Original Resear	Volume-9 Issue-3 March-2019 PRINT ISSN - 2249-555X
ol Of Applia	Ophthalmology
0000 × 4000	A CLINICAL STUDY OF DEMOGRAPHICS OF INPATIENTS ATTENDING REGIONAL EYE HOSPITAL, KURNOOL
Dr.P.R. Niveditha	Assistant Professor, Regional Eye Hospital, Kurnool Medical College, Kurnool.
Dr. B. Krishna Naik*	Junior Resident, Regional Eye Hospital, Kurnool Medical College, Kurnool. *Corresponding Author
Dr. R. Chaithanya	Junior Resident, Regional Eye Hospital, Kurnool Medical College, Kurnool.
ABSTRACT Prevent attendin out of which 40.2% were male a group of 51-60 years. Most of t hospital is cataract (90.48%).	able blindness is an important aspect of eye health problem. A retrospective study of demographics of inpatients ig regional eye hospital, Kurnool, with eye problems assessed. A total of 988 patients were enrolled in this study, nd 59.8% were female. About 43.5% of patients seeking eye health care services were found to belong to the age them belonging to poor socioeconomic status (75.5%). A most common cause for which patient attending our
KEYWO	ORDS : Demographics of inpatients, Eye care services, Regional Eye Hospital, Kurnool.
INTRODUCTION:	A total of 988 patients were enrolled in the present study. Out of them

(n=988)

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INTRODUCTION:

Blindness or low vision is the major eye health concern all over the world. It can have an impact on all aspects of life in most of the patients all over the world. Many patients even now are devoid of eye care. Even though many agencies like WHO, Sight Savers Society and many NGO's are putting lots of effort for the good ocular health care, the reasons for the high prevalence of low vision are either nonavailability or inaccessibility or poor affordability of the eye care services. The initiative was developed, known as "VISION 20201-Right to vision", to improve the eye care services. The major components of "Right to vision" are specific disease control, human resource development, infrastructure, and technology development². As the most common cause of blindness is cataract and others like glaucoma, and injuries are preventable³⁻⁷. Treatment of cataract eliminates most of the blindness. So our study assesses regarding the inpatient services to eliminate the blindness. The factors which affect the eye care services include age, gender, socio-economic factors, and beliefs⁸. As the eye care services in Regional Eye Hospital, Kurnool, are free of cost and easily accessible to the poor. Most of the poor people rely on Government Eye Hospital, for their eye care services.

AIM:

The purpose of the study is to assess the demographics of patients accessing the eye care services in Regional Eye Hospital, Unit IV.

METHODOLOGY:

A Hospital based retrospective study conducted in Regional Eye Hospital, Kurnool, from March 1^{st,} 2017 to December 29^{th,} 2018.

SOURCE OF DATA:

Patients admitted in the Regional Eye Hospital, Unit IV, Kurnool, for various purposes.

METHOD OF COLLECTION OF DATA:

From inpatient record of the Regional Eye Hospital, Unit IV, Kurnool.

RESULT:

TABLE 1: Distribution of inpatients according to their age group (n=988)

AGE GROUP	NO. OF PATIENTS	PERCENTAGE
< 50 YEARS	215	21.7 %
51-60	430	43.5 %
>60 YEARS	343	34.7 %



MALE 397 40.2 % FEMALE 591 59.8 % Gende

years age group- 343(34.7%) (TABLE 1)



430(43.5%) were in the age group of 51-60 years, followed by >60

TABLE 2: Distribution of inpatients according to their gender

NO.OF PATIENTS PERCENTAGE

A total of 988 patients were enrolled in the present study. Out of them, 591(59.8%) were females and 397(40.2 %) were males (TABLE 2). In the present study, females are more in number than males, which implies women tended to utilize eye care services more than men.

TABLE	3:	Distribution	of	inpatients	according	to	their	socio-
economi	c st	tatus(n=988)						

SOCIO-ECONOMIC STATUS	NO. OF PATIENTS	PERCENTAGE
VERY POOR	124	12.5%
POOR	745	75.5%
LOWER MIDDLE	99	10 %
UPPER MIDDLE	20	2 %
TOTAL	988	100%



B.G.Prasad classification11 is used to classify socioeconomic status. The socioeconomic status of 75.5% of enrolled patients were poor, followed by 12.5% of enrolled patients were very poor (TABLE 3).

