

September is Save our Sight month

Did you know?

Around the world, an adult goes blind every five seconds and a child goes blind every minute.

The World Health Organisation estimates that the number of people with visual impairment is 285 million. Of these, 246 million have low vision and 39 million are estimated to be blind.

The top four causes of visual impairment are uncorrected refractive errors, cataract, glaucoma, and Age related Macular degeneration.

The top three causes of blindness are cataract, glaucoma and age-related macular degeneration.

The rate of avoidable blindness based on the population in WHO regions is as follows: Western Pacific Region (including Australia and New Zealand) 26%, the American Region 9.6%, and European Region 9.6%.

In New Zealand it is estimated that 20% of those registered blind are blind from preventable causes.

Compared to other countries, New

Zealanders, it seems, are poor at having regular eye exams. In a recent survey it was revealed that one in three respondents had not had an eye exam in the past 5 years and one in five had never had an eye exam—ever.

People in New Zealand are going blind because the diseases that rob them of their sight are not being detected early enough to prevent blindness

Glaucoma NZ reports that one in two people with glaucoma do not know they have it. Macular Degeneration New Zealand (MDNZ) reports that macular degeneration is estimated to affect 1 in 7 people over 50 in some way and untreated, the majority of people with wet MD become functionally blind within 2 years.

And this is why the NZ Association of Optometrists, every year, heads an eye health promotion campaign called Save Our Sight.

The fact that regular eye examinations can save our sight is the simple key message.

So how can a GP help?

A couple of things spring to mind:

1. referring for an optometrist report might make your job of diagnosing easier in the case of people with eye conditions;
2. an optometrist report will provide all clinical details that you need regarding the patient's eye health and give advice on treatment, management or referral as appropriate; and
3. an optometrist report will assist in setting a priority for a patient who needs to move into secondary care.

¹ Ahn, Frederikson, Borman, Bednarek, (2011) Health Education, Vol. 111 (2) pp.147 – 155

The fact is regular eye examinations can save sight



Why order an eye test for your patient?

- ✓ Recent change in vision
- ✓ Sore and/or red eye
- ✓ Meibomian cysts
- ✓ Watery eye
- ✓ Headaches
- ✓ Glaucoma
- ✓ Cataract
- ✓ Other.....?



Why are eyes so important:

More than **70,000 New Zealanders** aged 40 years and older have glaucoma. At least half do not know they have it.

Twenty-five thousand New Zealanders **have already lost sight** due to Age Related Macular Degeneration (ARMD) and a further 2,000 are developing the disease each year. MDNZ estimates the number of people with MD will increase by 70% by 2030.

Around **81,500 New Zealand adults and 13,200 children** are already legally blind or have a sight impairment that cannot be corrected by glasses or contact lenses.

Studies such as the Blue Mountains Eye Study have shown that **Impaired vision** can lead to falls, poor health, and higher levels of depression.²

Many patients will be more concerned about diseases that affect vision than other, more lethal diseases when told that they may have an eye problem. Being deprived of sight can have a devastating effect on the psyche, as well as economic and social effects.

And there are general health findings from examining people's eyes, for example diseases such as myasthenia gravis, diabetes, and atherosclerosis can show their first signs during an eye examination, well-before a patient experiences any symptoms.

² Wang, et al. IOVS, 1999; Wang et al Aust NZ J Pub Health, 1999

Plus, the maintenance of ocular health and correction of eye problems that decrease vision contribute greatly to the ability to appreciate the longer lifespan that all of medicine continues to allow.

The NZAO has developed an optometry referral form that GPs can order from our National Office at no charge and it can also be integrated into Medtech as a standard form:

OPTOMETRY REFERRAL FORM

Referrer

GP Name: (or Practice Stamp)

Practice :

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Patient Name: NHI:

Address:

..... DOB:

Dear Optometrist,

Please assess this patient for: (Tick or Circle where appropriate)

- Cataract
- Possible glaucoma
- Headaches
- Sore and/or red eye
- Compliance with visual standards (e.g. driving, police, occupational)
- Presbyopia
- Suitability of current spectacle Rx
- Recent change in vision
- Other (please specify)

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Relevant background details are:

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Current medications include:

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- Please contact patient to arrange an appointment
- Patient to arrange appointment

(complete if specific optometrist required)

Optometrist:

Practice :

Please provide a report of your findings

Signed:

GP Name:



N·Z·A·O

NEW ZEALAND ASSOCIATION
OF OPTOMETRISTS INC.

This form is available online at:
<http://www.nzao.co.nz/interesting-stuff#GP Referral Form>



Summary of Optometric Procedures

Procedure	Example
Diagnosis and treatment of systemic and ocular disease, and referrals to other health care specialists	Infection, inflammation, glaucoma, cataracts, retinal disorders; and systemic diseases, such as hypertension and diabetes
Assessment, diagnosis, and treatment of anomalies in vision	Myopia (near-sightedness), hyperopia (farsightedness), astigmatism, amblyopia ("lazy eye"), presbyopia (near vision defect), color accuracy, and depth perception
Diagnosis and treatment of oculomotor malfunctions	Binocular vision defects, heterophoria (latent "eye turn"), and strabismus ("turned eye")
Assessment, diagnosis, and treatment of refractive errors	Prescribing corrective lenses, contact lenses, aniseikonic (image size) lenses, low vision aids, and vision therapy
Evaluation of patients pre- and post-operatively for treatment	Cataracts and refractive surgery.
Assessment and treatment with special optical devices	Patients with permanently reduced vision
Miscellaneous procedures	Foreign body removal, epilation of eye lashes, culturing for pathogens, and ocular imaging
Counseling of patients	Patients with partial sight, color blindness, or hereditary vision defects
Consulting for schools, government, and industry	Eye screenings, lighting, and safety programs