

In brief: eye screening and care

navigating the treatment pathway





Aboriginal and Torres Strait Islander people begin life with generally very good vision—on average better than non-Indigenous people—but in adulthood, rates of blindness increase at an earlier age than for non-Indigenous people.



Complications from some health conditions (e.g. diabetes) can result in severe vision loss and blindness that

can be prevented if people receive regular eye checks, relevant eye screening and care.



It's important that Aboriginal and Torres Strait Islander children and adults are supported to get regular eye checks and navigate the treatment pathway.

Eye screening is a quick way to detect eye problems and can be conducted by a range of trained health care professionals, including: Aboriginal and Torres Strait Islander Health Workers and Practitioners, eye health workers (EHWs), regional eye health coordinators (REHCs), nurses and general practitioners (GPs), and optometrists.



Eye checks are an important part of broader preventive health efforts like:

- health assessments for Aboriginal and Torres Strait Islander people
- chronic disease management.







When conducting eye checks, health care professionals conduct different types of eye screening. Eye checks usually include:

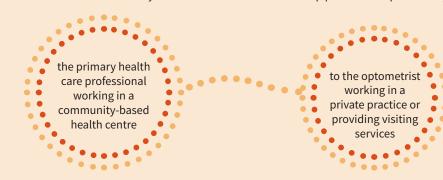
- · taking the patient's case history
- screening for visual acuity (measuring refractive error i.e. distance/near vision)
- checking the structure of the eyes for abnormalities.



Depending on the patient's age and needs, and the training and resources available to the health care professional, eye checks may also include:

- screening for infant red reflex
- screening for cataract
- screening for diabetic retinopathy (DR) if patients have diabetes
- screening for trachoma (in children) and trichiasis (in adults) in parts of the country where active trachoma persists
- screening for trichiasis (in adults) if they grew up in a trachoma area but now live elsewhere
- treatment for minor eye injuries
- appropriate referral if further eye assessment and/or care is needed.

Linked and coordinated eye care services are needed to help patients complete the eye care journey from:



to the ophthalmologist providing visiting services, conducting surgical blitzes or orking in a hospital

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