

Population: 4.8 million (2016)

Percentage of older people: 9% over the age of 65 years old, which is expected to rise to 24% by 2050

Diabetes: 278,900 people living with the condition with an estimated 111,700 undiagnosed cases

The DR Barometer, a ground-breaking global study, has highlighted the urgent need to prevent unnecessary vision loss caused by diabetic retinopathy. To help facilitate regional and country-level actions on this issue, the International Federation on Ageing (IFA) hosted the Diabetic Retinopathy (DR) Barometer Latin American Advocacy Workshop on 6-7 April, 2018 in Mexico City, Mexico in partnership with the International Agency for the Prevention of Blindness (IAPB), the International Diabetes Federation (IDF) and Bayer AG.

The workshop brought together 46 delegates from Argentina, Brazil, Chile, Colombia, Costa Rica, and Mexico across many disciplines (patients, ophthalmologists, diabetes specialists, primary care providers, diabetes educators, governments, and industry) to work together to determine solutions for improving care pathways that lead to improved vision health outcomes for adult with diabetes in the region.

This “Viewpoint” outlines the country-specific strategies from Costa Rican working group to improve patient outcomes at a local level.

Goal:

To achieve better results for people with diabetic retinopathy (DR) and diabetic macular edema (DME) through better screening and optimizing access to treatments.

Barriers that need to be addressed:

1. Lack of education about the referral process among primary health care professionals.
2. Poorly designed and incentivized telemedicine programme.
3. Inadequate financing of screening programme, inhibiting access to treatment.

Key stakeholders of the working group:

Collaboration through a common strategic direction of all interdisciplinary stakeholders (patients, ophthalmologists, diabetes specialists, primary care providers, diabetes educators, governments, and industry) is essential to address barriers toward effective management of DR. Institutionally these also include:

- Costa Rica Social Security Institution (Caja Costarricense del Seguro Social)
- National society of primary health care professionals (Asociación Costarricense de Especialistas en Medicina Familiar y Comunitaria)
- Diabetes and vision health specialists (Asociados de Macula Vitreo y Retina de Costa Rica)

Objective the working group:

Education: Educate primary health professionals about DR within diabetes management by engaging with the national college of primary care professionals.

Next steps:

1. Convene a symposium for primary health care providers to provide education about DR and how to address it in their practice by April 2019.
2. Identify additional stakeholders to become involve in advocacy work.
3. Communicate and establish a relationship with the existing telemedicine network coordinator.

Resources

A designated coordinator for the symposium has been identified, however financial incentive to continue work is needed.

Advocacy efforts could benefit from gathering epidemiological evidence, including cost-effectiveness, with local and international perspectives.

To learn more or join the DR Barometer Costa Rican Working Group, contact:

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Go to www.drbarometer.com to join the DR Barometer Community today.