







COVER IMAGE:

Dr. Sareta Dubay prepares a patient for surgery in Antigua

INSIGHT IS A PUBLICATION OF CVRS TRINIDAD EYE HOSPITAL.

Caribbean Vitreous & Retina Surgery Ltd (CVRS) offers a wide range of high quality ophthalmology and optical services.

Trinidad Eye Hospital (TEH) is a not-forprofit organization whose mission is to make the world a better place by restoring sight for those who have lost their vision their dignity and their hope. All TEH services are free and made possible by its main sponsor CVRS.

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A Brighter Future & A Spirit of Resilience



It's Issue 3 of our InSight Magazine and we are so happy to be back! We have a fresh set of inspirational stories to share with you. Thanks to our wonderful CVRS | TEH team members, we have tapped into our creative side and managed to describe just how meaningful reducing avoidable blindness is to all of us.

This year World Sight Day was celebrated on October 14th and the theme was "Love your Eyes." We hope this issue uplifts you as we have tried to bring this theme to life. We thank Dr. Bhola and the management team for their commitment and spirit of resilience during another year of life amidst COVID-19. CVRS has not ceased to put patient care first despite the challenges we've faced.

Inside, you will read about how we made 2021 count and how much we are we looking forward to changing more lives in 2022!

Anura & Franka
EDITORS

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Greetings from our Chairman & CEO

By: Dr. Ronnie Bhola FRCS(Ed), CCT (UK)



2021. What a year it has been! Navigating another year through pandemic protocols and lockdowns has been difficult, especially for us in the healthcare sector. Although everything has changed, our commitment to increase our innovation in eyecare management has grown.

Worldwide, people have suffered the effects of slowed rates of elective surgeries, such as cataracts, due to COVID-19. According to the International Agency for the Prevention of Blindness (IAPB), barriers to eyecare and the resulting vision impairment in our society must be reduced as a matter of urgency.

The latest Lancet Global Health Publication (April 2021) also states that sight loss costs the global economy \$411 billion per year in productivity losses. CVRS I TEH has engaged with our local and regional health care providers to be a part of the solution.

The landscape of eye health management calls for a new and wholistic approach to eyecare and to increased access to eyecare, especially for our most vulnerable patient community.

Sight loss erodes the quest to achieve sustainable development goals in the developing world. It is directly related to poverty, loss of income, depression, and several social ills that can burden a society.

As we look toward 2022, we understand that more partnerships must be forged between the public and private sectors to reduce blindness.

As leaders in eye health care, we have the responsibility to deliver patient care in more efficient and cost-effective ways.

We invite our Ministry of Health to engage with us, to develop plans for the future of eye care so that our society doesn't suffer the high cost of vision impairment and sight loss.

Thank you to the Diabetes Association of Trinidad and Tobago (DATT) who collaborated with us to do eye health screening of patients in remote communities. To date, our Diabetic Eye Screening Program has screened over 5000 persons nationwide while partnering with the DATT, but there's still over 100,000 persons with diabetes to be screened, so we must persevere.

We are also grateful for the support and partnerships with key ophthalmological players in the country and the region. Thank you to the Medical Board of Trinidad and Tobago (MBTT) for taking the bold step of recognizing the Resident Training Program at our organization, and to the

Ophthalmological Society of Trinidad and Tobago (OSTT) for signing an MOU with the Royal College of Ophthalmologists, thereby supporting and driving the education of ophthalmologists in our country.

Our continued partnership with the Ministry of Health and the Environment, Antigua and Barbuda, was also a special highlight. When our borders were finally reopened, we were able to do more than 100 long-awaited cataract surgeries for patients in Antigua.

Overall, right here at CVRS, we did over 1300 cataract surgeries and 350 retina surgeries this year, but unfortunately, thousands more are still waiting and may lose their vision due to long wait times. CVRS and TEH will strive to increase access to eyecare and lower these wait times in the new year.

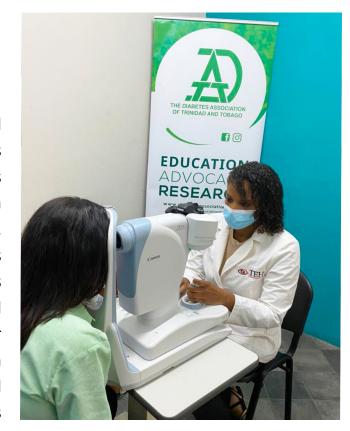


2022 calls for more action, for all of us to make a difference. Blindness prevention is within our grasp. We must work together and take those important steps to invest in eyecare with more discussion and collaboration with stakeholders. Let's work together. Let's make it happen!

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DESP & DATT Collaboration

In October 2020, the Trinidad Eye Hospital signed an institutional partnership with the Diabetes Association of Trinidad and Tobago (DATT). DATT is the national non-profit association for diabetes in Trinidad and Tobago. Through this arrangement, persons living with diabetes can benefit from TEH's FREE Diabetic Eye Screening Program (DESP) as well as continuity of care with easy referrals and access to ophthalmologists for treatment. Their focus is to prevent or delay the onset eye health problems through education, research and advocacy, especially in persons at risk. Through this



partnership, members of DATT benefit from reduced prices of our services at CVRS clinics.

Since October 2020, six members of DATT have had their eye surgeries done free of charge through TEH's Gift of Sight Charity Surgeries Initiatives. This partnership also allowed the TEH's DESP team to expand their outreach program and consequently reach thousands more persons with diabetes throughout Trinidad and Tobago. This year, 1623 persons with diabetes have been screened, thanks to the partnership. This has moved DESP one step closer to achieving its goal of reducing avoidable blindness through diabetic eye screening. Screening during a pandemic, though challenging, remains very important and necessary, so we adapted our existing



screening protocols to include those required for COVID-19, and worked assiduously with leaders in communities across the nation to ensure that persons with diabetes were still being reached for screening. In collaboration with DATT, our goal is to screen 80- 90 % of all persons with diabetes in Trinidad and Tobago over the next five years.



