Pumpkins Galore!

This time of year, we see pumpkins everywhere, from pumpkin scented candles to pumpkin lattes! But did you know, pumpkins can be very beneficial in regards to your eye health? They are one of the best super foods out there, rich in zinc, vitamin C, vitamin A, lutein, and zeaxanthin, making them a treat for your vision and overall health. So exactly what do those vitamins and minerals do for your eyes?

- Vitamin A protects the cornea and aids your eyes’ ability to see in low lighting.
- Vitamin C reduces the risk of macular degeneration, which is one of the leading causes of adult blindness.
- Lutein and zeaxanthin are antioxidants that can reduce the risk of chronic eye diseases, such as cataracts and age-related macular degeneration. They also filter out harmful high-energy wavelengths of light from your eyes.
- Zinc is highly concentrated in the eye, particularly in the retina, and it plays an essential role in delivering vitamin A to the retina to produce melanin.

So clearly, pumpkins are not only good for carving and baking pies, but they're also good for your eyes!

Unfortunately, most pumpkin snacks on the market, including pies, cakes, and breads, are full of sugar and should be eaten in moderation. Some healthier pumpkin choices would be pumpkin seeds, or a pumpkin smoothie. You could also try some pumpkin soup, a fantastic way to warm up on colder days, or have roasted pumpkin as a main course, side dish, and even in a salad. The choices are as plentiful and varied as the expressions of jack-o-lanterns. We hope you enjoy the fall season and try a new pumpkin dish or two, your eyes will thank you!

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Board inSight

Q&A with FLLEC Board Member Chuck Carter

CEO and Founder of Paint it Forward Ministries and the Lions Club District Governor for SW Florida, FLLEC Board Member Chuck Carter shares with us some of his insights...

**Q** What is the most important thing you hope to accomplish as a FLLEC Board Member? To bring visibility to the Florida Lions Eye Clinic
What do you think is your best attribute you bring to FLLEC?
A passion for telling others about how FLLEC makes our state better with the Gift of Sight.

What do you see in the future for FLLEC?
Growth. A larger facility with more staffing and support to serve more people.

What is the best piece of advice you've ever given?
Take a moment to thank God for your blessings every day.

If you could meet one person (dead or alive) who would it be?
Eric Clapton. He is amazing at producing music that touches my heart.

Do you have a favorite quote?
"Only a life lived for others is a life worthwhile." –Albert Einstein

If you were a superhero, what would your superpower be?
To fly. I loved Superman as a kid. (I’m still a kid.)

What's your favorite hobby?
Gardening. I have a 225 square foot raised bed garden in my back yard. My neighbors enjoy it too.

What's the one thing you can't live without?
My faith. I can live forever with it.

If you were stuck on an island what three things would you bring?
A sailboat, plenty of food, and my girlfriend.

Where is the best place you've traveled to and why?
Maui, Hawaii. Beautiful paradise that is still mostly unspoiled.

Visit our Website

Surfer's Eye

Sometimes known as Surfer's Eye, pterygium is a eye condition that can affect anyone who spends a lot of time outdoors.
Pronounced tur-IJ-ee-um, it is an abnormal growth of tissue on the conjunctiva (the clear membrane that covers the white of the eye) and the adjacent cornea (the clear front surface of the eye). It usually forms on the side closest to your nose and grows toward the pupil. It is most common in tropic regions, associated with chronic sun (ultraviolet [UV]) exposure, and can grow over a period of months to years.

Even though it can look quite scary, the condition generally isn't serious, and can be treated simply with over-the-counter eye ointments or drops. However, in extreme cases, it can cover the pupil and cause vision problems. The longer and greater exposure to the sun throughout a person's life, the higher the risk. Here, in Southwest Florida, a large portion of our most at risk population spends extreme amounts of time outdoors while working in jobs, such as farming or landscape maintenance. These are some of the same populations that can't afford eyecare.

At the Florida Lions Eye Clinic, we have treated 173 cases this year, with 28% of those being serious enough to require surgery. Luckily, our doctors are experienced in this type of eye surgery and it can be preformed at the clinic on an out-patient status. Thankfully, many of the clinic's pterygium patients, who require surgery, are able to return to work soon after the procedure.

FLLEC Receives Generous Grants!

The Florida Lions Eye Clinic recently received generous grants from a variety of area foundations and associations. The Community Foundation of Collier County awarded FLLEC three grants, totaling $17,690, the Martin Family Foundation, Inc. awarded the Clinic a $20,000 grant, and finally, the Florida Association of Free and Charitable Clinics, together with the State of Florida, Department of Health, awarded the Clinic a grant of $63,500. The funding from all three will help the clinic to serve an increased number of patients and perform many procedures and surgeries inhouse, as well provide funding for surgeries performed and referred to specialists outside of the clinic.

