National Workshop on National Strategic Plan for Prevention of Blindness 2008-2015

Phnom Penh, Sunway Hotel 5-6, June, 2008

Supported by

FHF, SEVA, CBM/CARITAS, IRIS, MED, ICEE, HKI
The Progress of Prevention of Blindness 1994 - 2007

- Blindness in Cambodia
- Eye care system Development in Cambodia
- Human Resource
- Facility Development
- VISION 2020 Disease Control
The Progress of Prevention of Blindness
12 Years of Implementation

Do Seiha, MD
National Coordinator for Prevention of Blindness
Phnom Penh, 5-6, June, 2008
The Progress of Prevention of Blindness 1994 -2007

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Blindness in Cambodia

• Blindness in Cambodia found to be a public health issue
• There was some surveys conducted in the past to find out the magnitude of Blindness in the country
• Shortage and mal-distribution of manpower, infrastructure and facilities
Blindness in Cambodia

Rational/ Estimates
- Population estimated 12 million, 85% in rural areas
- Estimates: Prevalence of Blindness: 1.2%
- Causes of Blindness:
  - Cataract (65%)
  - Uncorrected refractive error/aphakia (10%)
  - Glaucoma 7%
  - Corneal scar 10%
  - Pterygium 5%
  - Other

• 80 – 90% are preventable of treatable
Blindness in Cambodia

• Recently In December 2007, the National Survey for Rapid Assessment for Avoidable Blindness was conducted in 21 Provinces of Cambodia and supported by partner NGOs

• The result of the survey which will be available soon will reflect the current status of Avoidable Blindness in the whole country which will help us to do the action plan properly.
The Progress of Prevention of Blindness 1994 -2007

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- Eye care system Development in Cambodia
- Human Resource Development
- Facility Development
- VISION 2020 Disease Control
Eye Care System Development in Cambodia

• 1994 : Establishment SCPBL by MoH & WHO
  – Development of National PBL Plan
  – Assign the Role of SCPB as Technical advice to MoH
• 1995 : Master Plan Developed
  – 1999 : Signed Member of VISION 2020
• 2003 : 2nd 5 years action plan (2003 - 2007)
• 2008 : 8 year National Strategic Plan
Eye Care System Development in Cambodia

• Priority Action Plan, since Establishment
  – Manpower Development
  – Facilities and materials
  – Financial resource mobilization
  – Management and specific control of endemic diseases
The Progress of Prevention of Blindness 1994 -2007

• Blindness in Cambodia
• Eye care system Development in Cambodia
• Human Resource Development
• Facility Development
• VISION 2020 Disease Control
Human Resource Development

• **WE has made a lot of Progress!**

• In Service Training BED, BEN started in 1998 to address the acute shortage of manpower
  – 2 training programs (BEDs & BENs) had been set up
  – 2 training centers: SR & TK (HAI & CBM/ Maryknoll then Caritas)
  – 1998: the training of BED and BEN started

• To date there are 22 BED/DO Trained and work in Eye Unit throughout the country
Human Resource Development (Cont.)

• 2006: Completion of BED Training in Takeo Eye Hospital and the training has brought into the University of Health Science

• 2007- Residency Training - 4 years supported by FHF & MED
  – 3 residents selected for training
  – 2 resident selected in 2008
  – Upgrading of BED will start soon
Human Resource Development (Cont.)
Other Training

BEN / Ophthalmic,

• BED began in 1998 which converted to Ophthalmic Nurse in 2006
• To date there are 80 Basic / Ophthalmic Eye Nurses Trained (6 of which is ongoing training in Takeo Eye Hospital)
• 2 Training Center: Takeo and Siem Reap which ended in 1999
Human Resource Development (Cont.)

Other Training

- **Refractionist Nurses**
  - (Former Optometry Technician) started in 1996 by SAO/COA and run for 3 courses now has converted to Refractionist Nurse Training and run by PBL supported by FHF & ICEE Started in 2008
  - To date there are 16 Refractionist Nurses Trained


Other Training

• **TOT Training:**
  – 4 courses organized since 1996 and trained 65 TOT Trainers for PEC
  – Primary Eye Care Training for HC staffs and VHV organized in all provinces with eye unit and coordinated with partner NGOs
  – TOT refresher courses organized every 2 years since 2003
Human Resource Development (Cont.)

Other Training

• Establishment of the Cambodian Ophthalmological Society (COS) in 2003
  – Continue Medical Education Annually organized to enhance clinical/Surgical Skill of all eye care professionals
  – Short Course organized by PBL & COS with Visiting Volunteer Teams and Faculties
Human Resource Development (Cont.)
Overseas Training

- Residency Training in Overseas in Thailand, Nepal…started since 1996
- Fellowship and short courses in Pediatric, Retina, Glaucoma, Cornea..
- Eye Care Management and community Eye Health
- Mid Level course for Nurses- 2 annually
- Refraction and Low Vision Nurse
# Current Human Resource

