Ophthalmology in SA Family Practice



Prof Anne Peters

Ocular problems and visual disorders are a common occurrence in all societies and the burden of eye disease in rural South Africa is high, with an estimated 750 blind in 100,000 of the population¹, due mostly to cataract and glaucoma.

The general practitioner is well placed to provide ophthalmic care in both the urban and rural setting. Less serious conditions may be treated and followed up and preventative and rehabilitative advice may be given.² The practitioner also needs to be fully aware of the indications for ophthalmic specialist referral, both urgent and less urgent.

In this edition of the South African Family Practice Journal, containing an ophthalmology review, several ophthalmic consultants from the Department of Ophthalmology at the Nelson R Mandela School of Medicine, University of KwaZulu Natal, have been invited to contribute articles to address the common eye problems seen in family practice.

The series starts with an important review of the office skills required by the general practitioner for the adequate examination of the eye is the third article. In a speciality where sophisticated equipment abounds this article elegantly demonstrates how well the eye may be examined with relatively simple instrumentation. It is written by Dr Farouk Adamjee who is also a consultant in the department. He has completed his Masters dissertation on the clinical features and genetic findings of a large Indian family with Aniridia.

The second article reviews the primary eye care of conditions suitable for diagnosis and treatment by the general practitioner

and includes the referral indications for more serious problems. It is written by Dr Vanessa Thunstrom, a young specialist ophthalmologist, whose interests span a broad medical and surgical range, with particular emphasis on retinal conditions.

The third article is written by Dr Linda Visser, principal consultant and presently Acting Head of the department. She has written a review of



the common eye disorders in the elderly, a group very commonly affected with blinding disorders such as cataract, glaucoma, retinal vascular disease and macular degeneration. In her article she makes note of the use of intravitreal injections of anti-angiogenic substances such as Macugen for the treatment of choroidal neovascular membranes. These substances offer exciting new potential advances in the management of age related macular degeneration and other diseases. The department is currently involved in a clinical trial on the use of Macugen in diabetic macular oedema. Dr Visser is well known in the ophthalmic community for her work on cytomegaloviral retinitis in patients with AIDS.

Unfortunately, in South Africa, ocular trauma is an important topic and Dr Kavitha Naidu has written a comprehensive article on the injured eye, a "must read" for all involved in trauma management. So often, when other

trauma is present, the treatment of the eye is overlooked or delayed, infinitely worsening the outcome.

Dr Naidu is a consultant and lecturer on the joint staff of the Provincial and University establishment. She is currently completing her Masters dissertation on the visual outcome following injury to the eye with a blunt object.

The last article gives an overview of the prevalence, screening, diagnosis and treatment of glaucoma, a common, insidiously blinding condition particularly prevalent in our black population. The author is Dr Brian Gundry, another young consultant in the department presently working on his Masters dissertation, a prospective nonrandomized trial entitled Primary Conjunctival Excision Biopsy with Lamellar Sclerectomy for Ocular Surface Squamous Neoplasia.

Ophthalmology as a speciality has made spectacular advances over the last twenty or so years, taking full advantage of the explosion in technology. The Department of Ophthalmology at the University of Kwazulu Natal has kept pace, particularly with the opening of the Inkosi Albert Luthuli Central Hospital, and provides a modern comprehensive service with phacoemulsification techniques for cataract extraction, seton implants for glaucoma and high quality vitreoretinal surgery for retinal detachments, trauma and diabetic retinopathy.

I sincerely hope that you, the reader, will find the articles emanating from the department interesting and informative.

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