DIABETIC EYE SCREENING PROGRAM (DESP)

FREE FOR ALL PERSONS WITH DIABETES

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Growing Partnerships

Antigua, We Missed You!

Antigua Surgery Trip 2021 1 Surgeon, 5 Days, 107 Surgeries

Since the World Health Organization's declaration of the Coronavirus pandemic, many medical procedures, inclusive of eye surgeries, all over the world were cancelled. Thousands

of clinic visits and surgeries were postponed, in some cases indefinitely.

Here in the Caribbean, we also experienced the extreme lengthening of patient wait times for elective procedures due to lockdowns and closed borders. This continues to affect the speed of patients getting their cataract and retina surgeries.

On Friday 22nd October 2021, a surgical team from CVRS travelled to Antigua, our first surgery trip since the start of the COVID-19 pandemic! This trip was crucial, as patients were waiting for their surgeries since the pandemic began in March of 2020.





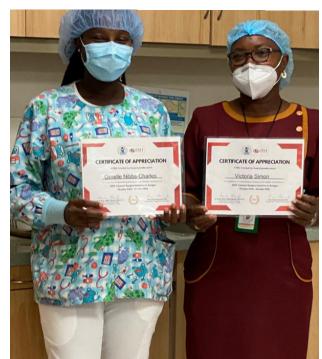
This venture was part of a partnership with the Ministry of Health & The Environment, Antigua and Barbuda. It was also the beginning of a robust plan to reduce the backlog of eye surgeries in Antigua.

From Sunday 24th October to Thursday 28th October 2021, 107 eye surgeries were successfully completed. All the surgeries were performed by Dr. Ronnie Bhola, who is the Chief Surgeon at CVRS and also Chairman of Board of the Trinidad Eye Hospital. The surgeries were performed at the Sir Lester Bird Medical Centre (formally Mount St. John's Medical Centre), St. Johns, Antigua.

In Antigua, the CMO, Dr. Rhonda Sealy Thomas and the Medical Director, Dr. Duncan, in collaboration with the Medical Benefits Scheme, spent months planning this project to ensure its success within the constraints of the pandemic.



The surgical team from Trinidad worked closely with the local medical team in Antigua, inclusive of Dr. Osama Dias and the nursing team, to complete all 107 surgeries within the short 5-day period.



It was a successful venture and patients were elated to have their vision restored after so long a wait. With as many as 400 patients still in need of surgery, the team is expected to return to Antigua in February 2022 to continue this vital work.



Lee Ann Lazarus Diabetic Eye Screening - My Story & Career

Ms. Lee Ann Lazarus serves as Trinidad Eye Hospital's Program Manager and Lead Grader for the Diabetic Eye Screening Program (DESP).

My career in Diabetic Eye Screening started in 2013 when I was offered the position of Retinal Photographer at South West Regional Health Authority (SWRHA). I had no clue of what the position entailed, what would be required of me, and I had no real concept of what diabetes is except for the little I had learned in school.

At SWRHA, our Diabetic Eye Screening team was small, with only three graders and photographers, all of whom lacked knowledge of how important our new roles were. We worked as a team, embarking on a pilot program to assess how prevalent diabetes truly was in the area, by



determining how many people were having their sight threatened due to this condition.

Diabetic eye screening moved from my job to my passion about a year into my position at SWRHA, when I met a patient who completely changed my outlook. When I met her, she had already lost both of her legs and had severely reduced vision, though only in her thirties. You could have never guessed how truly ill she was from seeing and speaking to her. She was loud and vibrant and made my day every time I saw her. She would always thank me for all that I had done for her, but what had I truly done? I would let her know what was wrong with her, but I could not do anything to improve her condition. That part was out of my hands. Because of the stage of her disease there was not much that could be done for her. We continued to monitor and have her come in until we learned that she had passed away. I thought, "how unfair that someone so young, vibrant and full of life, had to endure so much suffering". She had much more life to live but never got the opportunity to live it because her diabetes had spiraled out of control. I oftentimes wondered "What if the program existed years ago? What if we knew when she had started developing early "changes"? Would it have made a difference? Could we have added to her happiness and excitement for life?"I would like to believe that we could have.

I grew up in a family where diabetes didn't affect us and I truly had no understanding of how serious diabetes could be. From the little practical experience I had with the disease, I always thought it was as simple as taking prescribed medication and everything will be fine. I had no

concept that diabetes could affect every aspect of your body and your life. No idea that diabetes can affect your physical, mental and financial well-being.

I joined CVRS in 2018 as the program manager for their Diabetic Eye Screening Program (DESP). It is a free screening program offered through their not-for-profit arm, Trinidad Eye Hospital (TEH). I was soon joined by my former co-worker, Ms. Vasti Ramkumarsingh, as our failsafe officer. Both Ms. Ramkumarsingh and I received our certification in Diabetic Retinopathy Screening from the University of Gloucestershire in 2019, while at CVRS | TEH. My main reason for joining this company was that I believed in their vision for eyecare, a vision where eyecare was readily available and not dependant on one's socio-economic standing. Our government healthcare services are overwhelmed and over-worked, and diabetes on the whole is a huge problem in this region of the world. I believe that it would take several groups working together to truly make a dent in solving this problem at hand.



We have travelled the length and breadth of the country to offer screenings to areas that previously did not have access to such a service. Each week, we would pack our vehicles with our imaging equipment, clinical supplies, tables and chairs, and set out on a mission to do as much as we can. We have pushed fifty-pound imaging equipment through the airports of Trinidad and Tobago!

You may say "Why do I need to this

screening? I'm seeing fine." The truth is that sight loss happens when there are already changes going on at the back of your eyes. Sometimes these changes are quite severe and may already be at a point where you need costly interventions, or it may be too late for anything to be done. Screening before you notice any changes in your vision can save your sight.

Diabetic eye screening is an important cog in the wheel of your diabetes care. You should visit your general practitioner in the recommended timeframe, do your eye checks every two years with your optometrist, watch your diet and exercise regularly.

