



# THROUGH OUR LENS

SPRING 2025

## DIABETIC MACULAR EDEMA

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*“If it’s not treated in a timely fashion, DME can cause permanent damage to the retina that can lead to irreversible vision loss.”*

— Rafael Ufret, MD, an ophthalmologist at UT Southwestern Medical Center in Dallas

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 **LISTEN TO THIS!**

# THE LATEST ON

## Diabetic Macular Edema

# 1 in 10

Number of people in DME clinical trials who are Black. There is a need for many more to reflect the higher numbers of Black people who have DME compared to others.

SOURCE: *JAMA Ophthalmology*



## IS DME IN YOUR GENES?

Black people are up to three times more likely to get diabetic macular edema (DME) than others. Doctors have said this is mostly because of systemic barriers that may limit access to good diabetes care and delay preventive care, screenings, and diagnoses. But new research suggests genes may play a role, too. Researchers analyzed the genes of 1,502 people with DME and 5,603 without. They found that African American people who carry a certain variant in the *APOL1* gene were more likely to develop DME. They determined that the gene could explain 5% of Black people's increased risk of this complication.

SOURCE: *PLOS Genetics*

# 2 in 5

Number of people with DME who are Black.

SOURCE: *Journal of the National Medical Association*

 **LISTEN TO THIS!**

# WHAT IS DIABETIC MACULAR EDEMA?

Poor blood sugar control over the long term can threaten your vision

By Sonya Collins

Reviewed by Brunilda Nazario, MD,

WebMD Chief Physician Editor, Medical Affairs

Uncontrolled high blood sugar from diabetes can damage blood vessels throughout your body, including the ones in your eyes. Once blood vessel damage reaches the retina, it can lead to diabetic retinopathy and then advance to diabetic macular edema (DME).

DME is swelling (edema) in the macula—an oval-shaped area at the center of the retina that gives you central vision and lets you see fine details.

“If it’s not treated in a timely fashion, DME can cause permanent damage to the retina that can lead to irreversible vision loss,” says Rafael Ufret, MD, an ophthalmologist at UT Southwestern Medical Center in Dallas.



Normal Vision



Vision with DME



## WHAT CAUSES DME?

Ongoing exposure to high blood sugar makes your blood vessels porous.

“They develop tiny holes and become like a leaky garden hose,” says





Audina M. Berrocal, MD, an ophthalmologist at the University of Miami Health Bascom Palmer Eye Institute in Florida. When this happens to blood vessels in the retina, she says “the retina, which is supposed to be like a dry sponge, becomes wet.” Like a sponge, when the retina fills with fluid that leaks from the blood vessels, it expands and swells.

The swelling puts stress on the retina, and the macula in particular, that can damage the eye and threaten your vision. You could develop blurry vi-

sion, double vision, floaters, difficulty seeing colors, and other vision problems.

### IS THERE ANYTHING I CAN DO ABOUT DME?

DME can lead to blindness if left untreated, but “you can always get better disease control and make things better,” Berrocal says. Following your doctor’s recommendations for medication, diet, and exercise to control your diabetes can help with your DME, too. It’s also critical to start treatment for DME as soon as possible.

### WHAT YOU CAN DO TO SLOW DME PROGRESS

- ★ Ask your doctor if you’re doing everything to get your blood sugar, cholesterol, and blood pressure under control.
- ★ Never miss an appointment with your diabetes doctor or your eye specialist.
- ★ If your diabetes isn’t well controlled with your primary care doctor, ask if you need to see an endocrinologist.
- ★ Get 30 minutes of moderate to vigorous physical activity, like a brisk walk, at least five days a week.



**DME**

Do you have diabetic macular edema?

## WHAT WOULD YOU DO TO STAY AT THE TOP OF YOUR GAME?

Armye's diabetic macular edema (DME) diagnosis impacted his vision, which could affect the things he enjoys most in life – like playing pool. But with the help of VABYSMO from August 2022, he's managed to keep doing the things he loves. This is his treatment story.

For Armye, playing pool isn't just a hobby—it's a way of life. He's spent over half a decade mastering the strategy and finesse of the game, reaching the highest rank in his league. But blurred vision due to diabetic macular edema started to impact his performance and passion for the game.

**"I had blurred vision... it affected the game badly"**

When road signs became increasingly difficult to read, Armye struggled to get to his favorite places and he knew he had to take action.

**"Let's not procrastinate, let's not wait, do what you got to do"**

Armye's retina specialist introduced him to VABYSMO, taking the time to discuss coverage and build trust and confidence in the treatment. This strong relationship became the foundation for Armye's journey.

**"I'm a 69 year old... but he explained it to me like I was 12 years old. It helps big time"**

Armye was pleased to see that treatment with VABYSMO quickly led to results.

