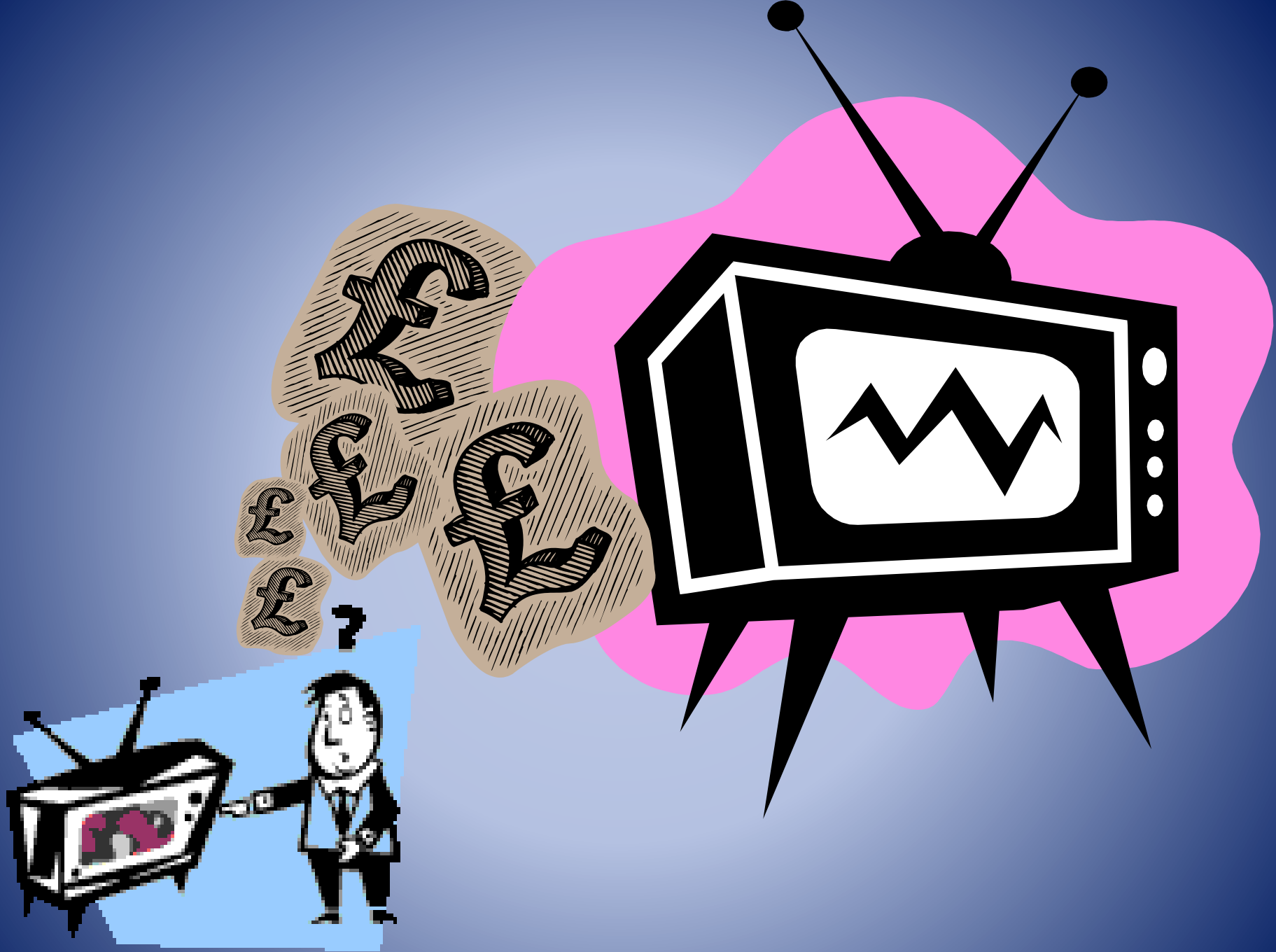


The fear of making eye contact: from NO screen to BIG screen

By Dawn Groves and Natalie Fox

The patient:

- 47 year old male
- Diagnosed with type II diabetes mellitus 2000
- HbA1c 9.9% (84.7mmol/mol)
- Had no regular contact with his G.P for any help with his diabetes care
- Known to ODESP – declined every invitation to attend screening since programme started 2006
- Last sight test 10 years ago

