthy dose of omega-3 fatty acids.

Planting Ideas about Chia Seeds:

Chia seeds have more omega 3s than its popular cousin, flax seed.

Blueberries: Blueberries are known for antioxidants, they can also be beneficial for your eye health.

Embrace Legumes: Legumes – examples include black-eyed peas, kidney beans, lima beans, and peanuts – contain zinc, an essential trace mineral that is found in high concentration in the eyes.

Spread the word that smoking causes sight loss

Smoking is the biggest 'modifiable' risk factor for age-related macular degeneration – smokers are up to four times more likely to develop the condition. Passive smoking can also have an impact on your eye health.

Tell as many people as you can about the affects smoking has on your eyes



Help us to transform lives by supporting the Macular Degeneration three-year Vision for 2020 campaign.

Your support will provide:

\$50	Information packs posted out to 10 people
\$150	Information packs for 36 seminar attendees
\$500	One week of the 0800 Save Sight Helpline
\$2,000	An Awareness and Education Seminar in your community
\$10,000	Help fund a Community Educator

Saving the sight of another is such a wonderful gift.

"No one has ever become poor by giving." Anne Frank

Bequests

Have you thought about leaving a gift to support the future work of MDNZ and its aim to reduce the incidence and impact of MD in New Zealand?

Contact us to find out more on <u>info@mdnz.org.nz</u> or call 0800 MACULA (0800 622 852)

"Great things are done by a series of small things brought together "Vincent Van Gogh



Please donate to support those with MD

Title	Mr / Mr	s / Ms / Miss /	Other	
First name				
Last name				
Name to app	ear on tax rec	eipt		
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Suburb				
City		Postcode		
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Signature				
For online donations visit <u>www.mdnz.org.nz</u>				
Thank you				
□ I would like to receive information about MD				
I would like to receive the MDNZ newsletter				
Please send me more information about leaving				
a gift/ bequest for MDNZ in my will				

Please complete this form and return to:

Macular Degeneration New Zealand, PO Box 137070, Parnell, Auckland 1151 or Fax 09 307 2021

For assistance phone **0800 MACULA (0800 622 852)** Donations over \$5 are tax deductible.

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Have you had your Macula checked lately?

Macular Degeneration is an eye disease that can quickly lead to vision loss if left untreated.

One in seven New Zealanders over the age of 50 will contract this eye disease.

A recent Galaxy poll showed that 41% of New Zealanders over the age of 50 do not even know what macular degeneration is, yet it is nearly as prevalent as heart disease and half as prevalent as diabetes*.

Far too many people are going blind because they don't know that a simple test can identify early changes and save their sight. People mistakenly think that blindness is an inevitable consequence of getting old but that's no longer the case – provided that people know the warning signs of macular degeneration and seek treatment early.

Detecting macular degeneration can be as simple as taking the Amsler Grid test regularly (see inside). It can be done in the comfort of your home or wherever you see a grid pattern. If the lines in the grid appear distorted or bent, then contact an optometrist without delay.

For further information contact MDNZ

- www.mdnz.org.nz
- 🔇 0800 MACULA (622 852)
- 🗹 info@mdnz.org.nz

