



**UK National Screening Committee
Screening for Glaucoma - an evidence review**

Consultation comments pro-forma

Name:	Cindy Tromans	Email address:	Jo.mullin@college-optometrists.org
Organisation (if appropriate):	College of Optometrists		
Role:	Board Chair		
<p>Do you consent to your name being published on the UK NSC website alongside your response?</p> <p align="center">Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p>			
Section and / or page number	Text or issue to which comments relate	Comment	
		<i>Please use a new row for each comment and add extra rows as required.</i>	
Para 10	The condition should be an important health problem.	Agree. It is important that people attend for eye examinations, as case detection is an important way of finding glaucoma. Repeat measures and referral refinement schemes are also important. Please remember that the system is different in the four	

		<p>countries. In Scotland, for example, there are crucial differences in the eye examination, the skill levels that are used in "routine" everyday GOS appointments and the funding mechanisms / remuneration. Additionally</p> <ul style="list-style-type: none"> • SIGN is different from NICE • The GOS arrangements in Scotland are different • Eye exams, skill levels, equipment and <u>the IT link</u> are different <p>The skill level of an optometrist in Scotland is the same as the rest of the UK; it is only that in Scotland they are contracted to do more and use the full range of skills we all have.</p>
Para 85		<p>We agree that it is unclear which, if any, of the tests for glaucoma considered would be suitable for a population screening programme. However, it is important to remember that community optometrists have an important role in opportunistic case finding for glaucoma, using a battery of tests including repeat measures and referral refinement. The lack of evidence surrounding the benefit of a screening programme should not detract from the important work done by community optometrists in opportunistic case finding for glaucoma which is – in its early stages - asymptomatic.</p> <p>In opportunistic case finding for glaucoma, using the traditional battery of tests of van herick, disc assessment,</p>

		visual fields and measurement of Intraocular pressures, repeat measures (core competency) and referral refinement (often requiring additional skills) are contractual arrangements in England, but are part of the core contracts in Scotland and Wales.
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Please return to Adrian Byrtus (Evidence Review & Policy Development Manager) adrian.byrtus@nhs.net by **11th September 2015**