

Knowledge of Glaucoma Management Among Glaucoma Patients on Medical Therapy in a Tertiary Hospital

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Introduction: Glaucoma is the leading cause of irreversible blindness and the second leading cause of blindness globally^{1, 2}. As a result of this, there is the need to adopt strategies that will improve the awareness among the population at risk and effectively manage the identified cases thereby preventing glaucoma blindness. One of the factors that improve the level of compliance in glaucoma patients is health education³. Educating the patient, simplifying treatment regimens, involving care-providers and customization to the patient's lifestyle had been shown to improve compliance⁴. The aim of this study is to determine the level of knowledge of glaucoma management among glaucoma patients on medical therapy attending Bowen University Teaching Hospital (BUTH) Ogbomoso.

Methods: The study was a descriptive hospital based cross-sectional study which was conducted at the eye clinic of BUTH Ogbomoso Oyo-State. Ethical approval was obtained from BUTH institutional ethical review committee. One hundred and eighty patients with primary open angle glaucoma (POAG) aged 40 years and above participated in this study. Semi-structured questionnaire was used to obtain socio-demographic data, medical history and patient's knowledge about glaucoma management. Data was analyzed using the Statistical Package for Social Sciences (SPSS) software version 21. Level of statistical significance was set at p-value <0.05.

Results: The mean age of the patients was 67.9 ± 10.5 years. The median age was 69years (range 40 to 85years). About two-fifth (40%) of the patients were between the ages of 60 – 69 years. There were 98 (54.4%) males and 82 (45.6%) females with male to female ratio of 1.2: 1. Majority of the patients 70 (38.9%) had been on anti-glaucoma medication for more than five years. Only 18 (10%) patients knew the purpose of glaucoma treatment as shown in figure 1. Good knowledge about the symptoms and risk factors was demonstrated in 108(60%) of patients and 103 (57.2%) patients had good knowledge of investigations for glaucoma. Less than half 87 (48.3%) of the patients were able to recall the names of the anti-glaucoma medications they were presently using. The attending doctor was the source of knowledge about glaucoma management in 174(96.7%) of the patients. Age, marital status, educational level and occupation of respondents were statistically significant characteristics associated with knowledge of the purpose of glaucoma management.

Discussion: Our study shows that most patients had poor knowledge of the purpose of glaucoma management. This was similar to the finding from a study⁵ in northern Nigeria where only 17% of the respondents had good knowledge of glaucoma. Our study noted that younger individuals, widowhood, having no formal education and being an unskilled worker were associated with poor knowledge of glaucoma among patients. This was similar to findings of a study which reported low educational level and low socioeconomic status as factors associated with poor knowledge among glaucoma patients⁵. Ophthalmologists should put together series of health education programs targeted at ensuring that glaucoma patients have good understanding

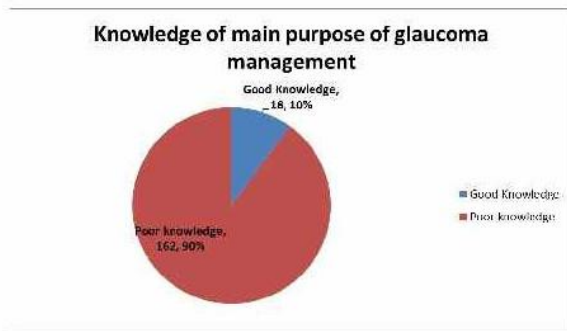


Fig.1: Knowledge of main purpose of glaucoma management

of the purpose of their disease management. Glaucoma counselling unit should be established in BUTH Ogbomoso Oyo-State, Nigeria.

References

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