

NEPAL NETRA JYOTI SANGH

GETA EYE HOSPITAL

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**The Fred Hollows
Foundation**



Hospital Management Committee



Mr Lok Raj Joshi, Chairperson



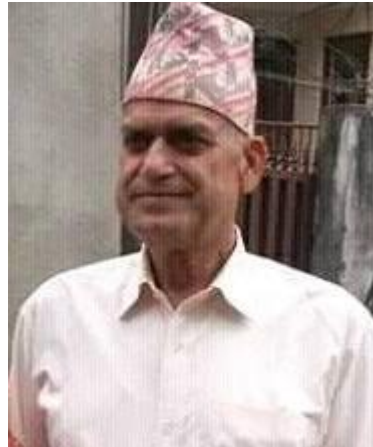
Mr Chakra Bdr Singh, Member



Mr Bishnu Datt Joshi, Member



Mr Bhupendra Thapa, Member



Mr Didya Pd Pant, Member



Mr Yagya Raj Chaudhary, Member



Mr Karunakar Bhatta, Member



Dr Suresh Raj Pant, Member



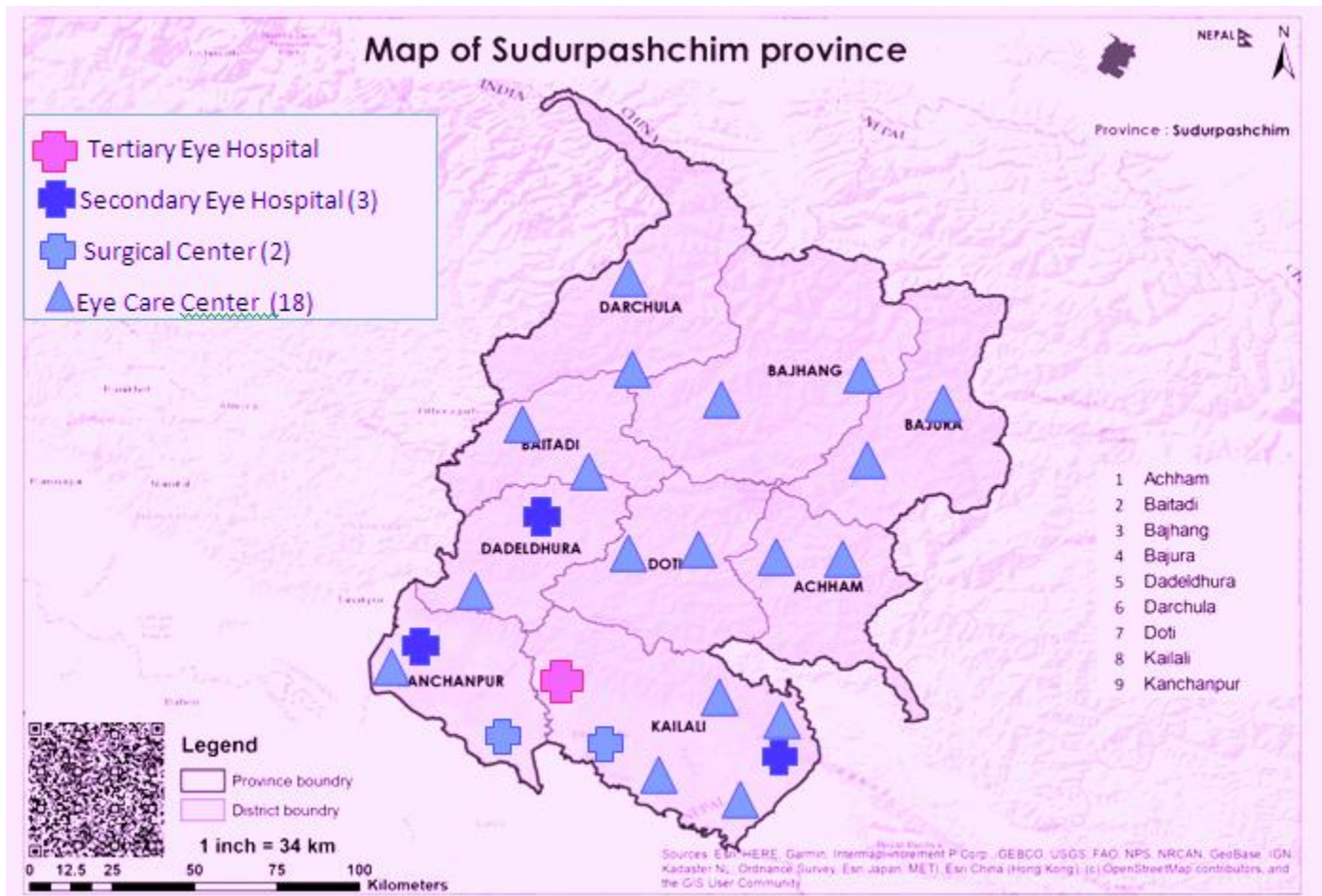
Mr Govind Pd Joshi, Member Sec.

