OVERSEAS

Patients and the Punjab

Scott Mackie reports on a recent UK optometry project to Northern India

With over 145 million people in the world with visual impairment through uncorrected refractive error a team from the UK set out to the Punjab, India for a right to sight project. The model allows for recycling of 8,000 pairs of spectacles from the UK sorted by prisoners in HMP Barlinnie and taken to India through humanitarian donations from BA and Vistara airlines. The spectacles must be in good condition with any cyls over 0.75 and anisometropia over 1.00 rejected hence having the nearest or similar BVS in each eye. Although the team agrees with the World Health Organisation's (WHO) opinion on trying to encourage the host nation to provide its own spectacles in the first instance, this is not always realistic in the poorest regions of the world. The team do however provide knowledge transfer in the form of lecture and hands on workshops.

The team congregated in London before flying to Amritsar and then on by bus to Jalandhar. The clinics ran over three days with 800 patients seen over that time. The majority of patients were given spectacles with others listed for surgery or treated for minor ailments. Only a minority of patients presented conditions where no intervention of spectacles or surgery would provide a better outcome.

Dispensing team with man who travelled 2000 kms to attend eye camp

From previous visits, we knew that illiteracy was high, myopia was low, presbyopia occurred up to one decade earlier than that seen in the western hemisphere. As such tests for distance and near used both E charts and Punjabi (the most popular dialect) charts.

A range of pathologies were encountered including trachoma, Treacher Collins syndrome, interstitial keratitis, keratoconus, cataract, amblyopia, nystagmus, trauma, optic atrophy, cerebral visual impairment, cerebral visual impairment, dysthyroid eye disease, incomitant deviation, vernal conjunctivitis and various types of corneal opacity.

"There were many other examples of dispensing which enabled patients to have a much better visual quality of life including congenital cataract requiring post correction of high myopia and astigmatism."

CASE STUDY 1 RETINITIS PIGMENTOSA

A women attended with advanced retinitis pigmentosa (RP) and the triad of signs of pigmentation, arteriolar attenuation and optic atrophy. She recorded a distance VA of 6/60 and had not read anything for years. There was minimal refraction for distance however with a 10x Peak Loupe she achieved N8 in Punjabi and was almost shocked that she could read again. Indeed, the author finds in general LVA patients to be the most rewarding to dispense especially when you can make a real difference to tasks that they no longer could achieve.

CASE STUDY 2 MARFAN SYNDROME

A mother attended with two of her children whom she reported all had the same

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