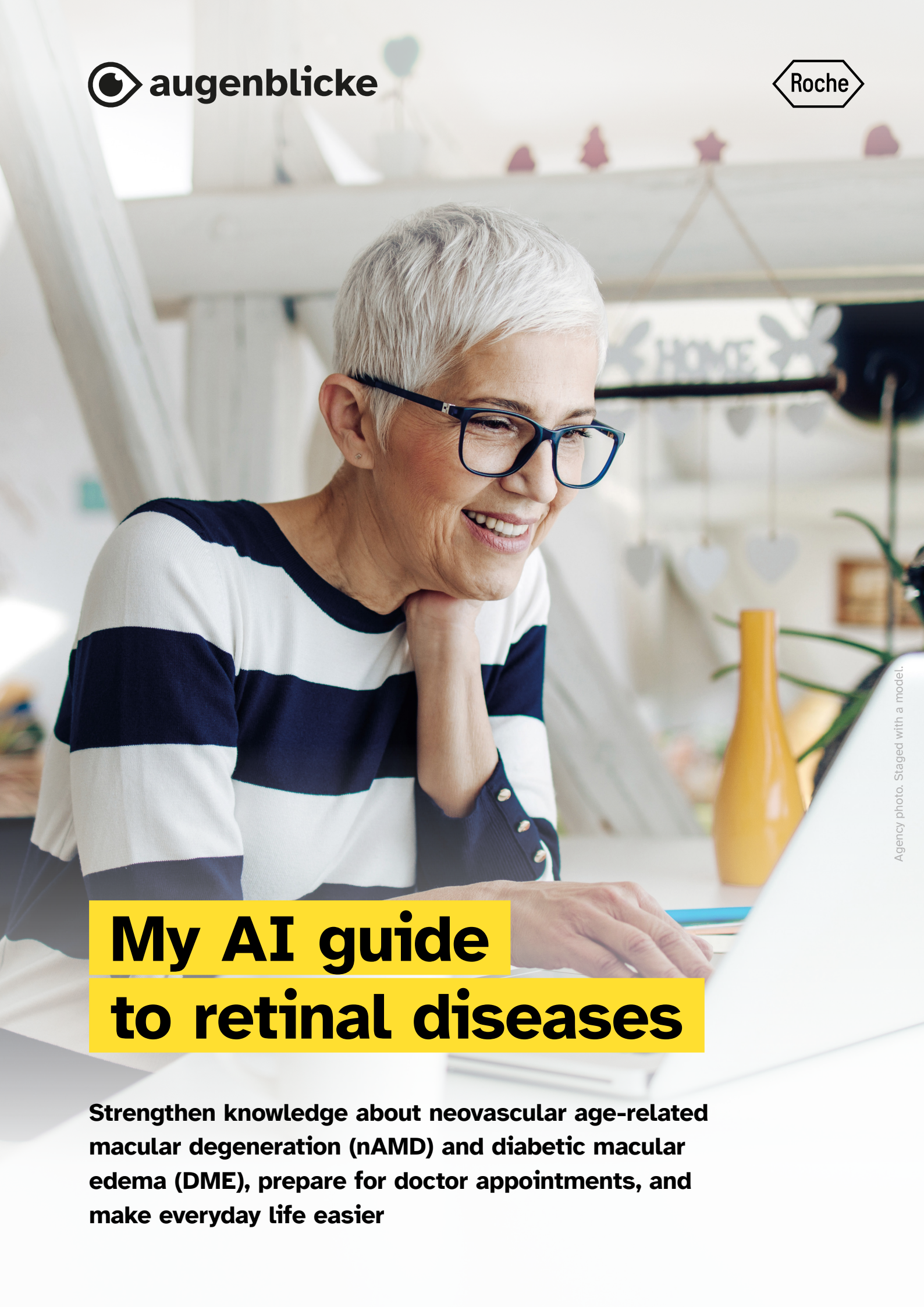
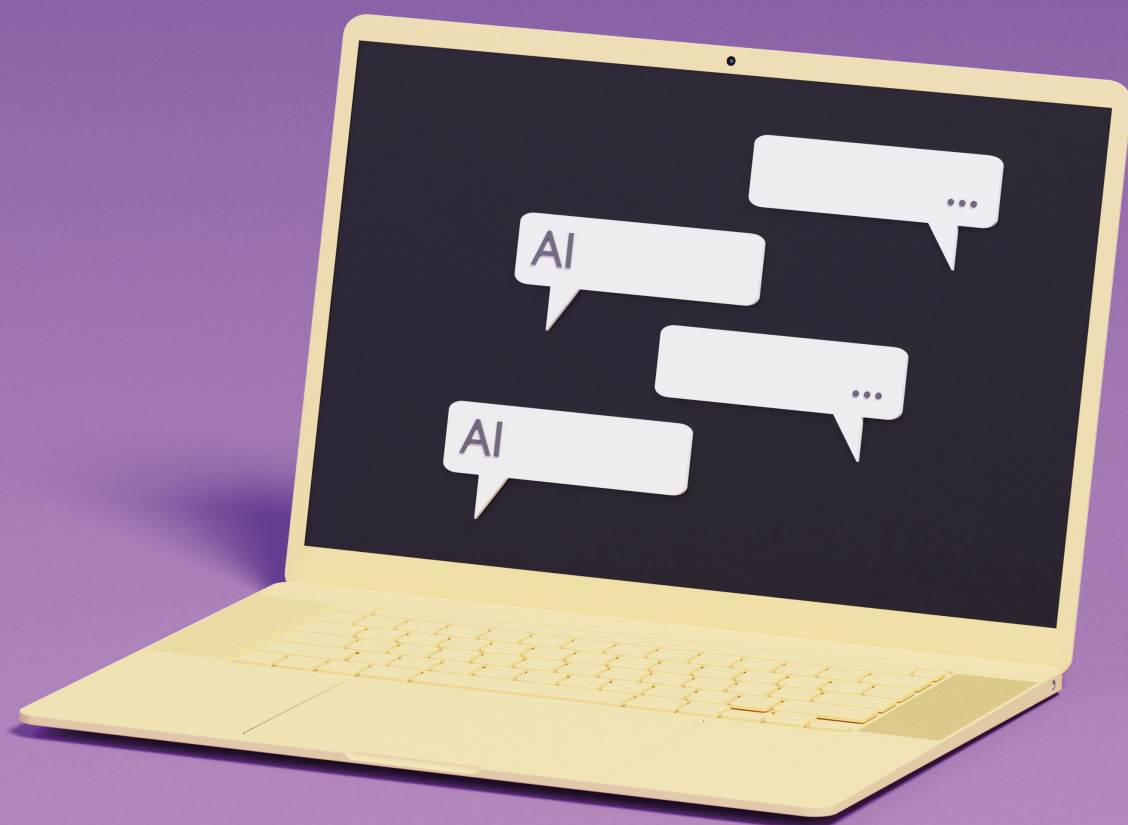