GETA EYE HOSPITAL SOUVENIR

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1. Eye Care Service coverage in Sudoor Paschim Province of Nepal



2. **Vision**

- Be a center of excellence for eye care services and academics with accessible and affordable network of fully functional hospitals and eye care centers in Sudurpashchim province.

Mission

- Provide sustainable, comprehensive quality eye care services, in the population along with producing skilled human resources.

Objectives

1. To develop as Centre of Excellence (COE)
2. To expand and extend eye care services with Quality of Care (QOC)
3. To generate income through diverse resources
4. To develop leadership and management with motivated and dedicated team of staff
5. To establish Research & Development system
6. To strengthen coordination mechanism and
7. To strengthen Monitoring, Evaluation and information system.

Strategies

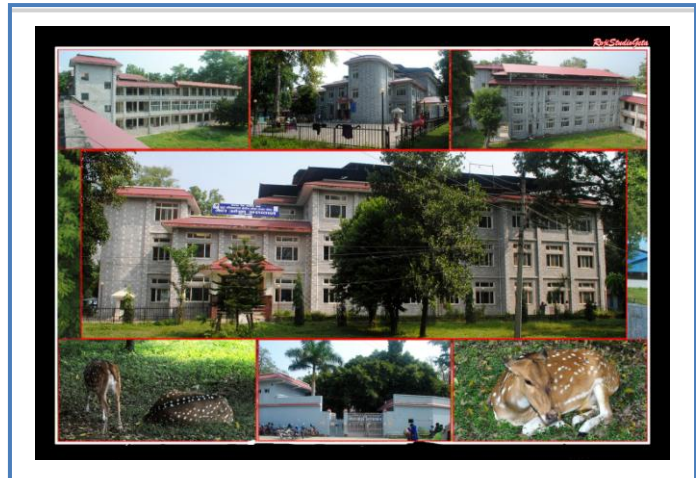
- Disease Control
- Infrastructure Development
- Human resource Development
- Coordination and advocacy

3. Introduction

The national blindness survey, in Nepal in the year 1980/81 conducted by the government of Nepal and World Health Organization identified a higher prevalence rate of blindness (1.02%) in the far western region of Nepal and as the home of trachoma, along with other blinding eye diseases. There was an absence of eye care service in the region, and patients had to depend on the service provided by Sitapur Eye Hospital in India which was far too expensive for the low-income and middle-income families to cover the expenses. To provide eye care services in the region, Prevention and Control of Blindness Program, run by the joint collaboration of the Nepal Government and the World Health Organization, had established Geta Eye Hospital in 1981 at Geta, of Kailali district. On the request of central NNJS to the Social Service National Coordination Council and on their recommendation, the government provided 10 bigaha lands for the hospital after cabinet decision.

Geta Eye Hospital is a service-oriented, non-profit-making social organization that provides preventative, promotive, curative, and rehabilitative eye care services in the Sudoor Paschim province of Nepal. This hospital was started as a 100-bed hospital made with low-cost local materials and applying a low cost philosophy. This hospital has been providing hospital-based medical and surgical eye care services with community-based outreach activities such as: mobile eye camps and screening camps in all nine districts since the beginning. It came under the umbrella of Nepal Netra Jyoti Sangh (The National Society for Comprehensive Eye Care in Nepal) in 1985 AD, and was run with the financial and technical support of Norwegian Church Aid and the INFIL Foundation from 1985 to 2004. Nepal Netra Jyoti Sangh is a social, non-profit, service-oriented non-governmental organization established in 2035 BS.

This hospital provides medical and surgical eye care services with community-based outreach activities such as surgical eye camps, screening camps, and school eye health programs in Sudoor Paschim province. The hospital also provides eye care



services to a large number of patients visiting from Uttar Pradesh and Uttaranchal in northern India.

The number of patients is increasing every year due to continuous improvement in surgical techniques and relatively low service costs in medical and surgical treatments. These costs are easily affordable for middle-income as well as poor patients.

4. Impact 1981 to 2023 June

Impact 1981 - 2023 June

- Eye Care Service at Base Hospital: 2,015,132
- Eye Care Service at Secondary Hospitals and Eye Centers: 1,692,233
- Eye Care Service at Eye Camps: 892,455
- Cataract surgery at Base Hospital: 474,843
- Other Surgeries at Base Hospital: 83,853
- Surgeries at Sec Hospitals and Eye Centers: 32,839
- Surgeries at Eye Camps: 69,162
- School children screened: 707,446

Total OPD: 4,599,820
Surgeries: 660,697

- Reduction of blindness from 1.02% in 1981 to 0.21% in 2021 in the province
- Reduction of the first major cause of blindness (cataract) from 72% to 36% in 2021
- Elimination of the second major cause of blindness (trachoma) in 2017

Year 2079-80 BS (2022-23 AD) at a Glance:

270,496 outpatients	36,952 reached through eye camps
24,761 surgeries	2,923 free surgeries through eye camps
96,107 students screened	1,072 glasses distributed to students
1,978 trained	

- Tertiary-level eye care service at Base Hospital
- Secondary-level eye care service through 3 Secondary Eye Hospitals and 2 Surgical Centers
- Primary eye care through 18 Eye Centers
- Eye care service through eye camps
- School Eye Health Program
- Eye health education and awareness through trainings and IEC materials

