

## ABSTRACT

TITLE OF THE ABSTRACT : Prevalence of ocular morbidity in children aged 15 years or younger in tribal area of Jawadhi hills, South India, a cross sectional study

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Aim: To determine the prevalence of ocular morbidity in tribal children 15 years or younger, in Jawadhi hills, Southern India.

Methods: A population based cross sectional study was done in four villages examine 260 children less than 15 years of age. Ocular Morbidity was defined as an abnormality in any of the ocular structures, which may or may not be visually significant and which may or may not require / improve with treatment. All the children were examined by an ophthalmologist for anterior segment and fundus changes and trained team of optometrist assessed vision, best corrected visual acuity wherever possible and wet refraction . Children requiring cycloplegic refraction and further management were referred to Schell eye hospital, Vellore.

Results: The prevalence of ocular morbidity was 10.8% (95% confidence interval (CI) 6.3 to 13.7). Vitamin A deficiency was the foremost morbidity 4.6% (95% CI,1.6-6.3) followed by refractive error (2.7%), episcleritis (0.8%), lid injuries (0.8%), strabismus (0.8%) and retinitis pigmentosa (0.4%).

Conclusion: Nearly 1 in 10 children suffer from ocular morbidity and 1 in 57 has either low vision or blindness. Vitamin A deficiency is the foremost ocular morbidity and a public health crisis which requires immediate intervention with prophylaxis and treatment. Second most common morbidity is refractive error. This strengthens the need for school eye screening program in this region and development of specialised health care services in tribal population.

Keywords : Ocular Morbidity, Vitamin A deficiency, Tribal population, Childhood blindness.