Patient experiences may vary.

\*Clinical studies showed people on VABYSMO gained vision on an eye chart (11 letters on average), similar to those on aflibercept 2 mg through year 1.

**"I saw a difference in my eyesight after just a couple of weeks"**

In the pool hall? Thanks to improved vision\*, Armye feels like he's playing with more confidence again.

**"I walk around the pool hall like I'm a champion... that's the confidence level you get when you can see"**

### IMPORTANT SAFETY INFORMATION

#### What is VABYSMO?

VABYSMO (faricimab-svoa) is a prescription medicine given by injection into the eye used to treat adults with neovascular (wet) age-related macular degeneration (AMD), diabetic macular edema (DME), and macular edema following retinal vein occlusion (RVO).

Please see Consumer Brief Summary and Important Safety Information on pages 10 and 11.

### SELECT IMPORTANT SAFETY INFORMATION

#### Do not receive VABYSMO if you:

- Have an infection in or around your eye.
- Have active swelling around your eye that may include pain and redness.
- Are allergic to VABYSMO or any of the ingredients in VABYSMO.

Please see Consumer Brief Summary and Important Safety Information on pages 10 and 11.





**VABYSMO**  
faricimab-svoa injection 6 mg

# VABYSMO improves vision quickly\* and delivers a chance for up to 4 months between treatments†

Your eyes deserve a different way to treat diabetic macular edema, your eyes deserve VABYSMO

9 out of 10 patients are covered by insurance for VABYSMO‡

No matter what type of health insurance you have, you may have options to help you afford your medicine. Options may be available to you even if you have no health insurance at all.

➤➤ **Ask a retina specialist about VABYSMO today**

\*Clinical studies showed people on VABYSMO gained vision on an eye chart (11 letters on average), similar to those on aflibercept 2 mg through year 1.  
†After 4 or 6 initial monthly eye injections, your doctor will choose a schedule of 1 to 4 months based on patient response. Dosing may vary.

‡Information is current as of January, 2025. Coverage data provided by MMIT. As insurer/payer policies are subject to change and many health plans offer more than one formulary, please check with the health plan directly to confirm coverage for individual patients. Genentech makes no representation or guarantee concerning coverage or reimbursement for any service or item.

## SELECT IMPORTANT SAFETY INFORMATION

### What is the most important information I should know about VABYSMO?

- Injections like the one for VABYSMO can cause an eye infection (endophthalmitis), separation of layers of the retina (retinal detachment), or inflammation in the eye that can lead to vision loss. Call your healthcare provider right away if your eye becomes red, sensitive to light, or you have a change or loss of vision.
- VABYSMO may cause a temporary increase in pressure in the eye (intraocular pressure), which occurs within 60 minutes after receiving the eye injection.

Please see Consumer Brief Summary and Important Safety Information on pages 10 and 11.

## SELECT IMPORTANT SAFETY INFORMATION

### What is the most important information I should know about VABYSMO? (cont.)

- Although not common, VABYSMO patients have had serious, sometimes fatal, problems related to blood clots, such as heart attacks or strokes (thromboembolic events). In clinical studies for wet AMD during the first year, 7 out of 664 patients treated with VABYSMO reported such an event. In clinical studies for DME from baseline to week 100, 64 out of 1,262 patients treated with VABYSMO reported such an event. In clinical studies for RVO during 6 months, 7 out of 641 patients treated with VABYSMO reported such an event.

Please see Consumer Brief Summary and Important Safety Information on pages 10 and 11.



IMPORTANT SAFETY INFORMATION

What is VABYSMO?

VABYSMO (faricimab-svoa) is a prescription medicine given by injection into the eye used to treat adults with neovascular (wet) age-related macular degeneration (AMD), diabetic macular edema (DME), and macular edema following retinal vein occlusion (RVO).

Do not receive VABYSMO if you:

- Have an infection in or around your eye.
- Have active swelling around your eye that may include pain and redness.
- Are allergic to VABYSMO or any of the ingredients in VABYSMO.

What is the most important information I should know about VABYSMO?

- Injections like the one for VABYSMO can cause an eye infection (endophthalmitis), separation of layers of the retina (retinal detachment), or inflammation in the eye that can lead to vision loss. Call your healthcare provider right away if your eye becomes red, sensitive to light, or you have a change or loss of vision.
- VABYSMO may cause a temporary increase in pressure in the eye (intraocular pressure), which occurs within 60 minutes after receiving the eye injection.
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- Severe inflammation of vessels in the retina has happened for patients treated with VABYSMO. Call your healthcare provider immediately if you experience a change in vision.

