

3<sup>rd</sup> Edition of International Conference on **Eye and Vision**  
&  
2<sup>nd</sup> International Conference and Expo on **Advanced Eye Care and Cataract**

June 14-15, 2018 Rome, Italy

### **Ophthalmology practice challenges in low income countries (Eastern Congo specific case)**

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Ophthalmology practice in low income countries remains a very big problem today because of inaccessibility to eye care for most people. Blindness prevention and V2020 plan applicability in this area is a dream today while blindness is at his highest level in most of these countries, especially in the Democratic Republic of the Congo. The aim of our study is to present a five years' experience of ophthalmology practice in eastern Congo, for an advocacy for a real integration of primary eye care into the primary health care system and a support of blindness prevention program in this area. On a total of 73,068 patients examination performed in our service in the last five years, the blindness rate was found to be 1.4 %. The blindness rate is increasing each year because of unoperated cataract (53%), uncorrected refractive errors (14.7%), glaucoma (8%), corneal pathologies, diabetic retinopathy (7.2%), traumatic pathologies (11.1%) in this area, where there have been many atrocities and human rights violation due to the war, destabilizing the region from 1996 until today. Many factors, like the absence of qualified human resources (only three ophthalmologists for 8.2 million people), specialized infrastructures (only two in the region), and poverty reinforces the situation. The absence of international partners and NGOs in this area and the non-implication of the government also adds to the situation. The national program of blindness prevention is not supported and primary eye care is not integrated in primary health care system. Prevalence of blindness is increasing in low income countries. Urgent action are required to ameliorate the situation such as training of human resources, eye care integration in primary health care system, and amelioration of eye care delivery, with government and NGO accompaniment.

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