Eye Care Situation in Bangladesh: Sightsavers Experience

SEMINAR SERIES
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Bangladesh
GLOBAL BLINDNESS SCENARIO

• 45 million people are blind worldwide
• A total of 153 million people are estimated to be visually impaired from uncorrected refractive error, of whom 8 million are blind
• Combined with the 161 million people visually impaired according to best-corrected vision (2002)
• A total of 314 million people are visually impaired from all causes.
• Uncorrected refractive errors therefore become the main cause of low vision and the second cause of blindness
GLOBAL BLINDNESS SCENARIO

• More than 90% of the world's visually impaired people live in developing countries.
• 75% of blindness is curable
• Most are due to cataract, which can be cured by providing an Intra-ocular lens through a simple and cost effective surgery.
• The incidence of blindness will be doubled by 2020, if adequate measures are not taken.
Global causes of blindness as a percentage of total blindness, 2004

- Cataract: 39.1%
- Uncorrected refractive error: 18.2%
- Glaucoma: 10.6%
- Age-related macular degeneration: 10.1%
- Corneal opacities: 7.1%
- Diabetic retinopathy: 4.2%
- Childhood blindness: 3.9%
- Trachoma: 3.2%
- Onchocerciasis: 2.9%
- Other: 0.7%
Bangladesh Blindness Profile*

- Over 750,000 blind.
- 650,000 due to cataract (80% of total blindness).
- 120,000 add every year as incidence.
- Over 6 million need vision correction by spectacles & other means.
- Approx. 150,000 irreversible blind which need to be rehabilitated.
- Approx. 40,000 children blind of which 12,000 are due to cataract & can be cured by surgery.
- 80% of the above live in rural areas.
- 90% of the doctors & their helpers live in towns & cities.

Blindness in Bangladesh
by major causes

- Cataract
- Childhood blindness
- Refractive error
- Others (diabetic retinopathy, glaucoma, trauma, age-related macular degeneration, etc.)
Ophthalmologists, by division

Distribution of Ophthalmologists by Division

<table>
<thead>
<tr>
<th>Division</th>
<th>Total Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barisal</td>
<td>16</td>
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<tr>
<td>Chittagong</td>
<td>78</td>
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<tr>
<td>Dhaka</td>
<td>350</td>
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<tr>
<td>Khulna</td>
<td>49</td>
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<tr>
<td>Rajshahi</td>
<td>103</td>
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<tr>
<td>Sylhet</td>
<td>30</td>
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<tr>
<td>Total</td>
<td>626</td>
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</tbody>
</table>
Ophthalmologist by Sector (By %)

Distribution of Ophthalmologists by Sector

- 47% Govt. Hospitals
- 13% NGO Hospitals
- 40% Private Hospitals
Distribution of MLEP by Sector

- Government Hospitals: 68%
- NGO Hospitals: 23%
- Other Hospitals: 9%
National Cataract Surgical Performance

Cataract Surgerical Performance by Division

- Barisal
- Chittagong
- Dhaka
- Khulna
- Rajshahi
- Sylhet
- Total

Total Number of Cataract Surgery

- Total: 143,000
- Sylhet: 2,000
- Rajshahi: 5,000
- Khulna: 7,000
- Dhaka: 1,500
- Chittagong: 500
- Barisal: 0
National Cataract Surgical Performance

Cataract surgical performance by sector

- 86% Govt. Hospitals
- 10% NGO Hospitals
- 4% Private Hospitals
Cataract surgical rate required

Minimum CSR required = 1,200-1,500 / mill / year to deal with the current backlog by the year 2010
- Present estimated CSR is 1000

This rate needs to be doubled as
- demand is increasing and surgery being done earlier
- the population is ageing
- second eyes are being operated on

CSR to control cataract blindness = 2,400 - 3,000/m/yr
Analysis of needs for, and output of cataract surgical services in Bangladesh

- Between 2,400 and 3,000 cataract operations are required / million population / year in Bangladesh to control cataract blindness

- This translates to a total of 307,000 - 384,000 cataract operations annually

- Currently about 1,40,000 cataract operations are being done, which represents around 45% of the estimated need.
National Eye Care Plan

- Vision 2020 launched & declaration signed in 2000
- National Eye Care Plan Developed and signed by the MOH in 2005
- Line Director Eye Care position created in 2006
- National Level V2020 committee formed in 2007
- Government has plan to form district level V2020 committee
Sightsavers Experience in Bangladesh
Sightsavers International

Mission: To eliminate avoidable blindness and promote equality of opportunity for disabled people.

- Established in 1950 at UK
- Working in 32 countries
- Programmes started in 1973 in Bangladesh
- Early emphasis on eye camps
- Hospital based surgery started in 1994
- On-going support to CBR
- Started working with government in 1999
Sightsavers International

- The national population based survey 1999-2000
- Switch to 100% IOLS in 2001
- Working with 30 partner organisations including three Government Ministries
- Eye care programme in 23 districts and the Dhaka City Corporation with hospital NGO partners
- Community based rehabilitation programme 12 districts with 11 NGO partners
- Education partnership with GOB and BRAC
- Bangladesh Childhood Cataract campaign (BCCC) covers the whole country
- Strategic/advocacy partnership to promote Vision 2020 & social inclusion (Govt. the INGO Forums, ORBIS, NFOWD and BVIPS)
Current programme area

SSI supported eye care services in Bangladesh

LEGEND
- Current programme districts of SSI
- Growth plan for SSI by programme district
Cataract patient
Low vision children
Child cataract
Visually impaired people
Patient queue for registration at screening camp
Patient examination by the Medical personnel
Pre-operative investigation by the technical staff
Refractive error correction
Patient transported to base hospital by the hospital vehicle and then surgical intervention.
Cataract surgery performed by the surgeon
Patients in hospital bed after operation
Comparison of year wise IOL cataract surgery performed by Sightsavers Partners in Bangladesh (2004-2007)
Key Performance – 2007 by the partners

- Patient examine : 722,857
- Adult Cataract surgery : 72,954
- Child Cataract surgery : 3,493
- Refractive error : 110,093
- Low vision : 837
- DLS and O&M training for VI people : 3,174
- School enrollment for VI child: 274
Islamia Eye Hospital
VARD Eye Hospital, Sunamganj
Challenges remain

- Coordination between Government & NGOs
- Mainstreaming eye care in the Health & Nutrition sector programme of the government
- Human resource development, particular the mid-level
- Formation and activation of district V2020 committees
- Include eye care in primary health care system
- Inadequate awareness among the potential beneficiaries.
- Barriers in uptake of eye care services by the poorest of the poor.
THANK YOU