



VISION SHIELD FOUNDATION Small Beginnings

PRESENTED BY: THE VISIONSHIELD FOUNDATION FOR EYE CARE WWW.VISIONSHIELDFOUNDATION.ORG

INTRODUCTION

WHO WE ARE WHAT WE DO GENESIS OBJECTIVES

STRATEGY

OUTPUT OUTCOME OUTLAY



INTRODUCTION

WHO WE ARE

VisionShield (RC: 120496) is incorporated under Part C (673-696) of the Company and Allied Matters Act (CAMA) of the Federal Republic of Nigeria, as a non-religious, non-ethnic, nonpolitical, non-governmental, nonprofit, tax exempt organization. Inaugurated in November 2018, the VisionShield Foundation is passionate about reducing the burden of preventable blindness notably cataract and refractive errors in adults and children respectively by strict adherence to our creed.

WHAT WE DO

We provide quality eye care for indigent members of the community at little or no cost to them, carry out diagnostic, corrective and therapeutic (medical, surgical and assistive) eye care in the reduction of the burden of preventable blindness notably cataract and refractive error in adults and children respectively on an outreach or collaborative basis.

We Empower and improve capacity of local eye personnel, eye clinics/hospitals in the reduction of the burden of preventable eye blindness by collaboration, capacity building and training. We are open to collaborate with other organizations which share the objectives of the foundationlocal and international- in capacity building, empowerment and improving eye care practice in the reduction of the burden of preventable blindness notably cataract and refractive errors.

WHAT IS GENESIS?

"Cataract was the commonest cause severe visual impairment and blindness responsible for 45.0% and 43.0% respectively. The prevalence of blindness due to cataract was 1.8%"- The Nigerian national blindness and visual impairment survey 2005-2007.

Cataract or clouding of the crystalline lens of the eye is a natural ageing process of the human eye. It results from the natural denaturing of lens protein leading to loss of transparence- and important quality of the lens needed for good vision. Cataract may also occur from some pathological processes from systemic illnesses like Diabetes or external factors like trauma or drug use. In all cases the lens loses is transparency and becomes opaque.

Globally cataract accounts for 47% of the world's cause of preventable blindness with sub Saharan Africa contributing over 30 % of this burden. This is due to the high cataract surgical rates in the developing and developed worlds. Cataract surgical rates need to be increased to meet the demand of growing cataract burden. Cataract outcome must match the growing cataract surgical rates to ensure continuous utilization of cataract surgery.

"Cataract is by far the main cause of readily curable blindness. As there are no known effective means of preventing the commonest forms of cataract, surgery should be provided to all those in need. Cataract surgery can be one of the most cost-effective of all health interventions, with a cost per DALY saved in the order of US\$ 20–40. Good-quality, high-volume cataract surgery can be provided at less than US\$ 10 per DALY in some settings. Cataract interventions are thus as cost-effective as immunization and can significantly and rapidly reduce avoidable blindness" - Avoidable visual impairment, a human, social and developmental issue, VISION 2020 GLOBAL INITIATIVE FOR THE ELIMINATION OF AVOIDABLE BLINDNESS: ACTION PLAN 2006–2011.

This has been proven so in countries and areas which have developed and maintained an efficient mode of delivering quality cataract surgeries at these costs and has translated to an increase in cataract surgical rates and a reduction in cataract burden. In Nigeria however, these costs may be a little higher, but cataract surgeries have been offered for as low as 30USD. We believe that as we develop and strengthen processes we can get to the point where we can offer cataract surgery at 10USD or less.

GENESIS is a VisionShield program designed mainly for collaboration with well-meaning institutions, NGOs, corporate organizations, societies, individuals who are willing to help in the reduction of preventable blindness by providing cataract surgeries to indigent members of the community at no cost and eye glasses for primary school children in their schools.



TO PROVIDE QUALITY CATRACT SURGICAL SERVICES AND EYEGLASSES TO INDIGENT MEMBERS OF THE COMMUNITY AND PRIMARY SCHOOL PUPILS AT NO COST

OBJECTIVES

- To carry out a minimum of 2000 cataract surgeries and provide 1000 eye glasses annually-OUTLAY
- 2. To continually monitor the outcome and effectiveness of cataract surgery and refractive error services provided by the VisionShield Foundation for Eye Care-OUTPUT



STRATEGY

OUTLAY- To carry out a minimum of 2000 cataract surgeries and provide 1000 eye glasses annually

- **GENESIS** is designed for the indigent members of the community and primary school children
- Surgery for cataracts will be carried out ONLY in a hospital in/around the area of need. Such hospital will have an arrangement in place for at least one follow up visit after surgery and POD1 care.
- Surgeons and ophthalmic assistants for GENESIS will be provided by
 VisionShield. However, collaborating bodies may provide volunteers who are the sole responsibilities of the collaborating bodies.
- Each cataract surgery will be provided at a minimum cost of 30USD, and
 VisionShield will be responsible for the sourcing of ophthalmic consumables to
 maintain and guarantee quality.
- VisionShield will be deploying only Manual Small Incision Cataract Surgery (MSICS) with Intra-Ocular lens for the execution of GENESIS.
- Surgeries shall be spread across the geopolitical zones of the country as much as funding and partnerships allow.
- Each patient for cataract surgery will have Biometry done before surgery. In the absence of Biometry, where these are not available PCIOL powers of 19, 20, 21, 22 D (A constant 118) will give a postop range of -2 to 0.00 in 80% of Nigerian Eyes- Nigerian Blindness and Visual Impairment Survey

OUTPUT- To continually monitor the outcome and effectiveness of cataract surgery and refractive error services provided by the VisionShield Foundation for Eye Care

- The monitoring of cataract outcome will be by use of the IAPB MCSO software for the monitoring of cataract outcome.
- o Monitoring of complications rates as outlined by the WHO/IAPB specifically
 - **a.** Posterior capsular rents without vitreous loss <5%
 - **b.** Posterior capsule rent wit vitreous loss <5%
 - **c.** Total complication rates <5%
- For the purpose of GENESIS the following are definitions used as detailed by the WHO/IAPB
 - **a.** Presenting vision: Visual acuity in examined eye with the available correction, if any
 - **b.** 'Best' vision: Visual acuity in examined eye with best possible correction or pinhole
 - **c.** Categories of visual acuity:
 - Good outcome: ≥ 6/18 or VA≥20/60; VA≥0.33; VA≤0.5
 (>80% of cases with available correction, >90% with best correction)
 - ii. Borderline outcome: < 6/18, but can see 6/60; or VA< 20/60 20/200; VA< 0.33 0.10; VA> 0.5 1.0 (< 15% of cases with available correction, < 5% with best correction)
 - iii. Poor outcome: <6/60 or VA<20/200; VA<0.1; VA>1.0 (<5% of cases with available correction. <5% with best correction)