Current Status and Strategies for Blindness Prevention and Treatment in China (BPT)

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October 13th, 2015
There are 280 million people with visual disability globally, 26 million in China. 450 thousand people go blind annually in China, which means:

ONE MORE blinded person in EVERY SINGLE MINUTE.

《2010 CHINA HEALTH STATISTICS YEARBOOK》
There are 3.9 million blind globally, with Cataract still being the primary cause of Blindness.

Domestic Blindness Information

Epidemiological survey of eye diseases in 9 Chinese Cities/Provinces in 2009

- Cataract is still the first cause of blindness in China.
- Among the victims whose ages are over 50 and eyesight below 0.1, the coverage of Cataract operation is merely 35.7%
The global strategic goal for BPT proposed by WHO and IAPB till 2020 will have to eliminate the evitable blindness caused by Cataract, Trachoma, River Blindness, Childhood Blindness, Low Vision, Ametropia, etc.

Chinese Government made a commitment in 1999 that it will be devoted to achieving this goal in China.
Overall working principle of BPT in China

The BPT has been benefited from the rapid development of ophthalmic and health services, and also given these services more honorable social responsibilities and more noble historic mission.
Till 2012 in China we have

- 5606 Ophthalmic medical institutions, in which there are 5280 Ophthalmology in general hospitals and 326 Ophthalmic Hospitals
- Nearly 80 thousand in the number of beds for Ophthalmology
- 31.4 thousand Ophthalmic Practice (assistant) Doctors
- 80 million people for annual ophthalmic emergency, and 3.09 million people in annual discharge volume

The development of ophthalmic medical and health services has made great contribution in the protection of people’s eye health.
Remarkable Achievements of BPT

- Second consecutive 5-year plan to execute “National Planning for BPT”
- The CSR has reached 1400, with it being 370 in 2000
- Has achieved to eliminate blinding trachoma in 2014
- Actively motivate social forces such as NGOs and Private Eye Hospitals to participate in Blindness Prevention
- Basic establishment of national, provincial, and municipal BPT technology guide system
National Planning for BPT
Current Problems

• China is still one of the countries with the largest blinded population

There are currently 6 million blinded people domestically, taking up 2/3 of the total blinded population in western Pacific area. About 60% of blinded people are caused by Cataract

• The Ophthalmic medical resources are insufficient and poorly distributed

In the national survey of ophthalmic medical resources in 2008, 44% of the ophthalmic medical institutions in China are located in eastern area, with 60% of ophthalmic doctors being in medium/big cities. By 2012, there has been 325 ophthalmic hospitals nationally, 70% of which are in urban area.
Current Problems

• Low coverage for Cataract recovery surgery and huge deficit between regions.
  By the latest statistics by WHO
    In Developed Countries (USA, Canada, and Japan) CSR>9000;
    In Developing Countries CSR>3000, In India CSR>6000
    In 46 countries located in the south of Sahara Desert, CSR is between 1200 and 4300
  The average national CSR in 2014 is 1400, with Shanghai urban area being 6000 and XinJiang being 330. It has been huge regional deficit.

• The expertise of ophthalmic doctors is still to be desired
  We have reached the rate of 1.15 Ophthalmic Doctor/50 thousand population, reaching the goal by the WHO “1 Ophthalmic Doctor/50 thousand population” in 2020 in advance.
  However, there is a quite amount of ophthalmic doctors in China who cannot give a Cataract surgery independently, and the overall service level needs to be elevated.
Opportunities

• The continuation of the revolution of Medical and health system and the start of the comprehensive reform of county hospitals will keep reinforcing the service elevation for county hospitals, including Ophthalmology.

• The government will continue encourage and conduct social capital for medical institutions, pushing for a quick development of health services. 83% of Ophthalmic Hospitals are non-public.

• Associations such as Chinese Medical Association Ophthalmology Branch emphasize more on BPT.

• The new National Blindness Prevention Technology Guiding Group has completed its adjustment. (This group was originally formed in 1984 for almost 30 years)
Recent Main Working Principles

• Strengthen eye disease comprehensive service capabilities in basic levels.
  ➢ 70% of Chinese population is residents in county level, meaning the suburban and rural areas are still the main field for BPT, and county hospitals are still the main force.

• The evaluation for National BPT Plan (2012-2015)
• The formulation of National BPT Plan for the next 5 years
• The launching of National Survey of Ophthalmic Capability Resources and Eye Disease Epidemiology
The continuity for BPT

The compliance with current goals of health and birth control and deepening health reforming

In compliance with international institutions, demonstrating global strategic goals and action plan calls proposed by WHO and IAPB

Stay honest and practical with macro overview and detailed working goals. Make it practical and able to be assessed.

For primary blinding eye diseases and domestic situations, we take different prevention methods and approaches.
Guiding Ideologies

1. Adhere to the principle of people-oriented. Make everyone have elementary eye care, eliminating evitable blindness gradually;
2. Absorb eye care service into medical health service system for better development;
3. Strengthen the capability of ophthalmic services in county-level general hospitals, and elevate the coverage, accessibility, fairness, and effectiveness of eye care services.

Working Principles

1. Adhere to the principles of government conducting, cooperating by multiple departments, and participating by entire society;
2. Combine the prevention of primary blinding eye diseases and the strengthening of basic-level ophthalmic service capabilities;
3. Clarify working goals and main responsibility for all levels;
Blindness by Cataract is treatable but uneasy to prevent, and the group will grow with the aging of population. The demand shall be fulfilled by elevating overall ophthalmic service capabilities;

Ametropic is relevant to the eye health of a large population of youth and correction should be executed scientifically;

The emphasis of diabetic retinopathy is prevention and the task should be moved forward to basic-level institutions and Endocrinology, making the sugar network able to be discovered as early as possible and referred;

Blinding by trachoma has been eliminated in China. The emphasis in the next 5 years will be the monitoring and propaganda, and the prevention from its back-striking.

The BPT is still a hard mission and a long journey
THANKS!