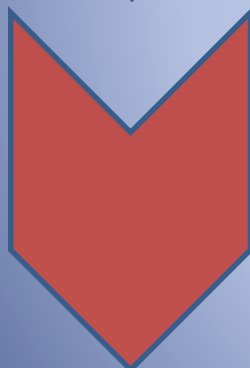




Purchase of very...very LARGE
screen television

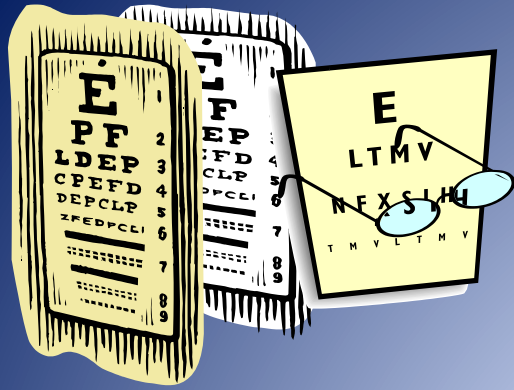


Difficulty recognising
colleagues



‘Near-miss’ accidents at work
involving work vans

Concerned employers encouraged the
patient to attend an opticians and asked
to be kept informed so they could offer
full support.



The first step:



Patient attended local optician 4th March

- Admitted he was unable to see long distance for approx 12 months
- VA 6/60 in both eyes corrected to 6/19 with pinhole.
- Bilateral proliferative retinopathy with NVD and retinal oedema observed

Optician telephoned
G.P and ODESP as
well as Faxing
report.



*Communication is
vital for a quick
referral*

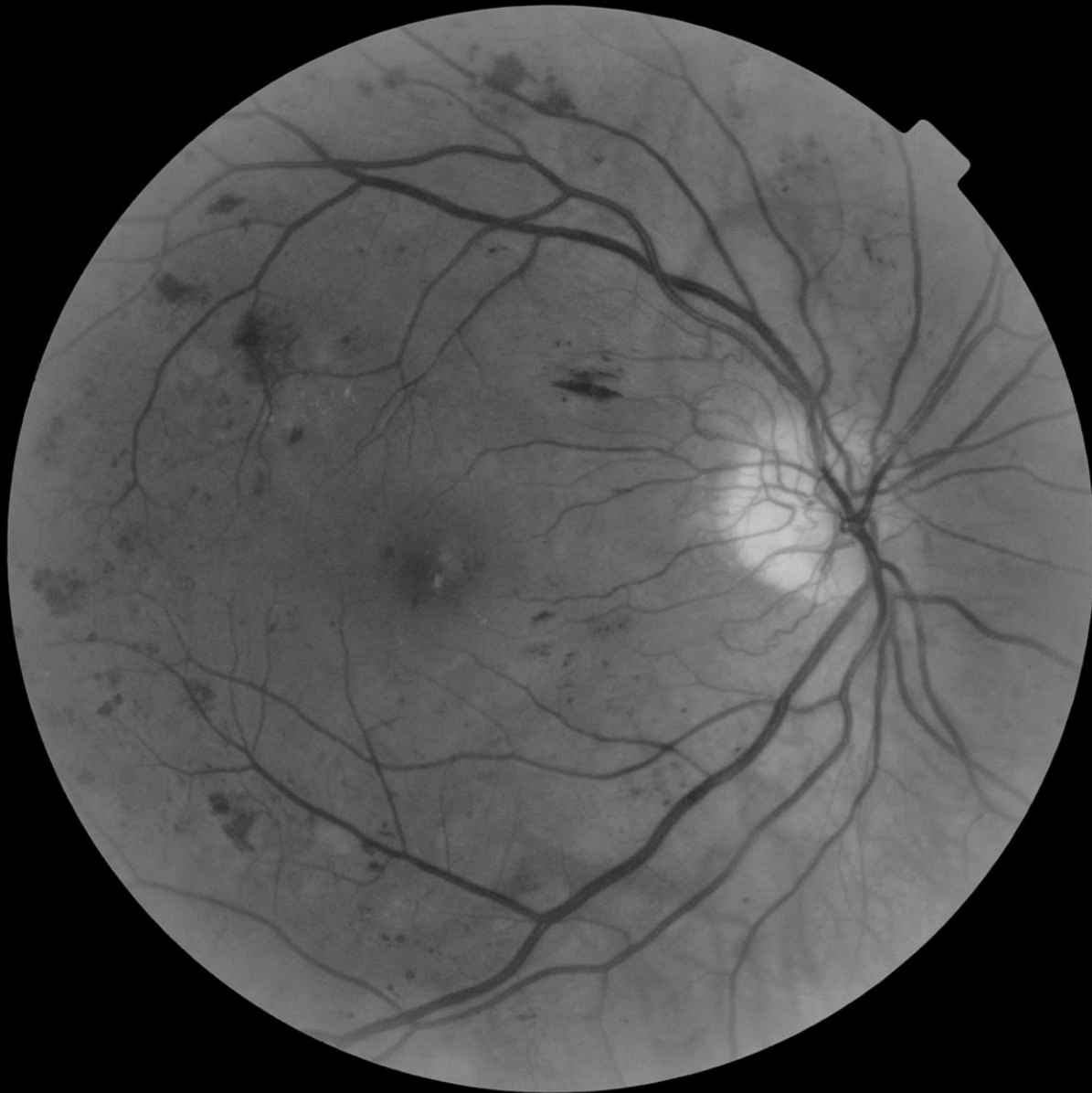
6th March:
G.P forwarded report from Optom
and telephoned ODESP requesting
an urgent appointment
(as suggested by optician).
Eye Screening appointment
already booked at local surgery the
next day.