Geta Eye Hospital offers the following eye care services:

- Cataract and General Ophthalmology.
- Oculoplasty
- Cornea
- Glaucoma
- Vitreo- Retina
- Pediatric Ophthalmology
- Low Vision Services
- Orthoptic Services
- Contact Lens Services
- Pathology & Microbiology Services
- Optical dispensing services
- Pharmacy services
- Emergency eye care
- Community Eye Care
- Eye health education

Cataract Services:

Cataract is the major cause of avoidable blindness in Nepal and in Sudoor Paschim province, comprising 36% of total blindness as per the 2021 RAAB. Cataract surgery has been shown to be one of the most cost effective health care interventions. It is being done using the small-incision cataract surgery procedure and the phaco-emulsification technique in the base hospital, three secondary-level eye hospitals and two surgical eye centers. Intra-ocular lens implantation is done in all patients after cataract surgery. Geta Eye Hospital and its network performed **17,551** cataract surgeries in the year 2079-80 (2022-23).



Subspecialty Eye Care Services:

i. Oculoplasty Services:

The hospital also provides oculoplasty services to the walk-in patients, referral cases from secondary-level eye hospitals, surgical centers, eye care centers and outreach activities of the hospital. Major oculoplasty surgeries were Pterizium Excision with graft, Excision biopsy of ocular mass, Dacryosystorhinostomy, Ptosis surgery, and lid repair. In the year 2079-80, a total of **3829** patients were examined in the oculpalsty clinic, and **1335** oculoplasty surgeries were performed.



ii. Cornea Services:

Corneal lesions are the second major cause of blindness in Sudoor Paschim province comprising 24.2% of total blindness as per RAAB 2021. Cornea specialty services at Geta Eye Hospital started in 2012 to address the common ocular morbidities associated with the cornea, and ocular surface. Corneal transplantation also started in the same

year. Cases have a wide range of variation in the disease spectrum. The most commonly encountered corneal pathologies are:

- Corneal ulcer/keratitis (bacterial/fungal/viral/protozoal), its sequelae, and complications
- Immune-mediated keratitis
- Ocular surface disorders
- Ocular surface neoplasia
- Chemical and thermal injuries
- Corneal laceration and perforation
- Ectasia, dystrophy, and degeneration
- Pseudophakic and aphakic bullous keratopathy



Currently available services are the management of:

- Corneal ulcer/keratitis
- Ocular surface disorders (dry eye disorders)
- Corneal laceration and perforation repair
- Ocular surface neoplasia: wide margin tumor excision +/- Mitomycin C with conjunctival auto-graft
- Symblepharon release and conjunctival autograft
- Recurrent pterygium: **PERFECT** surgery
- Small corneal perforation: Gunderson's flap and corneal patch graft
- Salzmann's nodular degeneration: superficial keratectomy
- Band-shaped keratopathy: **EDTA** chelation
- Non-healing/recalcitrant corneal ulcer and perforated ulcer: Therapeutic penetrating keratoplasty (**TPK**)
- Stable corneal scar/opacity: Optical penetrating keratoplasty (**PK**)
- Corneal scar with cataract: **Triple Procedure** (penetrating keratoplasty with cataract extraction and intraocular lens implantation)

There is a huge number of patients seeking corneal consultation in our hospital who require transplantation surgery. From January 2019 until September 2023, the total corneal transplant surgery was 242. Still, there is a huge backlog of patients due to the limited supply of donor tissues. At present there is only one eye bank in Nepal (Nepal Eye Bank at the Tilganga Institute of Ophthalmology) that does donor tissue harvesting, processing, and maintaining the supply and demand chain. So, in the future, Nepal needs more tissue collection and processing centers to meet the demand of the ever-increasing number of patients and the addition of new corneal consultants every year.

With newer advances in technology and clinical practice, the cornea unit is planning to further expand the available treatment modalities. Newer services in the pipeline are:

- Amniotic membrane graft (**AMG**)
- Simple limbal epithelial stem cell transplant (**SLET**)
- Deep anterior lamellar keratoplasty (**DALK**)
- Descemet's membrane endothelial keratoplasty (**DMEK**)
- Descemet's stripping endothelial keratoplasty (**DSEK**)
- Corneal topography
- Collagen cross-linking (**CXL**)

In the year 2079-80 (2022-23) **9975** patients were examined, and **163** corneal surgeries were performed.

iii. Glaucoma Services:

Glaucoma is the third major cause of blindness in the province, comprising 21.2% of total blindness in the province in 2021. To provide the glaucoma subspecialty service in the hospital a glaucoma subspecialty clinic was established in 2013. In the glaucoma clinic, **2811** patients were treated medically or by laser therapy for glaucoma in our hospital and **81** glaucoma surgeries were performed in the year **2079-80 (2022-23)**. Glaucoma



subspecialty services in GEH are provided on all working days. For early detection and management of glaucoma, the department has installed advanced diagnostic equipment. We have been providing medical treatment, laser service, and glaucoma surgery.