“We are thrilled to have the support from all three organizations,” said Robin Goldstone Garcia, FLLEC Executive Director. “Through these generous donations, the clinic will be able to treat an increased number of patients and continue working towards our goal of providing no cost eyecare to everyone in the community in need. They truly have made a difference for us, and we are extremely grateful!”
Flashes & Floaters

What are they and what to do if you get them?

Contributed by Dr. Tim Diegel, FLEC Medical Director

Early in my career as an ophthalmologist, someone told me
that by age 60, 60% of people will suddenly experience flashes and floaters in their vision. I wondered, who really came up with that statistic? I’ve since repeated it to many patients that come in with these symptoms. It reassures them that flashes and floaters are very common and part of the normal aging process.

The inside cavity of the eye is filled with a jelly material (the vitreous) which is attached in various places to the retina. The retina is a thin multilayered tissue including nerve layers of cells called by their shape, rods and cones. There are also many fibers, a blood vessel layer, a pigment layer and surface blood vessels. In children and young adults, the vitreous is a thick jelly material but, with age, it becomes more liquified. During this time, the attachments to the retina can pull off from the retina unrelated to what a patient may be doing. This is called a vitreous detachment. Subtle flashes of light may be observed as the vitreous pulls from the retina, especially noticeable in the dark. Eventually the attachment pulls free and the flashes dissipate.

When the vitreous moves around in the eye, small fibers that are part of the vitreous appear. These may be seen because they cast a shadow in front of the retina. These are called floaters. Since our vision is very sensitive, these floaters can be very bothersome, even scary, even if they are minimal. A potential problem can occur, due to the pulling, which may cause a tear in the thin retina. That is why it is reasonable for a patient to be seen by an ophthalmologist for an examination if they experience flashes and floaters. The ophthalmologist can determine if the symptoms are part of the normal aging process as described, or if there is a retinal tear. The symptoms are usually the same at the beginning. If a tear does occur, the liquified fluid can find its way into the tear and separate more of the retina away from its inner attachment from the white sclera of the eye. If the tear is in the upper part of the eye, fluid continues to go down with gravity and cause a significant retina detachment. A patient will notice lack of vision and a blind spot due to this separation, and loss of visual field. This can cause a permanent serious loss of vision. It’s important to realize this possibility and to know what to do to prevent a tear from progressing.

Most of the time when experiencing the flashes and floaters there is no tear. The vitreous just pulls free from the attachment to the retina. In the normal aging process, the floaters will not bother a patient as much with time, but they still may be present especially looking up at a bright blue sky or a white piece of paper. But how can you be sure there is no tear? An office exam is needed. A tear can be difficult to see by the eye doctor. You may be told that
“all looks good” but the pulling may be ongoing so a tear may form in a few days. A patient is usually told to return if there are more symptoms - more flashes, an increase in floaters or a blind spot area in the vision. Some patients may feel reassured from the first exam, or become too busy, and don’t return for another exam. It is so important to follow up if you have been told to come in for a further check of your retina. If a tear is found with no or minimal fluid, a laser surgery can be performed immediately to seal the tear down. This is the treatment for early on in the process of a retinal tear developing and is usually very successful. But, it’s possible that a tear can reform again with more pulling at a future time.

One day in the office, a receptionist told me her brother called and was worried because he was experiencing flashes and floaters. I told her that he better come in to be checked. She replied that he was in Costa Rica and would have to drive 6 hours to San Jose to the closest ophthalmologist. What should he do? I asked him if he was seeing thousands of little dots like pepper. This particular symptom of a shot of pepper is particularly important in diagnosing the start of a retinal tear.

The receptionist’s brother was having this symptom so I told him to make the drive now and don’t delay. There is a pigment layer under the surface of the retina and specks of the pigment can come out from under the tear into the vitreous. This may not happen in all tears but if the specks are seen, it’s a sign of a tear.

There are many reasons when an eye exam can be inconvenient or almost impossible, but one should not wait more than a few days to be seen with flashes or floaters. If the pigment specks are observed; then even sooner better.

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**Animal Eyes Fun Facts!**

- **Geckos** can see colors around 350 times better than a human!
- **A worm** has no eyes at all.
- **Camels** have three eyelids!

- **Cat’s eyes** have almost 285 degrees of sight in three dimensions (ideal peripheral vision for hunting).
- **An ostrich’s eye** is bigger than its brain.

- **Dolphins** can sleep with one eye open.
- **Dogs cannot distinguish between red and green.**
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