At TEH, it is our mission to provide this free service to all persons with diabetes throughout Trinidad and Tobago and ensure that you have the opportunity to receive the eyecare that you need. It is my mission, and the mission of all with whom I work, to improve the quality of the lives of our patients and, if possible, all persons througout the country living with diabetes.

Technology in the Eye Health Industry

By: IT Technicial Specialist - Asa Joseph MSc, BSc, AS

According to Nidamanuri and Popiela (2017), ophthalmology is one of the greatest sources of inspiration for technological progress in medicine. The field of Ophthalmology has made significant advancements in technology, and continues to grow across all sub-specialties, for example, advances aimed at the health of the eye and its



socket, the Optical Coherence Tomography Angiography (OCT-A) technique and the B-scan Ultrasound. These two non-invasive, highly efficient and accurate imaging technologies are now essential aids to ophthalmologist, as they provide detailed information for diagnoses.

Over the past several decades, the eruption of new optical technologies has had a significant impact in ophthalmology (Wang & Jacques, 2021). This eruption has been felt throughout the Ophthalmic community and each new innovation has been welcomed every step of the way.

Butwhat about EHR (Electronic Health Records)?

Since its introduction in 2019, Compulink's Ophthalmology Advantage EHR has not only increased the workflow productivity of our clinics, but it has also allowed us to operate the practice with a significantly greater level of efficiency.

EHR's value to a practice is however, often overlooked and not seriously considered until a disaster strikes or until one is found that best fits the practice. While the latter should be the only acceptable reason for delaying its introduction, or for the slow implementation of EHR in practices, more often it's the former. Indeed, finding an EHR system specific to an ophthalmic practice is no easy feat, but I can assure you that most, if not all EHR vendors, take the time to include what is required by the particular practice.

In our case, the initial hesitance was due to our practice's unique workflow. This uniqueness was eventually catered for by my colleagues and me, along with the vendor's EHR specialist. Our entire team invested a significant amount of hours in customizing layouts, menus and database templates. We officially implemented Compulink's Ophthalmology Advantage EHR into our

practice in August 2019. Common to any new implementation, at first, the EHR slowed us down during the initial weeks, due to its meticulous process. However, like any progressive sprint, our processes accelerated as staff quickly adapted, and familiarity with the new system set in.

With all our patient's information, including scan results, clinical records, medical history, diagnoses and plans, stored on Compulink's Ophthalmology Advantage EHR, the immediate impact was astounding, considerably surpassing our projected expectations. The benefit of not having to flip through sheets or navigate through MS Word files, allowed our teams the ability to present data and communicate more effectively with patients and their families.

In a 2013 publication, Gregg J. Berdy, MD, identified that his patients were impressed by the

technology and the ability to see their problem, as it's also a great educational tool, something that we also have, and continue to witness (Berdy, 2013).

Since its implementation, Compulink's Ophthalmology Advantage Patient Tracking system is just one of the advantages, among many others, that has been lauded and fully adopted into our practice. This feature, in tandem with our unique pod system, has



allowed all of our clinic processes to flow more efficiently. Now, utilizing one of our most valuable tools for effective workflow management, we have been able to reduce waiting times and almost eliminate overcrowding. The ripple effect of automatically knowing where patients are in the clinic, where they need to go next and where physicians and staff need to be, has helped maximize patient volume and overall practice efficiency. While patient flow may initially feel as if it is only a major concern for large health systems and hospitals, I assure you that it is just as, or even more, impactful on the operations of private practices and clinics. As we constantly seek to improve our quality of care and operations, it is important to look at how an EHR system can optimize your practice.

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Message from the Diabetes Association of Trinidad and Tobago

By: Andrew Dhanoo, President of the Diabetes Association of Trinidad and Tobago

Our experiences over these past two years have taught us that our health is our most precious commodity. A threat to our health is not just a threat to our lives, but to our livelihoods, our happiness and our future. The COVID-19 pandemic has caused unfathomable setbacks throughout the world, and has certainly not spared us here in T&T. However, our people are resilient, and in the face of adversity, chose to innovate, adapting to the "new normal". Our partnerships with organizations like the Trinidad Eye Hospital, allows us to serve more persons with diabetes and improve the standard of care delivered to them.

We are living in extraordinarily difficult times, in which people with diabetes are facing an additional major health threat from COVID-19. Regrettably, we have seen that people living with diabetes can be more susceptible to the worst complications of this virus. The Diabetes Association of Trinidad and Tobago (DATT) recognized this threat, so as soon as vaccines



became available, our staff and volunteers rose to the call to administer acquired does to the most vulnerable.

Now, however, I am worried that the legacy of the pandemic, which saw resources and attention focused on COVID-19, may be to the detriment of all noncommunicable diseases, including diabetes, which could result in the reduction in the quality of care given to



persons with NCDs. This may trigger an explosion of new NCD cases and complications in the near future, as the social restrictions, while necessary to curb the immediate danger, has fueled a storm of unhealthy behaviors.

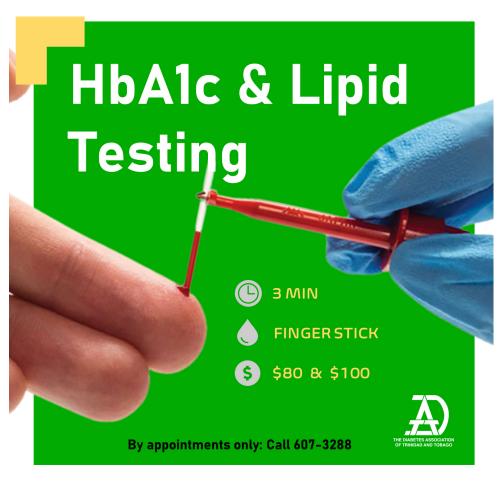
Now, more than ever, we need to bring about meaningful change for the close to 200,000 persons

living with diabetes in our country. DATT remains committed to drive this change towards the empowerment of people living with diabetes to take better care of themselves and improve

access to resources for those most in need. Through diabetes education, community screening initiatives (such as our DATT/TEH Diabetic Eye Screening programme) and access to blood glucose machines for self-monitoring, we will be working throughout the next few years to improve your access to diabetes care.