Before receiving VABYSMO, tell your healthcare provider about all of your medical conditions, including if you:

- Are pregnant or plan to become pregnant. Based on how VABYSMO interacts with your body, there may be a potential risk to your unborn baby. You should use birth control before your first injection, during your treatment with VABYSMO, and for 3 months after your last dose of VABYSMO.
- Are breastfeeding or plan to breastfeed. It is not known if VABYSMO passes into your breast milk. Talk to your healthcare provider about the best way to feed your baby if you receive VABYSMO.
- Are taking any medications, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Tell your healthcare provider about all the medicines you take.

What should I avoid while receiving VABYSMO?

- Your vision may be impaired after receiving an eye injection or after an eye exam. Do not drive or use machinery until your vision has recovered sufficiently.

What are the most common side effects with VABYSMO?

- The most common side effects with VABYSMO were cataract and blood on the white of the eye (conjunctival hemorrhage).
- These are not all the possible side effects of VABYSMO.

Call your healthcare provider for medical advice about side effects. You may report side effects to the FDA at 1-800-FDA-1088. You may also report side effects to Genentech at 1-888-835-2555.

Please see the VABYSMO full Prescribing Information for additional Important Safety Information.

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SUMMARY OF INFORMATION ABOUT VABYSMO

This is only a brief summary of important information about VABYSMO (vah-BUYS-mo) (faricimab-svoa) and does not replace talking to your doctor about your condition and your treatment.

What is VABYSMO used for?

VABYSMO (faricimab-svoa) is a prescription medicine given by injection into the eye used to treat adults with neovascular (wet) age-related macular degeneration (AMD), diabetic macular edema (DME), and macular edema following retinal vein occlusion (RVO).

When should I not take VABYSMO?

Do not receive VABYSMO if you:

- Have an infection in or around your eye.
- Have active swelling around your eye that may include pain and redness.
- Are allergic to VABYSMO or any of the ingredients in VABYSMO.

What warnings should I know about VABYSMO?

- Injections like the one for VABYSMO can cause an eye infection (endophthalmitis), separation of layers of the retina (retinal detachment), or inflammation in the eye that can lead to vision loss. Call your healthcare provider right away if your eye becomes red, sensitive to light, or you have a change or loss of vision.
- VABYSMO may cause a temporary increase in pressure in the eye (intraocular pressure), which occurs within 60 minutes after receiving the eye injection.
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- Severe inflammation of vessels in the retina has happened for patients treated with VABYSMO. Call your healthcare provider immediately if you experience a change in vision.

What should I tell my healthcare provider?

Before receiving VABYSMO, tell your healthcare provider about all of your medical conditions, including if you:

- Are pregnant or plan to become pregnant. Based on how VABYSMO interacts with your body, there may be a potential risk to your unborn baby. You should use birth control before your first injection, during your treatment with VABYSMO, and for 3 months after your last dose of VABYSMO.
- Are breastfeeding or plan to breastfeed. It is not known if VABYSMO passes into your breast milk. Talk to your healthcare provider about the best way to feed your baby if you receive VABYSMO.
- Are taking any medications, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Tell your healthcare provider about all the medicines you take.

What should I avoid while receiving VABYSMO?

- Your vision may be impaired after receiving an eye injection or after an eye exam. Do not drive or use machinery until your vision has recovered sufficiently.

What are the side effects of VABYSMO?

- The most common side effects with VABYSMO were cataract and blood on the white of the eye (conjunctival hemorrhage), the appearance of spots in vision (vitreous floaters), tearing of a thin layer of cells in the retina (retinal pigment epithelial tear), increased pressure in the eye, and eye pain.
- These are not all the possible side effects of VABYSMO.

The risk information provided here is not comprehensive. To learn more, talk about VABYSMO with your doctor. The FDA-approved product labeling can be found at VABYSMO.com







# DME IN THE BLACK COMMUNITY

DME affects more Black people than others. Here's what you should know.

By Sonya Collins

Reviewed by Brunilda Nazario, MD,

WebMD Chief Physician Editor, Medical Affairs

Black people are most likely to get diabetic macular edema (DME), and some treatments may not work as well for them. But because Black people tend to be underrepresented in research, less is known about how this disease affects them.

## MORE DME IN THE BLACK COMMUNITY

Black people may have a genetic tendency to get DME. Researchers have discovered a specific variant in the *APOL1* gene, which Black people are more likely to carry, that raises the risk of DME.

But genes don't explain everything.

"Higher rates of DME reflect higher rates of obesity and diabetes in both poor communities and Black communities," says Reginald J. Sanders, MD, president of the Foundation of American Society of Retina Specialists. "Diabetes is a socioeconomic disease."



## DIFFERENT TREATMENT RESPONSES

Some studies show that anti-VEGF shots—standard treatment for DME—don't work as well in Black people as they do in others. This could be because Black patients' DME is typically more severe at the start of treatment.

