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Branch Retinal Vein Occlusion (BRVO)

Vein occlusions result in poor blood flow through tissue drained of blood. This “backs up” the system causing bleeding, swelling, and lack of oxygen. High blood pressure is the most common condition associated with BRVO. About 10 to 12 percent of the people who have BRVO also have glaucoma (high pressure in the eye). Diabetes is probably also a risk factor.

Branch retinal vein occlusion refers to loss of flow in small veins in the retina, the layer of light-sensing cells at the back of the eye. If the blocked retinal veins are ones that drain the macula of blood, central vision will be affected. During the course of vein occlusion, sixty percent or greater will have swelling of the central macular vision area. In about one third of people, this macular edema will remain for over one year.

BRVO causes a painless decrease in vision, resulting in misty or distorted vision. If the veins cover a large area, new abnormal vessels may grow on the retinal surface, which can bleed into the eye and cause blurred vision (similar to that in diabetes).

There is no cure for BRVO. Finding out what caused the blockage is the first step in treatment. Your ophthalmologist may recommend a period of observation, since hemorrhages and excess fluid may subside on their own. Depending on how damaged the veins are, laser surgery may help reduce the swelling and improve vision. Laser surgery may also shrink the abnormal new blood vessels that are at risk of bleeding. New treatments include Avastin, the same medicine used for macular degeneration.

If you have had a branch retinal vein occlusion, regular visits to your ophthalmologist are essential to protect vision.