We echo the International Diabetes Federation's theme, "Access to Diabetes Care," as we focused on selfcare this year. We understood that we must empower persons living with diabetes to take better care of themselves. Although 2021, marked the 100th anniversary of the discovery of insulin, millions of people with diabetes around the world and here in T&T still cannot access the care that they need. We know that people with diabetes require ongoing care and support to manage their condition and avoid complications.





There is a need for us to identify these persons who are living with diabetes and pre-diabetes. We have seen that people are still reluctant to seek testing and care even more so now, due to the fear of catching the COVID-19 virus if they go out.

The DATT will focus on five main areas in 2022:

1. Eyecare, as we expand our DESP partnership with the Trinidad Eye Hospital, and through the contribution of a new Robotic Camera sponsored by TATIL and TATIL

Life, we will be performing free diabetic eye screening in communities across Trinidad and Tobago for persons living with diabetes.

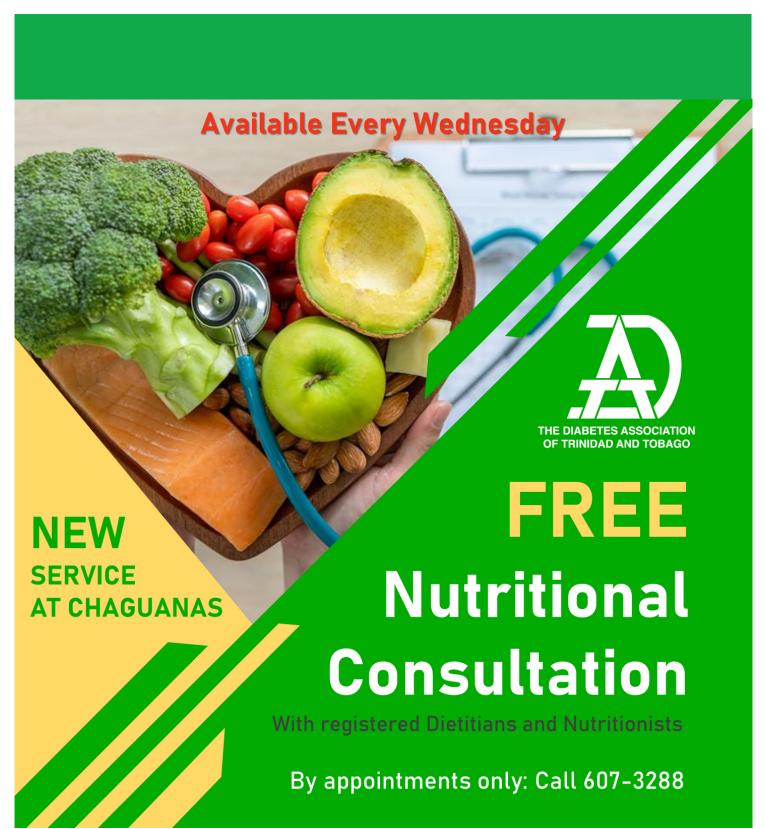
- 2. Adherence to Diabetes Medications through group and individual consultation sessions.
- 3. Healthy diet and exercise programmes using practical workshops and online instructional sessions for adults and

children.

- 4. Footcare through the launch of our DATT
 FOOT programme which will seek to train lay-screeners and send them into communities to conduct preliminary foot screening and interventions.
- 5. Screening and Self-monitoring through the expansion of the Know your A1C programme in communities and our blood sugar machine programme for persons in need.



The DATT needs your help so that we can do this work. In November 2021, we launched a car raffle. Through this, we aim to improve our clinic and outreach services so that we can reach more persons who need our support. Tickets are available at our DATT offices and through our members, with a draw date of April 30th 2022. Call us at 607-3288 to find out more about our programmes.



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Myopia in children, a growing cause for concern.

By: Ibraheem Mohammed, Optometrist

Myopia also known as nearsightedness, is a type of refractive error that causes a person to have blurred vision at a distance, while maintaining clear vision up close. Myopia frequently starts to develop in children around the age of six, and can progress throughout childhood, sometimes into adulthood. Childhood onset myopia is most commonly caused by the eyes growing too quickly, or continuing to grow after ages 10-12, when eye growth should normally cease. Genetics, environmental factors and certain individual characteristics can all contribute to a child developing myopia. Children who are nearsighted are at increased risk of developing eye diseases, such as retinal detachment, glaucoma and myopic degeneration, as their

refractive error worsens. The World Health Organization (WHO) estimates that an average of 52% of the world population will develop myopia by 2050.

Many children have developed myopia as an unexpected side effect of the COVID-19 pandemic. Research carried out in countries such as Hong Kong, Australia and the United States revealed that the rate of nearsightedness doubled during the pandemic, from 11.63%

An uncorrected vision problem can interfere with a child's ability to learn and reach their highest potential.

to 26.98% prevalence. This is due to kids having increased screen time and near work, combined with a decrease in time spent outdoors. At CVRS Optical, we have definitely observed a surge in the number of children presenting to our clinic, with most



kids needing to either update or get a first pair of spectacles. What was alarming, was the severity of prescription change. We realized that, at this point, we had to do more than just spectacles to properly manage the vision of these kids.

Since a child's vision provides important information about the world around them, healthy vision is critical for social development and education. Thus, an uncorrected vision problem, can interfere with a child's ability to learn and reach their highest potential. It is vital that parents and teachers have the ability to detect signs of visual impairment. Some of the major symptoms associated with myopia are; squinting to focus, headaches and reading or watching television at an unusually near distance. The WHO recommends that kids have routine two-year eve examinations done. If visual impairment is suspected, parents should visit their optometrist who will evaluate and manage accordingly.