ABLE	4:	Distribution	of	inpatients	according	to	their
diagnos	sis(n	1=988)					

DIAGNOSIS	NO. OF PATIENTS	PERCENTAGE
CATARACT	894	90.48%
CHRONIC	36	3.64%
DACROCYSTITIS		

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PTERYGIUM	19	1.92%
CORNEAL TEAR	5	0.5%
OTHERS	34	3.4%



Out of a total of 988 patients, about 894(90.48%) were admitted for cataract, followed by chronic dacryocystitis, 36(3.64%) (TABLE 4).

DISCUSSION:

The current study is a retrospective study which included 988 inpatients attended to Regional Eye Hospital from March 1st, 2017 to December 29th 2018. Preventable blindness is an important issue in public health in developing countries, especially in India. By addressing these causes of preventable blindness not only improve the quality of life but also reduce the burden to the society/nation.

AGE: In the present study, 43.5% of the enrolled patients were in the age group of 51-60 years, 34.7% were in the age group of >61 years, 21.7% were in the age group of <40 years. We have noted a significant association between the age and visual problems, this might be due to the inability to perform work with impaired vision and also the cataract is more common in old age.

TABLE 5: Comparison of age distribution with other similar studies

STUDY	< 50 YEARS	51-60 YEARS	>61 YEARS
Kovai et al10	28.7%	24.1%	32.8%
Aarthi et al11	0	48%	51.5%
Present study	21.7%	43.5%	34.7%

In our present study, most of the patients (43.5%) in 51-60 years of age group were found to utilize eye health care services compared to another study like Kovai et al¹⁰, in which maximum patients (32.8%) seeking eye health care services were >60 years. In Aarthi et al¹¹, the age group for the study is chosen > 50 years, in which maximum patients about 51.5% belong to >61 years (TABLE 5). As most of the patients attending our hospital are from rural, who don't have proper knowledge of their correct age, the findings in this aspect cannot be relied on.

GENDER: Among the enrolled patients of 988, 59.8% were female and 40.2% were male (TABLE 6). In our present study, women tended to utilize eye care services more than the men because women are more careful about their eye health and also as many of them are dependent¹². They have preferred free eye care services.

Table 6: Comparison of gender distribution with other similar studies.

STUDY	MALE	FEMALE
Kovai et al10	29.4%	29.9%
Aarthi et al11	36.6%	63.4%
Fotouhi et a ¹²	41.8%	58.2%
Present study	40.2%	59.8%

Our present study findings were similar more or less with other studies like Kovai et al¹⁰, Fotouhi et al² and Aarthi et al¹¹.

SOCIO-ECONOMIC STATUS: B.G.Prasad's classification" is used to classify socio-economic status. The socio-economic status of 75.5% of enrolled patients were poor, followed by 12.5% of enrolled patients were very poor. These findings were similar more or less with other studies done in India.

Table 7: Comparison of socio-economic status distribution with other similar studies

STUDY	VERY POOR	POOR	LOWER MIDDLE	UPPER MIDDLE
Kovai et al10	34.2%	28.9%	28.5%	33.3%
Present study	12.5%	75.5%	10%	2%

In Kovai et al¹⁰, the socio-economic status of 34.2% of enrolled patients were very poor compared to our study where 75.5% of enrolled patients were poor (TABLE 7), which means most of the poor socio-economic status people are utilizing the eye care services in our hospital.

CONCLUSION:

It is clear from our study, that older age group women are utilizing the services mostly. The common reason for which they approaching is a cataract, so it is proved that cataract is the leading cause of low vision/blindness for which the patients are approaching the Regional Eye Hospital, Kurnool. Awareness among women is more regarding the utilization of Eye Care Services. The regional eye hospital, Kurnool provides free of cost Eye Care Services, so most of the poor socio-economic status people are utilizing the Eye Care Services.

RECOMMENDATIONS:

Creating awareness by public eye health campaign via electronic and mass media outreach programmes involving the peripheral eye health staff and creating awareness regarding the free of cost eye health services will improve the number of patients utilizing the eye care services. The early the visual defects are corrected the patients quality of life is improved.

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