7th March: Patient attended
local clinic after some
encouragement by the screener as
patient failed to arrive at his
morning appointment. Adequate
Macular and Nasal images
captured and additional extra
fields.

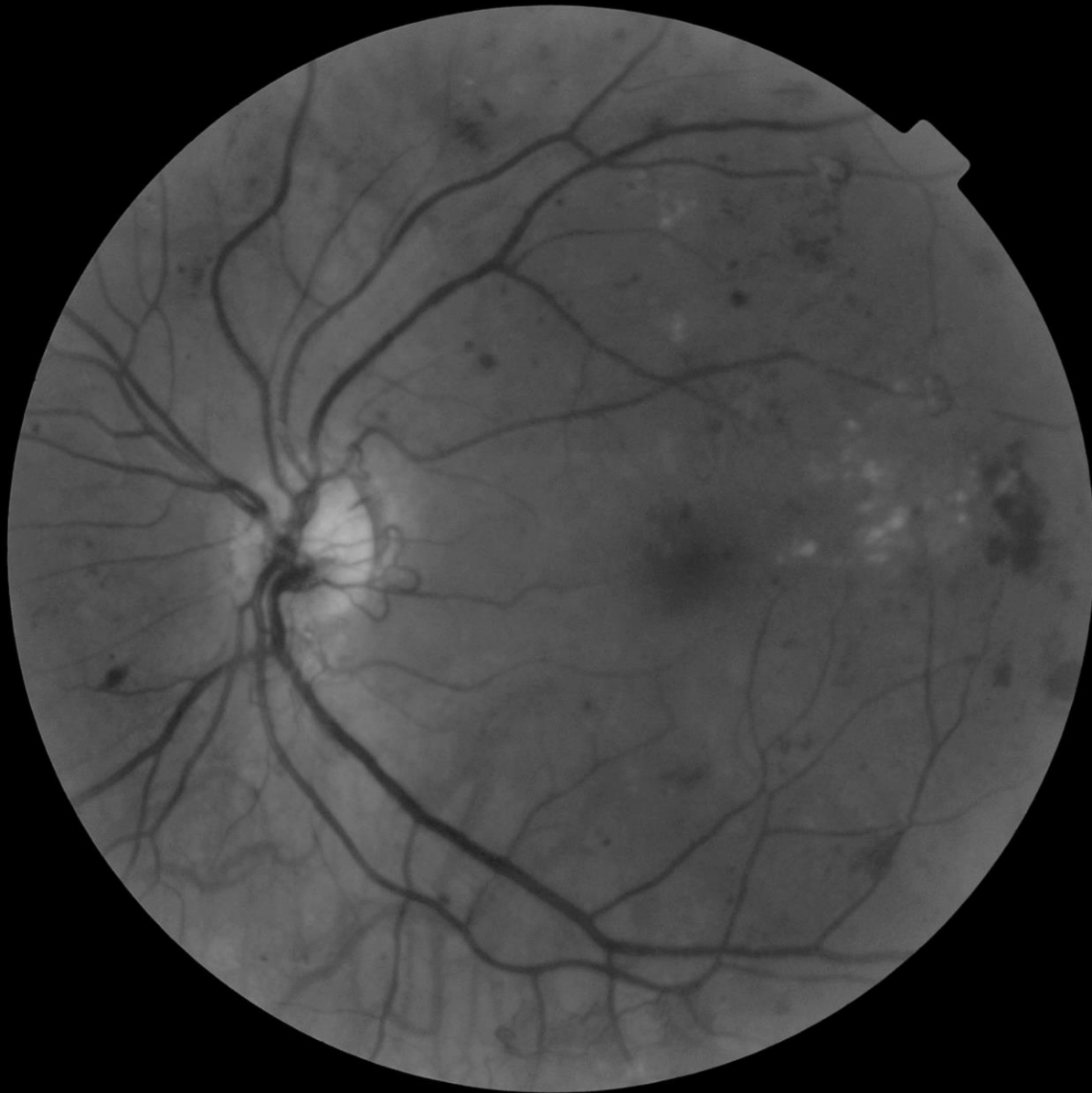
Screening result:

Right Eye		Left Eye
Adequate	Image Quality	Adequate
6/19	Best recorded visual acuity	6/30
R3A Active proliferative retinopathy	Diabetic retinopathy	R3A Active proliferative retinopathy
M1 Maculopathy	Maculopathy	M1 Maculopathy









ODESP:

Patient and employer
telephoned and
informed of outcome;
an URGENT HES
appointment offered

COMMUNICATION !

Patient declined
appointment as on
annual leave.

Employer
telephoned by
programme
manager to discuss
appointment
arrangements.

Eye Hospital treatment timeline:

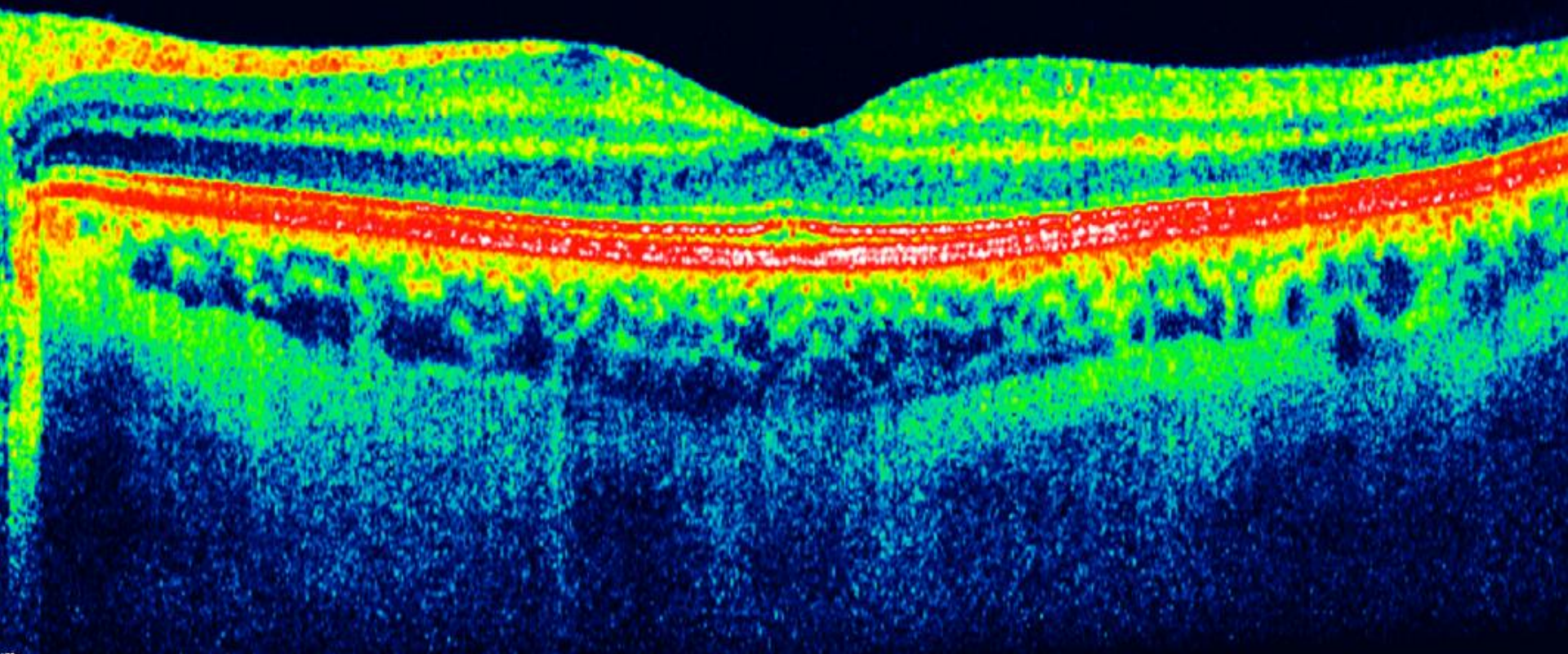
12th March: NSC Grade RE: R3A M1 P0 LE: R3A M1 P0
PRP treatment delivered to RE. Plan to laser LE in 1/52

