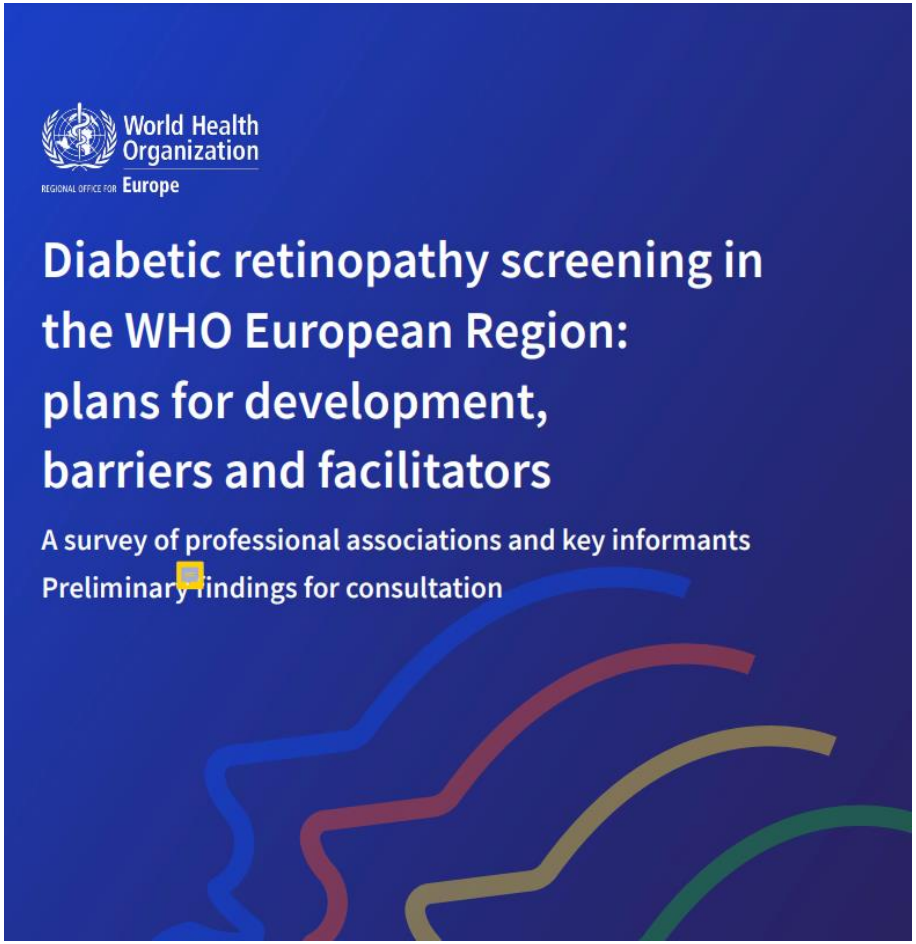
Breakout rooms addressed main areas of concern from the survey



World Health Organization
REGIONAL OFFICE FOR Europe

Diabetic retinopathy screening in the WHO European Region: plans for development, barriers and facilitators

A survey of professional associations and key informants

Preliminary findings for consultation

1. Producing guidelines and ensuring engagement from patient groups and policy makers
2. diabetes registers/electronic patient databases were needed to develop and manage successful DR screening programmes
3. Linking screening and treatment

Room 1: Producing guidelines and ensuring engagement from patient groups and policy makers

Facilitators: Jurate Balciuniene (Lithuania) / Simon Harding (England)

Scribes:

Dr Katie Curran

Dr Emma Pons

Feedback:

Dr Sue Coher

Producing guidelines and ensuring engagement from patient groups and policy makers

- Producing guidelines- these need to adapted to suit local healthcare system
- Ensuring engagement from patient groups and policy makers
  - Create local groups of other healthcare professionals and patients- think about primary care

Key message to policy makers

Emphasise the economic benefit of screening

<u>Room 2</u>: Patient registers and the diabetic retinopathy pathway

Facilitators: Dr Caroline Styles (Scotland) and Dr Irini Chatziralli (Greece)

Scribes:

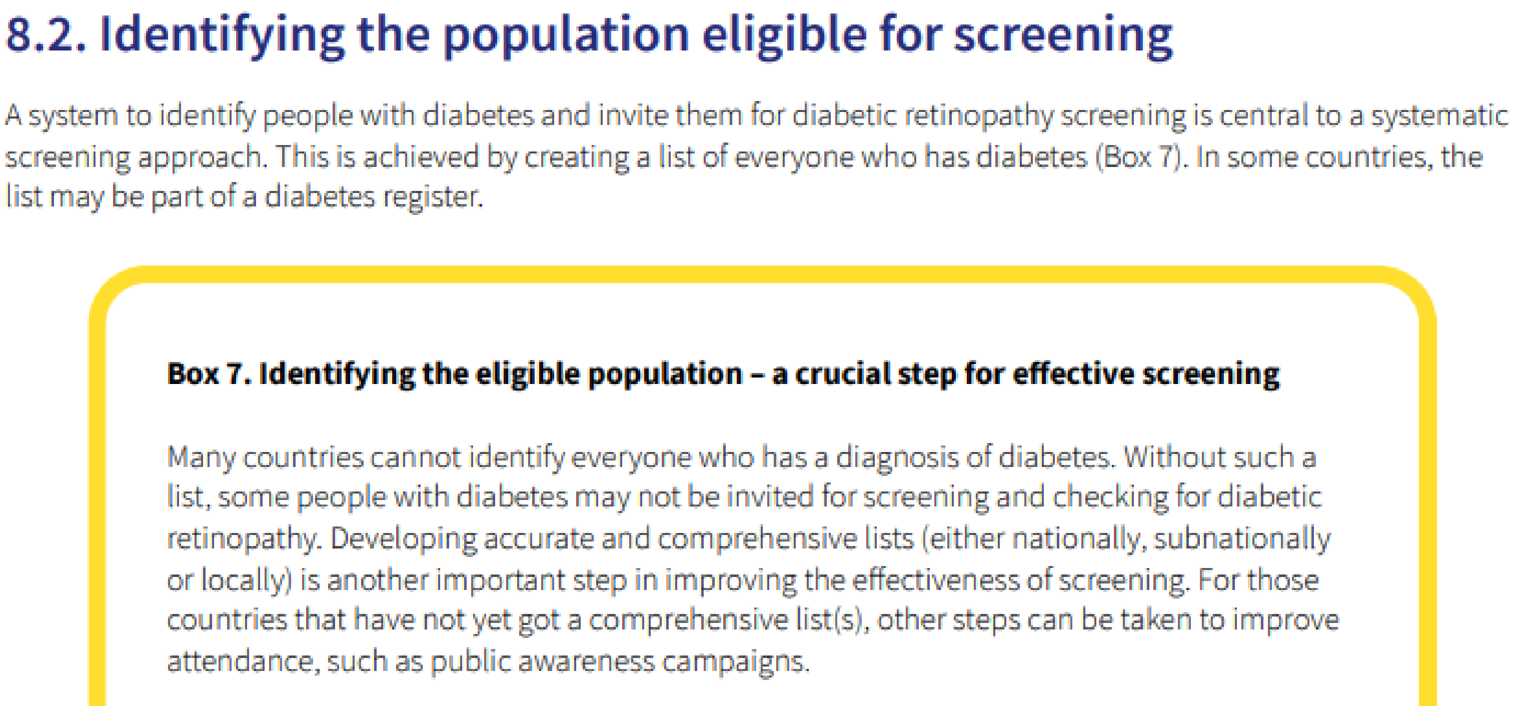
Dr Recivall Salongcay

Ms Linsey Scott

Feedback:

Dr Maria Niskopoulou

Patient register for the diabetic eye pathway

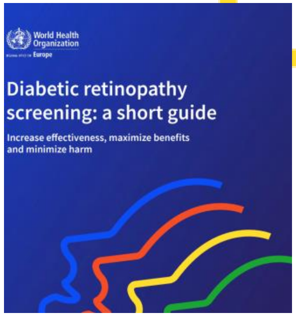


8.2. Identifying the population eligible for screening

A system to identify people with diabetes and invite them for diabetic retinopathy screening is central to a systematic screening approach. This is achieved by creating a list of everyone who has diabetes (Box 7). In some countries, the list may be part of a diabetes register.

Box 7. Identifying the eligible population – a crucial step for effective screening

Many countries cannot identify everyone who has a diagnosis of diabetes. Without such a list, some people with diabetes may not be invited for screening and checking for diabetic retinopathy. Developing accurate and comprehensive lists (either nationally, subnationally or locally) is another important step in improving the effectiveness of screening. For those countries that have not yet got a comprehensive list(s), other steps can be taken to improve attendance, such as public awareness campaigns.



World Health Organization
Europe

Diabetic retinopathy screening: a short guide

Increase effectiveness, maximize benefits and minimize harm

Learning

If there is no national electronic register;

- Collaboration with other healthcare professionals is important
  - to ensure screening pathway is advertised to maximum number of patients
  - To advocate for more complete national register
- Public awareness campaigns
  - Empower people with diabetes to access screening

Room 3: How do we link screening and treatment pathways in order to reduce the risk of blindness?

Facilitators: Dr Deborah Broadbent (England) / Professor David Keegan (Ireland)

Scribes:

Dr Prabhath Piyasena

Ms Ieva Janiskeviciute

Feedback:

Professor David Keegan

How do we link screening and treatment?

- Learn from other countries mistakes!
- Establish treatment quality standards
- Need outcome data
- Collaboration
  - Administrators
  - diabetologists


TEAM