My AI guide to retinal diseases

Strengthen knowledge about neovascular age-related macular degeneration (nAMD) and diabetic macular edema (DME), prepare for doctor appointments, and make everyday life easier



My AI guide to retinal diseases

Strengthen knowledge about neovascular age-related macular degeneration (nAMD) and diabetic macular edema (DME), prepare for doctor's appointments, and make daily life easier



Important **information**



Useful **tips**



Page reference



Social media



Read more here



Would you like to read the AI guide digitally?
Then scan the QR code and access it at
www.MeineAugenblicke.de

Contents

06 What to expect in your AI guide

Chapter 1: Understanding AI Chatbots

09 What can AI chatbots do, and what can't they do?

10 Data protection and security

Chapter 2: The Art of Questioning – Prompting Made Easy

13 What is a prompt?

13 Tips and specific use cases for good prompts

14 Advanced: Why do AI responses vary?

14 Typical stumbling blocks and mini-checklist before submission

Chapter 3: Using AI in Everyday Life with Retinal Disease – Prompts to Try Out

17 Understanding the report of findings and technical terms

19 Preparing for the doctor's appointment, motivation, expectation management and treatment intervals

20 Better understanding the disease, everyday topics such as self-determination & social law

21 Personal lifestyle, psychological coping and fear of blindness

Chapter 4: Summary and Next Steps

23 Key takeaways as well as help & personal interaction

What to expect in your AI guide

Dear patients and relatives,

The diagnosis of a retinal disease such as wet age-related macular degeneration (nAMD) or diabetic macular edema (DME) raises many questions in everyday life: how exactly does injection therapy (IVOM) work? Why is it so important to attend appointments consistently, even if you don't feel an immediate improvement? How can you prepare for your next appointment with your ophthalmologist to openly address your fears before the injection?

