

Understanding Thyroid Eye Disease (TED)

Thyroid Eye Disease (TED) is a serious, progressive and vision-threatening rare autoimmune disease.^{1,2} Common symptoms include light sensitivity, eye grittiness, bulging eyes and double vision, among others – all of which can reduce a person’s independence, ability to work and self-confidence.^{1,3}

TED occurs when the body attacks its own cells around the eyes

TED is an autoimmune disease. An autoimmune disease occurs when a body’s immune system can’t tell the difference between foreign cells and normal cells. With TED, this causes the muscle and fat tissue behind the eye to become inflamed and swollen.^{4,5}

TED triggers a cascade of symptoms and can have vision-threatening consequences

People living with TED can experience an array of early symptoms, which are often confused with other conditions, such as allergies or dry eye.

Early symptoms of TED may include:¹

- Light sensitivity
- Excessive tearing
- A feeling of grittiness in the eyes
- Swelling of the eyelids
- Dry eyes
- Redness and irritation

As the disease progresses, signs and symptoms may include:

- Eye bulging (proptosis)
- Double vision (diplopia) – reported in about 50% of people with TED^{8,9,10}
- Misalignment of the eyes (strabismus) – reported in more than 50% of people with TED^{6,7}
- Vision loss

“Because of my Thyroid Eye Disease, I had to quit my job and required eight surgeries to regain some of my vision after being legally blind for many years.”

– LAQUILLA, who lives with TED



TED has two phases – acute and chronic

TED begins with an acute phase, which means that symptoms appear suddenly and often get worse quickly. The inflammation (redness and swelling) and scarring that start to form during this phase can damage eyes and cause a number of changes. While the length of the acute phase of TED is different for everyone, it usually lasts between six months to three years. Ideally, treatment should be given during the acute phase.^{1,11,12}

Acute TED is followed by what is called the chronic phase. TED may slow down over time, but that does not mean it has gone away. Some may still have symptoms during the chronic phase, and it is possible for symptoms to return, or “flare up,” if left untreated. Early treatment is better, but treatment later in the course of TED may still help. While doctors recommend getting treatment as early as possible in the acute phase, treatment may still make a difference even in the chronic phase.¹¹

TED is its own distinct disease

TED is most often seen in people who also live with Graves' disease – affecting up to half of people with Graves' – but it is a distinct disease that requires separate treatment.^{12,13,14}

A diagnosis of TED may even come before a finding of Graves' and can be an early warning sign of impending thyroid dysfunction. TED can also occur in people living with Hashimoto's hypothyroidism or even in people with normal thyroid function.¹⁴



TED is rare and has known risk factors

Acute TED is estimated to affect 15,000 to 20,000 people each year in the United States. The primary risk factors for TED include:

Gender

TED is more likely to affect women; however, men are at a greater risk for more severe symptoms.^{1,15}

Age

TED is typically diagnosed among middle-aged people. In fact, the odds of developing TED increase by 17% with each decade of age progression.¹⁶

Smoking

Smoking is a noted risk factor for TED, increasing the risk two-to-eight-fold.¹

“TED was painful and scary as I literally watched my vision and outward appearance slip away. Driving was not an option, work was increasingly more difficult, and my whole life came to a bleak and lonely halt.”

– WANDA, who lives with TED

The significant burden of TED can affect many aspects of patients' lives

People living with TED often experience long-term functional, psychological and financial burdens, including inability to work and perform activities of daily living.^{3,8} In addition, pain, impairment of sight, depression, and loss of self-confidence all have a substantial effect on patients' well-being.^{1,3,17}

Optimal care includes a specialized approach

Given the complex nature of TED, not all eye doctors have experience treating it. People who suspect that they may have TED or are at risk for developing TED can find a TED Specialist at TEDDoctors.com to have their eyes examined and receive a proper diagnosis and management plan. Effective management of TED requires early diagnosis and active monitoring to identify the best opportunity for medical intervention.¹



To learn more about TED, please visit www.ThyroidEyes.com.

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