

2018 ICEH Alumni Workshop - Presentation Summary

Name	Summary of alumni presentation	Challenges	Positive outcomes	Goals for the next 2-3 years
Egide Gisagara <i>Rwanda</i>	<ul style="list-style-type: none"> ACKNOWLEDGEMENT <ul style="list-style-type: none"> The Queen Elizabeth Diamond Jubilee Trust Fund International Students House ICEH staff Reported back to work:1/10/2017 Summer Project: Burden and situational analysis of Glaucoma services in Rwanda Need for capacity building Need for increase of glaucoma detection 	<ul style="list-style-type: none"> Changing mind-set of the existing workforce in eye care in Rwanda Competing priorities 	<ul style="list-style-type: none"> MSc. equipped me with knowledge and skills to tackle public health issues effectively 	<ul style="list-style-type: none"> Practice what I have learnt through: <ul style="list-style-type: none"> Teaching Publication Getting involved in eye care positive change interventions Glaucoma fellow if chance comes my way and get scholarship
Ian McCormick <i>Ireland</i>	<ul style="list-style-type: none"> MSc project: A review of spectacle compliance and its determinants in a school vision screening programme in Botswana 60% compliance compared favourably with two previous African studies Female sex, primary school age and binocular UCVA worse than 6/6 were factors predictive of compliance Prescribing protocol to manage false positive referrals and avoid low prescriptions should be in place Acknowledgement of LSHTM staff, Botswana stakeholders and funders including Hooper scholarship and Fiona's Eye Fund Description of current research assistant role at LSHTM intent to pursue further research 	<ul style="list-style-type: none"> Multi-tasking on four separate research projects Translating MSc project into article for peer review submission Analysis of some badly executed data collection 	<ul style="list-style-type: none"> Experience with collaborative writing for publication Further work with STATA New exposure to qualitative research 	<ul style="list-style-type: none"> Develop expertise in research methods – stats and epi for surveys, trials etc. Secure funding for PhD project
Kehinde Oladigbolu <i>Nigeria</i>	<ul style="list-style-type: none"> Visual outcome following posterior capsule rupture during manual small incision cataract surgery in 	<ul style="list-style-type: none"> Combining routine clinical and academic works with public health 	<ul style="list-style-type: none"> Knowledge gained has improved my teaching/training skills. 	<ul style="list-style-type: none"> Publish the findings of dissertation Carry out and promote quality research in the

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	<p>Kaduna, Nigeria - a case control study.</p> <ul style="list-style-type: none"> • Methods: Analytical, case controlled, hospital-based study. • Result: Participants with posterior capsular rupture (PCR) and >60 years of age were 7.0 and 1.4 times respectively, more likely to have poor visual outcome (<6/18) compared to others. • Acknowledgement of CSSS, BCPB, ICEH lecturers and management of LSHTM. 	<ul style="list-style-type: none"> • Getting support from stakeholders for rural eye care services • Scarcity and difficulty accessing research grants 	<ul style="list-style-type: none"> • Research and management skills for enhanced performance - concluded supervision of 2 ophthalmology residents' dissertations for the final fellowship award. • Partnership with stakeholders in promoting eye health education and services – ABU campus FM and rural health authorities. • Made new friends and developed wider network with people from other parts of the world. 	<p>university/hospital where I work</p> <ul style="list-style-type: none"> • Partner with stakeholders to establish sustainable rural eye care programmes • Involve in advocacy for quality eye care
<p>Robert Ewusi-Wilson <i>Ghana</i></p>	<ul style="list-style-type: none"> • Acknowledgement to BCPB, CSSS, Lecturers, ICEH staff • Summer Project: Benefits to NHS partners from the VISION 2020 LINKS programme. • 6 UK NHs partners were included in the study • Teams were made up of 8 ophthalmologists, 2 optometrists, 3 orthoptists and 2 registered nurses. • Teams visited four African countries namely Zambia, Malawi, Tanzania, and The Gambia. • More than half of them noted that they have had significant or slight improvement in the 6 dimensions namely communication, personal development, equality and diversity, service improvement, project management and developing leadership skills. 	<ul style="list-style-type: none"> • Combining clinical work and public health work 	<ul style="list-style-type: none"> • Networking with colleague and staff of ICEH • Gained new knowledge and skills to do research and plan for public health programmes 	<ul style="list-style-type: none"> • Planning to do a public health project to improve cataract surgical services uptake and a school screening programme • Do more research and look into doing a PhD