Artificial intelligence (AI) can help. It helps **translate medical jargon from your OCT findings into understandable words, summarize retinal health information, or create lists of questions for your next appointment.**



Important: AI does not replace a consultation with your ophthalmologist. It is a tool that strengthens you and provides you with guidance. The decision about your treatment is always made together with your treatment team. Please also ensure that your data is protected when using it: formulate questions anonymously without personal information such as name, address or specific patient number.

This guide walks you through how to use AI safely and meaningfully, so that you can experience that “eureka moment” for your health. Find out in a clear manner how the technology works, what you need to look out for and specific ways to help you in everyday life with nAMD or DME. You will find many practical examples for topics such as:

- **Structured preparation for IVOM appointments:** Questions about the injection and how to manage anxiety.
- **Understanding of findings:** OCT values and “retinal fluid” explained simply.
- **Treatment adherence:** Why “stability” is a success and how it can lead to longer injection intervals.
- **Self-determination:** Managing everyday life independently despite visual impairment.
- **Social assistance:** Applications for severe disability (disability rating) or assistive devices.

We will help you use AI wisely. With the right inputs, you will get better results. Our example AI prompts are based on reliable sources that are medically and scientifically tested, such as our patient website



www.MeineAugenblicke.de and the website of the patient organization **PRO RETINA** (You can find a list of helpful pages in the appendix). The more clearly you articulate your needs, the better AI can support you in working with your care team to make the best decisions for your vision. Just try the examples out and make adjustments to suit your individual situation. Feel free to share your experiences with us and the community on



📷 **Instagram** or 📘 **Facebook** at **@meineaugenblicke.de**

We wish you joy in your discoveries and above all many valuable insights for the treatment of your retinal disease!

Chapter 1

Understanding AI Chatbots

Artificial intelligence (AI) is the name given to systems that take on tasks that normally require human thinking – such as understanding text or answering questions. Large Language Models (LLMs) specialize in communicating with people in natural everyday language.



Did you know? How do I access ChatGPT? You can open and use ChatGPT in your web browser (chatgpt.com) or as an app (iOS/Android). Of course, there are other AIs you can use.

What AI chatbots can and cannot do

- **Strengths:** AI chatbots (like ChatGPT or Google Gemini) can translate medical jargon into simple words, summarize reports, or create lists of questions for your next ophthalmology appointment.
- **Limits:** They do **not make diagnoses** or **treatment decisions**. Occasionally, they make up information that may sound credible but is wrong – this is called “hallucinating”. Always view AI as a source of inspiration, not a medical expert.



Important: **AI does not replace a consultation with your ophthalmologist.**

AI chatbots are tools. You and your treatment team will make medical decisions together. The more specific you are in your prompt and the more important details you provide, the better the AI chatbot can respond.

Privacy and security

Special caution is required when handling health data:

- 1. Remain anonymous:** Never enter your name, address, or date of birth.
- 2. Anonymize reports:** When you upload or type in a report of findings (for example, OCT values), remove all information that allows conclusions to be drawn about you or the doctor's office beforehand.
- 3. Check answers with a critical eye:** Never rely blindly on AI. In your request, explicitly ask the AI **to use reputable sources, such as www.MeineAugenblicke.de or professional medical societies.**



Important: Certain anonymized contextual information, such as “I am female and 63 years old” can be helpful to assist AI chatbots in responding more appropriately to individual life situations.

It is especially important to never enter personal data. With anonymized text and a critical review of responses, you can use AI chatbots safely and meaningfully.

How patients can recognize hallucinations

- **Missing information on sources:** Caution is advised when the system does not provide clear verifiable sources (e.g. medical guidelines, studies, manufacturer information). A source reference does not guarantee the answer is correct, but it does allow the answers to be fact checked.
- **Incorrect medical terminology:** Whenever terms are used inconsistently, inappropriately or are outdated, it is a warning sign.
- **No option to ask follow-up questions or request explanations:** LLMs should allow users to ask for reasons or evidence for a statement (“How does the system arrive at this recommendation?”).
- **The answer does not match your own disease:** Many eye diseases sound similar, but are different. AI can confuse terms, for example age-related macular degeneration or diabetic macular edema. As a result, an answer may sound medical but is not consistent with one's own diagnosis. (“I have been diagnosed with nAMD. Please only respond about this disease and tell me if you do not know something for sure.”)
- **Numbers that are not classified:** AI can invent or misrepresent percentages, study results, or frequencies. Numbers may look trustworthy at first glance, but this does not mean that they are automatically correct. (“Where is this number coming from? Please provide a reliable source and explain exactly what the number means.”)



