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DIABETIC RETINOPATHY SCREENING: DATA FROM A NEW CENTRE

Oral

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Purpose:

to introduce the new screening programme adopted by ASL Città di Torino. To highlight the prevalence and the severity of diabetic retinopathy (DR) in the diabetic population living in Torino. To relate systemic factors and the time since last ophthalmology visit to DR severity.

Methods:

observational study carried out at the new ophthalmologist centre for screening and treatment of DR in Ospedale Oftalmico di Torino since September 2021. The study was conducted in collaboration with the Diabetology Service. Systemic and anamnestic data were collected by the program Smart Digital Clinic used by diabetologists. Records about previous eye visits and treatments were collected .

During eye examination patients underwent slit lamp anterior and posterior examination, BCVA evaluation (LogMar), OCT evaluation (Heidelberg Spectralis OCT).

We assessed demographic and prevalence data, severity grading by ETDRS (Early Treatment Diabetic Retinopathy Study) classification and its correlation with systemic factors, treatments prescribed.

Results:

277 patients were enrolled, 15.52% affected by DM type 1.

The mean DM duration was 15,7 ($\pm 11,33$) years, 2.5(± 1.92) the years from the last eye visit, 51,99% the prevalence of related systemic comorbidities (25,27% hypertension, 19,86% coronary artery disease, 9,03% chronic renal insufficiency). At presentation BCVA was 0.15(± 0.5)LogMar, 2.17% patients showed new vessels, 1.08% hemorrhagic vitreous, 6.5% epiretinal membrane; 35,38% cataract; 3,25% had positive history for previous antiVEGF injections, 1,08% for Dexhametasone injection.

Study population showed: 41,52% no sign of DR, 26.35% mild DR, 13% moderate, 2,17% severe, 4.33% proliferative DR, 15.52% diabetic maculopathy ; 4.69% patients received antiVEGF injections, 1.44% Dexhametasone injection, 4.69% laser treatment.

Conclusions:

to improve screening uptake a strict collaboration with diabetologists is demanded. The employment of computer programs shared with other specialists helps a whole management of diabetic patients. A DR screening eye program allows to detect other eye diseases related to the diabetes which can be treated earlier with better outcomes.