<table>
<thead>
<tr>
<th>HN</th>
<th>Eye Unit</th>
<th>N Bed</th>
<th>* Dr</th>
<th>MA</th>
<th>Nurse</th>
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*Dr: All categories: Ophthalmologist, BED, DO, Eye Doctor*
The Progress of Prevention of Blindness 1994 -2007

- Blindness in Cambodia
- Eye care system Development in Cambodia
- Human Resource Development
- Facility Development
- VISION 2020 Disease Control
Facility Development

• Facilities and Materials development
  – 1993 - 3 eye units
  – 1998 - 10 eye units
  – 2001 - 15 eye units
  – 2007 - 15 eye units
Facility Development

• Current Eye Care Facilities:
• Phnom Penh: Many
  – 1 National Eye Hospital: Preah Ang Duong
  – 3 Eye Units in Government Hospitals
  – 1 Eye Unit in Military Hospital
  – 2 Eye Hospital Run by NGOs
  – ~ 10 Private Eye Clinics in Town
Facility Development

• In 2006 the Preah Ang Duong Hospital had got a new facility/building donated by the Kusanone Fund from Japan and the construction completed in December, 2007.

• This hospital now has functioned as a center for Graduate and Post Graduate Training and for Central PBL Coordination
Facility Development (Cont.)

• Provincial Eye Unit: 15 Eye Units in 14 provinces
  – Takeo, Kandal, Prey Veng, Svay Rieng, Kompong Spue, Kg Chnang, Pursat, Battambang, Banteay Meanchey, Siem Reap, Kompong Cham (2), Kratie and Stung Treng
  – Outreach Eye Camp to other provinces has no eye units
Facility Development (Cont.)

- Provincial Eye Units (EU):
  - Most of them are good functioning
  - Most of them Work with partner NGOs, subsidy scheme, outreach eye screening, equity fund..
  - Facilities are in fair to good condition
  - Equipment has been improved most of the EU supported by partner NGOs
The Progress of Prevention of Blindness 1994 - 2007

- Blindness in Cambodia
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VISION 2020 Disease Control

• Cataract
• Refractive Errors & Low Vision
• Trachoma
• Childhood Blindness
• Glaucoma
• Diabetic Retinopathy
Current Situation of Cataract
Current Situation of Cataract

• Cataract
  – Accounted for 65 % of blindness
  – Cataract backlog 80,000
  – Annual incidence 19,000
  – The PBL Plan to increase output and CSR to 1000/M/Y by 2007 and to cover the annual Incidence
VISION 2020 Disease Control
Cataract

Surgical Out put
- 1993 : 500
- 1998 : 3500
- 1999 : 5341
- 2000 : 6120
- 2001 : 6735
- 2002 : 6859
- 2003 : 6517
- 2004 : 10,107
- 2005 : 11,112
- 2006 : 11,077
- 2007 : 13,166
VISION 2020 Disease Control
Cataract (Continue)

• Percentage of Cataract output
  – Appr 20% in Phnom Penh
  – Appr 60% in Provinces
  – Appr 10% Outreach Camp
  – Appr 10% Private sector

  – The quality of Cataract Surgery has improved from year to year
VISION 2020 Disease Control
Cataract (Continue)

- Approximately IOL Usage varied 80 to 95% (Average 87.5%)
- Patients Achieved Best Vision 23%
- Patients Achieved Good Vision 65%
- Poor Vision 12%
Current Situation of Refractive errors and Low Vision
Current Situation of Refractive errors and Low Vision

• 2nd major cause of blindness (~10 %)
  – Refraction service carried out in all eye units by a trained eye care professionals.
  – Outreach Vision Screening by Eye Unit team and NGOs.
  – Most of Eye Units do not have facilities for making/ dispensed glasses
• The need for Refraction Service Development is in high Priority
Current Situation of Refractive errors and Low Vision

- Assuming prevalence of RE of:
  - 3% 0-15 years
  - 8% 16-40 years
  - 80% 40+ years
- Assuming uptake of spectacles between 50-80%
- Approx. 600,000 spectacles required each year
The Progress of Refractive Errors and Low Vision

- Refractionist Nurse Training: PBL in collaboration with FHF & ICEE will train 4 Refractionist Nurses annually has been planned.
- There are up to plenty of private optical shops in the city and towns with unknown skills.
- Low Vision service has been established in Ang Duong and COA office and start to provide service, providing low vision device. Upgrading this center is necessary.
- A need to expend service and upgrading skill for the existing refractionist nurse.
The Progress of Refractive errors/ Low Vision

• Current action for Refractive errors and Low Vision development
  – Manpower development
    • TOT Training
    • Establishment of Training centers
    • Funding & Support has been secured
  – School screening guideline- underdevelopment
  – School health program: underdevelopment
  – Low cost Glasses provision: underdevelopment
  – Low cost production, quality and pricing
  – IEC materials and health education
Current Situation of Trachoma
The Progress of Trachoma Control

- Current Strategies and ongoing strategy
  - Implement **SAFE**
    - **S**: Reduce blindness from trachoma: Lid surgery can be performed in all EU
    - **A**: Treat active trachoma: Tetracycline ointment – available through CMS/MoH
    - **F**: Face Washing: Integrated with PHC/Health Promotion, Health Education
    - **E**: Environment Change: Integrated with MoRD, MoEn, water supplies, Sanitation
Current Trachoma Control Program
E & F Component of SAFE

