Comparison of new glaucoma referrals to a tertiary eye centre before and during COVID-19: Volume remains, but does the quality?

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INTRODUCTION

COVID-19 has presented several challenges to health services across the globe, and these have not been any different to ophthalmology departments. Ocular pathology naturally continued to remain prevalent in patients during the pandemic as were the referrals from the community to the hospital eye service. It was our impression that during the pandemic, when compared to pre-pandemic times, the quality of optometry referrals could have been impacted negatively for reasons which are yet unclear. We therefore carried out a study to look at new glaucoma referrals to the hospital eye service before COVID-19 hit, and compared them with the same period, a year later during the pandemic.

PURPOSE

To evaluate the correlation between the quality of community optometry referrals of patients with suspected glaucoma to our unit and the NICE CG81 guidance recommendations.

METHOD

Referrals from community optometrists to the glaucoma unit at James Cook University Hospital in Middlesbrough from September to December 2020, and those from October to December 2019 were evaluated retrospectively. All information from these referrals were collated including visual acuity, intraocular pressure and method used, cup-to-disc ratio, and visual field analysis. This data was then compared to the NICE CG81 guidelines published in 2017.

RESULTS

Between September and December 2019, there were a total of 1731 routine referrals to the Ophthalmology department, of which 12% (n=202) were glaucoma referrals. The total number of referrals between October and December 2020 was 654, of which 245 represent 38% of the total number of referrals. The percentage of rejected referrals in the 2019 time period was 0% while that in 2020 was 48%.

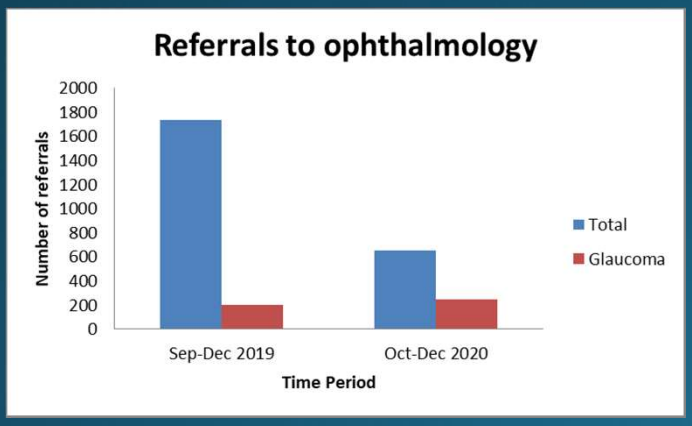


Figure 1

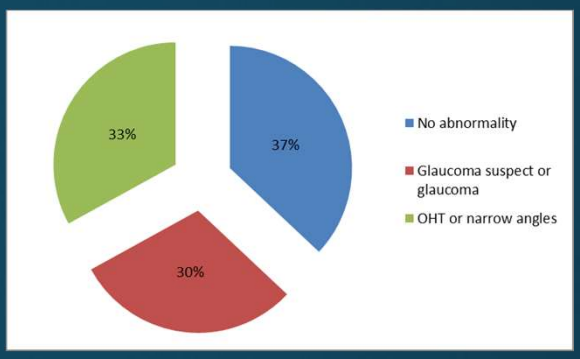


Figure 2

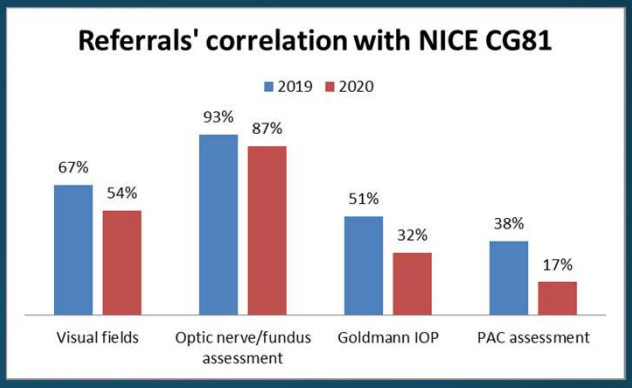


Figure 3

CONCLUSION

Our data reveals that most optometrists used non-contact tonometry when measuring intraocular pressure. The main reason for referral cited was raised intraocular pressure, of which just under 50% had no other features of glaucoma. Approximately one third of referred patients were not found to have glaucoma. Another third were found to be glaucoma suspects or have been diagnosed with glaucoma. The remainder of patients were diagnosed with ocular hypertension or narrow angles requiring treatment.

A large proportion of referrals to an already oversubscribed department can be reduced or monitored in the community. Due to the impact of COVID19, the number of general referrals to our Ophthalmology department has reduced from 1731 to 654, however, the actual number of glaucoma referrals has increased from 202 to 254. This highlights the need for a more efficient system to see patients referred with potential glaucoma from the community. Our results show that despite the onset of the pandemic, glaucoma remains one of the most sought after hospital service in the eye unit.

Our recommendations would be to encourage the use of contact tonometry with repeated measurements as per guidelines to ensure an accurate reading is being taken. In addition, we also will be initiating a feedback system to each referrer as we believe this will play a role in improving the quality of referrals in the future.