Myopia control or myopia management is the area of children's eye care dedicated to slowing down childhood myopia progression. Optometrists would advise both patient and parents on the type of spectacles required and how to manage the progression of myopia. This process can be done via different treatment options such as specialty spectacle lenses, contact lenses and atropine eye drops. Parents should schedule mandatory outdoor time for their kids of an average two hours per day, as this would help develop their distance vision.

Myopia is a silently growing epidemic and without the necessary interventions can lead to long-term complications in vision and well-being. Fortunately, intense research efforts on prevention are ongoing, and several treatments hold promise for slowing or halting the progression of this potentially devastating condition. At CVRS, our Ophthalmologists and Optometrists are highly skilled in managing myopia in kids. If you suspect that your child has this eye condition, book an appointment for them and spread awareness where you can.

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Sophia's Journey - A Patient Story

By Peter Hopkinson of Diaspora Auxilium





As the world grapples with huge issues of poverty, pandemics and environmental damage, we may feel helpless in the face of these seemingly overwhelming challenges. But there is a wonderful organization in Trinidad quietly changing lives one at a time, tackling one problem at a time, one eye at a time; CVRS|TEH.

When nine-year old Sophia Kerr from Guyana suddenly lost her eyesight while in a virtual classroom on September 20th, her wonderful parents Oliver and Phillipa were devastated. Doctors confirmed that Sophia had suffered dual retinal detachment, the same problem which had caused her dad Oliver, to become totally blind at 8 years old.

Emergency intervention would be needed to save her sight, but the surgical expertise was not available in Guyana, and as is every parent's nightmare, there was no money for these unexpected expenses; tickets to travel to Trinidad, much less for the retinal reattachment surgery she desperately needed to restore her sight.

Diaspora Auxilium, a global non-profit organization registered in the United States and Guyana, heard of Sophia's situation and

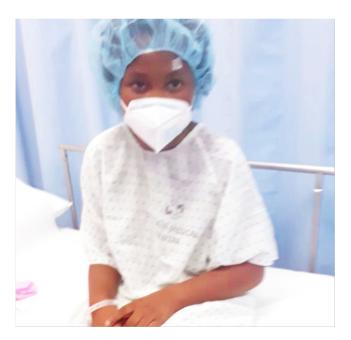
was determined to help. Along with the Lions Club of Georgetown, Durban Park and concerned individuals around the globe, we quickly came together to organize the plane tickets, accommodation and logistics needed to allow Sophia to travel to Trinidad for surgery, and have a chance at a normal life.

Guyana's Ministry of Health met the surgical expenses for one eye, while Diaspora Auxilium raised USD\$3,775, via a GoFundMe campaign that was supported by 27 individual donors from Guyana, USA and England, for the other eye.

Sophia and Phillipa arrived in Trinidad on October 21st and were met by the lovely Ms. Pravita Shankar of CVRS|TEH. She was seen that same morning by consultant ophthalmologist and head surgeon Dr. Ronnie Bhola. After an additional visit and examination by Dr. Dorian Dwarika on October 26th, surgery was performed on her left eye on October 30th, followed by surgery on her right eye on November 8th.

Sophia's prognosis is positive as both surgeries went as well as expected. After a final check-up on November 16th, Dr. Bhola was satisfied that no further surgery would be required, and Sophia was given the all clear to return home, where Dr. Shailendra Sugrim will take charge of her post-surgical care.

Dr. Bhola stated that it is now "up to nature to take its course in the healing process" We continue to pray that it goes well.











On a personal note, my family and I were honoured to host Sophia and Phillipa; they, along with Oliver and Oliver Jr. in Guyana, are a wonderful family with a strong faith and belief that God is in charge.

We were able to share Diwali and a thanksgiving dinner with them, and have been truly touched and amazed at the bravery and resilience of Sophia, and were overjoyed at the first signs of her sight returning, and so the hope of a normal life beckons.

And while we may not have solved those major issues facing the world, we know that together, CVRS|TEH and Diaspora Auxilium have changed the life trajectory of Sophia, one eye at a time.

We look forward to working again in partnership to do the same for others.

Diaspora Auxilium (DA) is a non-profit organization registered in the United States and Guyana. Founded in April 2021 by Queen's College High School alumni, DA's core mission is to create a vehicle for members of the diaspora to support charitable causes in Guyana.

DA focuses on four pillars: Education and Innovation, Health and Wellness, Alleviating Hunger and Poverty, and Unity and Social Issues.

Since its formation DA has helped more than 6,000 people in Guyana.





Help Those In Need DONATE!



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Customised Donation
A specially designed donation option to suit your personal preferancce.

Patient-Based Donation

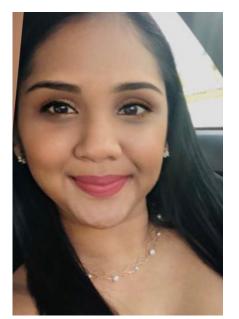
A donation request made specifically on behalf of a patient in urgent need and sent on a case-by-case basis.

TO LEARN MORE, CONTACT:

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+1 868 794 1026
Email: donations@trinidadeyehospital.org

Deepening my love for Optometry

By: Rinelle Rajcoomar, Optometrist



I am one of the two Optometrists at CVRS Optical and mainly based at the St. Augustine office. For as long as I can remember, I have had a deep yearning to help others in a way that would change their lives for the better. My interest in Optometry stemmed from as far back as my primary school years when I would accompany my mom to her routine eye exams. I was always so fascinated by the Optometrist and the equipment in the office, and I would often leave amazed by how well my mom could see with her new glasses at the end of the exam. Although those visits ignited a spark in me, I didn't realize untill I was doing CAPE that Optometry was something that I could actually persue. With the help of one of my teachers, I did some research into the

field and found out that UWI offered a relatively new Optometry degree so I immediately applied and that was how my career began. I officially graduated as an Optometrist in 2018 and since then, I have been privileged to gain experience and expand my knowledge in multiple areas of eye care in Trinidad and Tobago at various organizations, and have had the opportunity to work with some of the very best in the eye care field.

