Test your knowledge and understanding

This page is designed to help you test your own understanding of the concepts covered in this issue, and to reflect on what you have learnt. We hope that you will also discuss the questions with your colleagues and other members of the eye care team, perhaps in a journal club. To complete the activities online – and get instant feedback – please visit www.cehjournal.org.

1. Consider diabetes and its link to diabetic retinopathy. Which statement is correct?
   - **Select one**

   a. Diabetes kills fewer people than TB and HIV
   - b. The risk of developing type 2 diabetes can be reduced by keeping to a healthy weight, taking regular exercise and minimising sugar intake
   - c. Once diabetic retinopathy occurs, the patient will inevitably go blind
   - d. If a patient has diabetic retinopathy, they are usually aware of it

2. Consider diabetic retinopathy in individual patients. Which statement is correct?
   - **Select one**

   a. Diabetic retinopathy (DR) affects only people with high blood pressure
   - b. If a patient’s diabetes and blood sugar levels are well controlled, there is no risk of DR
   - c. Laser treatment will improve vision in people with DR
   - d. The risk of blindness from DR can be avoided if patients attend hospital appointments as required and accept treatment

3. Consider diabetic eye disease as a public health problem. Which statement is correct?
   - **Select one**

   a. Blindness from diabetic retinopathy can be prevented by a screening programme
   - b. Blindness from diabetic retinopathy is mostly linked with patients unable to afford services
   - c. The risk of blindness from diabetic retinopathy can be reduced through early detection and treatment
   - d. Blindness from diabetic retinopathy occurs mostly in high-income countries

4. Consider the prevention of diabetic eye disease in your district. Which of the following is essential?
   - **Select one**

   a. Good links with other health workers involved in caring for patients with diabetes (e.g., physicians, diabetes nurses)
   - b. A community-based survey to determine the number of people with diabetes in your country
   - c. A national diabetic retinopathy screening programme
   - d. Enough ophthalmologists to examine every patient with diabetes at least once every year

ANSWERS

Q1. Which of the following is essential?
   - a. The support of other health workers is essential.
   - b. The risk cannot be abolished by a healthy lifestyle, but it can be greatly reduced.
   - c. Diabetes kills more people than TB, malaria, and HIV put together. If diabetic retinopathy is diagnosed and treated promptly, blindness can be prevented in almost all cases. Diabetic retinopathy is usually asymptomatic in its early stages.
   - d. Enough ophthalmologists to examine every patient with diabetes at least once every year

Q2. Which of the following clinical signs are present?
   - a. Retinal “cotton wool spots”
   - b. Neovascularisation of the retina
   - c. Retinal haemorrhages
   - d. Laser treatment will improve vision in people with DR
   - e. Retinal “cotton wool spots”

Q3. Which treatments might be useful in managing this condition?
   - a. Pattern laser treatment to the macular area
   - b. Peripheral retinal photocoagulation
   - c. Investigation of papilloedema
   - d. Anti-vascular endothelial growth factor intra-vitreal injections

ANSWERS

Q1. a. Papilloedema due to a brain tumour
   - b. Proliferative diabetic retinopathy
   - c. Hypertensive retinopathy
   - d. Coat’s disease
   - e. Non-proliferative diabetic retinopathy

Q2. a. Vitreous haemorrhage
   - b. Neovascularisation of the retina
   - c. Retinal haemorrhages
   - d. Retinal hard exudates
   - e. Retinal “cotton wool spots”

Q3. a. Laser treatment to the macular area
   - b. Peripheral retinal photocoagulation
   - c. Investigation of papilloedema
   - d. Watch and review in 3 months
   - e. Anti-vascular endothelial growth factor intra-vitreal injections

REFLECTIVE LEARNING

Visit www.cehjournal.org to complete the online ‘Time to reflect’ section.