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Elevated prevalence of age-related macular degeneration associated with lower socioeconomic status in an urban primary care setting

Abstract:

Age-related macular degeneration (AMD) is a leading cause of irreversible vision loss in older adults, yet its relationship with socioeconomic status (SES) remains understudied. This study investigates the association between lower SES and AMD prevalence in a diverse urban primary care population. Color fundus photographs were collected from 312 patients aged 50 to 89 years during routine primary care visits at Mount Sinai Hospital–Union Square. All images were evaluated and graded for AMD by two ophthalmologists using standard clinical criteria. Socioeconomic status was estimated by linking patient ZIP codes to median household income data from the U.S. Census Bureau. Results revealed that patients diagnosed with AMD had a significantly lower median household income (\$72,000) compared to those without AMD (\$151,000), with a highly significant difference ($p < 0.0001$; Z-test). These findings suggest a strong association between lower SES and increased prevalence of AMD, potentially due to disparities in healthcare access, lower disease awareness, and underutilization of preventive eye care services. The study highlights the need for targeted vision screening and early detection strategies in underserved urban populations to help reduce inequities in eye health outcomes and prevent avoidable vision loss.

Biography

Adriana Kaganovski is a third-year medical student at SUNY Downstate College of Medicine, with a strong interest in ophthalmology, health equity, and population-based research. She has contributed to clinical research on age-related macular degeneration and the impact of socioeconomic disparities on vision health. Adriana's work emphasizes the importance of improving access to screening and care in underserved urban communities. She has presented at national ophthalmology meetings and is committed to pursuing a career in academic medicine. Her current research focuses on integrating public health approaches into clinical ophthalmology to reduce preventable vision loss.