CVRS Optical is no exception. In fact, in the short eight months that I have been with this company, I would say that I have learnt so much that the experience has undoubtedly made me a better Optometrist. This has been my first time working in an Ophthalmology clinic and my first time working alongside such esteemed Ophthalmologists and, thus far, the clinical experience that I have gained is second to none.

Apart from my regular duties as an Optometrist, I have been more exposed to medical and surgical management of



both common and complex eye diseases, pre-operative and post-operative care of patients, clinical guidelines, decision-making and best practice. I've had the opportunity to learn from various eye care professionals, both locally and regionally, through our weekly teaching sessions. On numerous occasions, I've also had the opportunity to develop my skills as a presenter by leading case presentations and discussions with fellow Optometrists and Ophthalmologists both locally and internationally.

Being able to work so closely with the Ophthalmologists has definitely been one of the highlights of my job, and it has deepened my existing love for areas such as Ocular Pathology and Low Vision. The experience has also helped me to develop a keen interest in some other areas, namely Refractive Surgery and Myopia Control. CVRS | TEH is definitely a place where the learning never stops. We are always searching for new techniques and innovative ways to treat our patients, and we always go above and beyond to ensure that we provide the best care possible. It definitely takes a team to make this happen and I am happy to be a part of this one.



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Integrated Eye Care Systems: A Special Opportunity to Make a Difference

By: Franka Mohammed, Stakeholder Engagement Manager



As 2021 comes to a close, I decided to do some reflection and I thought to myself, "Wow...I really love the work that we do at CVRS and TEH". You might wonder, why I would feel this way and why is it even important to share this sentiment.

The thing is, this year, we've had the privilege of putting our best efforts forward, to influence leaders in the eye health industry right here in our country and across the Caribbean. For me, it's been a chance to do something meaningful, that makes a difference in the lives of others, even when the best possible results seem so far away.

Changing any process can be long and can tread on many an uncomfortable path, yet there's some joy to be found in the struggle. Our stakeholder relationships are nurtured with the main goal, to be of benefit to patients who need greater access to eyecare both within the public and private health care systems. When patients benefit from greater access to care, it makes it all worth the effort.

According to the United Nations, the wellbeing of a country is closely related to its ability to see. Sight affects our ability to earn a living, educate our children, feed our families, and have a healthy state of mind and life quality. These are essential ingredients for the sustainable development of any economy and society.

This makes contributing to blindness prevention and eye health management conversations, a special opportunity to make a difference.

A recent study done in the United Kingdom shows that since the pandemic began in 2020, there's been a high cancellation rate of cataract surgeries all over the world, resulting in vision impairment and sight loss for thousands. Some countries have opted to quell this problem in new and innovative ways.

One of these ways, include Health Authorities contracting private eye care providers to deliver high volume cataract surgery lists to reduce backlogs quickly. This has proven to be effective. Many patients regain their eyesight faster than before, thereby reducing the negative effects of lengthy surgery wait times. We believe that this approach can also work in Trinidad & Tobago, especially 26 INSIGHT

during the COVID-19 pandemic.
Without intervention, our Cataract
Surgery Rate* (CSR) will drop and
inadvertently impact our economy.

Integrated Eye Care Systems are the way of the future. We look towards 2022 with a renewed sense of responsibility and purpose. Advocating for more patient centred eye care solutions will be one of our highest priorities. So far,



in our experience, service on behalf of others always proves to bring us great joy. This is what I meant when I said I love the work that we do.

*Cataract Surgical Rate (CSR) is **the number of cataract operations performed in one year, per million population**. It is a measure of the quantity of cataract services. CSR needed in each country (the target CSR) is determined by the number of eyes that will develop cataract in one year (the incidence).

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Annette's Gift of Sight - A Patient Story

By Mrs. S. (Annette's Relative)

Just when you thought nothing good came of 2020, the Trinidad Eye Hospital (TEH) brought sheer joy to my cousin Annette when Dr. Bhola, of TEH, removed one of her cataracts in December 2020. The surgery was free of charge as part of TEH's annual charity events - The Gift of Sight Initiative. For Annette, it was the best Christmas and birthday present she could have imagined, and for our family, a magnificent experience of kindness.

This is my fun-loving cousin Annette.



Since the time of my visit to celebrate my mum's 87th birthday in October 2018, Annette was already losing her vision because of cataracts in both eyes, until she eventually was unable to drive. This never stopped Annette from taking care of business, and most of all it never diminished her positivity. She walked everywhere to do errands for herself and for others. And, whenever someone called out to Annette while she was out and about, she would calmly and sweetly ask "who is this?" If you know my swanky 'cuz', she still looked chic even though she admitted she couldn't see the clothes in her closet properly anymore.

When the daughter of one of her schoolmates told her about Dr. Bhola and TEH, Annette could not believe she would become the beneficiary of such

charity. The care Annette received was superb and Annette felt cherished by Dr. Bhola and his highly competent, professional, and nurturing team. TEH was so attentive that it thrilled Annette when she received a follow-up call from one of the nurses the same evening of her surgery to make sure she was doing okay.

The Gift of Sight Initiative is TEH's Free Cataract Surgery Charity Event. It is done twice a year in July and December. All surgical supplies and resources as well as patient supplies (such as a free bag of eye drops, gauze, and sunglasses) are generously donated in support of this initiative.



Doing what I love!

By: Dr. Sareta Dubay, Resident of Ophthalmology

When you love what you do, you just LOVE doing it. You want to be there, you put your best foot forward, you let it inspire you to be more, and do more. This is what my time at the CVRS | Trinidad Eye Hospital has made me feel.

I began over a year ago, as an Ophthalmology Research Fellow. I still remember to this day, Dr. Kumar, our Head of Education, asking me to write a list of all the things I'd like to do at the hospital in the next three months. "Wow," I thought. "Is this Christmas?" Kidding- it wasn't, but close enough. Eagerly, I wrote my list, and in no time, we did it all, together.



