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Optometry services in the Ashanti region of Ghana

Emmanuel Kobia-Acquah

Kwame Nkrumah University of Science and Technology, Ghana

Statement of the Problem: Optometrists predominantly provide refractive services however the scope of practice varies depending on the curriculum for training and legislation for practice. The marked shortage of ophthalmologists in Africa means that optometrists will be important in meeting other eye care needs of the continent by providing primary eye care and diagnostic services apart from refraction. Although optometrists in Ghana are trained to deliver a wide range of eye care services including treatment of some eye conditions, it is not clear whether they are able to effectively render these services. This study sought to assess optometric services in government, Christian Health Association of Ghana (CHAG), and Non-Governmental Organisation (NGO) hospitals/clinics in the Ashanti region.

Methodology: This was a cross-sectional study. 26 government CHAG and NGO facilities including one teaching hospital were included in the study. The principal investigator visited all the facilities and administered structured questionnaires to all available optometrists.

Findings: The average age of optometrists working in these facilities was 31.6 ± 4.5 . NGO facilities were better equipped than CHAG and government facilities. Refraction, spectacle dispensing, and treatment with therapeutic drugs were available in all the facilities. 28.1% optometrists provided low vision services, and only 3.1% provided contact lens service. There was no association between the optometrist's years of practice and their level of confidence in performing the procedures except for skills in low vision assessment ($\chi^2=18.41$, $p=0.05$) and tonometry ($\chi^2=19.99$, $p=0.01$). Similarly, there was no association between facilities in which the optometrist's practiced and their level of confidence in performing the procedures except for tonometry ($\chi^2=22.05$, $p=0.04$) and biometry ($\chi^2=26.15$, $p=0.04$).

Conclusion & Significance: Although NGO facilities were better equipped compared to CHAG and government facilities, there was no difference in the ability of optometrists to perform routine procedures within these facilities.

Biography

Emmanuel Kobia-Acquah is an accomplished, Ghanaian trained Optometrist, Public Health for Eye Care Researcher, and currently Lecturer at the Kwame Nkrumah University of Science and Technology (KNUST). He graduated with a Doctor of Optometry degree in 2010 at KNUST. He had one-year comprehensive fellowship training in Clinical Optometry in 2012 at the L V Prasad Eye Institute in India and subsequently obtained an MSc in Public Health for Eye Care in 2015 from the London School of Hygiene and Tropical Medicine. He is currently undertaking a number of research work including: An image processing algorithm for prediction of glaucoma in Ghana, referral patterns of patients attending optometry clinics in Ashanti region, knowledge, attitudes, and practices on ocular health among street vendors in Kumasi. He is also involved in several community outreach programs in Ghana and is a Board Member of the Volunteer Optometric Services to Humanity (VOSH-Ghana)

ekobiaacquah.cos@knust.edu.gh

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