

INTRODUCTION

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Diabetic macular edema is retinal thickening at or within one disc diameter of the macular center or definite hard exudates in this region (ETDRS 1985).

It is the leading cause of moderate visual loss in diabetic patients. The prevalence and incidence of macular edema increase with both longer duration and overall level of concurrent retinopathy (Klein et al 1989).

Diabetic macular edema results from leakage of fluids through damaged retinal endothelial cells. It may be focal macular edema with focal retinal thickening due to leaking microaneurysms or diffuse macular edema with diffuse retinal thickening due to generalised breakdown of the inner blood retinal barrier as leaking microaneurysms, intraretinal microvascular abnormalities or short capillary segments (Bresnick 1983).

Laser photocoagulation whether focal, grid or modified grid is indicated for clinically significant macular edema which include cases with retinal thickening at or within 500 micrometer of the macular centre or hard exudates associated with retinal thickening at or within 500 micrometer of the macular centre or cases in

which retinal thickening is at least one disc area in extent any part of which is within one disc diameter of the macular center (ETDRS 1987).