

## **Eye Banking in India**

### **World Sight Day -2009**

(Gender and Eye Health – equal access to care)

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## **Corneal Blindness Scenario**

- It is estimated that 1.1 million people suffer from corneal blindness.
- Majority of them are children
- It is estimated that every year incidence of corneal blindness is about 20-25000
- APEDS, Rajasthan and Tirunelveli study on corneal blindness shows prevalence ranging from 1% to as high as 7%.

## Snapshot of Eye Banking in India

	2006	2007	2008
No. of Eye Banks / EDC's	543	560	589
		(3.1%)	(5.17%)
Collection	28857	30353	34520
		(5.18%)	(13.7%)
Utilisation	12975	12969	13887



## Snapshot of Eye Banking in India

	2006	2007	2008
No. of eye banks collecting upto 100	197	183	254
100 to 500	32	45	47
500 to 1000	10	9	7
Above 1000	3	3	7



## Snapshot of Eye Banking in India

	2006	2007	2008
Percentage of Eye banks collecting upto 100	36.2%	32.6%	43.1%
100 to 500	5.9%	8%	7.9%
500 to 1000	1.8%	1.6%	1.2%
Above 1000	0.5%	0.5%	1.2%



## Snapshot of Eye Banking in India

- 4% of Eye Banks who are members of EBAI account for 50% of total collection.
- 46% of Eye Banks who are members of EBAI account for only 28% of the total collection.
- **It is evident that India needs less number of eye banks and more number of eye donation centers feeding into the eye banks. Thus the three tier eye banking model becomes relevant and appropriate.**

## Snapshot of Eye Banking in India

	2006	2007	2008
<b>Central Zone</b>			
Collection	582	615	744
Utilisation	338	335	405
<b>East Zone</b>			
Collection	1628	2001	2028
Utilisation	666	702	731
<b>North Zone</b>			
Collection	3213	3675	5141
Utilisation	2082	2171	2901



## Snapshot of Eye Banking in India

	2006	2007	2008
<b>South Zone</b>			
Collection	13496	13787	16311
Utilisation	5032	4997	5904
<b>West Zone</b>			
Collection	9938	10275	10296
Utilisation	4857	4764	3946



## Snapshot of Eye Banking in India

- Since 1995 our collection has been increasing year on year by a minimum of 3.3% and a maximum of 16%



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## Eye Banking in India

Success of Eye Banking depends on:

- Leadership
- Awareness
- Organisation Model
- Government Support



## Leadership

- Eye banks need strong, committed and passionate leadership to motivate, inspire and lead by example.
- Eye Banks are successful only in few places where such leadership is available.
- Attracting, training and developing strong leadership is essential for success of eye bank.



## Awareness

- Regular, ongoing programs – Long term, costly and requires huge resources. Measuring outcome is difficult. Needs new ideas, new celebrities, religious heads etc to attract and engage public attention. Ex – Hemamalini Ji, Aishwarya Rai / Amitabh, Jeeyar Swamijee, Asaram Ji etc
- Proactive focused programs like HCRP target potential donors and is less costly. Outcome can be measured. Awareness programs can be restricted to limited area. More result oriented.  
Ex – RIEB, Disha, National Eye Bank, GNEC etc



## Quality

- Quality depends on attitude and is in short supply!!!
- Many follow procedures out of necessity or regulations rather than genuinely appreciating the need and adopting them.
- Thus Accreditation has become a necessity to ensure quality.



## Organisation Model

- Eye Banks part of hospitals – No need felt to increase beyond a level as needs are fulfilled.
- Standalone eye banks finding it difficult to survive – Not able to find enough resources. Govt funding can meet part of expenditure only.
- Motivating Eye Bank Personnel becomes difficult in such scenario. – Does not have assured career growth in case of small set up eye banks / eye donation centers



## Organisation Model

- Eye Banks need to consolidate their operations and build a strong, sustainable and practical business model so that people can be motivated to achieve goals set up by management – Three tier Eye Banking model.
- Non ophthalmic leadership is essential to take care of day to day activities and growth strategies leaving the technical side to be handled by Medical Director.



## Government Support

- Government Support – Required Request.
- Brazil which is similar to India has one of the world's largest eye banks collecting more than 6400 eyes due to support from government in terms of legislation, funding etc
- No need to wait for amending the act or introducing new act; A circular to all hospitals that families are to be counseled for eye donation can increase donations considerably.



## Government Support

- Example – West Bengal government gives permission to implement HCRP in government as well as non government hospitals to private as well as government eye banks for three years / five years. In the same way the hospitals can be asked to counsel families for eye donation or hospital authorities to intimate nearest eye bank.
- May be implemented in one or two states and based on the outcome can be extended to other states. – Example – U.S.A – from about 30000 eyes it has increased to more than 93000 at present in a short span due to the enabling legislation like Required Request.



## Government Support

- The support to eye banks for operational expenditure at present is available partially and should be entirely met by government so that eye banks can concentrate on quality and awareness aspects. It is being followed in Brazil and has yielded best results.
- Government can extend support on an experimental basis to select few eye banks to start with and fine tune the program based on the outcome.



## Conclusion

- Eye Banks need Strong leadership, cost effective focused programs to target and educate potential donors, robust business model which can attract and retain talent and effective government support to strengthen them.



## Eye Banking in India

Thank You

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