Important: Laypersons are always at risk of not being able to recognize hallucinations. Therefore, AI responses to important topics should always be reviewed with the treatment team and viewed as suggestions only.



Chapter 2

The Art of Asking (Prompting)

What is a prompt?

A “prompt” is simply your input to the AI. You can ask a question or assign a task and the AI chatbot will answer you in plain language.

An important accessibility tip: Especially for people with visual impairments (such as nAMD or DME), the voice control (**microphone icon**) in the app provides tremendous relief when reading or typing is difficult on your smartphone. You can just say your questions out loud.

You can also show the AI photographs of anonymized doctor's letters or OCT findings and ask it to analyze them.

Tips for good prompts: The more precise your input is, the more helpful your result will be. Remember these six basic rules for good prompts:

- 1. Ask with precision and clarity:** Be specific about what you want to know.
- 2. Give context:** Mention your pre-existing conditions or comorbidities. For example: “I have diabetic macular edema (DME), diabetes and experience significant anxiety. Explain to me...”
- 3. Set the format:** Determine what the answer should be. For example: “Write a list with up to five short sentences” or “answer with an easy-to-use table”.
- 4. Articulate your purpose:** Tell the AI what you need the information for. For example: “I want to understand why it is important to go to IVOM therapy regularly from the start.”

5. Set style & tone: “Explain it in simple, patient-friendly language” or “Use a friendly, tone.”

6. Review your response with a critical eye and request sources: Always encourage AI to use legitimate sources. For example: **“Provide evidence for everything with reputable sources like www.MeineAugenblicke.de or www.pro-retina.de.”**

Avoid typical stumbling blocks

Be sure to work around these common mistakes so that AI doesn’t overwhelm you:

- **Too many topics in one prompt:** Eight tasks at a time often result in a superficial answer. It is better to work in stages (first have the findings summarized, then ask for a list of questions for the doctor).
- **Not specifying a format:** If you don’t specify a format, you often get unstructured text blocks. Request bullet points or tables specifically.
- **Lack of limits:** AI likes to write a lot. Limit the answer, e.g. with “maximum 150 words” or “exactly 5 points.”
- **Allow uncertainty:** Prompt the AI: “If you are unsure, please say so.”

For advanced users:

Why do AI responses differ? Asking the same question twice will make you realize that AI answers a little differently each time. This is because AI models completely recalculate the probability of the next word for each request; each response is unique. High-performing models perform a real “thought process” (reasoning) to resolve complex medical correlations.

Tip: If an answer seems too superficial, simply attach the **following sentence to your prompt: “Give it very deep thought”**. This signals to the model that it should invest more computational effort in providing a high-quality and thoughtful answer.

Pre-submission mini-checklist



Is the objective clear?

- What do I need the answer for?
- What will the outcome help me do?



Was context given?

- Which kind of person or situation should the answer be suited to?
- Is there any background information to help better understand the request?



Was the format defined?

- In what form should the answer come back (e.g. list, table, short text, summary, list of ideas)?
- Is there a desired length or structure (e.g. 150 words)?



Have follow-up questions been factored in?

- If something is unclear, would you prefer the AI chatbot to ask before answering?
- Formulation tip: “If you are unsure, please ask before answering.”



Was data privacy observed?

- Has personal data been anonymized or removed?



Did you know? Just try it: If the result doesn’t match, rewrite the prompt and submit it again!



Agency photo. Staged with a model.

Chapter 3

Practical prompts for your everyday life

Here you can see how small changes in your question make a big difference in the quality of the response. Feel free to use the “better” examples as a template for your everyday life!

1. Understanding findings reports and technical terms

Often, the doctor is short on time and specialist terms in the doctor’s letter (such as OCT, edema, visual acuity) might remain unclear.

Not optimal: “Explain my ophthalmology letter to me.”

Better: “I am a 78-year-old woman with wet macular degeneration (nAMD) and am currently being treated with injections (IVOM). Please explain this (anonymized) findings report to me in plain language. Structure your answer as follows: 1) explain the medical terms (what do edema and visual acuity mean?), 2) what do the current values mean for my vision?, 3) which 3 specific questions should I ask at the next appointment? Answer in a maximum of eight bullet points and clearly mark any uncertainties. Use information from www.MeineAugenblicke.de.”