"It could also be that the longer you have DME, the more it is driven by inflammation than by VEGF," says Basil Williams, MD, a retina specialist at University of Miami Health



in Florida.

If that's the case, newer anti-VEGF/ANG2 shots might work better. These drugs block the VEGF proteins that spark the development of DME as well as the inflammatory ANG2 proteins that spur it along.

"We don't quite know whether Black patients get a more inflammatory type of edema," Williams says.

### LACK OF INFORMATION

Two in 5 people with DME are Black, but only 1 in 10 people in clinical trials are. That's why doctors don't understand all the differences between DME in Black people and in others.

### GET THE MOST FROM YOUR CARE

- ★ Don't delay your DME treatment.
- ★ Ask your doctor to plan care around how often you can realistically come in.
- ★ Know that it's never too late to benefit from lifestyle changes.

Enrolling in a clinical trial can take more of your time, but it may also get you better care and help improve care for Black people in the future. If you want to join a clinical trial, ask your doctor how.



 **LISTEN TO THIS!**

# MY JOURNEY WITH DME

From diagnosis to advocating for others

By Barbara King

Reviewed by Brunilda Nazario, MD,


WebMD Chief Physician Editor, Medical Affairs

When I was diagnosed with type 1 diabetes more than 20 years ago, the one thing I didn't want to lose was my eyesight. I knew my vision could be impacted, so I took changes to my eyes seriously.

I don't have a pancreas. That's how I became diabetic in my 30s. My doctor found tumors on my pancreas, and I had to have it completely removed. He told me this may lead to diabetes, and it did. Around the same time I was having issues with my pancreas, I was diagnosed with breast cancer. It was overwhelming to have so much going on at once. But with the help of friends and family, I managed.

## VISION CHANGES

A few years ago, my vision started changing. My doctor told me I had a cataract, so I did that surgery, but I still had issues



with my eyes afterward. I was told the pain in my eye was normal, but I knew it wasn't. Whenever light hit my eye, an indescribable pain would enter my body. I had floaters, and that scared me. The steroids I was on led to sugar rising. So, I took my health in my hands and went to an eye specialist who confirmed I had diabetic macular edema (DME) in my right eye.

I didn't want to acknowledge it when I heard DME. But I went home and did my research, and that helped me. It was the unknown that scared me.



DAVID IZQUIERDO/500PX/VIA GETTY IMAGES; INSET PHOTOGRAPHY BY DONNA JOHNSON

## MY SIGHT ON THINGS AHEAD

As my vision has declined in my right eye and now my left, my life has been impacted. I'm unable to drive at night, and depending on the weather, I cannot drive during the day. It has impacted my social life. I need much more help getting around and am so grateful my two adult daughters live nearby. At home, I use eye drops to help with my DME and am exploring surgery. My dog, Onyx, keeps me company.

It wasn't enough for me to advocate for myself. In 2020, I co-founded the African American Diabetes Association (AADA) with a colleague to help others like myself—others who may be suffering in silence. I want them to know they're not alone.



## BARBARA'S TIPS



### **Know your limits.**

Driving has become more difficult for me so I get help from my daughters.



**Don't give up.** Keep fighting even when it's tough.



**Speak up.** I write letters, make calls—whatever I need to do.





SCAN ME

For other types of support, read “The Psychosocial Effects of DME.” Use your smartphone camera to activate the QR code.

# RESOURCES AND REINFORCEMENT

## Arm yourself with information

By Kendall K. Morgan

Reviewed by Brunilda Nazario, MD,

WebMD Chief Physician Editor, Medical Affairs



Your risk of diabetic macular edema (DME) and related vision loss is greater when you're Black due to health inequities, costs, and other barriers to timely diagnosis and care. Once diagnosed, you'll need quick access to resources and support to restore as much vision as possible while preventing further losses.

### GET THE FACTS

“Once you're diagnosed with the complication of DME, your first source of information should come from your treating physician,” says Joseph M. Coney, MD, an ophthalmologist at Retina Associates of Cleveland in Beachwood, OH, who studies racial disparities in diabetic eye diseases.

He says most doctors have handouts with basic facts about what DME is and how diabetes affects your eyes. He

also recommends reliable online sources of information, including the American Academy of Ophthalmology ([AAO.org/Eye-Health](http://AAO.org/Eye-Health)) and the American Diabetes Association ([Diabetes.org/Health-Wellness/Eye-Health](http://Diabetes.org/Health-Wellness/Eye-Health)).

### MORE SUPPORT

BlackDoctor.org offers information, tools to find a culturally sensitive doctor, and more, including a video on how to overcome the obstacles of diabetic retinopathy, including DME, featuring Coney himself. Coney also recommends seeking support at your local community center, clinic, or church. “Oftentimes, help is not as far away as you think,” he says.

RGSTUDIO/VIA GETTY IMAGES