My schedule was all-rounded; it consisted of a well thought out mix of clinic days, surgical days and research days. Clinic days meant leaping into a completely new, but stimulating, world of modernized instruments, tests, and pathology. Nothing remotely close to the basics I had studied in medical school. I think that was one eye-opening aspect, that I quickly realized, about the field of Ophthalmology; how uniquely cutting-edge it is. Due to the high-volume clinic system, I was guaranteed to examine a wide variety of diseases every day, which made for excellent proficiency building. To add to this, we allotted time slots after each clinic, for reviewing the interesting or "must-know" cases. My surgical days were equally as gratifying, starting with fundamental ropes of anaesthetizing eyes pre-op, prepping patients and observing surgeries. It was incredible, in all ways, seeing patients go from almost 'hand movements vision'



to reading all the lines on the chart. I ended up seeing firsthand what a dire need there was in our country, for numerous people to regain their sight. I wasn't aware till I became aware. I knew I wanted to help. Then there was my research. At the end of my fellowship, I was able to submit my first ever paper for publication! We studied 78 of our patients who were diagnosed with refractory glaucoma, and had valves placed at the back of the eye to further aid in lowering eye pressures. The study exhibited



the immense success of these valves placed by one of our consultants, Dr. Dwarika (kudos Doc!)

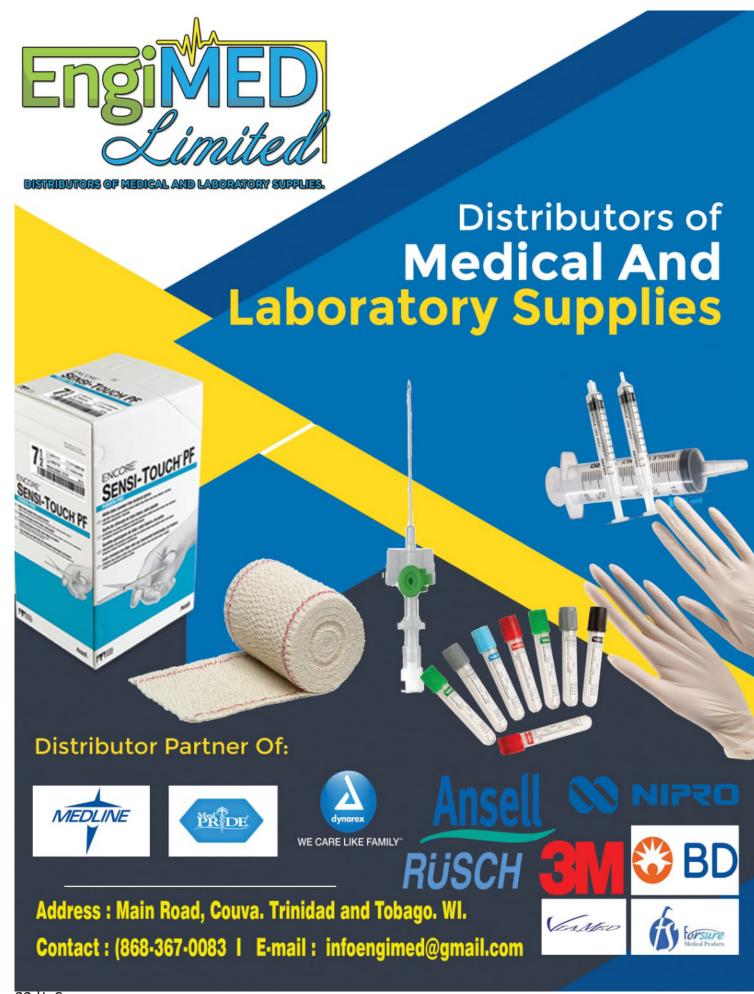
In retrospect, my time as a Research Fellow was such a useful transition into being a Resident. My training was hardly limited to what we did in clinics. Our biweekly online classes with other Ophthalmology residents from across the island and other islands, encouraged us to learn from each other, support each other and share our experiences. Every quarter, we even held our own leadership training session. What continuously stands out to me, is the patience and kindness of my consultants. It's so rare to have this one-on-one, individualized teaching on a daily basis, and I believe that's what sets the program here at CVRS | TEH apart. Another strength of our

Ophthalmic Specialist Training (OST) program is the support we received in helping us achieve the first parts of our RCOphth and ICO exams, one of the major stepping stones in specializing. My first year of residency ushered in thrilling adventures such as performing actual surgery, performing lasers and other procedures, traveling to Antigua for the 107-cataract surgery list, seeing more patients independently, submitting more research papers for publication, and most invaluable to me, developing my relationships with everyone within the CVRS | TEH family.

All these words, then still, you may ask: "but Y the I?" ... Well, I have no 'eye-dea.' No wait, 'EYE' do. I am happy to be here. My job is rewarding and wonderful in so many ways. I get the opportunity to see such a minute part of my patients' bodies, that holds all the true livelihood a person can have. You see colours, shapes, patterns, textures, under that microscope. And being able to determine what's wrong, and determine how I can help, is something I really really enjoy doing, any day, any time. I will forever be grateful to Dr. Bhola for believing in me and introducing me to the family that he has grown.

You want to be there, you put your best foot forward, you let it inspire you to be more, and do more.

To conclude, just three simple, random things to get to know me: I am an identical twin, I have six magnificent dogs and I love baking. I look forward to meeting you!



New Dry Eye Clinic

By: Prianka Persad, Surgical Services Manager



Do you suffer with itchy, gritty, red, watery eyes which may sometimes cause your vision to become blurry? If you answered yes, you may have dry eyes resulting from meibomian gland dysfunction (MGD).

The normal tears of the eye are made up of three layers — an oily, watery and mucous layer. MGD occurs when the glands that make the oily layer of the tears are not working properly and this

causes the watery layer of the tears to dry out quickly.

