

Integrating Primary Eye Care with Primary Health Care Services in India: Perspectives and Learnings to Strengthen Primary Healthcare Systems in India

Ayesha Siddiqua Nawaz¹, Divya Rao², Shailendra Kumar B. Hegde³, Pachava Vengal Rao⁴, Devika Chadha⁵, Aakash Ashok Raikwar⁶

¹Chief Manager - Clinical Operations, ²Consultant - Ophthalmology, ³Head - Public Health Innovations, ⁴Regional Clinical Domain Co-ordinator, ⁵General Manager - Operations, ⁶Manager - Health Economics and Policy, Piramal Swasthya Management and Research Institute, Hyderabad, Telangana, India

Abstract

Background: Vision impairment and blindness are major public health challenges, especially in low- and middle-income countries. Although the prevalence of blindness in India has reduced considerably, untreated cataract still remains a public health challenge. The World Report on Vision (2019) emphasizes the need to make eye care an integral aspect of universal health coverage and incorporate integrated people-centred eye care in health systems. **Objectives:** (1) To describe the setup of an Integrated Primary Eye Care model. (2) To describe the pattern of ocular morbidity among patients attending the primary healthcare clinics across four states in India. **Materials and Methods:** Retrospective observational study describing the primary eye care services delivered across four states in India between August 2019 and March 2020. The de-identified secondary data were analyzed for the pattern of ocular morbidity. **Results:** Seven thousand and twenty-four patients availed the eye care services across the four primary care clinics. Majority of the patients were female (54.7%), most patients belonged to the age groups of 45–60 years (33.2%) and 30–45 years (32.3%). Elderly patients of both genders had equal access to the eye care services. The common presenting complaints were diminished vision (83.1%), redness (9.5%), and pain (6.4%). **Conclusion:** Uncorrected presbyopia (35%), refractive error (32.8%), and cataract (12.8%) were the commonly observed ocular morbidities. Integration of primary eye care into primary health care can improve access to eye care services, especially for vulnerable population such as elderly and women, who otherwise face several challenges to access eye care services.

Key words: Blindness, cataract, integrated primary eye care, refractive errors, rural India, vision impairment