iv. Vitro Retina Services:

Vitreo-retina subspecialty clinic was established in 2013 to provide medical and surgical vitreo-retina service in the hospital. In the vitreo-retina department, **4,544** patients were examined and treated medically, vitreo-retina surgery, and lasers in the fiscal year **2079-80 (2022-23)**. Out of the total patients, **324** provided VR surgeries and **1086** provided retinal laser therapy services



v. Pediatric ophthalmology Services:

ORBIS International has supported Geta Eye Hospital to establish the pediatric ophthalmology unit at the base hospital in 2011. In the pediatric ophthalmology department, **13,902** children were examined and treated at the base hospital of which **403** children were provided surgical treatment in the fiscal year **2079-80 (2022-23)**. Major surgeries offered to pediatric patients were congenital cataracts followed by corneal repair and conjunctival repairs.



vi. Low Vision Services:

Children are rarely encouraged to develop the use of residual vision, and its existence is often ignored by medical and educational staff. The challenge for us is to recognize ways that allow partially sighted children to benefit from their residual vision through the provision of appropriate services, materials and devices. Geta Eye Hospital provides optical low-vision devices to utilize residual vision for study and to support being self-dependent in life.

vii. Outreach Activities:

Geta Eye Hospital provides outreach services through surgical eye camps, diagnostic screening and treatment (DST) eye camps, and school screening programs to provide preventive, promotive and curative eye care services to unreached patients of Far Western province.

a. Surgical Eye Camps:

To reach the unreached population in remote location and provide comprehensive eye care, Geta Eye Hospital conducts surgical eye camps in different locations of the Far West province with the support of governmental and nongovernmental organizations. The hospital conducts surgical eye camps for 2 to 3 days at a place and organizes 3 to 4 camps in a trip to save travel time and minimize operating costs. Patients examined in the eye camps were treated medically, and cataract surgeries were performed with intra-ocular lens implantation and some other minor ocular surgeries free of charge. Patients with refractive errors were also offered retinoscopic refraction and provided glasses free of charge or with subsidized costs at the same site. Opportunistic screening was performed for glaucoma, diabetic retinopathy, and other conditions and referred to Geta Eye Hospital for further investigation and management. In all surgical eye camps local social organizations, Nepal Red Cross Society volunteers, school teachers, students, social workers, female community health volunteers, and government health workers actively participated in advertisement and volunteer work.

In the Year **2079-80 (2022-23)** hospital conducted **22** surgical eye camps, performed **14,973** patient examinations and performed **2,569** surgeries, of which **2,544** were cataract surgeries, and the rest were provided either optical correction or medical treatment.

b. Screening Eye Camps:

Geta Eye Hospital and its network conduct diagnostic screening and treatment (DST) camps to reach the unreached to provide comprehensive eye care. Operable cataract patients screened at such camps are referred to base hospital or secondary-level eye

hospital, or surgical eye center to provide surgery free of charge. Opportunistic screening was performed for glaucoma, diabetic retinopathy, and other conditions and referred to hospitals for further investigations. To address visual impairment due to refractive error, the eye camp team performs retinoscopic refraction and provides glass free of charge or at subsidized rates at the same site. The hospital and its network conducted **164** screening camps in **F/Y 2079-80 (2022-23)** where **21,979** patients were examined and operable patients were referred to base hospital, surgical eye camps, secondary hospital or surgical centers for surgical intervention.

c. School Eye Health Program:

Geta Eye Hospital and its network conduct school eye health programs in all districts of this province to support in elimination of visual impairment and avoidable blindness in school children.

Under this program, the hospital or eye center team visits the schools and examines the school children for eye problems. Children with ocular problems are treated medically on the spot and children with refractive error are referred to the base hospital or eye care centers or retinoscopic refraction performed at the same school for refractive correction, and provided spectacles free of charge. In addition trained school teachers screen school children and refer to an eye center or ophthalmic assistant visit to the school for refractive corrections.

Children who required special ocular examinations such as orthoptics, low vision and surgical intervention were referred to the base hospital for respective services. All services and treatment including ocular examination, spectacle and surgery have been provided free of charge or subsidized charge. In the year **2079-80 (2022-23)** hospital and its network screened **446** schools to cover **96,107** children and provided spectacle to **1072** children free of charge.

The financial support for the school eye health program in the Far West province is being provided by the SEVA Foundation, Fred Hollows Foundation and the Government of Nepal through the Nepal Netra Jyoti Sangh central office.

