



COULD IT BE KC?

Stephen Curry has navigated life with keratoconus (KC). Now, he's working with Glaukos to help others do the same.

Symptoms to look for, a self-assessment, frequently asked questions, and other resources to help you manage your KC journey

Understanding keratoconus

What is KC?

Keratoconus, often referred to as “KC,” is a progressive eye disease in which the cornea weakens and thins over time, causing the development of a cone-like bulge and blurry or distorted vision. KC can result in vision loss and may lead to a corneal transplant in severe cases.

Signs and symptoms of keratoconus can include:

- Excessive eye rubbing, even from allergies
- Difficulty seeing at night
- Frequent headaches
- A family history of KC
- Mildly blurred vision
- Regular prescription changes
- Vision that cannot be fully corrected with glasses or contact lenses

What causes KC?

The exact cause of KC is unknown, but genetics, the environment, and hormonal changes could play a role in the development of KC.¹⁻³ Even excessive eye rubbing may contribute as a result of seasonal allergies.

Early KC detection is important for treating this disease

Without early diagnosis and treatment intervention to preserve your vision, KC can lead to significant vision change.



A recent survey found that the KC diagnosis process typically took months to years, with up to a third of people saying they didn't receive enough information during this time. Some respondents feared permanent vision change.*

*Glaukos data on file

Do you have any family members with KC?

Caregivers are encouraged to be proactive about their children's eye health



Dr. Darcy Wolsey,
Ophthalmologist

"If they have a family history of keratoconus and the children start needing glasses, I would recommend getting screened for KC—especially starting at age 12."

Take the KC self-assessment

Do you often feel the urge to rub your eyes?

Y

N

Do you experience blurry vision?

Y

N

Do you sometimes have trouble seeing clearly, even with new glasses or contacts?

Y

N

Do you have difficulty with your night vision (eg, glare around lights)?

Y

N

Has your vision changed, requiring frequent updates to your glasses/contacts?

Y

N

Has a family member been diagnosed with keratoconus?

Y

N

Understand where you are, then track where you're going

The path forward is manageable. Use the space below to record the next steps, current questions, and essential motivations of your KC journey.

1. Which KC symptom is making the biggest impact on your life?

2. What activities or hobbies do you struggle with because of your vision?

3. Do you have any outstanding questions for your care team?

4. When is your next follow-up appointment?



Schedule an appointment with your eye doctor and share these results to start the conversation about keratoconus.



Keratoconus: Common questions and answers

Knowledge is key to understanding how you can navigate your KC journey. Gathered below are commonly asked questions and answers.

Q1: Why is eye rubbing associated with keratoconus?

A1: Eye rubbing is a common sign and symptom of keratoconus. Excessive and frequent eye rubbing may aggravate and further weaken an affected cornea. Even eye rubbing from allergies can cause KC to progress.

Q2: What kind of tools are used to diagnose keratoconus?

A2: A corneal tomographer and topographer are imaging devices that can help measure the corneal shape and/or thickness to identify symptoms of KC.

Q3: I have more questions about KC. Who should I talk to?

A3: If you have questions about keratoconus, ask your eye doctor. You can also learn more by calling the KC Care Connect team at 855-419-5852.

Q4: What should I do after being diagnosed?

A4: Schedule regular appointments with your eye doctor to monitor your cornea and determine if keratoconus is progressing, which can guide the treatment recommendation and your decision on next steps.

Treatment options, too!

VISION MANAGEMENT

Contacts and glasses do not treat KC and only help correct your vision while you're wearing them. Further interventions will be necessary for treating the root causes of this disease and possibly preventing progression.



Eyeglasses or soft contact lenses

Mild or early cases of KC that have not shown progression could benefit from prescription glasses or disposable/reusable contact lenses.



Rigid gas permeable contact lenses

Rigid gas permeable (RGP) contact lenses are small-diameter rigid contact lenses that are placed on the top of the eye to help mask the irregular corneal shape.



Prescription corneal implants

Micro-thin prescription corneal implants are designed for the reduction or elimination of nearsightedness and astigmatism (an imperfection in the curve of the eye) in patients with KC.

INTERVENTION



Corneal cross-linking

Corneal cross-linking is a minimally invasive outpatient procedure that combines the use of ultraviolet (UV) light and riboflavin (vitamin B2) eye drops.

END-STAGE SURGERY



Corneal transplant surgery

In KC, when the cornea becomes dangerously thin or when sufficient vision can no longer be achieved by contact lenses due to extreme damage to the cornea, a corneal transplant may be the only option.



Find a Keratoconus Detection Center near you by visiting <https://find-a-doctor.coulditbekc.com/>

Get the support you need every step of the way

There are several KC advocacy and support groups dedicated to communal support and building understanding*.

The National Keratoconus Foundation (NKCF) is an outreach program dedicated to increasing awareness and understanding of keratoconus (KC), and aims to provide resources to individuals with KC.

nkcf.org

Keratoconus Group is a safe, supportive community for people living with keratoconus and the people who care for them.

keratoconusgroup.org

World KC Day is November 10, an international awareness day sponsored by the National Keratoconus Foundation. This day is dedicated to raising awareness about keratoconus (KC), as well as educating and advocating for those living with KC.

worldkcday.wordpress.com

*Glaukos is not responsible for content on third-party sites.

Find Could it be KC on:



A new resource for your KC journey

If you need guidance along your keratoconus path, the KC Care Connect team is here to help.



Personalized support – We can help you prepare for a conversation with your doctor about KC



Educational and informational resources on keratoconus – Our Dedicated Patient Support Team is standing by with answers to your questions



Help finding a doctor – We can help you find a KC Detection Center that can screen for keratoconus



Call 855-419-5852 to start a conversation with KC Care Connect today.



For a long time, I didn't realize anything was wrong with my eyes. I got so used to just getting by — squinting and brushing off the constant headaches — that I didn't even know what clear vision was supposed to look like. I saw the world a certain way and assumed that was normal.

Then came the diagnosis. I could barely even pronounce keratoconus (KC). It opened up a new world of fear. But I knew I couldn't ignore it. I had to ask for help and put in the work to get treated.

I did it because I didn't want to lose sight of what mattered. When you realize life's this beautiful, you don't want to waste any time seeing it clearer. Vision is one of the biggest privileges we have.

If you have KC, I hope this story helps you to feel seen and to keep going.

Keep dreaming big. And keep your eye on the ball.



Scan the QR code or visit CoulditbeKC.com to find more information and support for your KC journey

References: 1. What causes keratoconus? National Keratoconus Foundation (NKCf). Accessed October 11, 2022. <https://nkc.org/about-keratoconus/what-causes-keratoconus>
2. Fecarotta CM, Huang WW. Pediatric genetic disease of the cornea. *J Pediatr Genet.* 2014;3(4):195–207. 3. Wang Y, Rabinowitz YS, Rotter JI, Yang H. Genetic epidemiological study of keratoconus: evidence for major gene determination. *Am J Med Genet.* 2000;93(5):403–409.