



## September 2018 at LVPEI

“Rural and Community Eye Health” is one segment of our activity that we are very proud of at this stage of the evolution of LVPEI. What started as an experiment to develop a model for high quality, comprehensive eye care for rural and tribal populations has grown into the largest network of rural eye health anywhere under the umbrella of “Gullapalli Pratibha Rao International Centre for Advancement of Rural Eye Care”. While this activity commenced nearly twenty five years ago, this Centre was formally launched twenty years ago by Prof. Al Sommer, the then Dean of the Johns Hopkins School of Public Health, and all activities were brought under this umbrella. At the twentieth anniversary celebrations this month, we were honored to have Sri ESL Narasimhan, Governor of Telangana and Andhra Pradesh; Sri Jagat Prakash Nadda, Minister of Health and Family Welfare, Government of India; Dr. Poonam Khetrpal Singh, Regional Director for South East Asia, World Health Organization (WHO); Mr. Bob McMullan, President of International Agency for the Prevention of Blindness (IAPB); and Dr. Wilhelmina Jallah, Minister of Health of the Republic of Liberia. The presence of the entire council of members of the IAPB has added immensely to the event.

This integrated model of care at different levels of delivery now has 176 primary care vision centres, and 18 secondary service centres linked to tertiary care at the top and a broad community based primary care at the bottom. This system offers Comprehensive care, with Commitment to quality, and the linkages at different levels ensure Continuity of care, while bringing care Closer to the door step of the people who need it most, and with Community participation. Prevention and promotion programmes, treatment of diseases, and low vision rehabilitation constitute the functional components. Millions of people were served; thousands of rural youth were educated and employed with career paths; thousands of communities were made more aware of health care; gender equity in accessing care was achieved; and scores of organizations and governments are replicating the model. In addition to service delivery, this Centre played a significant role in the education of community eye health professionals, public health research, capacity building of hundreds of organizations in the developing world, and also played a leadership role in advocacy, planning and formulation of policy at the national and global levels. Kudos to the thousands of our rural youth who work tirelessly in the remote communities to eliminate needless misery from blindness and visual impairment! I convey our deepest appreciation to the leadership of this Centre and we are indebted to all the supporters whose generosity made all this possible. Allen Foster (London) and R. Pararajasegaram (Geneva) were pivotal in moving us in this direction. This, and the guidance from Late P.G. Michael and D. Nagarajan are greatly appreciated. Hugh Taylor’s (Melbourne) support in conducting the landmark Andhra Pradesh Eye Disease Study (APEDS) was critical, and we are grateful!

We were delighted to host the Annual Council of Members (CoM) meeting of the International Agency for the Prevention of Blindness (IAPB), the biggest ever meeting so far. It was a combination of an intensive meeting schedule and joyful social events. Many important aspects of eye care were discussed, and new ideas and plans emerged from the shared experiences of members to further enhance global efforts to control the scourge of blindness. We are thankful to all these friends from around the world who joined us to celebrate the twentieth anniversary of our efforts to touch the lives of the most disadvantaged, and reaching out to the most remote areas.



It was very special to have Dr. Wilhelmina Jallah, Honorable Minister of Health, Republic of Liberia and Dr. Jerry F. Brown, CEO of John F. Kennedy Medical Center, Monrovia, Liberia, our partners and supporters in building an Eye health system in the Republic of Liberia. We are very grateful that they have found time out of their busy schedules to be with us. Our programme in Liberia is making steady progress with gratifying results.

Internationally acclaimed leaders visiting us and giving generously of their knowledge is a privilege that we have been blessed with. Dr. David Nash, Dean of the College of Population Health at Jefferson University in Philadelphia; Dr. Serge Resnikoff, formerly Head of the Prevention of Blindness and later on Non- communicable Diseases, WHO; Prof. Ralph Eagle, Head of Pathology at the Wills Eye Institute, Philadelphia; Dr. R D Ravindran, Chair of Aravind Eye Care System; and Dr. Sonia Guha of the Jules Stein Eye Institute, Los Angeles, were our visiting lecturers this month. To all of them, we are very grateful.

In addition, several education programmes were held covering a broad range of subjects. On the research front, we are delighted that we have received funding for three new projects from the governmental funding agencies.

Our Manufacturing unit of special scleral contact lenses, while celebrating its first anniversary, has crossed the 100 mark this month with ten different institutions using these lenses. During this year, seventy five patients from economically disadvantaged backgrounds received these lenses at no cost to them; and this was possible because of local production. Congratulation to the entire team of this unit! Our Engineering and Technology Innovation team has also made progress with many products making it possible to take these to the clinical and screening settings.

To commemorate the contributions of our late colleague Sam Balasundaram, the Atrium, used as a waiting lounge for our Sight Savers group of patients, has been dedicated to his memory at a ceremony this month in the presence of his family members. Sam was there every day to ensure that each of these patients had the most positive experience. The Liberia-LVPEI Residency Training Programme has also been dedicated to him in recognition of his efforts to promote eye care in Liberia.

During this month again, many of our colleagues received accolades from both national and international organizations. Congratulations to all of them!

The story of nine year old Shaharsha clearly highlights how our integrated model of comprehensive eye care makes a difference. She was identified by our team with visual impairment during school screening in a remote village in Nizamabad district. On further evaluation at our nearby secondary centre, she was diagnosed to have a form of oculo cutaneous albinism. Because of the availability of low vision services even at this level of care, it was possible to provide her with appropriate low vision devices resulting in a major improvement in her scholastic performance. This would indeed be transformational for her life! In the twenty year journey of our comprehensive rural eye health programme, we had the privilege of touching many like Shaharsha in all age groups presenting with a whole range of visually disabling conditions. It is this kind of transformation that makes our rural work as worthy and gratifying as the cutting edge work we do in our Hyderabad campus.

- Gullapalli N. Rao