Step-by-step guide to uploading documents

1. Open the chat: Open the chat using ChatGPT in the browser or in the app.

2. Upload the file:

- Click the paperclip icon at the bottom of the input field.
- Select your document (for example, a PDF, DOCX, TXT, or CSV file).
- Once uploaded, the file name will appear in the chat window.

3. Give the following instruction: Instruct it how to process the document, e.g.

- “Summarize the doctor’s letter.”
- “Rewrite the letter in plain language.”
- “Just show my diagnosis and medication.”

Privacy: If you share confidential information, be sure to anonymize it by removing personal data – for example:

- Redact your name, date of birth, address, hospital name, doctor name, or patient number from the doctor’s letter.
- You can also simply type in the text, omitting any personal details or replacing them with a placeholder – for example, [name], [hospital] or [date].

This will keep the content, but it will not enable anyone to identify the individuals involved.

2. Preparing for the doctor’s appointment

The idea of an injection into the eye causes discomfort for many people. Good preparation can make the situation feel less threatening.

Not optimal: “What questions should I ask my ophthalmologist?”

Better: “I have diabetic macular edema (DME) and a great deal of fear about the next injection (IVOM), especially the burning sensation caused by the disinfectant. Create a list of eight specific questions for my appointment. Focus on the exact procedure on the day of treatment, options for local anesthesia (e.g. gel instead of drops or a short-acting local anesthetic), alternative disinfection for iodine sensitivity, and relaxation techniques during injection. Format it as a checklist with checkboxes to tick.”

3. Motivation, expectation management & treatment intervals

It can be frustrating when the injections do not immediately improve vision. At the same time, many people do not know that consistent adherence to therapy can go hand in hand with longer intervals.

Not optimal: “Do I really have to get another injection if I don’t see better?”

Better: “I have been receiving injections for months for my nAMD, but I have not noticed any improvement in my vision. That frustrates me a lot. In a motivational way, but a matter-of-fact tone, explain to me why a “dry retina” and the maintenance of the current condition (“stability”) are already a great success in this chronic disease. **Also explain to me how this kind of stability may make it possible to extend the intervals between injections (treatment intervals) in the future.** What is statistically likely to happen to my vision if I stop therapy out of frustration? Give it very deep thought and provide evidence for everything with reputable sources like www.MeineAugenblicke.de.”

4. Better understanding one's disease

Many older people have difficulty understanding complex medical processes in the eye. A visual comparison helps enormously.

Not optimal: “What is nAMD?”

Better: “I’m 78 years old and diagnosed with wet macular degeneration (nAMD). Use simple everyday language to explain to me what exactly is happening in my eye. Why is this called “wet” and why is the doctor talking about the need to make the retina dry again with the injections? Use a visual comparison with a leaking hose in a garden to help me understand. Answer in no more than five sentences and provide sources for everything from www.MeineAugenblicke.de.”

5. Self-determination and organization of everyday life

When vision in the center decreases, fixed structures in the household provide security and help people remain independent.

Not optimal: “How do I live with poor vision?”

Better: “I see increasingly worse at the center due to my retinal disease (nAMD) and I definitely want to maintain my independence at home. Create a practical checklist with five specific tips for everyday life. Consider self-determination strategies, such as ‘always the same routines’ and ‘fixed places for things’. Give it deep thought and use tips from www.MeineAugenblicke.de.”

6. Social law and technical aids

AI can help you to better cope with everyday life with visual instability and manage bureaucracy.

Not optimal: “Will I receive a disability parking permit with AMD?”

Better: “What requirements (e.g. visual acuity values) do I need to meet in order to receive a German disability ID card (degree of disability, GdB) or a disability parking permit if I have retinal disease? Prepare a table that includes: Benefit | Prerequisite | Competent body | Documents required. Consider the counseling services of www.pro-retina.de. What functions on my smartphone (such as the read-aloud function or magnifying glass) can help me in my everyday life?”

7. Self-influence & lifestyle

Many people want to know what they can actively do themselves.

Not optimal: “What can I do myself to help manage DME?”

Better: “I have diabetic macular edema (DME). Explain the direct link between my long-term blood glucose (HbA1c) and the fluid in my macula. Create a checklist of five tips for an eye-healthy lifestyle (e.g. diet, exercise). Give it deep thought and use information from professional sources.”

