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Post-operative complications and visual outcome in eye camp patients undergoing sutureless cataract surgery at a Base Hospital in Vijayapura District, South India

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Background: Cataract is the principal cause of blindness in India, accounting for 62.6%. This problem can be tackled, and the backlog of cataract blind can be reduced by performing cataract operations on a large scale. Base hospital approach with screening camps has shown good visual outcome with lesser complications. Aim and Objectives: To study the profile of postoperative complications and visual outcome in eye camp patients undergoing cataract surgery at the base hospital. Materials and Methods: In this cross-sectional study, 413 patients were included following screening at community screening camps. Patients underwent sutureless small-incision cataract extraction with intraocular lens implantation under local anesthesia at the base hospital. Postoperative complications and visual outcome were recorded. Results: Immediate postoperative complications were corneal edema (9.44%), striate keratitis (6.77%), expected uveitis (5.56%), secondary glaucoma (2.66%), residual lens matter (2.66%), iris prolapsed (0.48%) and shallow anterior chamber (0.24%), hyphema (0.24%) and iris incarceration (0.24%). Endophthalmitis was reported in 0.48% (one grew citrobacter, rarely reported). Late complications included posterior capsular opacification (3.87%) noted and retinal detachment (0.48%) later. Majority 83.39% of the patients had postoperative best corrected visual acuity (BCVA) between 6/6 and 6/18, 13.42% had BCVA between 6/18 and 6/60, 3.19% had BCVA < 6/60 as at 6 months follow-up visit (overall percentage is 100%). Conclusions: The overall vision-threatening complications after cataract extraction in the base hospital are low. Our study reflects the efficacy of the base hospital approach, in terms of visual and surgical outcome, as an important aspect from the public health point of view, which can help in clearing the cataract backlog in developing countries like India.

Introduction

Recent global estimates of visual impairment from the World Health Organization (WHO), reveal that 47.8%[sup][1] of global blindness is due to cataract.[sup][1] In South Asia region which includes India, 51% of blindness is due to cataract.[sup][1] A cataract is a significant and increasing global problem with vast economic and social implications.[sup][2] It is the principal cause of blindness in India accounting for 62.6%.[sup][3] It is projected that the number of about 20 million cataract blind as at 2002 will double by the year 2020.[sup][4] High-volume surgery still has a role in reducing the cataract load in India.[sup][5] By 2020, cataract surgical coverage in India is predicted to increase to 7.63 million/year.[sup][1] This demonstrates significant progress in

addressing surgical aspects; however, visual recovery after surgery is poor in about 25% of cases. [sup][6] Various factors are implicated as outcomes varying according to community-based or hospital-based data, duration since surgery, conditions under which operations were conducted (excellent or less favorable), single or diverse surgeons. Therefore, this study seeks to determine the proportion of postoperative complications and effectiveness of base camps in terms of visual outcome following cataract surgery. It is only through an integrated approach that the challenge of creating widespread access to surgical services capable of delivering good quality visual rehabilitation will be met. The effective work of Aravind Eye Hospital System in South India, which is believed to...

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