Diabetic Retinopathy

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Policy/strategy approach to diabetic eye disease

Vision
2020

CBM Medical Eye Care Policy

Diabetic Eye Disease
Aim / Strategy

AIM

• Prevent blindness and low vision from diabetic retinopathy.

STRATEGIES

• Laser should be available in all CBM supported training programmes where DR is a significant problem.
• Screen all diabetic patients for diabetic retinopathy.
• Work closely with the diabetic service to improve patient education and control.
• Support the development of national policies when retinopathy contributes at least 5% of blindness.
Diabetic Retinopathy

Bangkok 2013
DR Priorities / Activities

- Training in diagnosis and management of DR
- Provision of management services
- Detection of diabetic retinopathy
- Referral system
- Collaboration with the physicians for screening & control of diabetes
- Community awareness
- Advocacy – govts / professionals
Challenges

- Training people in Diagnosis and Management
- Poor uptake of the available services
- Cost effective detection / screening programmes
- Lack of adequate awareness and training in professionals.
Pakistan - Good Practice

- Support the development of diabetic related blindness Taskforce in Pakistan
- Screening guidelines by the DR task force in Pakistan
- Development of diabetic retinopathy grading card for ophthalmologists
- Development of a Model for DR
- Supported EMR regional workshop to address the issue of diabetic retinopathy
CBM Approach in Pakistan

Demographic data and Public Awareness Motivation

Community

Primary level

Diabetic Screening Referral.

Screening for DR Referral to Laser Centre by Refractionist

Secondary level

Recognition of DR Laser by Ophthalmologist

Tertiary Eye Care

Application of VR Surgery Further Management by VR Surgeon
CBM Research related to DR

- Collaboration with the International Center for Eye Health, the London School For Hygiene and Tropical Medicine
- CBM has supported the RAAB with Diabetic Retinopathy methodology
THANK YOU