# DOCTOR DISCUSSION GUIDE

## Managing Geographic Atrophy

### Introduction
Geographic atrophy (GA) is a progressive condition that some people with age-related macular degeneration (AMD) can develop. With this condition, some cells on the light-sensitive retina begin to get weak (atrophy). Before you meet with your eye provider or retinal specialist, familiarize yourself with these common terms that may come up during your consultation.

### Vocabulary to Know
Your doctor might mention these common terms. Here's what they mean.

<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
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<tbody>
<tr>
<td>Amsler Grid</td>
<td>It's a simple grid pattern on paper with a dot in the middle. To use this at-home test, you cover one eye. Then, you look at grid pattern with the other, uncovered eye. You do this test while you are wearing your reading glasses or corrective lenses.</td>
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<tr>
<td>Choriocapillaris</td>
<td>This layer, made up of many capillaries, is the part of the eye that supplies blood to the outer retina. In geographic atrophy, this tissue may begin to waste away.</td>
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<tr>
<td>Dry AMD</td>
<td>About 8 out of 10 with AMD have this type. As this condition progresses, the macula gets thinner. Unfortunately, there is no treatment for this form of AMD.</td>
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<tr>
<td>Fundus</td>
<td>Located opposite the pupil, this consists of the retina, the macula (area in the middle of the retina that allows you to see details), the fovea (the area with the sharpest vision at the very center of the macula), and the optic disc that surrounds the optic nerve.</td>
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<tr>
<td>Low Vision Exam or Vision Rehabilitation</td>
<td>A test that evaluates the best strategies to help maximize your remaining vision. The most common treatment is magnification, either through a telescope, a handheld magnifier, or electron magnification devices</td>
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<tr>
<td>Macular Lutea</td>
<td>You rely on this part of the eye for sharp, detailed central vision. Also called the fovea. If an area of GA develops in this area, a scotoma (area of vision loss) will be noticed.</td>
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<tr>
<td>Retinal Pigment Epithelium</td>
<td>This is the layer that nourishes the retina. It is the area that is first affected by macular degeneration.</td>
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<tr>
<td>Scotoma</td>
<td>This involves diminished or lost vision, with a blank spot in the visual field. If this is in the center, it’s known as a central scotoma.</td>
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<tr>
<td>Wet AMD</td>
<td>In this less common form of AMD, new blood vessels form on the retina and easily leak. This leakage can lead to scarring and vision loss. While you can lose vision more quickly with wet AMD, it can be treated if this is caught early.</td>
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</tbody>
</table>
Questions to Ask Your Doctor
These questions will help you start a conversation with your healthcare provider about what birth control method may be right for you.

About symptoms
❑ What symptoms should I be watching for?
❑ How can I check my symptoms at home?
❑ Once I have a sign of geographic atrophy, how quickly is it likely to worsen?

About causes
❑ Does the type of AMD I have—wet versus dry—make a difference in whether I develop geographic atrophy?
❑ If I have a sibling or parent with geographic atrophy, am I more likely to develop it?
❑ What role does a lifestyle factor like smoking play in my risk?

About diagnosis
❑ What kinds of tests will I need to tell if I have geographic atrophy?
❑ When will I find out results?
❑ How far along is my geographic atrophy?
❑ How quickly is the condition likely to progress?

About treatment
❑ Are there any medications or procedures that can stop geographic atrophy?
❑ Can taking vitamins help to slow it down?
❑ Are there any promising treatments on the horizon?

About coping
❑ Ultimately, what will my vision allow me to see?
❑ How can low-vision aids help?
❑ How can I find low-vision services if I need them?