SECONDARY EYE HOSPITAL AND EYE CARE CENTERS OF GEH

1. Secondary Eye Hospital Mahendranagar, Kanchanpur
2. Secondary Eye Hospital Tikapur, Kailali
3. Secondary Eye Hospital Dadeldhura
4. Surgical Center Dhangadhi, Kailali
5. Surgical Center, Belauri Kanchanpur
6. Eye Center Dodhara Chadani, Kanchanpur
7. Eye Center Patan, Baitadi
8. Eye Center Gothalapani, Baitadi
9. Eye Center Silgadhi Doti
10. Eye Center Sikhar, Doti
11. Eye Center Sanfebager, Achham
12. Eye Center Darchula
13. Eye Center Chainpur Bajhang
14. Eye Center Martadi Bajura
15. Eye Center Bhajani Kailali
16. Eye Center Hasuliya Kailali
17. Eye Center Lamki, Kailali
18. Eye Center Sukhad, Kailali
19. Eye Center Jogbudha, Dadeldhura
20. Eye Center Mangalsen Achham
21. Eye Center Tante, Bajura
22. Eye Center Deulek Bajhang
23. Eye Center Gokuleshwar, Darchula

Telemedicine:

To provide consultant eye care service to the patients located in remote areas the hospital had established telemedicine service at Geta Eye Hospital and its Eye Care Centers. The hospital had installed a third eye camera on a slit lamp bi-microscope to capture a live image of the patient's eye, which can be consulted with the Ophthalmologist at Geta Eye Hospital through an internet connection and treatment provided as per advice given by ophthalmologist. In the year 2079-80, **709** patients from different eye centers benefited through telemedicine.

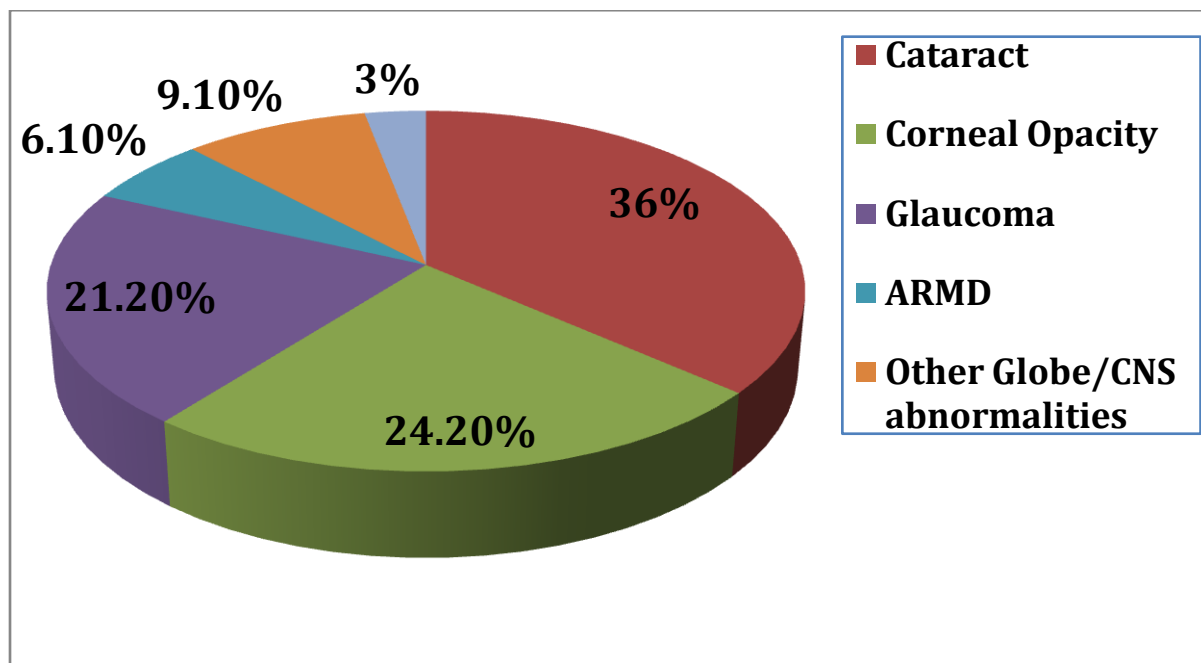


6. Rapid Assessment of Avoidable Blindness (RAAB) :

In the year **2020-21**, Geta Eye Hospital with the financial support of SEVA Foundation successfully completed RAAB in the Far West province. A total of **132** randomly selected clusters each consisting of **35** subjects above **50** years were evaluated. Subjects were collected by door-to-door enumeration. A survey team led by an ophthalmologist assessed visual acuity, thorough examination of the eye and records were maintained online in RAAB software.

The survey examined **4573** out of **4615** subjects enumerated with a response rate of **99.1%** in the study. Out of **4573** subjects, **1995 (43.63%)** were male and **2578 (56.37%)** were female. Among the examined, **2214 (48.4%)** were between 50-59 years, the age and sex-adjusted prevalence of blindness was **0.6 % (95 % CI 0.3-.087)**. The age and sex-adjusted prevalence of severe visual impairment, moderate visual impairment and early visual impairment were **1.0%** (95% CI 0.6-1.3), **5.3%** (95% CI 4.5-6.2) and **7.0%** (95% CI 6.0-8.0) respectively. The main cause of bilateral blindness was untreated cataract (**36.4%**), non-trachomatous corneal opacity (**24.2%**), glaucoma (**21.2%**), globe/CNS abnormalities (**9.1%**), ARMD (**6.1%**) and other posterior segment diseases (**3.0%**).

