2009 Research Days Abstract Form – Department of Ophthalmology – UNIFESP/EPM

2. SCIENTIFIC SECTION PREFERENCE (REQUIRED):

Review the Scientific Section Descriptions. Select and enter the two-letter Code for the one (1) Section best suited to review your abstract.

3. PRESENTATION PREFERENCE (REQUIRED) Check one:
☐ Paper
☐ Poster
X☐ FAST Paper

4. The signature of the First

Scientific Section Descriptions (two-letter code):

(BE) OCULAR BIOENGINEERING
(CO) CORNEA AND EXTERNAL DISEASE
(CA) CATARACT
(EF) ELECTROPHYSIOLOGY
(EP) EPIDEMIOLOGY
(EX) EXPERIMENTAL SURGERY
(GL) GLAUCOMA
(LA) LABORATORY
(LS) LACRIMAL SYSTEM
(LV) LOW VISION
(NO) NEURO-OPHTHALMOLOGY
(OR) ORBIT
(PL) OCULAR PLASTIC SURGERY
(PH) PHARMACOLOGY
(RE) RETINA AND VITREOUS
(RS) REFRACTIVE SURGERY
(RX) REFRACTION-CONTACT LENSES
(ST) STRABISMUS
(TR) TRAUMA
(TU) TUMORS AND PATHOLOGY
(UV) UVEITIS
(US) OCULAR ULTRASOUND

Deadline: Oct 12, 2009

FORMAT:
Abstract should contain:
Title
Author, Co-authors (maximum 6), Purpose, Methods, Results, Conclusion.

Poster guidelines:
ARVO Abstract Book (1.10 x 1.70m)

43. FIRST (PRESENTING) AUTHOR (REQUIRED):
Must be the author listed first in abstract body.

( ) R1 ( ) R2 ( ) R3 ( ) PIBIC
(X) PG0 ( ) PG1 ( ) Fellow ( ) Technician

Last Name: Nakanami
First Name: Célia
Middle: Regina

Service (Sector): Epidemiologia

CEP Number:

5. ABSTRACT (REQUIRED):

Title:"A five year project for the Prevention of Avoidable Childhood Blindness in Brazil"
Authors: Célia R.Nakanami, Paulo H.A.Morales. Ghopal Pokharel, Rubens Belfort Jr. Solange R. Salomão
Purpose: To set out a comprehensive matrix for the management and prevention of childhood blindness (CHLDBL)and visual impairment (VI) in Brazil over the period 2003 –2007, as part of the WHO Regional Planning Meeting for Elimination of Avoidable Childhood Blindness, supported by WHO/LIONS. **Methods:** The project strategy adopted 3 areas: human resource (HR) development, strengthening the available infrastrucuture (IS) by reinforcing the Tertiary. Eye Care University centre as a National Resource Centre and provision of specific equipment (E). HR development: by training eye care professionals (Ophthalmologists, Technologists, Physicians, Nurses, Technicians,and community workers), reorienting Pediatrician/Neonatologists for CHLDBL/VI causes, ROP and examining the red reflex; infrastructure including the development of a comprehensive pediatric eye care unit (Ermelino Matarazzo) and the provision of equipments and Low Vision devices provided by WHO/LIONS. Monitoring/evaluation were assessed by a set of indicators. Quarterly reports were sent to WHO/LIONS and disseminated gains presented at official Congress of both specialties. **Results:** From August/2003 to December/2007 UNIFESP trained 108 professionals: 58 ophthalmologists, 17 ophthalmic technologists, 18 physical therapists, 15 ophthalmic nurses. All professionals were capacitated for team work to perform procedures aiming the prevention, diagnosis and treatment of the main target diseases (retinopathy of prematurity, infantile cataract, glaucoma and low vision). Several specific equipments were acquired for ROP screening and treatment, glaucoma treatment, Low Vision devices among others. The number of patients attended in the center ranged from August 2003 to December 2007 were 97,481 children. The most frequent condition was Refractive Error, followed Strabismus, Congenital Cataract, ROP and Congenital Glaucoma. A new tertiaty center was installed in this period in a low-income area of Sao Paulo City. **Conclusion:** Training of eye care professionals, acquisition of specific equipment and number of children benefiting from this program were successfully achieved according to WHO/LIONS monitoring committee. This program should be considered as a model to be implemented in other developing countries as well as underprivileged areas of Brazil.
Keywords: Childhood blindness, Visual impairment, Eye care policy