# Diabetic retinopathy screening comparative study interdisciplinary model involving primary care doctors vs single expert observer

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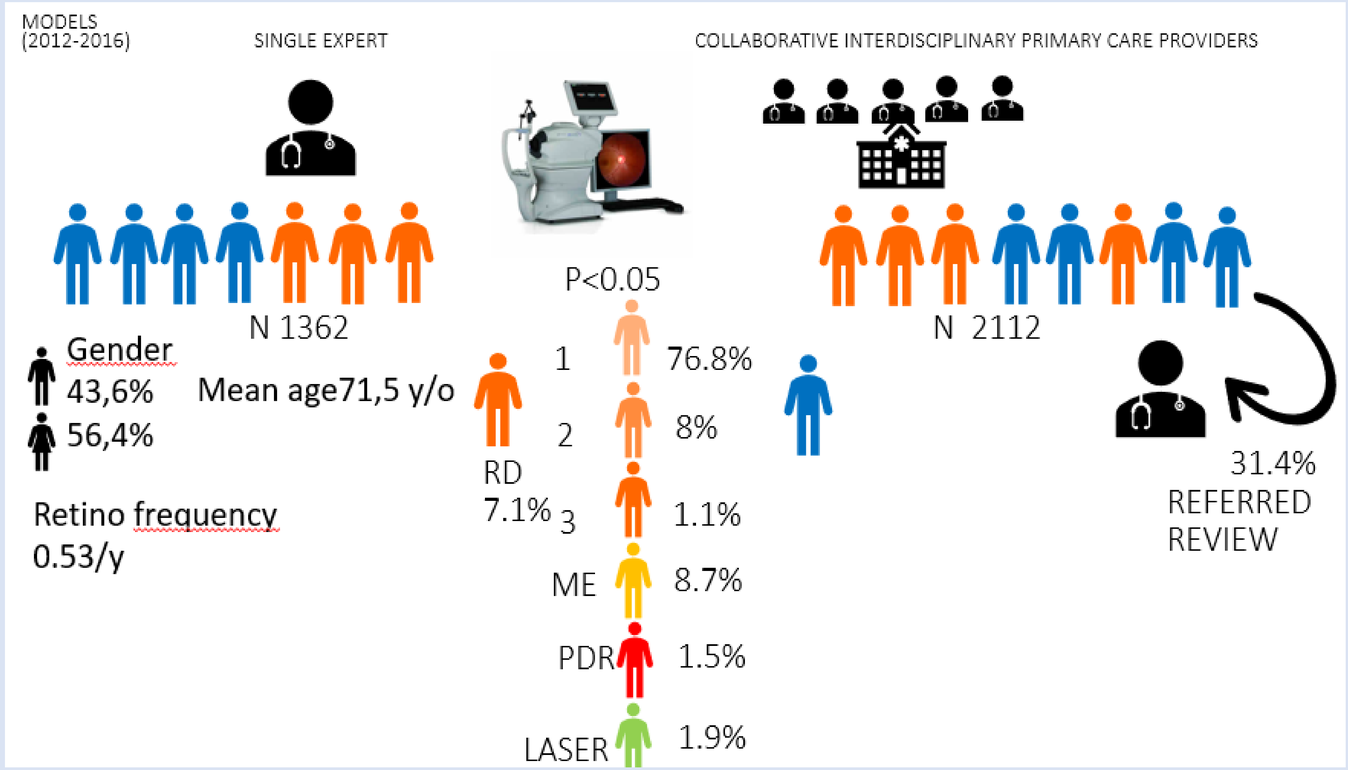
Currently the preferrable diabetic retinopathy screening model is retinography, on other hand It has been demonstrated that in early stages, one of the most important factors is a tight metabolic control. For these reasons it would be desiderable that primary care providers were part of the screening programs offering a complete and close management of their pathology.

The objective of the present observational study is to compare if collaborative model involving primary care doctors is as effective as single expert model evaluating diabetic retinopathy.

We designed two diabetic retinopathy screening models.

- **SINGLE EXPERT MODEL**, one expert review all retinographies (N2112)
- **COLLABORATIVE MODEL** Well-trained doctors staff from a primary care center review all the retinographies (N1362)

In both models one retinography 30º centrated on the macula is taken with non-mydriatic camera for each eye and if pathology was suspected it was sent to a referral ophthalmologist




- In conclusion the collaborative system with primary care doctors is as efffective as one observer expert model

- There are not significative differences detecting diabetic retinopathy, even analyzing separately different groups according to retinopathy grades.

- This system let to primary care doctors a more complete and closer control of their patients.