

Visual impairment in developing countries

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We are now entering the endemic phase of COVID-19, a worldwide medical scourge which brought upon tremendous effects in our lives, and especially to the children and the elderly... the vulnerable ones. For children in particular, the impact of these effects has been tremendous. The consequences have been the acceleration of myopia¹ and the threat of digital eye strain,² which make up an emerging public health problem globally.

In this issue, we have articles that report cross-sectional, prevalence data on visual impairment and refractive errors from tertiary referral centres in Malaysia as well as Nigeria. In the study by Teoh *et al.*, the causes of visual impairment in children under 7 years of age were collated and examined. The authors reached an opinion that more than half of the cases had preventable or treatable causes, thus highlighting the importance of early screening and intervention programmes to prevent childhood visual impairment. They also suggested raising awareness and developing clinical guidelines into the national health program. The study by Otulana *et al.* reminds us that a significant proportion of visual deficit in developing countries is still contributed by relatively simple and correctable causes such as refractive errors. The authors stress that when left uncorrected, these problems may lead to disadvantages in education and employment opportunities, while also reducing quality of life.

These studies are important for healthcare planning and policy-making as they help us understand the kind and magnitude of problems that are common in the community, identify priorities, and strategize in terms of appropriate funding and distribution of health measures to combat the issues. They also inform the assessment of interventions or prevention measures, since they provide data on the baseline risk for a given disease in a patient group or population which influences effect measures.³ We hope that these articles will help generate more interest and subsequent reports on population-based ophthalmological conditions and their related impact.

References

- Holden BA, Fricke TR, Wilson DA, et al. Global prevalence of myopia and high myopia and temporal trends from 2000 through 2050. Ophthalmology. 2016;123:1036-42. <u>https://doi.org/10.1016/j.ophtha.2016.01.006</u>
- 2. Bahkir FA, Grandee SS. Impact of the COVID-19 lockdown on digital device-related ocular health. Indian J Ophthalmol. 2020;68:2378-83. <u>https://doi.org/10.4103/ijo.IJO_2306_20</u>
- Harder T. Some notes on critical appraisal of prevalence studies. Int J Health Policy Manag. 2014;3(5):289–290. <u>https://doi.org/10.15171/ijhpm.2014.99</u>