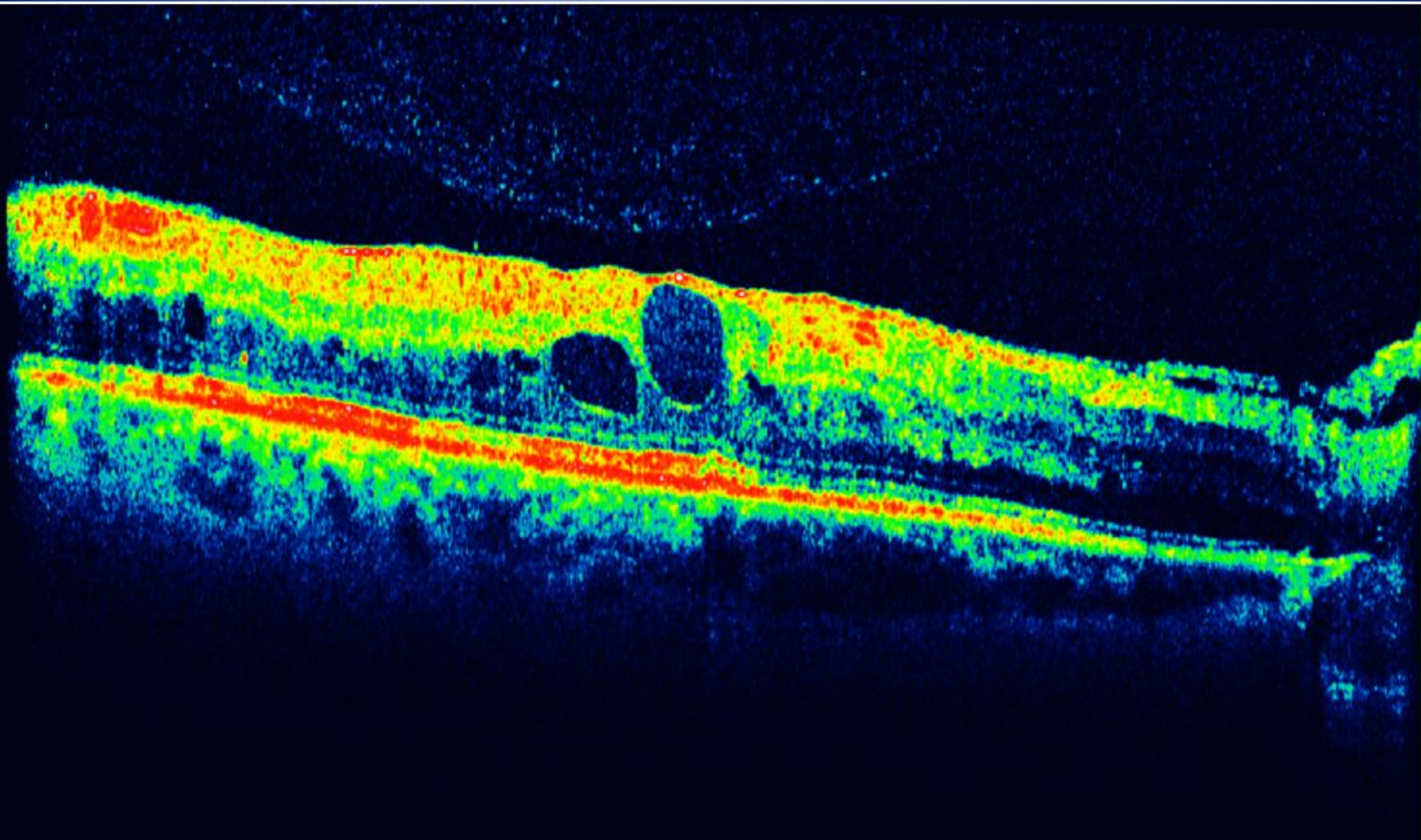
17th March: NSC Grade RE: R3A M1 P1 LE: R3A M1 P0
PRP treatment delivered to BE with a follow up appt planned for 2 months.

