

Screening for Diabetic Retinopathy in Europe

Impact of New Technologies

Links to systemic care
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Points for discussion



1. **Has there been an unintended consequence of the introduction of systematic screening?**
 - Can screening for DR become “remote” for diabetes care teams as the process is taking place entirely away from the diabetes clinic?
 - Is the same happening also with GPs?
 - Are diabetologists/GPs losing their skills with fundus examination?
 - Have they ever had any? (UK, elsewhere)

Points for discussion



2. What is the role of the diabetologist in screening?

3. What is the role of the primary care physician in screening?

In countries with systematic screening (eg. UK) their roles may paradoxically decrease, as the whole process is removed from their offices.

The situation is obviously different in those countries (the vast majority) where there is no systematic screening in place:

- do they play a role in those countries?
- do they really **wish** to play a role?

Points for discussion

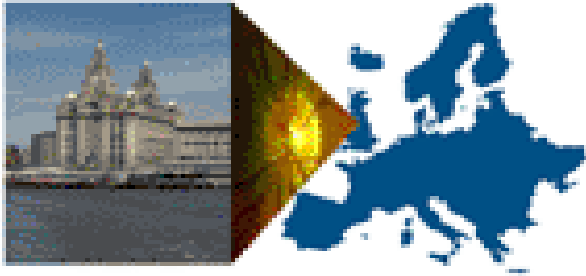


4. How do we implement multidisciplinary care for patients with diabetic retinopathy?

What about interdisciplinary communication?

Who should manage situations at risk:

- Poorly controlled patients who do not attend screening?
- Rapid improvement of HbA1c in patients with DR?
- Correcting glycaemic control in patients undergoing treatment for DR?
- Evaluating risk factors for patients receiving intra-vitreal agents?
- Other points for interdisciplinarity?



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We would very much like to hear from you!

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