

## Healthy People – Healthy Eyes

### **The Save our Sight campaign**

*Welcome to Save our Sight 2009: the public awareness campaign for eye health.*

*In each year since 2002, the New Zealand Association of Optometrists has headed a month-long eye health promotion campaign called Save our Sight. The fact that regular eye examinations can save our sight is the simple key message.*

#### **Our mission:**

To improve the eye health of New Zealanders by raising the profile of eye health and by fostering understanding among New Zealanders of the need to take responsibility for personal eye health;

#### **Our 10 key objectives:**

1. Increase awareness of eye health within the overall health context
2. Reduce visual impairment due to diabetic retinopathy
3. Reduce visual impairment

due to glaucoma

4. Reduce visual impairment due to cataract
5. Reduce visual impairment due to age related macular degeneration
6. Increase the proportion of adults with diabetes who have a regular fundus examination or photograph
7. Increase the proportion of persons who have an appropriate eye examination at suitable intervals
8. Reduce uncorrected visual impairment due to significant refractive errors, especially in the ageing population
9. Increase the proportion of children under 8 who have a comprehensive eye and vision assessment
10. Increase the use of appropriate eye protection in recreational activities and hazardous situations in industry and around the home.

#### **The extent of the problem:**

More than 70,000 New Zealanders aged 40 years and older have glaucoma. At least half do not know they have it.

#### **Untreated, glaucoma will cause loss of sight.**

Twenty-five thousand New Zealanders have already lost sight due to Age Related Macular Degeneration (ARMD) and a further 2,000 are developing the disease each year.

#### **Smoking and dietary factors are related to the progression of the disease.**

ACC processes more than 17,000 claims for eye injury accidents most years. US analysis of hospital treatments for eye injuries indicates that around

#### **90% of all eye injuries are preventable.**

Around **81,500 New Zealand adults and 13,200 children** are legally blind or have a sight impairment that cannot be corrected by glasses or contact lenses.

Early detection and correction of sight problems in children is essential because development of the visual system is complete by the age of nine.

Overseas experience shows that up to 20% of school age children may have focusing errors that can easily be corrected by glasses or contact lenses.

**Vision impairment contributes 30% to risk of hip fracture ....**



**Blurry vision makes it hard for children in so many ways: in the classroom, playing sports, working on a computer, riding a bike, or texting their friends.** Crisp, clear, vision is critical to good performance.

#### **Messages for your patients:**

- Stop smoking (whatever your age)
- Eat for eye health
- Remember that early detection saves sight – regular eye exams recommended
  - If you are **over 40** you should see the optometrist every two years.
  - If you have **diabetes** or other health problems then you need to see your optometrist more often.
  - If you have a family history of **glaucoma** then you are advised to see your optometrist every year.

#### **Putting it into context:**

Out of a total of 10 goals and 61 objectives for the health and wellbeing of New Zealanders there are some key areas with potential to reduce risks to sight as well as achieving other health outcomes.

- Nutrition
- Smoking cessation
- Positive Ageing
- Diabetes
- Child Health

#### **Nutrition:**

It is common for doctors to be urged to promote healthy nutrition as a means of reducing obesity, heart disease and so on. But the idea of eating for eye health is hardly ever mentioned. Interestingly, consumers appear to be ahead of medicine in their response to research like the Blue Mountains Eye Study and the Age Related Eye Disease Study (AREDS).

AREDS has shown that there is a role for antioxidants and minerals in the delaying or reducing the onset of dry AMD if the fellow eye has wet AMD. Some ophthalmologists are already prescribing preps containing these as part of the management of AMD.

Blue Mountains Eye Study, Beaver Dam Eye Study and Seddon (2003)<sup>1</sup> showed there was a higher AMD risk with increasing consumption of dietary fat.

AREDS and Seddon showed significant protection from increasing dietary fish.

#### **Smoking Cessation**

The risk between smoking and macular degeneration is well established<sup>2</sup>  
But what is new knowledge is that for eye health benefits it is never too late to stop.

Current smokers have 4 x the risk of developing AMD than never or past smokers<sup>3</sup>

Over 5 years, smokers develop AMD 3 x more frequently and 10 years earlier than non-smokers<sup>4</sup>

#### **Positive Ageing**

The association between visual impairment and increased dependence, between visual impairment and increased incidence of falls, between visual impairment and increased

morbidity, between visual impairment and higher levels of depression, have all been well documented<sup>5</sup>.

The relative risk of hip fracture is 8.0 for non-correctable visual impairment and visual impairment contributes 30% to risk of hip fracture; adjusted for age, sex, history of stroke, arthritis, self-reported health, past and current use of medication<sup>6</sup>.

It is no accident that the ACC specifically refers to impaired vision as a contributing factor in its 'thinksafe' falls prevention programme and encourages people to get their eyes checked regularly.

To ensure positive ageing it is necessary to retain maximum visual function. For some people that will mean no more than having a proper prescription in their spectacles. For others it will mean managing or treating conditions that cause blindness.

### **Diabetes**

People with diabetes are all at risk of developing diabetic eye disease so it is important that all areas of New Zealand have access to timely, cost effective, and quality driven screening for diabetic eye disease. We also need to think about the impact of diet and blood glucose and blood lipid control in the development of diabetic retinopathy and ensure that people are well informed about diabetic eye disease.

### **Children**

Children's vision is extremely important to development. There is a critical period between birth and age 6 when the brain's visual system is hardwired. Particular care is required in screening children during this time. The B4 School Check will be hugely important in screening for amblyopia but care needs to be taken that symptomatic children get early assessments for other vision problems including refractive error that can impact on learning, physical co-ordination and social development.

### **How you can help:**

- Please get behind Save our Sight for September 2009.
- Perhaps you can find opportunities to talk to patients about eye health during September.
- It would be great if you could invite one of the local NZAO optometrists in your town to talk with you and your staff about some of the eye health issues raised in this article and to find ways of working more effectively together.
- Please put out the 2009 Save our Sight leaflets for patients so they can read about protecting their eyes, and
- Please put up the 2009 Save our Sight posters



saveOURsight



## 2009

Please help us to educate people about the importance of good visual health.

People need good vision for a whole range of activities that we all take for granted. Sight is such a precious sense yet we hardly ever think about it. New Zealanders generally have low levels of understanding about eye health and preventable blindness. This is why 20% of people registered as blind in New Zealand are blind from preventable causes.

You can help by making Save our Sight a feature in your practice and make September the eye health month for your patients. Posters, bookmarks, and pamphlets are enclosed with this newsletter for you to display and give away during September.

**THANKS FOR HELPING US HELP OTHERS**

### References:

1. Seddon, Cote, & Rosner (2003) Progression of age-related macular degeneration: association with dietary fat, transunsaturated fat, nuts and fish intake. Arch Ophthalmol 121:1728-37
2. Mitchell, Campbell & Smith (1999). Smoking is a major cause of blindness: a new cigarette pack warning? Medical Journal of Australia 171:173-174
3. Mitchell et al Arch Ophthalmol 1996
4. Mitchell et al Arch Ophthalmol 2002
5. Wang, et al. IOVS, 1999; Wang et al Aust NZ J Pub Health, 1999
6. Ivers et al. JAGS, 2003

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PRIMARY

EYE CARE

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