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<p>Shalinder Sabherwal <i>India</i></p>	<ul style="list-style-type: none"> • Acknowledgement to BCPB, CSSS, lecturers, ICEH staff • Reported back to work • Summer Project: Evaluation affirming eye care services in Jigawa State North-Western Nigeria. • Need for training, supportive supervision and supply for basic PEC. 	<ul style="list-style-type: none"> • Putting knowledge and skills into practice 	<ul style="list-style-type: none"> • Gained the knowledge and skills to implement eye care programme from the MSc • Networking with colleague and staff of ICEH • Summer project: presence of HS support to PEC 	<ul style="list-style-type: none"> • Complete residency programme • Involve in public health approach, opportunity gets to my way • Publish, do more research and look into doing PhD.
<p>Lila Puri <i>Nepal</i></p>	<ul style="list-style-type: none"> • Acknowledgement <ul style="list-style-type: none"> • Lieutenant-Colonel Henry Kirkpatrick Scholarship • Supervisor- Matthew Burton • Fellow colleagues • ICEH • LSHTM • LSHTM Trust Fund • Summer project: Microbial Keratitis in South East Nepal: Determinants of poor outcome and strategies to improve the outcome • Aim: To determine factors associated with a poor outcome from Microbial Keratitis (MK) in South East Nepal and make recommendations for community and hospital-based interventions to improve the outcome. • MK was most frequently seen in the young and productive age group • most people were involved in either farming or household work activities. • The most common predisposing factor was ocular trauma • Delay in presentation to the hospital was common findings 	<ul style="list-style-type: none"> • Human resource as it in remote area • Government, new structure • Finding time to pursue research amongst busy clinical/administrative responsibilities • Balancing clinical work in hospital and public health • 	<ul style="list-style-type: none"> • Research methodology training to residents and ophthalmologists. • DR proposal to Lions International which is approved- 200,000 USD • Fellowship curriculum development • Eye care center establishment- 2 • RAAB involvement – involved in planning • Drafting eye care road map in province 2 • Planning of CBR in one district as pilot project School eye health programme • Patient satisfaction survey at the hospital • Surgical audit to improve the surgical quality • Clinical Quality audit to improve the clinical services • Evaluation of services at 2 eye hospitals as a team member of evaluation team 	<ul style="list-style-type: none"> • Involve in 5-year corneal infection project – LSHTM and Lahan Eye Hospital • PEEK for School health programme • Combine public health for eye care with clinical ophthalmology • Strengthen research and community activities • Strengthen training programme clinical and community related • Involve in strategic planning •

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	<ul style="list-style-type: none">• Patient lack of accessibility to eye care service followed by lack of awareness about the disease, unavailability of eye care service, cost, visit to various places for the initial consultations and late referral, lack of awareness about eye hospital, lack of family support and faith on traditional healer were main barriers for early uptake of existing corneal services by patients.• approximately three- fourth of the total patients had visited places like local medical shop, government health center and traditional healers• Most of the patients 86(49%) were using antibiotic eye drops bought mostly from local medical store.38 (22%) patients were using steroid eye drops and 22(13%) were using TEMs.• fungal keratitis (48%)was more common than bacterial keratitis (22%)• From the 2016 data analysis, we found that 35% were blind in the affected eye and 42% had poor outcome. In the prospective study, 60% were blind in the affected eye at presentation, 57% had poor outcome at the end of 3 weeks follow up.• age, trauma (with vegetative matter), use of steroid and TEMs and delayed presentation were significant factors for the poor visual outcome as found in the			
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	<p>quantitative and qualitative results.</p> <ul style="list-style-type: none"> Public awareness about the disease, health promotion messages about eye protection in the workplace, improving the accessibility of the eye care services, improving the affordability and availability of the medicines (especially anti-fungal) and implementing occupational safety measures are other important interventions that can prevent MK and these were the suggestion put forward by MK patients during the IDIs and FGDs. 			
<p>Axelle Rigaudy <i>Switzerland</i></p>	<ul style="list-style-type: none"> MSc Project: Situational Analysis of Paediatric Tertiary Ophthalmology Facilities in African VISION 2020 LINKS Current Situation: Training to be an ophthalmologist in Future Plans: Continue ophthalmology with a public health approach Acknowledgment: Supervisors, classmate 	<ul style="list-style-type: none"> Having time to publish data Continue to have time to do research work within clinical work 	<ul style="list-style-type: none"> Networking with colleagues and staff Leadership skills Presented at the European paediatric ophthalmology conference 	<ul style="list-style-type: none"> Publish finding Continue public health work and research
<p>Mohammad Shalaby <i>Egypt</i></p>	<ul style="list-style-type: none"> MSc Project <ul style="list-style-type: none"> Acknowledgement Problem and Rationale Objectives Methods Key Findings Limitations Conclusion and Recommendations Life after the MSc <ul style="list-style-type: none"> Executive Director, Magrabi Foundation 	<p>Organizational</p> <ul style="list-style-type: none"> Change Management <ul style="list-style-type: none"> Internal Stakeholders External Stakeholders Board Development Effective communication of the Foundation's image <p>Personal</p> <ul style="list-style-type: none"> Work-Life Balance! 	<ul style="list-style-type: none"> Developed much deeper understanding of Public Health Orientation and started spreading the word out, internally and externally <ul style="list-style-type: none"> Team Building Build: Research Unit Strengthen and Restructure: Finance – Project Management Office 	<ul style="list-style-type: none"> MSc Project <ul style="list-style-type: none"> Acknowledgement Problem and Rationale Objectives Methods Key Findings Limitations Conclusion and Recommendations Life after the MSc <ul style="list-style-type: none"> Executive Director, Magrabi Foundation

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	<ul style="list-style-type: none"> • Organizational Health Check • Areas of Focus • Work in Progress • Main Challenges 		<ul style="list-style-type: none"> • Recruited: Professional Education and Training Manager – MarCom Team – Healthcare Operations Manager – Research Assistant • External Relations <ul style="list-style-type: none"> • IAPB Council of Members • WHO 16th meeting of the Regional Program Review Group (RPRG) on Lymphatic Filariasis elimination and other preventive chemotherapy programs • IAPB EMRO Meeting • EMR Regional Alliance on Trachoma Meeting • International and national external stakeholders • Projects <ul style="list-style-type: none"> • Ongoing: Egypt Institute for Community Ophthalmology (CBM) • Started: Community Eye Health Centers and Agents for Change (GIZ) – School Screening Pilot (CFLI) – Phaco Training (CBM) • In Progress : School Screening Program – RAAB 	<ul style="list-style-type: none"> • Organizational Health Check • Areas of Focus • Work in Progress • Main Challenges
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