

Address at AGM of Vision 2020 The Right to Sight Initiative

16/Jul/2009 : Patna

Light to See: A Noble Mission

“Let there be light”

I am delighted to participate in the 5th Annual General Body Meeting of the “Vision 2020: The Right to Sight India” at Patna. My greetings to all of you. I am sure, this annual general body meeting being held in Patna, will enable working together of all governmental, non-governmental, autonomous organizations and international funding agencies to take up a project for Bihar for removing the avoidable blindness in a time bound manner. I am sure, “Vision 2020: The Right to Sight India” functionaries will be able to sensitize Government of Bihar to consider eye-care as a priority health care area. May I suggest your opening a web site which would give information in regional languages to the public on preventive eye care, warning signals as well as possibility of interaction through question and answers. Friends, when I am in the midst of this audience, I would light to talk on the topic “Light to See: A Noble Mission”.

Status of Eye-care in Bihar

I was studying the eye-care need in terms of cataract surgery, spectacles, diabetes and diabetic retinopathy, glaucoma and low vision persons in Bihar. Our study indicates that against the need of cataract surgery for nearly 6 lakh people, the system is able to cater only 1.4 lakh surgery per year. Similarly spectacles are being provided for only 65,000 people whereas 42 lakh need spectacles. The citizens suffering from diabetic retinopathy and glaucoma are around the 12 lakh and none of them get any treatment. Nearly 9 lakh low vision persons need immediate attention. I am sure, this study definitely indicates an urgent need for starting a mission mode programme by all the stakeholders collectively, so that treatment is available to all the 67 lakh citizens with avoidable blindness within the next 3 years.

Right to Sight mission for Bihar

Right to Sight programme aspires to have our country free of avoidable blindness, where every citizen enjoys the gift of sight and the visually challenged have enhanced quality of life as a right. Now that we are concentrating on Bihar, the Right to Sight programme executives have to develop strategies through which all the 67 lakh citizens are provided with treatment at the earliest through the support of the Bihar Govt officials,

Bihar Ophthalmological society, Ramakrishna Mission Ashram, Patna Blind School and other NGOs of Bihar and other states who volunteer for this noble mission.

Strategies to be adopted

In view of the current economic climate it is essential to maximize the impact of existing resources and technical programmes across India, across all the districts of Bihar. In my opinion the planning broadly should contain the following:

1. Increase political and financial commitment to eliminating avoidable blindness.
2. Facilitate the preparation of evidence-based standards and guidelines for cost-effective interventions.
3. Review international and national experience and share lessons learnt and best practices in implementing policies, plans and programmes for the prevention of blindness and visual impairment.
4. Strengthen partnerships and coordination between stakeholders involved in preventing avoidable blindness.

With increased allocation of union health budget for eye care from Rupees 400 crore to rupees 1250 crore, fund must be distributed to deserving eye-care agencies and states very speedily and transparently, so that they can take the development action very fast. I am sure, Vision 2020 India could play a major role in this area. I would suggest that they work with the Ministry of Health and create a web based information about the distribution of funds targets achieve and the utilization of funds.

Eye-care delivery

With modern technology and techniques nearly 80% of eye problem can be cured. At least they include cataract (62%) and uncorrected refractive error (18%). We have to train more eye care personnel in the modern and cost effective eye care. The training must include paramedics and nurses in addition to eye doctors.

Healthcare delivery personnel of Bihar must build a relationship with other states that have experience in eye-care. I know some eye hospitals in South, notably the Aravind Eye Hospital and the LV Prasad Eye Institute have been doing well working in all levels of Vision Pyramid. They have Vision Centers at the base of pyramid, Service and tertiary centers in the middle of pyramid and have topped the organization with one Center of Excellence. The Aravinds are in Uttar Pradesh already; Bihar is not far. This type of pyramid structure can be created in Bihar in partnership with experienced hospitals and professionals within and outside Bihar.