Causes of Blindness in the province



The prevalence of blindness was drastically reduced in the province from **2.5 %** in **RAAB 2008** to **0.6%** among the above **50** Population in **2021**. Although cataract remains the major cause of blindness, comprising **36.4%** followed by corneal opacities and glaucoma. Cataract was also the major cause of SVI comprising **85.7%** followed by posterior segment diseases and MVI comprising **55.1%** followed by refractive errors. The major cause of early visual impairment is refractive errors comprising **76.2%** followed by cataract. Therefore higher priority should be given for cataracts, corneal blindness and glaucoma in future interventions to eliminate blindness and refractive errors to reduce the prevalence of MVI, and early visual impairment.

7. Partner Organizations

Geta Eye Hospital is grateful for the continuous support of our partner organizations. The financial donations we receive enable us to upgrade our facilities to provide better patient care, purchase medical equipment and conduct outreach activities throughout the Far West province of Nepal.

Major Partner Organizations are as follows:

Nepal Government through Central NNJS

Nepal Government has provided support to conduct eye camps, school screening program, Diabetic Retinopathy program, and program expenditure of nine eye centers in remote locations of the province since the year 2009.

SEVA foundation:

SEVA Foundation has been supporting the outreach programs, equipment, and support on the establishment of the eye centers, human resource development and awareness in the community since the year 2008-09.

Fred Hollows Foundation:

Fred Hollows Foundation has been supporting to Geta Eye Hospital in Human resource development, outreach activities and equipment since the year 2013.

Rotary clubs, Elverum and Hamar, Norway:

The Rotary clubs, Elverum and Hamar Rotary Club, Norway have been supporting the Outreach program to conduct the eye camps and equipment for the hospital since the year 2008.

Charity Vision International:

The Charity vision International has been supporting our hospital with consumable supplies for cataract surgeries since the year 2019. We performed **5000** social surgeries in the year 2078-79 (2022).

Tej Kohli Ruit Foundation (TKRF)

Tej Kohli Ruit Foundation has been supporting cataract surgery through outreach program for conducting eye camps in the far western province and to the poor patient at the base hospital and its secondary hospitals as well as surgical centers since the year 2021. GEH and its network performed **3184** cataract surgery free of charge to patients under TKRF program.

8. Clinical Activities 2079-80 (2022-23)

A total of **270,496** patients were examined in the outpatient department (OPD) of Geta Eye Hospital and its satellite centers in the year 2079-80. Out of which **23,416** patients were provided surgical treatment and the rest were treated medically.

✦ THREE YEAR CLINICAL DATA :

CLINICAL ACTIVITIES	2077-78	2078-79	2079-80	TARGET 2080-81
<u>OPD</u>				
Geta Eye Hospital	62217	99787	97607	105000
Eye Hospital, Mahendranagar	19584	23851	23586	24000
Eye Hospital, Tikapur	30161	28337	23552	25000
Eye Hospital, Dadeldhura	6619	8919	11723	12000
Eye Camp (DST+Surgical)	859	24922	21379	24300
Eye Centers	52269	66068	92649	95000
TOTAL OPD	171709	251884	270496	285300
<u>CATARACT SURGERY</u>				
Geta Eye Hospital, Geta Kailali	8696	13911	11851	13000
Eye Hospital, Mahendranagar	758	652	826	1000
Eye Hospital, Tikapur, Kailali	983	1040	894	1000
Eye Hospital, Dadeldhura	78	102	488	550
Surgical Eye Center, Dhangadhi	438	166	784	1000
Surgical Eye Center, Belauri	0	12	153	200
Eye Center Mangalsen			11	
Surgical Eye Camp	0	2346	2544	2810
TOTAL CATARACT	10953	18229	17551	19560
<u>LASER AND OTHER INTRA-OCULAR SURGERY</u>				
Geta Eye Hospital	1469	3919	4511	5000
Surgical Eye Camp	0	0	14	15
Total other Intra-ocular surgery	1469	3919	4525	5015

EXTRA-OCULAR SURGERIES				
Geta Eye Hospital	1139	1751	2298	2000
Eye Hospital, Mahendranagar	78	53	70	150
Eye Hospital, Tikapur, Kailali	83	114	59	150
Eye Hospital, Dadeldhura	7	1	134	150
Surgical Eye Center, Dhangadhi, Kailali	55	41	92	125
Surgical Eye Center, Belauri	0	4	5	30
Surgical Eye Camp	0	23	11	20
Other Eye Centers	10	11	16	55
Total Extra-ocular Surgeries	1372	1998	2685	2680
Grand Total Surgeries	13794	24146	24761	27255
Number of School Screened	100	328	446	655
Number of Students Screened	12823	60117	96107	128000
Number of Free Spectacle Distribution	117	685	1072	2915

9. Trainings:

At Geta Eye Hospital, we also provide training for eye health workers, clinical exposure for ophthalmology residents, manual SICS training for ophthalmologists, clinical exposure training for ophthalmic assistants, practical training for nursing and health assistant students and primary eye health care training for school teachers, Mothers group, female community health volunteers (FCHV), social volunteers and drug retailers.



