

Diabetic retinopathy: Screening, prevention, and treatment

To the Editor: I read with great interest the review on diabetic retinopathy by Dr. Chong and colleagues¹ published in the August 2024 issue of the *Journal*. The article rightly emphasizes the pivotal role of primary care physicians in managing diabetic retinopathy through early detection and referrals. However, there are additional facets of diabetes care that deserve attention to further reduce the growing burden of this disease.

The authors emphasize the importance of glyce-mic control in preventing diabetic retinopathy. The article, however, could further explore the impact of new therapies, such as sodium-glucose cotransporter 2 inhibitors and glucagon-like peptide-1 receptor ago-nists, which have shown promise in managing dia-betes but have complex interactions with diabetic retinopathy.² Recent studies have highlighted poten-tial early worsening of retinopathy when rapid glyce-mic control is achieved using these agents.³ Further discussion of this phenomenon could provide clini-cians with a more nuanced understanding of the risks and benefi ts of sodium-glucose cotransporter 2 inhibi-tors and glucagon-like peptide-1 receptor agonists.

The section on arti ficial intelligence in diabetic retinopathy screening could be expanded regarding the limitations of arti ficial intelligence tools. While

systems that use artificial intelligence to identify diabetic retinopathy are promising, concerns about lower specificity and inappropriate referrals are noted in other reviews.⁴ A broader discussion of these lim-itations, as well as practical solutions, would aid in implementing such systems in clinical practice.

In summary, the authors have skillfully compiled important information on diabetic retinopathy, provid-ing valuable guidance for clinicians treating patients with diabetes. Their thorough coverage of screening, prevention, and treatment offers critical insights. I com-mend their work and look forward to future updates and discussions on advancing management strategies and applying these insights in everyday clinical practice.

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■ REFERENCES

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