8. Psychological coping and fear of blindness

“Will I go blind?” is often the biggest concern after diagnosis. AI can help sort through these fears, provide objective facts (e.g. for preserving side vision), and identify initial coping strategies.

Not optimal: “Will I go blind due to my retinal disease?”

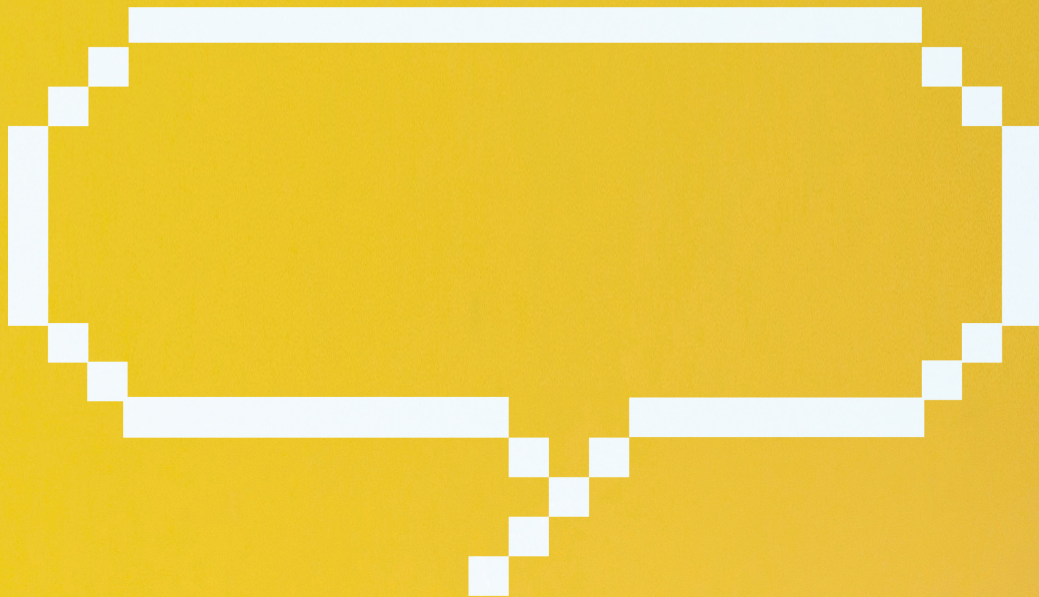
Better: “I’ve been diagnosed with nAMD (or DME) and I’m so worried about going completely blind. Help me structure my thoughts. Objectively explain to me exactly what “blindness” means in this context and whether my side (peripheral) vision will be preserved. Also, tell me three strategies to deal with this anxiety and refer to the psychological counseling services of www.pro-retina.de. Answer in an empathetic but factual tone.”

Summary

Try it out! If the outcome isn’t satisfactory, don’t be disappointed: engage in dialog, probe and clarify your request. Often, the answer becomes clearer and more helpful on the second attempt.

With accurate questions, matching formats and sources such as www.MeineAugenblicke.de, AI becomes your hands-on guide – for better understanding, structure and prepared conversations with your care team.

What are you waiting for? You are now as prepared as possible. Start right away with your first prompt.



Chapter 4

Summary and next steps

You've now learned how AI can help you better understand your eye condition and have informed conversations at the ophthalmology office.

Key takeaways:

- **Practice makes perfect:** use voice control when reading is difficult and have the confidence to ask AI questions.
- **Remain critical:** Always question AI responses and compare them with official sources.
- **Privacy:** Use AI without personal details such as your name or address.

Support and personal contact

AI is a digital guide, but it cannot replace human conversation. If you need support or would like to exchange ideas, you can take advantage of the following offers:



- **Internet & Information:** For up-to-date and layperson-friendly information, visit www.MeineAugenblicke.de

- **Aids for daily life:** The specialized **Retinora app** (www.retinora-app.de).



- **Social media:** Talk to the community on Instagram and Facebook at [@meineaugenblicke.de](https://www.instagram.com/meineaugenblicke.de).

**Stay consistent,
because informed,
treatment-committed patients
have been shown to have a
better prognosis.***



Other helpful pages:

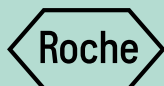
www.MeineAugenblicke.de

www.pro-retina.de

www.amd-netz.de

www.retinaplus.de

www.dog.org



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