21st May: NSC Grade RE: R3A M1 P1 LE: R3A M0 P1
Bilateral NVD still active, for further PRP fill in.

7th July: NSC Grade RE: R3A M1 P1 LE: R3A M1 P1
PRP treatment delivered to BE. RE shows persistent Macula oedema -
Lucentis course booked

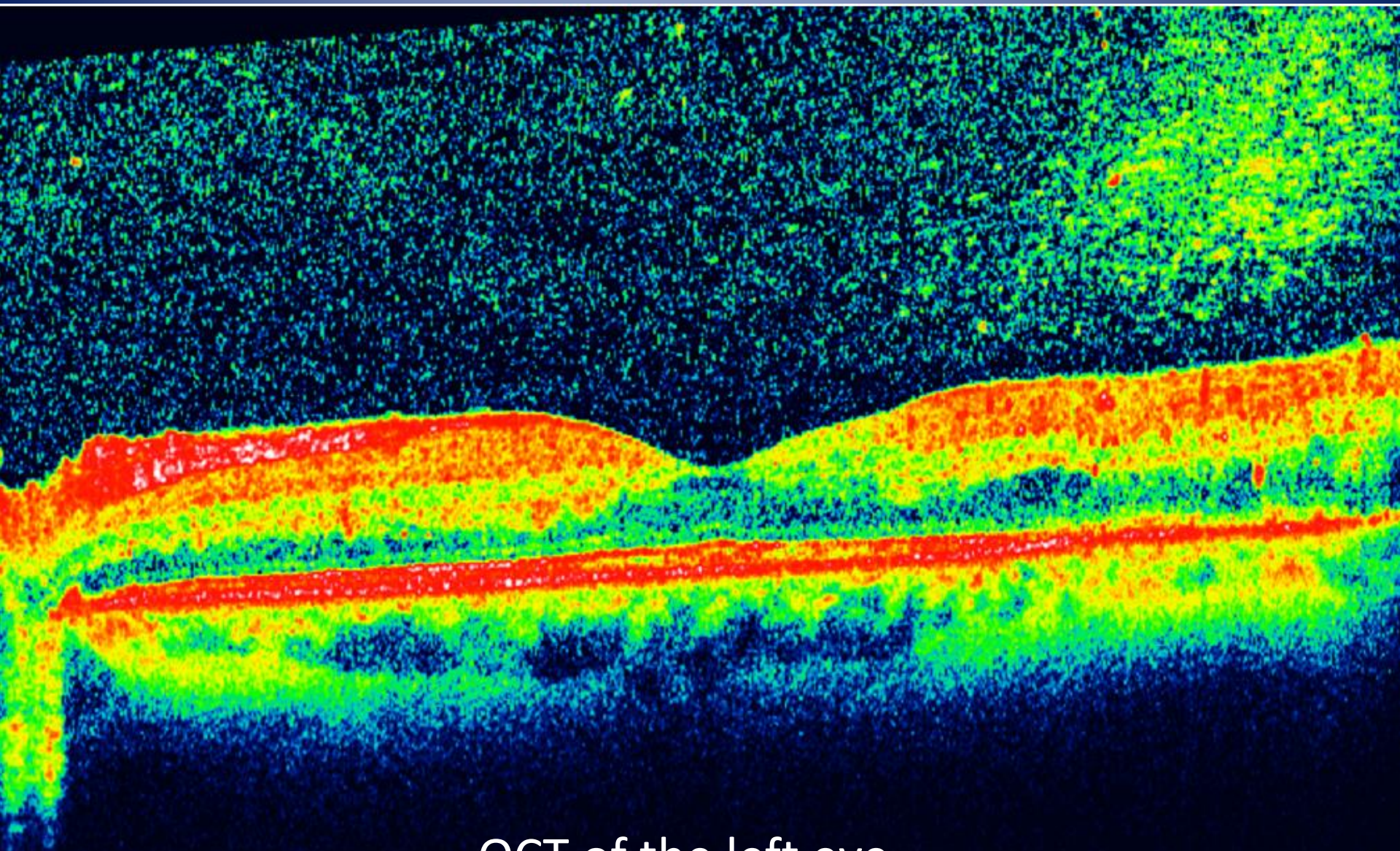
A Negative OCT





OCT of the right Eye, Clearly showing CSMO
July 2014

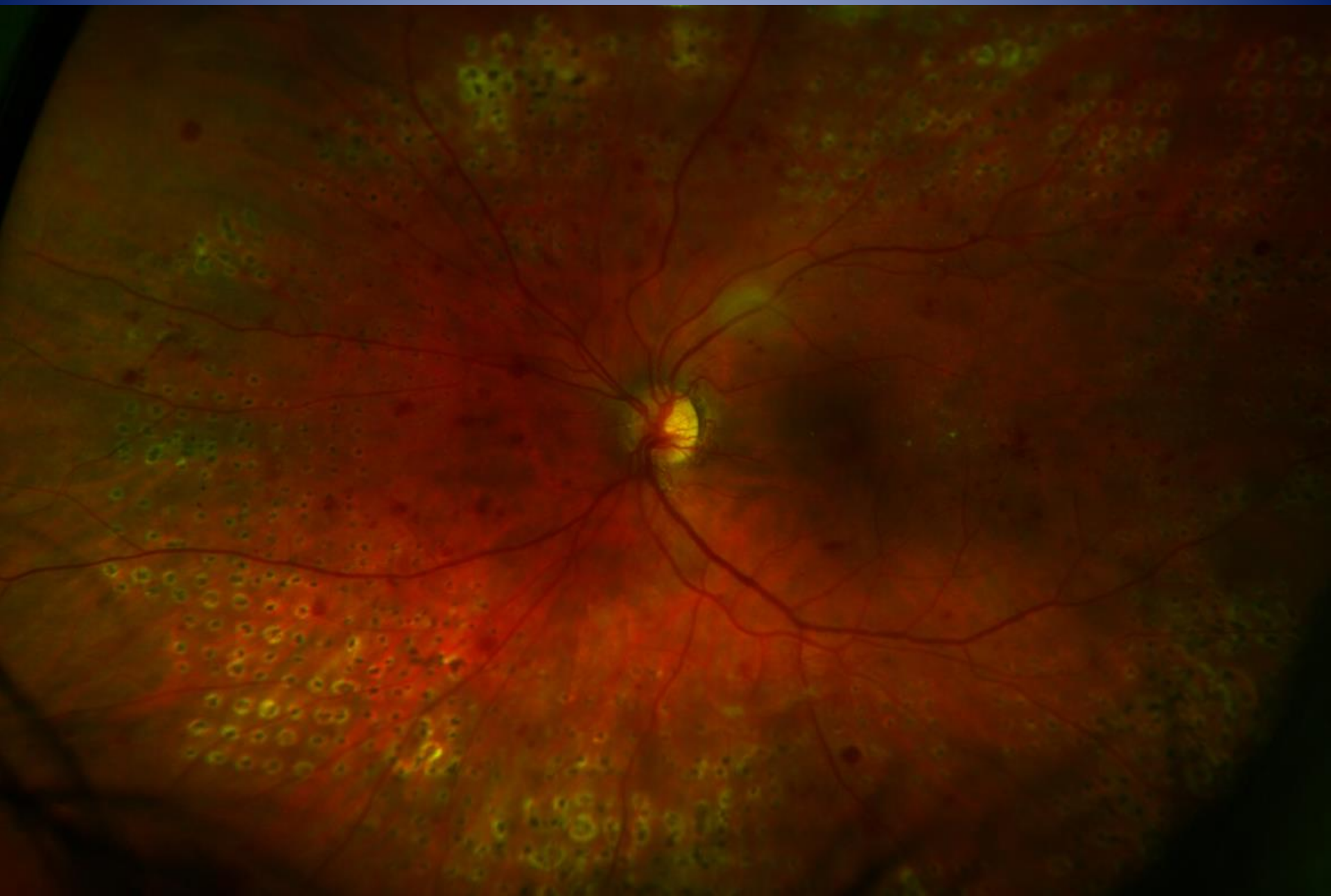
200 μ m



OCT of the left eye
July 2014



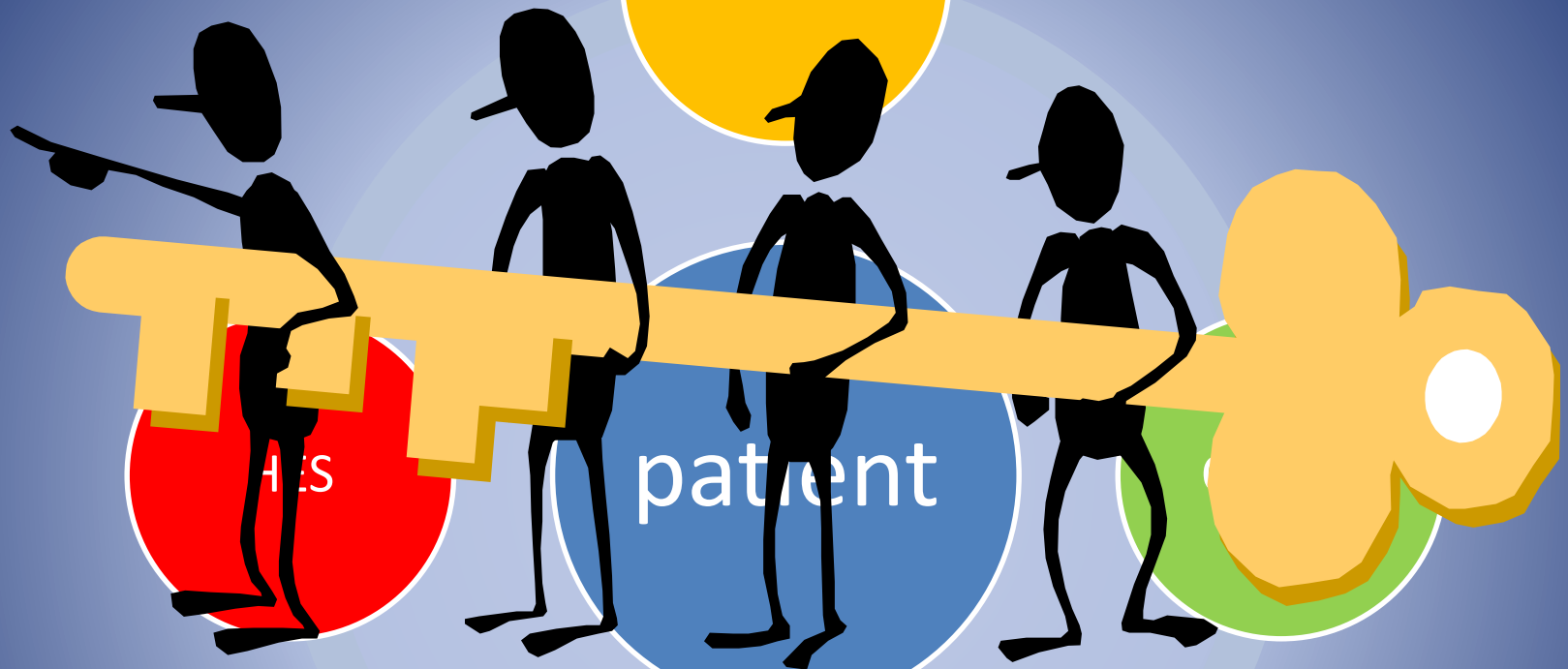
Right eye Optomap Image July 2014



Left eye Optomap Image July 2014

The KEY to good patient care is:

ODESP



RELATIONSHIP BUILDING

SUPPORT

COMMUNICATION

EDUCATION

SENSITIVITY

employer

UNDERSTANDING

Thank You!