In the year **2079-80**, GEH provided Eye Center Management training for **10** Ophthalmic Assistants, clinical exposure training for **19** Ophthalmic Assistant trainees, Primary eye health training to **373** health workers, basic eye health training to **882** FCHVs, optical dispensing training for **4** people, basic eye health training to **646** school teachers, at Geta Eye Hospital and its hospital / eye care centers.

10. Activities Photographs:



Eye Camp Lamki, Kailali



Eye Camp Sayal Doti



Surgical eye Camp Bayalpata Achham



On the way for Eye Camp 2012



Eye Center Tante Inauguration



Eye Center Gokuleshwar Inauguration



Upgrade of Surgical Center Belauri



Telemedicine at Eye Center



Annual Planning Meeting



Cataract Quality improvement meeting



Primary Eye Care Training to HW



Eye Center Management Training



FCHV Training



World Sight Day 2022



School Teachers Training

11. Eye health Education Posters:

आँखा पाक्ने रोगका प्रमुख लक्षणहरू :

- एक्कासी एउटा अथवा दुवै आँखा रातो हुने ।
- आँखा धेरै चिलाउने ।
- आँखामा कचेरा लाग्ने तथा टासिने ।
- आँखाबाट आसु बगिरहने ।
- आँखा सुन्निने, दुख्ने/बिभाउने ।
- घाम तथा उज्यालो प्रकाशमा हेर्न समस्या हुने ।

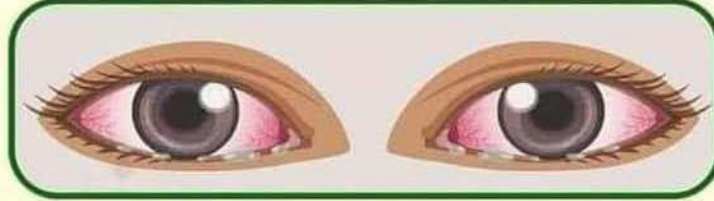


आँखा पाक्ने रोगबाट बच्ने उपायहरू :



- जथाभावी रुपमा आँखा नछुने/आँखा छुनु भन्दा पहिले राम्ररी साबुन पानीले हात सफा गर्ने ।
- सफा पानीले आँखा सफा गर्ने ।
- हरूले प्रयोग गरेका तौलिया/रुमाल प्रयोग नगर्ने ।
- व्यक्तिगत सरसफाइमा ध्यान दिने ।

आँखा पाक्ने रोग लागिहालेमा के गर्ने :



- पटक पटक सफा चिसो पानीले आँखा सफा गर्ने ।
- आँखा छोडिसकेपछी हरेक पटक साबुन पानीले हात सफा गर्ने ।
- आफूले प्रयोग गर्ने रुमाल, तौलिया, कपडा छुट्टाछुट्टै राख्ने र अरुलाई प्रयोग गर्न वा छुन नदिने ।
- कालो चस्माको प्रयोग गर्ने ।
- आफूले प्रयोग गरेको सिरानीको खोल, तन्ना हरेक दिन सफा गर्ने ।
- जथाभावी रुपमा आँखामा औषधिको प्रयोग नगर्ने ।



यस्तो समस्या देखिएमा नजिकको आँखा उपचार केन्द्र वा आँखा अस्पतालमा आँखा परिक्षण गराएर मात्रै औषधिको प्रयोग गर्नु पर्दछ जथाभावी औषधिको प्रयोगले थप जटिलता आउन सक्दछ ।

मोतिविन्दु

मोतिविन्दुको कारणले आँखाको दृष्टि विस्तारै धमिलो हुँदै जान्छ र नदेख्ने गराउँछ । यो औषधिको प्रयोगबाट निको पार्न सकिदैन तर अप्रेसनद्वारा गुमेको दृष्टि पुनः फर्काउन सकिन्छ ।

यसको अप्रेसन दुई विधिबाट गर्न सकिन्छ:

† Phaco (फेको मसीनबाट)

† SICS (सानो चिरा दिएर हातले)

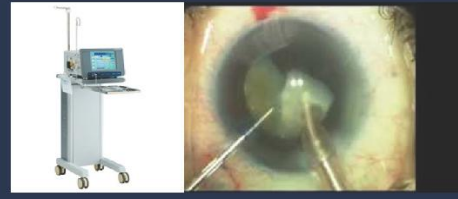
यदि मोतिविन्दु धेरै पाक्दा सम्म पर्खेर रहेमा यसबाट जलविन्दु पनि हुन सक्छ । जलविन्दु भई सके पछि अप्रेसन गरेर पनि दृष्टि नआउने गरि बिग्रन सक्छ ।



मोतिविन्दु



SICS (सानो चिरा दिएर हातले गरिने)



Phaco (फेको मसीनबाट)



थप जानकारी तथा उपचारको लागि:
नेपाल नेत्र ज्योति संघ

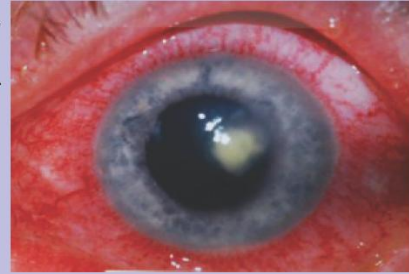
गेटा आँखा अस्पताल वा नजिकको आँखा उपचार केन्द्रमा सम्पर्क राख्नुहोला