Finally there must be a strong Public- Private partnership in all healthcare activity including the eye care. Such a partnership is already piloted in the

Kishanganj district. The partners are the District administration, Sight savers and Sushrut Foundation from Calcutta. While I wish this pilot all success, I would request all of you to see whether it can be extended to other eight needy districts of Bihar.

Vision village complex

Friends, in past, I have spoken about PURA- Providing Urban amenities in Rural Areas. I will today speak about an extension of this concept in eye care. This is called Vision Village Complex, my friend Dr. Taraprasad Das explained to me. Our friend Prof. GN Rao is doing this in Andhra Pradesh. The only mission of the entire concept is to provide affordable and quality eye care in villages all throughout the year. One service centre complex consists of 10 Primary Centers surrounded in 25 kms radius. The Primary center located in villages, serves a population of 50,000 people (approximately 25 villages) and so the Service center, located in a mid size town, typically a district head quarter or so, serves a population of 500,000. The L V Prasad Eye Institute has established several such models in Andhra Pradesh. They can also help Bihar in creating such centres.

Aravind Eye Care System

Similarly, the Aravind Eye Care system has a principle that the hospital must provide services to reach rich and poor alike, yet the eye care facility must be financially self-supporting. The entire Aravind Eye care system is conducting on an average 800 eye surgeries per day and annually treat over 2.5 million patients. They are providing for every 30 paid patients, free treatment for 70 patients who cannot afford. This principle is achieved through high quality, large volume care and a well-organized system. I am sure, Aravind Hospital with their culture of "efficiency" and a culture of "giving" which is essential in this noble profession can definitely come forward to train the ophthalmic doctors, nurses and para-medical staff of Bihar.

What is the need of the hour

Through all these interventions, we have to see 38 districts of hospitals and sub-divisional hospitals have an eye surgeon on permanent basis or by borrowing the services from other hospitals in different states. It is also essential to do the same technique for filling the vacancies of eye surgeons in referral hospitals. Similarly there is a need to post para-medical ophthalmic assistants in all the districts, sub-divisional, referral hospitals and primary healthcare centres. Since, generating such a number of ophthalmic specialists personnel will take some time, I would suggest major hospitals like LV Prasad Eye Institute, Shankar Nethralaya, Aravind Eyecare centre, Dr Rajendra Prasad Eye Institute, Ratanjyot Eye Hospital to nominate the doctors, nurses and para-medical staff along with equipments for a certain period for the Bihar Eye Care Mission. This will be greatest societal

contribution of these major hospitals in this noble mission of providing light to needy citizens of Bihar.

Eye Bank with a mission

When I was in Rajasthan, I saw a unique mission carried out by Eye Bank Society of Rajasthan. I talk to Shri M.L. Mehta, President of Eye Bank Society of Rajasthan. I was inspired to know that this society has 100 members (30% women) and they are spearheading a movement to add 400 cornea every year with an ultimate goal of collecting 1000 cornea per year. This is an important mission in relation to Right to Sight India programme. What touched my heart was that the members of the society reach the homes and the mortuary to persuade the grieving relatives for giving the eye of the departed soul, so that light can be given to many who are in darkness. I visualize that the spirit of giving light should spread across the whole nation. I would suggest the Right to Sight programme executives can invite some of the members of the Eye Bank Society of Rajasthan to Patna. These members can share the knowledge with some of the NGOs of Bihar on the techniques they adopt, for mobilizing cornea from departed souls.

