

EYE-TO-EYE REPORT

July 2020

International Perspectives in Eye Care

The demands on eye care have never been greater. The World Health Organisation report on vision estimates that around 2.2 billion people around the world are visually impaired. Of this number, around 1 billion have an impairment which could have been prevented or is yet to be addressed. Vision care is also big business, worth in excess of \$70 billion a year.

With aging populations and a myopia epidemic on the horizon, this latest WCSM virtual discussion meeting was always going to be lively and informative. Between the panel and international members joining the session, we covered over 10 hours of time zones!

Chaired by Renter Warden **Ian Davies**, the panellists were **Peter Holland, CEO of IAPB, Alex Louw, Chief Medical Officer of National Vision, Inc, Scott Mundle, Past President of The World Council of Optometry, and Lakshmi Shinde, CEO of the Optometry Council of India and Director of Global Education, IACLE.**



Three core themes came out of the discussion:

- the variability of the delivery of eyecare around the world
- the need for global collaboration
- the ability of the sector to embrace disruptive technology to generate solutions to the problems.

Variability in the **delivery** of eyecare is multifaceted. In lower- and middle-income countries the burden of vision impairment is 4x greater than that in the rest of the world. In larger countries the regulations defining the scope of practice can vary state to state and while there are attempts to standardise teaching curricula for eye care practitioners, a lack of consistent regulatory framework makes this hard to reinforce. Consistency in the scope of practice of the different professions is also hugely variable. Although political divisions still exist between professions in some countries, there is a sense that the WHO report can help in galvanising organisations towards how vision is best corrected rather than by whom.

Finally, the impact of affordability and access was discussed. Even in developed markets like the US some 45 million people may miss out on an eye exam for financial reasons.

Continuing to improve **collaboration** across the sector came up as being critical in breaking down some of the silo thinking of the past. The range of agencies involved in vision impairment is high. Collaboration must start with joined up thinking across the key professions delivering eyecare, but then expand to embrace the many charities and NGO's working in the field, encompass universal healthcare coverage and medical insurance and align with increased vertical integration. Governmental thinking needs to expand beyond just health care, with the impact of corrected vision being seen in education and workforce productivity.

A common thread in all the discussion was the role of disruptive **technology** in the future. All speakers recognised the opportunities which technology brings and the extent to which the COVID-19 pandemic has accelerated some of the change. Discussion was tempered by concerns about the need for face to face human contact and the establishment of a regulatory framework within which it could exist. The increasing use of AI in the field of diabetic retinal screening and accuracy in automatic refraction were both seen as technologies which require careful consideration as they become more widely available.

The correction of vision impairment and improvement of eye health go hand in hand with economic and educational benefits. By taking a multi-disciplinary approach in highlighting the opportunities to governments around the world, the meeting ended with a call to continue to keep vision care at the top of their agendas.

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