आँखाको नानीमा घाउ (Corneal ulcer)

आँखामा चोट पटक लागेर अथवा कहिले काँही चोट नलागेर नै पनि आँखाको नानीमा घाउ हुन सक्छ । यस्तो हुन गएमा तुरुन्तै नजिकको आँखा उपचार केन्द्र अथवा आँखा अस्पतालमा गई जचाउनु पर्दछ । बताईए अनुसार आँखामा नियमित रूपमा औषधि राख्नु पर्दछ । नियमित औषधि नराखेमा आँखाको दृष्टि पुरै जान सक्छ ।

यस्मा जडीबुटी तथा जथाभावी औषधिको प्रयोग गर्नु हुँदैन र भारपफुक बाट पनि यो निको पार्न सकिदैन ।

यदि तपाईंले खेतमा काम गर्दा चशमाको प्रयोग गरेमा यस प्रकारको चोट पटक लाग्नबाट धेरै हद सम्म बचाउन सकिन्छ ।



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मधुमेहका कारणले हुने अन्धोपन (Diabetic Retinopathy)

मधुमेह अर्थात चिनी रोगका बिरामीहरुमा आँखाको दृष्टि पर्दा (रेटिना) मा रक्तश्राव भइ स्थायी अन्धोपन आउन सक्ने भएकोले नियमित आँखा जाँच गराउनु पर्दछ



सामान्य दृष्टि

मधुमेहका कारण हुन सक्ने दृष्टि



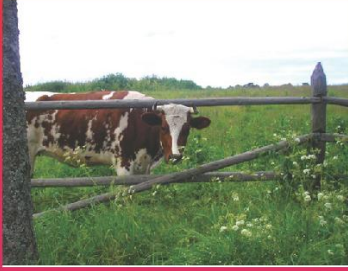
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गेटा आँखा अस्पताल वा नजिकको आँखा उपचार केन्द्रमा सम्पर्क राख्नुहोला



जलविन्दु



राफ्रो आँखाले देखिने



जलविन्दु लागे पछि देखिने

जलविन्दुका रोगीको सुरुको अवस्थामा आँखाको दृष्टि कम भएको थाहा नै हुँदैन तर उपचार नपाएमा विस्तारै आँखाको दृष्टि पुरै जान सक्छ ।



आँखाको दृष्टि बचाउनको लागि चालिस वर्षमाथिका सबैले वर्षमा एकपटक आँखा जाँच गराउने र जलविन्दु लागि हाले सल्लाह अनुसार औषधिको प्रयोग गरि रहनु होस ।



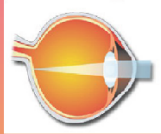
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चरमा लगाउनु पर्ने अवस्था

कुनै पनि बस्तुबाट आएका प्रकाशका किरणहरू दृष्टि पर्दा (Retina) मा केन्द्रित नभई, पर्दा भन्दा अगाडी वा पछाडी केन्द्रित भएर वस्तु स्पष्ट नदेखिने अवस्था चश्मा लगाउनु पर्ने अवस्था (Refractive Error) हो ।



सामान्य बबस्था (Normal)
प्रकाशका किरणहरू दृष्टि पर्दामा
केन्द्रित भएको



बदूर दृष्टि (Myopia)
प्रकाशका किरणहरू दृष्टि पर्दा भन्दा
अगाडी केन्द्रित भएको



दूर दृष्टि (Hypermetropia)
प्रकाशका किरणहरू दृष्टि पर्दा भन्दा
पछाडी केन्द्रित भएको



आँखा उपचार केन्द्र वा अस्पतालमा जाँच
गराई आवश्यकता अनुसार चश्माको प्रयोगले
सामान्य देख्न सक्ने बन्न सकिन्छ ।



थप जानकारी तथा उपचारको लागि:

नेपाल नेत्र ज्योति संघ

गेटा आँखा अस्पताल वा नजिकको आँखा उपचार केन्द्रमा सम्पर्क राख्नुहोला

12. Abbreviations used:

RAAB:	Rapid Assessment of Avoidable Blindness
GEH:	Geta Eye Hospital
ECC:	Eye Care Center
COE:	Centre of Excellence
QOC:	Quality of Care
NNJS:	Nepal Netrajyoti Sangh
OPD:	Out Patient Department
TPK:	Therapeutic penetrating keratoplasty
PERFECT:	Pterygium Extended Removal Followed by Extended Conjunctival Transplant.
EDTA:	Ethylenediamine tetraacetic acid.
VR:	Vitreo- Retina
DST:	Diagnostic Screening and Treatment
ARMD:	Age Related Macular Degeneration
EVI:	Early Visual Impairment
MVI:	Moderate Visual Impairment
SVI:	Severe Visual Impairment
VA:	Visual Acuity
CNS:	Central Nervous System
SICS:	Small Incision Cataract Surgery
FCHV:	Female Community Health Volunteer

GETA:
Get Eye Treatment Accurately



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GETA EYE HOSPITAL

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