The meibomian glands are inside the eyelids, and the openings are on the edge of the eyelids. When the glands become blocked, the oily part of the tears cannot be released. This causes the watery tears to dry up more quickly which results in the eye becoming dry and can make it feel sore. The eyelids can also become sore and swollen as the glands become blocked.



MGD is a common condition and can affect anyone. However, it is more likely to happen after the age of 50, if you have diabetes or oily skin conditions, and it is also more common in women.

But fear not- we can easily treat it in our new dry eye clinic! Treatment involves releasing the oily tears from the glands using hot compresses and eyelid massages (applying pressure to the eyelids to express the glands and squeeze out the oils) known as meibomian gland expressions. Sounds scary? Do not worry. A topical anesthetic is also administered to both eyes before the procedure, which makes the treatment tolerable.

Meibomian gland dysfunction, if not treated, can cause

damage to your eyes and vision to the point that routine daily activities become difficult. This expression of the glands can help patients with MGD since it promotes the healthy and adequate secretion of oil to the eye surface, providing excellent long-term benefits.

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Subsidized Pricing Program

What is Subsidized Pricing (SP)?

The Subsidized Pricing (SP) Program is a discount program where patients benefit from reduced prices for all clinic and surgical services.

It was created to ensure that everyone has access to the same high quality, affordable eye care.

No health insurance? SP is the program for you!

To date, thousands of persons are enrolled and benefit from the SP Program.

Who can join the SP Program?

Anyone who agrees to our simple terms and conditions!

Which services are discounted?

ALL Clinic & Surgical Services are discounted in our SP Program.

So, why pay regular price?

If you can afford it, do it! Here's why:

Our doctors and surgeons all strive

towards using their gifts to give back and to make a significant difference in the lives of our patients. We believe that the same high quality of eye care should be easily accessible to all persons regardless of their economic status. It is with this in mind that we have designed our services so that good fortune is simply passed along.

For those who can afford the regular price for eye care services, we honour you by passing most of that along to someone who can't. You directly contribute to helping those who are part of our Subsidized Pricing (SP) Program and can only afford part payment.

It does not stop there, as both regular priced and subsidized priced patients, pass their good fortune along through charity eye surgeries to those who absolutely cannot afford much-needed eye care.

SUBSIDIZED PRICING "SP" PROGRAM DOCTOR VISITS 40% OFF CATARACT SURGERY 40% OFF AVASTIN INJECTIONS + 50% OFF SCANS & TESTS ALL SURGICAL PROCEDURES



Knowledge Sharing

2021 Virtual Academic Sessions

Nelson Mandela once said that education is the most powerful weapon you can use to change the world. TEH is on a mission to change the world as we aspire to a world where everyone sees. We believe that through education and the sharing of knowledge, this goal becomes one step closer.

Along with our sponsors and specially invited guest speakers from the United Kingdom, Trinidad Eye Hospital hosted four virtual academic sessions during the year 2021. These sessions focused on Urgent Referrals, Retina, Cataracts and Refractive Surprise and Refractive Surgery. Three of these sessions targeted optometrists and optometry students, with a remarkable attendance record of 120 participants for the cataract session. These sessions aimed at developing closer working relationships between our ophthalmologists and optometrists in order to add value, and better serve the needs of patients. These sessions had GOC (General Optometry Council) approval and were all worth one CET (Continuing Education and Training) credit.

One session focused on Refractive Surprise and Refractive Surgery and was attended by junior doctors and ophthalmology resident doctors.

All sessions were structured to encourage participation as well as problem solving skills through active clinic patient cases. More sessions are planned for 2022!

TEH | CVRS Resident Training Program



On July 15th 2021, CVRS|TEH received recognition via Pathway B, from the Medical Board of Trinidad & Tobago (MBTT), for its comprehensive Resident Training Program. This means that all Resident doctors currently training at CVRS|TEH can register directly with the MBTT upon completion of examinations and training.

The program is led by our Director of Education, Dr. Vineeth Kumar, who has carefully designed the program using the competency framework utilized by the prestigious Royal College of Ophthalmologists in the

Growing Partnerships

United Kingdom. This is certainly a highlight for the future of Ophthalmology in Trinidad & Tobago and the Caribbean.

It attests to the fact that Residents who complete their training in ophthalmology via the CVRS|TEH program will be well equipped to charge forward in the fight against avoidable blindness.

Learn more about our prospectus https://www.trinidadeyehospital.org/ost-prospectus

Head of Examinations of the Royal College of Ophthalmology visits Trinidad & Tobago

Earlier this year, The Royal College of Ophthalmologists announced that their Refraction Certificate and Part 2 FRCOphth Oral examinations will be held in Trinidad and Tobago for the first time in March 2022.

On November 1st, Mr. Dylan Castello, Head of Examinations at the college, came to Trinidad to scout for potential examination venues. CVRS|TEH co-hosted the visit with Dr. Vishwamitra Ramdath, President of the Ophthalmological Society of Trinidad & Tobago.

Hyatt Regency Hotel in Port of Spain was selected as the exam venue for March 2022. Applications for these exams open on 22nd November 2021 and will close on 3rd January 2022.

Mr. Costello had a successful visit and also had the pleasure of celebrating Divali with members of the CVRS|TEH team. We look forward to meeting Mr. Costello again, together with the Royal College examiners in March 2022.





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Coming in 2022!



Farewell Maraval

As of 28th January 2022, our Maraval clinic location will be CLOSED.

All patients will be accommodated at our St Augustine location.

St Augustine, We'll Be Moving Soon!



Due to COVID-19, for the safety of our patients and staff, we need more space. Our team is working towards an April 2022 move.

We look forward to serving you at our new Pasea location!

New Location Coming Soon: Corner Pesea Rd & Churchill Roosevelt Highway



Left to right:

Dr. Dorian Dwarika MRCS (Ed), Dr. Zahrid Mohammed MBBS, Dr. Ronnie Bhola FRCS (Ed), CCT (UK), Dr. Vikash Badasee MBBS, Dr. Sareta Dubay MBBS, Dr. Vineeth Kumar FRCS (Ed).



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