



December at LVPEI

While we celebrated the inauguration of our hundredth vision centre a couple of weeks ago, thus reaching about 2000 villages with high quality integrated primary and secondary care, another pilot project for rural eye health was started in December. Based on the demand and the enthusiastic support from a local philanthropist, an operating room was added to one of our vision centres, thus creating a kind of “VISION CENTRE PLUS”. Initially, this centre will be covered by weekly visits from one of our ophthalmologists which will change based on the demand. From the experience with this project, future strategy on replication will evolve. This could very well be the beginning of a phenomenon when some of the vision centres will be transformed into secondary eye care centres in future.

Optical supply and dispensing of spectacles is the most crucial aspect of primary eye care as uncorrected refractive errors is responsible for more than half of the burden of visual impairment. Our technicians and opticians are specially trained to address this issue in our vision centres. This month, supported by a grant from the Seva Foundation, we organised a continuing education programme for this group in the entire network. This was preceded by the training offered by two optometrist volunteers from “Eye Care Plus” of Australia which was organised by the “Optometry Giving Sight”. Thanks to the OGS group headed by Clive Miller and this team of volunteers, these exercises are helping to enhance the competence of our technicians to tackle all refractive errors more effectively, which in turn, decreases the need for referrals to the next level. More significantly, this translates into significant cost savings to the people served.

Yet another batch of fifteen ophthalmologists completed their advanced training in various aspects of ophthalmology – as fellows – during this month from our Mark Nathaniel Thadikonda and Vijayamma Nannepaga Centre as well as Pathak Centres for Eyecare Education. These youngsters are now ready to spread the culture of high quality eye care in the rest of India and other countries. Our fellowship training is very intense and aims to help transform these youngsters not only into highly competent ophthalmologists but also better physicians and human beings. I congratulate them and wish them the very best in realising their dreams.

To meet the demand for community eye health professionals, our education programmes include Diploma and Masters programmes in Community Eye Health and a Diploma in Eye Health Management. This month, twenty three individuals graduated from these courses from our Ramachandra Pararajasegaram Education Centre in Community Eye Health. The Masters degree in Community Eye Health is given by the University of New South Wales of Australia. These courses incorporate excellent balance of didactic and field experience as we have the advantage of necessary infrastructure and faculty for both. This group is now better equipped to lead many community eye health initiatives for their sponsoring organisations. Congratulations to everyone in the group.



For those with irreversible forms of low vision and blindness, comprehensive rehabilitation training includes development of social skills. As part of this process, PRK Prasad Centre for Rehabilitation organised a fun camp with about 300 participants who included children with special needs, their siblings and other family members. Multiple events were organised to foster social interaction. Beula Christy and her team deserve all the credit for pursuing these approaches to make the rehabilitation training more comprehensive for visually challenged children. We are grateful for the many volunteers who actively contributed to the success of these programmes.

Our innovation centre Srujana's LVPEI-MITRA programme is buzz with activity with several engineering and technology students working on various projects. These youngsters are actively engaged in developing tools for early diagnosis as well as developing assistive devices for the visually challenged to help them with their many tasks. We are looking forward to the development of some innovative products that are high quality and cost effective from this programme as the progress in the very first quarter is impressive.

Once again, several of our colleagues were honoured with awards and leadership positions this month and I convey my compliments to each of them.

Bill Kite is an American who lives in the Himalayan region of India part of the year and has various businesses. He is very much part of that community and initiated various health care, programmes including eye health, to serve the local people using his own funds. In his recent visit to our Institute, he was impressed by the immediate relief in the condition of his friend who he escorted. His friend was fitted with a special type of contact lenses for a recalcitrant corneal problem and benefitted immensely. He promptly made a generous contribution to provide these relatively expensive lenses (imported from Boston) to some of our economically underprivileged patients. This is yet another example of how generosity from all corners of the world helps us experience the miracle of touching the lives of millions each year.

- Gullapalli N Rao