

Letter to the Editor

Common Ocular Diseases: Recent Observation from a Community Based Ophthalmological Clinic in Shaymoli, Dhaka

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Dear Editor

I am an ophthalmologist and eye-surgeon running an ophthalmological clinic. I aim to share some of my major observations during my day-to-day ophthalmological practice which I had to deal with, seriously, over the past period of few years (January'2017 - December 2021).

In this five years of my ophthalmological practice I have managed clinically and surgically about 30,000 patients attending our eye hospital/clinic. I have successfully managed about 5000 various types of ocular disease pertaining to minor eye problems to major surgeries as shown below:

List of eye problems among patients having been suffered from several ophthalmic disorders:

- Diabetic retinopathy,
- Dry eye diseases,
- Age related cataract,
- Age related macular degeneration,
- Viral keratitis
- Viral conjunctivitis patients are increasing day by day.
- Others like eye injuries (traumatic, foreign bodies' chemical burns etc.)

Although, most of these patients attended with the defect of eye powers (Refractive errors), following my

own, yet, effective eye management protocol for every patient suffering from refractive error, followed by IOP (Intraocular pressure) and dry eyes test, (schirmer test) were performed in most cases. Below remain a list of my observations as an ophthalmological expert:

- Patients attending with the complaints of dry eye are getting rampant day by day.
- Previously ophthalmological diseases/disorders were observed among only adult's but, my current observation remain that eye sight abnormalities (refractive error, etc.) are becoming much more big issue among young group of people like school going children several young adults and often old aged groups of people, mostly living in and around our locality of Shaymoli, Adabor, Ring road, Mohammadpur, etc.
- To my opinion all these ophthalmological issues occur much more due to air pollution intake of food chemical toxic and drinking polluted water.
- Moreover, visual online activities (on smart phones etc.) gradually making most of us if not all, device dependent, which may well remain another major cause of eye- problems like: dry eyes or refractive error.
- Conjunctivitis mostly being of viral origin, which i have been observing occurred more frequently than we faced those earlier currently being flaring up much more that even persists for 3-6 weeks or longer.
- These issues currently remain as more important and burning issues that sometimes do not even respond to conventional treatment. This may

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Received Date : 10 March, 2022

Accepted Date : 15 April, 2022

become so serious in near future unless we fail to make people aware to take care of our eyes, with proper treatment/management.

- It is, therefore the high time, according to my serious observations based on community based ophthalmological practice to be more serious thus being aware on these issues more attentive, in depth. To me, any ophthalmologic consultation requires such measures through following proper advices given, to abide by mandatorily.
- Simple conjunctivitis causing viral keratitis occurs due to negligence of not treating those eye-issues early, and, properly.
- One, of my other important observation is:

Many patients gave a history of using chloramphenicol eye drop only due to quickly and easily available medicine bought from nearer by medicine shop. And so, their eyes are not gets cured, even within the next 7 to 10 days of applying those. So, at last when the patients attends to my clinic with there already developed viral keratitis or keratoconjunctivitis, only due to either negligence or not addressing the issue checking up earlier by any eye specialist/ ophthalmologist.

- Since such eye-diseases need prolonged treatment minimum upto 6 to 8 weeks, but if it is not treated properly and at first time, such patients may face the worst consequences of long term suffering which could have easily be cured, otherwise. So, one must be aware on handling such ophthalmological issues of simple conjunctivitis in time and properly being one of the experts enough trained ophthalmologists.
- One of my other vital observations is on post-operative (eye-surgery) complications: This happens much more in many cases of post-cataract surgery patients who suffer more, only due to long gap between doctors and patient's communications for periodic follow up and maintaining doctor's advice at par.
- Any complication during cataract surgery may happen/occur, any time, so it must be clearly discussed/ addressed or managed. So, the patients and/or their guardians should create a good rapport and frequent visits with their eye specialists better to go to show it to the doctor who examined saw the

patient earlier and should clearly be noted down, either, on the discharge certificate, or, on the prescription(s) with appropriately referral letter to higher level ophthalmological hospitals, where managements of such complex ophthalmological cases are available.

Last but not the least: To me, any type of surgery complication should not be masked/ hidden by the patients/ guardians. In fact we should be aware about this and must comply with the ophthalmologist's advice and suggestions, properly.

Bottom line:

The main objective of this communication to keep our community aware on the aforementioned tips and suggestions on ophthalmological details/eye-injuries. One must be very alert on these issues so that everyone in our community both the ophthalmologists and the patients/guardians parties. This would assist to opt for better care of eyes-a sophisticated yet so delicate an organ better, faster and effectively.

With these aforementioned news and views, we the 'Shaymoli Eye Hospital' look forward to conduct community uplift men working hand-in-hand towards better community development activities and conductive prudently essential research.

Recently, we plan to conduct a community based research on common eye disease in our communities around Shaymoli/ ring road, Mohammadpur, Adabor, etc. soon, employing some of our volunteers (junior ophthalmologists) and led by public health physicians and researchers.

United we stand!!! Come let's keep our vision intact!!!!

Conclusion:

We, the ophthalmologists, particularly those who are running/practicing any community based eye clinic/ hospitals should provide due attention and adequate time for checking the patients, on any ophthalmological diseases/ disorders, or, seeking advice regarding different treatment modalities but must discuss on probable complications of eye case issues. Plausible complications of drugs/treatment modalities, and, must abide by the post-operative follow-up details to keep the fate of their eyes better, otherwise might face worse consequence, if left untreated.