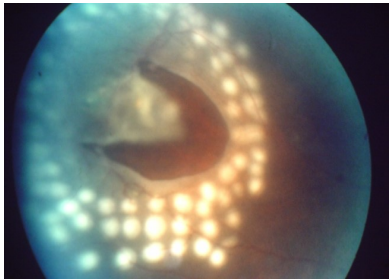


**DIAGNOSIS AND TREATMENT  
OF LATTICE DEGENERATION**

Our staff will dilate your pupils with eye drops so that one of our doctors can exam-



**Retinal tear with surrounding treatment with laser. This is immediately after the treatment. Eventually, the white spots will become black.**

ine your retina with various instruments and techniques. There is no viable

treatment for lattice degeneration itself, but there is

treatment for the serious eye disorders such as retinal tears or retinal detachments that may result from lattice degeneration.

A retinal tear can usually be treated with a laser or cryotherapy (freezing) that surrounds the tear or “tacks” the tear back in place. The procedure takes only a few minutes to perform and is usually painless.

It is critical that a new retinal tear be repaired as soon as possible. Untreated, it could lead to a total loss of vision. The treatment for a retinal detachment can be the same as a retinal tear or may require very serious retinal surgery requiring hospitalization, and the results are less certain. In the case of lattice degeneration alone, periodic dilated examinations are usually all that is required. After your diagnosis, we will determine the best treatment plan for you.

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**DRS. T. NABERHAUS, LOCKE, LEON,  
BOYLE, BURNS, DIMMICK, & G.  
NABERHAUS**

**OPTOMETRIC PHYSICIANS**

**TELEPHONE:  
MELBOURNE – 725-4755  
SUNTREE - 752-0100  
WWW.BREVARDVISIONCARE.COM**



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**LATTICE  
DEGENERATION**

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VISION  
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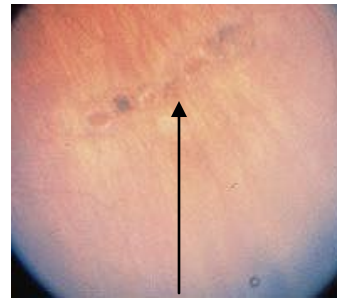
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## ***WHO GETS LATTICE DEGENERATION?***

Studies in the United States have shown that 10% of the population has lattice degeneration. There appears to be no increased risk from demographic factors such as gender, race or age. Family history is a risk factor, although cases with no family history are very common. Lattice degeneration becomes visible to the clinician before the age of 20 in most patients. Even though age is not a risk factor, the condition becomes more detectable clinically as the patient ages and therefore, the diagnosis becomes more common the older one gets. About 15% of those with high degrees of myopia (nearsightedness) have lattice degeneration. This corresponds to an increase in the length of the eyeball in highly nearsighted individuals.

## ***WHAT IS LATTICE DEGENERATION AND WHAT CAUSES IT?***

Lattice degeneration is a disease of the peripheral retina characterized by oval or linear patches of thinning of the retina. The underlying cause for the development of the condition is unknown. Lattice degeneration is more common in highly nearsighted eyes, and highly nearsighted eyes are usually longer, thereby stretching the retina.



**Lattice degeneration**

When stretched, the retina may undergo structural changes that cause the physical signs the doctor sees upon examination. Why these changes in the retinal anatomy occur in some patients and not

others is unknown. There is no evidence that other factors such as systemic health problems or the use of glasses or contact lenses has any effect on the condition. The areas of lattice degeneration tend to gradually enlarge and become darker through the years. These changes will occur without noticeable symptoms to the patient. As a result, patients with lattice may require more frequent dilated eye examinations. In addition, if the patient experiences symptoms of flashing lights, floating spots or shadows in the vision, this warrants a call to the office and an appointment for a dilated eye examination to assess the possibility of a retinal tear or retinal detachment.

## ***WHAT COMPLICATIONS OCCUR WITH LATTICE DEGENERATION?***

While lattice degeneration is not a dangerous condition by itself, it increases the risk for the development of more serious retinal disease such as retinal holes or retinal tears. If a retinal hole forms without any associated symptoms of flashes or floaters, it may be monitored without any further treatment. If symptoms occur



**Retinal tear**

with the development of a retinal hole, treatment may be warranted.

In the event that a retinal tear develops in association with lattice degeneration,

treatment will usually be necessary. Retinal tears must be treated quickly to prevent more serious disease such as retinal detachment. In fact, less than 1% of patients with lattice degeneration develop a retinal detachment. However, 40% of retinal detachments have lattice degeneration.

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