participants. This is in keeping with the results of previous studies done in Nigeria which found an association between uncorrected presbyopia and decreased vision-related quality of life.6

Conclusion: Presbyopic correction improved the vision related quality of life. The fact that more than half (52.5%) in this cohort of teachers either had no reading glasses at all or had inappropriate corrections underscores the acute need to improve on optometric care in under-served settings such as Nigeria.

Keywords: Presbyopia, Vision -related quality of life, Teachers

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Prevalence of eye disorders and awareness of glaucoma among workers in a mission hospital in southwest Nigeria

Akinsola Aina^{1,2} and Michaeline Isawumi^{1,2,3}

¹Department of Surgery, Bowen University Iwo, Osun State, Nigeria.

²Department of Surgery, Bowen University Teaching Hospital Ogbomoso, Oyo-State.

³Department of Surgery, Osun State University Osogbo, Osun state. Nigeria.

Corresponding author: Akinsola Aina, E-mail: akinsola.aina@bowen.edu.ng; +2348033907271

Introduction: Good vision is a vital aspect of any individual's daily activities, especially for those in the working population. It allows connection with the surroundings and improves the performance of daily tasks either at home or the workplace. Some eye disorders can lead to visual impairment in an individual if not detected early and appropriately managed. 1,2 This study aimed to determine the prevalence of eye disorders and evaluate awareness and knowledge about glaucoma among mission hospital workers in Bowen University Teaching Hospital (BUTH) Ogbomoso. This is to enable the introduction of appropriate interventions that are necessary to forestall visual impairment among hospital workers.

Methods: This is a cross-sectional study carried out among workers in BUTH Ogbomoso with an estimated population of seven hundred and forty (740). The study was carried out at the BUTH eye clinic during the ocular screening activities commemorating the year 2023 World Glaucoma Week program. Participants included both Health and Non-Health workers working presently in the hospital. A self-administered questionnaire was used to obtain information on awareness and knowledge of Glaucoma from all the consenting participants. Detailed ocular examination of the anterior and posterior segments was carried out using direct and or indirect ophthalmoscope by ophthalmologists. Intraocular pressures were measured with Perkins tonometer. Data was entered and analyzed by simple descriptive statistics using SPSS version 23.

Results: Four hundred and fifty-five (445) workers participated in this study. The mean age of the respondents was 41.8 ± 11.2 years. Majority (50.1%) of the respondents were middleaged (40-59 years). More than half of the

respondents (62.6%) were female. Majority (58.2%) had an eye disorder while the rest (41.8%) had essentially normal ocular findings (Table 1). About two-third of the study participants(60.8%)

Table 1:Distribution of the ocular diagnosis

Variables	Frequency	Percentage (%)
Normal	226	41.8
Presbyopia	150	27.7
Refractive Error (Distance Only)	64	11.8
Allergic Conjunctivitis	32	5.9
Immature Cataract	21	3.9
Chronic Glaucoma	12	2.2
Operable Cataract	7	1.3
Significant Pterygium	5	0.9
Squint	5	0.9
Corneal Opacity	3	1.3
Chorioretinal Scar	1	0.2
Others*	15	2.8

^{*}Others (Chalazion, Retinitis Pigmentosa, Age related Macular degeneration, Dry Eyes, Diabetic Retinopathy, Hypertensive retinopathy)

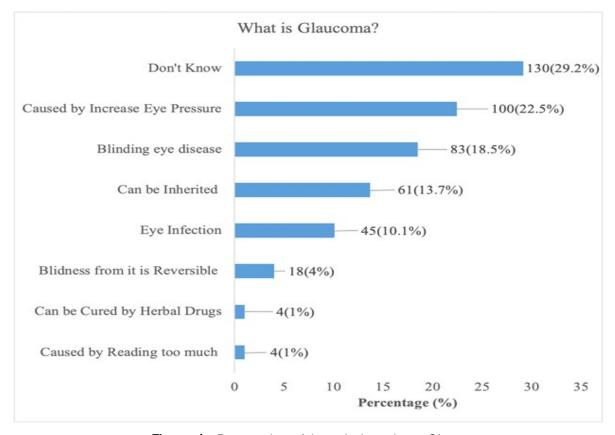


Figure 1: Respondents' knowledge about Glaucoma

were aware of Glaucoma. Their knowledge about Glaucoma is presented in Figure 1.

Discussion: The mean age of the respondents was similar to a study done in southwestern part of Nigeria where the mean age was $35.07 \pm$ 7.05years⁽³⁾. This reflects the age of workers' population in Nigeria.

Awareness of Glaucoma (60.8%) in this study was similar to the findings by Nkizor-Akaraiwe et al (65.5%)(4) but some studies found higher level of awareness of Glaucoma⁽⁵⁾. This might be because of the difference in the cohort of participants and their education level. However, the correct knowledge of Glaucoma was higher in this study(54.7%) compared to Nkizor-Akaraiwe et al(36.8%) study in southeastern Nigeria⁽⁴⁾. This might be because this study was done during the World Glaucoma week activities so the respondents were already sensitized about Glaucoma. A study done by Isawumi et al (6) in a rural community found a much lower level of awareness about Glaucoma compared to our study which was done in a sub-urban area.

The Refractive error (especially presbyopia) seen as the leading cause of ocular morbidity in this study was similar to several other studies such as was found by Senyoujo et al 7 and Ogbonnaya et al8.

In conclusion, awareness and knowledge of glaucoma among the participants is still low and Refractive error especially presbyopia remains a major cause of ocular morbidity among the working population such as the hospital workers. Health education strategies need to be instituted to improve the awareness and knowledge of Glaucoma among the health and non-health workers in the hospital.

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