

## The Quick Summary

There is a change present in your cornea, which is causing your cornea to swell. We need to monitor how much swelling is happening to decide what to do about it.

### Fuchs Dystrophy

Dr. Shalwala sees some changes in the inside part of your cornea. The cornea is a clear “windshield” that is the very front of your eyeball. The cornea has different layers, and the very inside layer is the endothelium. The job of the endothelium is to pump water out of the “windshield,” because a water-filled windshield is swollen and doesn’t focus light properly. When we see a problem with the endothelium, we start worrying that it might be Fuchs Dystrophy, which ultimately can lead to a very swollen windshield that is hard to see anything through. Everybody loses cells in the endothelium with age, but it usually doesn’t amount to enough to interfere with the pumping action.



The first changes that appear early in Fuchs Dystrophy patients are little “dots” that we can see on the endothelium. These are called guttae. At this point, the cornea is not very swollen, but even the presence of guttae can interfere with vision. Usually we don’t do much treatment on patients who have guttae without much swelling, but it can depend on how much the guttae seem to be hurting the vision.

As a Fuchs Dystrophy patient progresses, the endothelium works less and less so the cornea swells more and more. A swollen cornea that takes up water is like a sponge taking up water; it gets thicker. We can track how swollen the cornea is by measuring its thickness.

Over the course of a day, a Fuchs Dystrophy patient may notice that the vision gets better. That is because there is some evaporation of fluid off of the surface of the eye, which leads to water loss that ultimately leads to less water in the cornea. There is not much evaporation with the eyes closed during sleep. So, a Fuchs Dystrophy patient will have worse vision in the morning and better vision as the day goes on.

We can treat Fuchs Dystrophy patients, and the treatment depends on how much guttae interfere with vision and how swollen the cornea is. Often, a part of the treatment is salt water on the eye, because the high salt concentration draws water out of the cornea. We will have to evaluate and decide at each visit what the best treatment for you is.

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