

Diabetic Eye Disease Initiatives to Close the Gap in Indigenous Eye Health



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Indigenous Australians experience a high burden of diabetes and diabetic eye disease (1)

Prevalence of self-reported diabetes in adults ≥ 40 years: 37%

Of Indigenous adults with diabetes:

- 36% have diabetic eye disease
- 13% have visual impairment
- only 20% had had an eye exam in the preceding year

Diabetic eye diseases are potentially avoidable and treatable.

National guidelines(2) recommend:

- **annual** eye exams for Indigenous people with diabetes
- two yearly eye exams for non-Indigenous people with diabetes

No Indigenous person with diabetes should be allowed to go more than 12 months without having an eye examination.

A multi-faceted approach is required to address diabetic eye disease and help close the gap for vision

The Roadmap to Close the Gap for Vision(3) is:

- a sector-endorsed, whole of system framework
- based on extensive consultation with over 500 stakeholders
- designed to reduce disparities in Indigenous eye health

A suite of diabetes-related measures have been adopted and resources developed. These aim to:

- Increase knowledge of diabetic eye disease, its prevention and management among both patients and clinicians
- Improve access to and uptake of eye tests
- Improve access to and uptake of treatment
- Encourage culturally appropriate engagement and reduce patient drop-out from the eye health system



Conclusion

- Diabetes and diabetes-related eye diseases are major public health issues affecting Indigenous Australians
 - A multi-pronged approach is required to address these issues
 - Resources are being developed to facilitate local efforts to close the gap for vision
- www.iehu.unimelb.edu.au

Eye checks are now a mandatory component of the MBS 715 item for adults and older people (annual health check for Aboriginal and Torres Strait peoples)



OTHER EXAMINATIONS CONSIDERED NECESSARY BY GP			
EXAMINATION	IDENTIFIED ISSUES	ACTION	

INVESTIGATIONS AS REQUIRED			
INVESTIGATION	TESTS DONE	TESTS ORDERED	ARRANGEMENTS (by referral details)
Fasting blood sugar	<input type="checkbox"/>	Date: / /	
Lipids	<input type="checkbox"/>	Date: / /	
Urea/Electrolytes	<input type="checkbox"/>	Date: / /	
STI	<input type="checkbox"/>	Date: / /	
Microangiopathy	<input type="checkbox"/>	Date: / /	
Optometry	<input type="checkbox"/>	Date: / /	
Other:			

Health promotion and educational materials for clinicians have been developed and are available online free of charge

DIABETIC RETINOPATHY GRADING www.drgrading.iehu.unimelb.edu.au

This self directed online learning resource is designed to provide training in grading diabetic retinopathy. It is available in English, Chinese and Spanish and a certificate of competency is provided after successful completion.

RAHC TRACHOMA MODULE www.rahc.com.au/elearning

This module provides an overview of key elements addressing the assessment, screening, diagnosis and management of trachoma.

RAHC EYE HEALTH AND DIABETES MODULE www.rahc.com.au/elearning

This module aims to provide health professionals working in Indigenous communities with an overview of the management of eye care for people with diabetes and will draw on findings from the Roadmap to Close the Gap for Vision.

TRACHOMA GRADING SELF DIRECTED LEARNING www.iehu1.unimelb.edu.au/trachoma/cera.swf

This self directed online learning resource provides a learning aid for field workers to become and maintain proficiency in assessing the signs of trachoma with particular emphasis on grading to simplified WHO Classification.

Eye care prompts are being developed for incorporation into IT software in primary care clinics and Aboriginal Medical Services

TRIGGER: Indigenous patient with diabetes

PROMPT: Has this patient had their annual eye exam to check for diabetic retinopathy?

TRIGGER: Indigenous patient

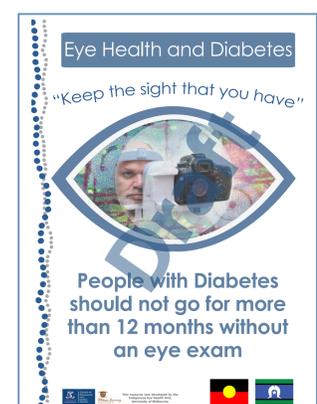
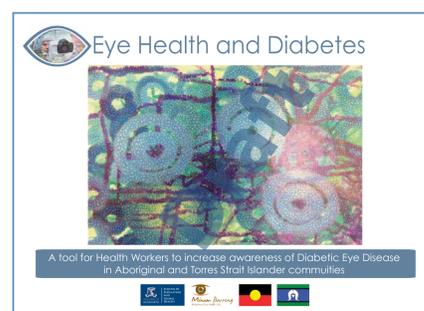
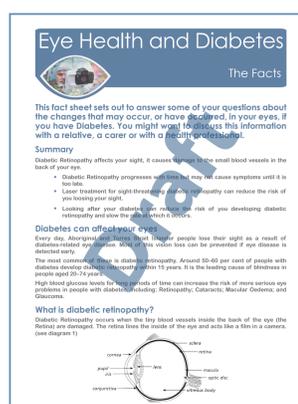
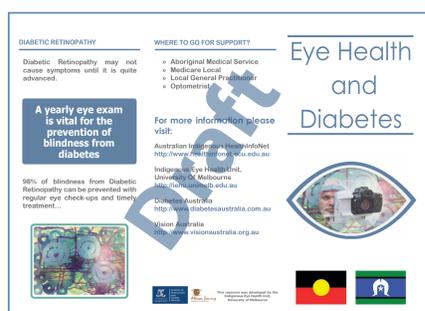
PROMPT: Has this patient had their annual health check? (MBS 715).

Indicators around diabetic eye disease are being developed. These few simple measures may guide local action, allow monitoring of local progress and inform continuous quality improvement efforts.

At a local and regional level, simple indicators may include:

- Percentage of primary care patients with diabetes receiving an annual eye exam
- Number of laser procedures performed for diabetic retinopathy in people with diabetes

Health promotion materials for patients are being developed, in consultation with community



(1) Taylor HR et al (2009): National Indigenous Eye Health Survey, Minum Barreng (Tracking Eyes). Melbourne: Indigenous Eye Health Unit. The University of Melbourne. ISBN 978-0-7340-4109-8

(2) NHMRC (2008): Guidelines for the management of diabetic retinopathy. ISBN 1-74186-671-5

(3) Taylor HR et al (2012): The Roadmap to Close the Gap for Vision: Full Report. Melbourne: Indigenous Eye Health Unit. The University of Melbourne. ISBN 978-0-7340-4756-4

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