Tele-Ophthalmology

Many of our eye care centers have created tele-Ophthalmology network using tele-eye care network of ISRO. Once we have the connectivity, then there should be a universal tele-ophthalmology system in place, Ophthalmologic specialist from different regions can come together in virtual clinics. More importantly, this network can be used for creating awareness and education for eye care and immediate aid in case of accidents or uncommon eye diseases. A multi eye clinic environment with seamless two-way interaction between the doctors and patients will enable the eye specialist to diagnose the particular patient and also seek expert opinion from distance doctors located in remote areas. Such sharing of knowledge will provide cost effective integrated treatment for the patients in the specialized areas like corneal blindness, surgical complications, posterior segment disorder, retinitis etc. The same system can be transformed into a virtual ophthalmic institute from where a specialist lecture or a diagnostic and treatment breakthrough, can not only reach any remote corner, but also enable a good eye specialist in the remote area, to share multicast information with others in the network. Thirdly the same system can be used to offer practical training to eye doctors and paramedical staff on the intricacies of eye operation through a "Virtual Operation Theater". As you all know, such is the power of network in Tele-Ophthalmology. As a first step, the Right to Sight India organisation should work towards providing a tele-ophthalmic network in Bihar for taking the aid of technology for enhancing eye-care. This will further enhance the volume and quality of treatment provided to the patients particularly in the rural areas. Tele-ophthalmology has been established by Aravind Eye Care centre in partnership with ISRO. Aravind Eye Care centre can assist in establishing tele-ophthalmology facility

in different district centres of Bihar. If any tele-connectivity is needed through ISRO, I can definitely assist.

Ophthalmologists as teachers

Recently, there was a meeting of cured patients, their doctors and a few social workers. One important point emerged during the interaction was that the relationship between the patient and doctor extends to patients' family. This in turn, transmits effective messages from one family to another family on advice to prevent the eye diseases, necessity of periodic checks, the dietary habits and the need for life style changes including eye exercise for good eye health. Actually, I believe this good contact between the doctor and patients is comparable to that of a teacher and student. I request every doctor to play the role of a teacher in advising every family on eye disease prevention and methods to lead a healthy life. This message can be transmitted to all the 75 member organisation of the Right to Sight India programme.

Conclusion

'Defect free vision for all' should be our national mission. The eye problems of the children can be corrected, if diagnosed early. Such programmes should aim at screening all the school children and other citizens. Doctors and nurses of participating institutions of Right to Sight India programme can conduct eye camps in rural areas in partnership with other regional eye care institutions, so that the rural children can be screened at the earliest stage for detection of eye defect if any. Any one having defective vision or any obvious complaints should be brought to the nearest eye institute for investigation and treatment. I have been asking the students to be helpful to their colleagues by bringing out special eye problem of their school friends to the notice of the parents or the teachers. While all out effort is being made to reduce the avoidable blindness among the grownup, there is a continuous increase in the eye problems among the children due to modern life style. Research is required to pin point the causes and provide appropriate guidelines to the parents, so that they can facilitate the children to preserve quality eye sight. This type of prevention and timely intervention will enable faster realization of "Vision for All" in its true perspective. I would suggest the members participating in the Annual General Body Meeting today to work on a Patna Declaration which can be signed by all the eye-care stakeholders before the end of the Annual General Meeting. This declaration must outline the actions needed to be taken by each stakeholder for providing quality eye care treatment to the 67 lakh needy citizens of Bihar within the next three years.

Friends, let me share with a quote from Helen Keller, the visually handicapped lady who led us to vision.

"Be of good cheer. Do not think of today's failures, but of the success that may come tomorrow. You have set yourselves a difficult task, but you will

succeed if you persevere; and you will find a joy in overcoming obstacles. Remember, no effort that we make to attain something beautiful is ever lost.”

My greetings to all the members of Right to Sight India success in their mission of enhancing the pace of eye care activities in the country aimed to ensure that every case of avoidable blindness is really avoided through appropriate intervention well before 2015.

May God Bless you.

I will read out an oath for the ophthalmology community. I would request all of you to administer this oath in your institutions.

Oath for Ophthalmology community:

1. I as an eye care professional, I realize by removing the darkness and giving the light to the patient is indeed the God’s mission.
2. I will always give part of my time for treating patients who cannot afford.
3. Based on the experience and my core competence as a Doctor, I am capable of diagnosing the exact disease at right time.
4. I will treat at least 100 rural patients in a year by going to rural areas and arrange cataract operation.
5. I will encourage the development of quality indigenous equipments and consumables by making use of them and assisting in enhancing the quality and reliability of the products.
6. I will follow the motto “Let my brain remove the pain of the suffering humanity and bring smiles”.
7. I will work for providing quality eye-care to all the needy citizens of Bihar within the next three.

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