

Macular degeneration: the facts

Sir,—Most scientific papers dealing with macular degeneration begin with the following type of statement: 'Macular degeneration . . . is the leading cause of severe visual loss in the United States and western Europe in persons aged 55 years or older . . . [it] is of unknown cause.'

Even the public understands the problem: 'After AIDS and cancer, the medical crisis Americans fear most is blindness. . . . More than half of all Americans with low vision have macular degeneration, a deterioration, of the retina that is the number one cause of visual deficiency in the elderly. . . . Although help for low-vision is plentiful, ophthalmologists often fail to refer patients to low-vision organisations. . . .'

'I can't stand the fact that many of my colleagues abrogate their responsibility,' says Dr Eleanor E Faye, who was a pioneer in developing low vision as a clinical specialty. 'No orthopedist would tell a patient, Well the bone is knit and your arm is bent at a 45-degree angle, but there's nothing more I can do for you' (personal communication).

There appears to be only a low correlation between the number and quality of publications (though there is no question that if there were no reports there could not be any quality). To examine this issue we studied the number of publications dealing with macular degeneration as reported in one of our leading medical listing services (*Index Medicus*). Our records show that 609 articles appeared during the last decade, of which 202 were in foreign languages (and therefore not readily available for study). With regard to causation, the annual average in English language journals is two to four. In all, we found 38 over the past 10 years.

It is obvious from this search of the literature that very little effort has been expended to determine the cause of macular degeneration. To put this into proper perspective, during the same period, 320 articles appeared in 1983 on the subject of AIDS. This has exploded to approximately 6000 in 1989 even though the incidence and prevalence as well as the devastation of AIDS and macular degeneration are comparable.

Therefore one must wonder whether we are dealing here with a truly insolvable problem, or whether, if greater and more organised effort were to be expended, the problems of macular degeneration might be solved.

E CHERASKIN

University of Alabama,
School of Medicine,

Birmingham, Alabama 35294, USA

- 1 Newsome DA, Swartz M, Leone N, Elston R, Miller E. Oral zinc in macular degeneration. *Arch Ophthalmol* 1989; 106: 192-8.
- 2 Seligmann J. Making the most of sight: a brighter future for the millions of Americans with 'low' vision. *Newsweek* 92-93, 16 April 1990.