MEDIA RELEASE

EMBARGOED UNTIL 7:00PM 7 October 2014

7 October 2014

An Eye Screening Program to Stop Australians Unnecessarily Going Blind from Diabetes

Diabetes is the leading cause of blindness in Australians yet only 50 per cent of non-Indigenous and 20 per cent of Indigenous Australians with diabetes are having their eyes regularly tested, and this has not changed over the past decade.

All people with diabetes are at risk of vision loss but most is preventable with timely access to eye checks and treatments. It is essential to substantially increase access to eye checks and treatments for Australians with diabetes to avoid unnecessary blindness and vision impairment.

The Centre for Eye Research Australia (CERA), Diabetes Australia and Baker IDI Heart and Diabetes Institute are planning to develop a coordinated and integrated diabetes eye screening system for Australia to reduce the number of people with diabetes developing vision impairment and blindness.

These partners are hosting a visiting expert, Professor Peter Scanlon, who is the Founder and Clinical Director of the successful English National Diabetic Retinopathy Program.

Diabetes is no longer the leading cause of blindness in the UK, and this has been attributed to the introduction of an integrated screening program. Australia currently has no organised system for diabetes eye screening and is lagging behind the UK and other countries such as Denmark, Sweden, Ireland, and Iceland which have national diabetes eye screening programs.

“Over 1.1 million Australians have been diagnosed with diabetes and are already voluntarily registered on the National Diabetes Services Scheme and that number is expected to significantly increase within the next decade,” CERA Principal Investigator, Dr Mo Dirani said.

“The situation is worse for Indigenous Australians with the prevalence of diabetes much higher in those communities. We must ensure that we have a national system to coordinate access to eye checks and monitor outcomes for all Australians with diabetes to decrease the risk of avoidable blindness.

“Early detection and timely treatment is the only way to prevent the majority of diabetes-related vision loss.”

CERA Principal Investigator, Dr Peter van Wijngaarden said it’s a tragedy that so many Australians with diabetes have been affected by vision loss when much of this could have been avoided.

“Many Australians are being failed by the current ad hoc approach to eye examinations,” Dr Van Wijngaarden said.
“Following the introduction of a screening program in England there was a 30 per cent drop in the rate of blindness caused by diabetes,” Professor Scanlon said.

“From my experience, a diabetes eye screening program is the simplest and most cost effective way to save people’s sight with diabetes and ease the burden on the health system using processes already in place.

“The data is there to show screening programs work, and I applaud CERA, Diabetes Australia and Baker IDI for addressing the gap in eye health care by developing a plan for coordinating, implementing and evaluating a national approach for screening diabetic eye disease.”

Professor Scanlon will visit Melbourne and Canberra to meet with Australian experts on diabetes, eye health, information technology and health economics to ensure the proposed screening program is optimised for the Australian healthcare environment.

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For more information or to arrange an interview, please contact Cameron Williams on cameron.williams@unimelb.edu.au or 03 9929 8426 or 0401 814 767.

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