Facial cleanliness:
- Encourage Face washing for children
- PEC/PHC campaign (training HCS)
- TV spots
- Radio
- IEC Materials

Environmental Change:
- Integrated with other ministries, MRD, MEN
- Better water supply
- Better sanitation through eye health education
The Progress of Trachoma Control Program

- With the existing control program in the last 5 years, the prevalence of active Trachoma has been decline dramatically in most region of Cambodia.
- Blinding Trachoma still a public health issue in many part of the country.
- Surveillance system should be developed to monitor the progress of elimination process.
- A separate Trachoma Control Program will be presented separately during this WS.
The Progress of Childhood Blindness

- Childhood Blindness
  - No National Survey has been conducted on the prevalence of childhood blindness
  - An estimate the prevalence of childhood blindness is 1.2 per 1,000 children
  - Actual Number Blind Children is 6145
The Progress of Childhood Blindness

Main Causes of Childhood Blindness
- Corneal Scar due to Vitamin A Deficiency
- Refractive errors/ Low vision
- Congenital Cataract
- Eye injuries
- Retinal Degenerative Diseases
The Progress of Childhood Blindness

Vitamin A Deficiency

- Vitamin A Deficiency: Eliminate by 2007 (?)
  - 1995 Expanded activities to include PEC and other strategies to address VAD
  - 1994 Work exclusive with VA Capsule Program
  - Since 1996 VAC distribution integrated into NIDS
  - Since 1998 VAC distribution through routine Immunization Outreach
The Progress of Childhood Blindness

– VAD has been mostly eliminate in the country
– VAC coverage varies widely among and within provinces (80%)
– Xerophthalmia and blinding related condition (Corneal Scaring) is almost under controlled
The Progress of Childhood Blindness

- **Refractive errors and Low vision**
  - Accounted for 10% of Childhood Blindness
  - School Children in Phnom Penh in 2005:
    - 10,192 screened and found refractive errors: 6.4%
  - School screening in Provinces found 1 to 3.2%
  - School Screening has considered as annual routine for all eye units
The Progress of Childhood Blindness

Congenital Cataract

- Data is Limited
- Hospital based: familial origin is common in Cambodia
- Hospital Data approximately 1.5% of eye surgeries.
- Service available in only a few provinces.
- Strengthening of PEC within PEC systems
The Progress of Childhood Blindness

- Human Resource and Basic Facility are available in Phnom Penh to carry on treatment almost all pediatric eye condition (Congenital Cataract and Glaucoma).
- Upgrading / strengthening the existing facility is necessary in our future plan.
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<tr>
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<th>NGOs</th>
<th>Supportive Activities</th>
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<tbody>
<tr>
<td>1</td>
<td>CBM / CARITAS</td>
<td>• Extended eye clinic in Takeo province</td>
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<tr>
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<td>• Trainings: Ophthalmic Nurse with Kompot Regional Nursing School</td>
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<tr>
<td>2</td>
<td>Fred Hollow Foundation</td>
<td>• Extended eye clinic ( Kg, Thom, Prey Veng, Kg. Chhnang provinces ) and CME</td>
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<td>• Support the Residency Training</td>
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<td>3</td>
<td>HKI</td>
<td>• Vit A, Trachoma Control, Primary Eye Care</td>
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<td>• Trachoma Training</td>
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<td>4</td>
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<td>• Extended eye Clinic ( Kg Cham province ) and subsidy poor patients in Kompot,</td>
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<td>Siem Reap, Batambang, Pursat provinces with ABC program</td>
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<td>• Outreach to other provinces without eye unit</td>
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<td>Mekong Eye Doctor</td>
<td>• Extended eye clinic ( Kratie, Svay Rieng Provinces )</td>
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<td>• Outreach to Ratanakiri and Mondulkiri provinces</td>
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<td>• Support the Residency Training</td>
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<td>SEVA</td>
<td>• Extended eye clinic ( Battambang, Bontey Mean Chey, Siem Riep Provinces )</td>
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<td>• Support Training: 1 Residency in Nepal</td>
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<td>7</td>
<td>Rotary Club International</td>
<td>• Extension of eye unit in Pursat and plan to provide Training and Equipment for this</td>
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<td>of Singapore</td>
<td>eye unit</td>
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<td>8</td>
<td>COA</td>
<td>• Refraction Screening</td>
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<td>9</td>
<td>Rose Charities</td>
<td>• Extended eye Clinic in Kien khlang Centre</td>
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</table>
Conclusion

• Prevention of Blindness has been greatly improved for the 12 year implementation and we are still continuing to work harder to reach targets set in the Action Plan

• Improvement Changes are in Human Resource, Facility, Management, resource mobilization and so on..

• All achievement can not be without support from our past and present partners NGOs

• The ambition of VISION 2020 in Cambodia is achievable.
Announcement

WHO 6th Inter Workshop for Prevention of Blindness
Phnom Penh
08-12 December, 2008
Thanks for Your attention!