

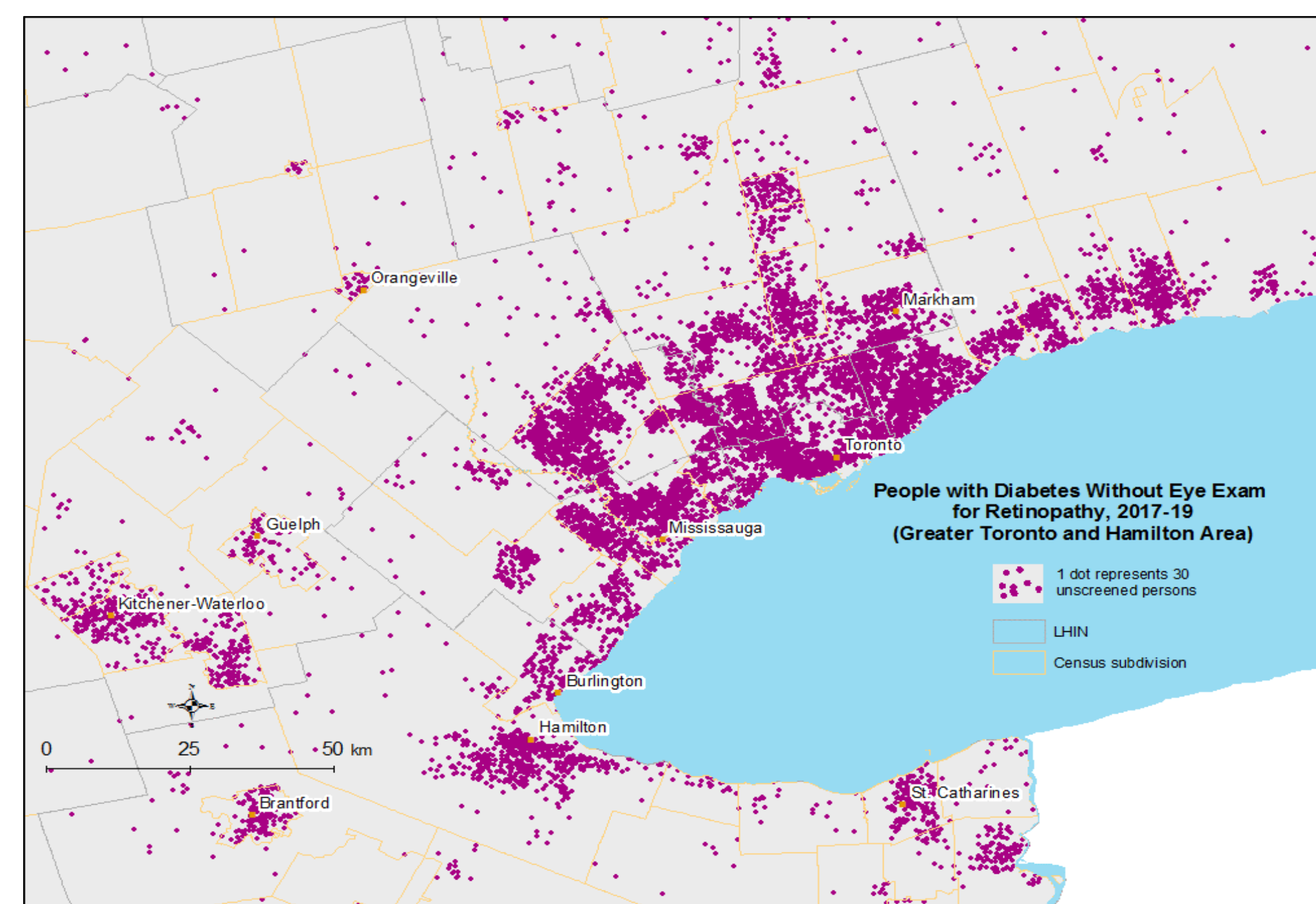
Increasing Diabetic Retinopathy Screening Rates Utilizing Provincial Healthcare Administrative Data

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Background

Diabetic Retinopathy (DR) is the leading cause of severe vision loss in working age Canadians. Despite all eye care resources, DR screening rates remain low.



Total number of people age >19 in Ontario living with Diabetes
1,346,578

DR Screening Status in Ontario*

Screened	Unscreened
N=891,551	N=455,027

*as of 01 Apr 2017 ICES project 2020 0900 645 001

New strategies are necessary to identify, engage, and provide ongoing monitoring to those requiring DR screening.

Methodology

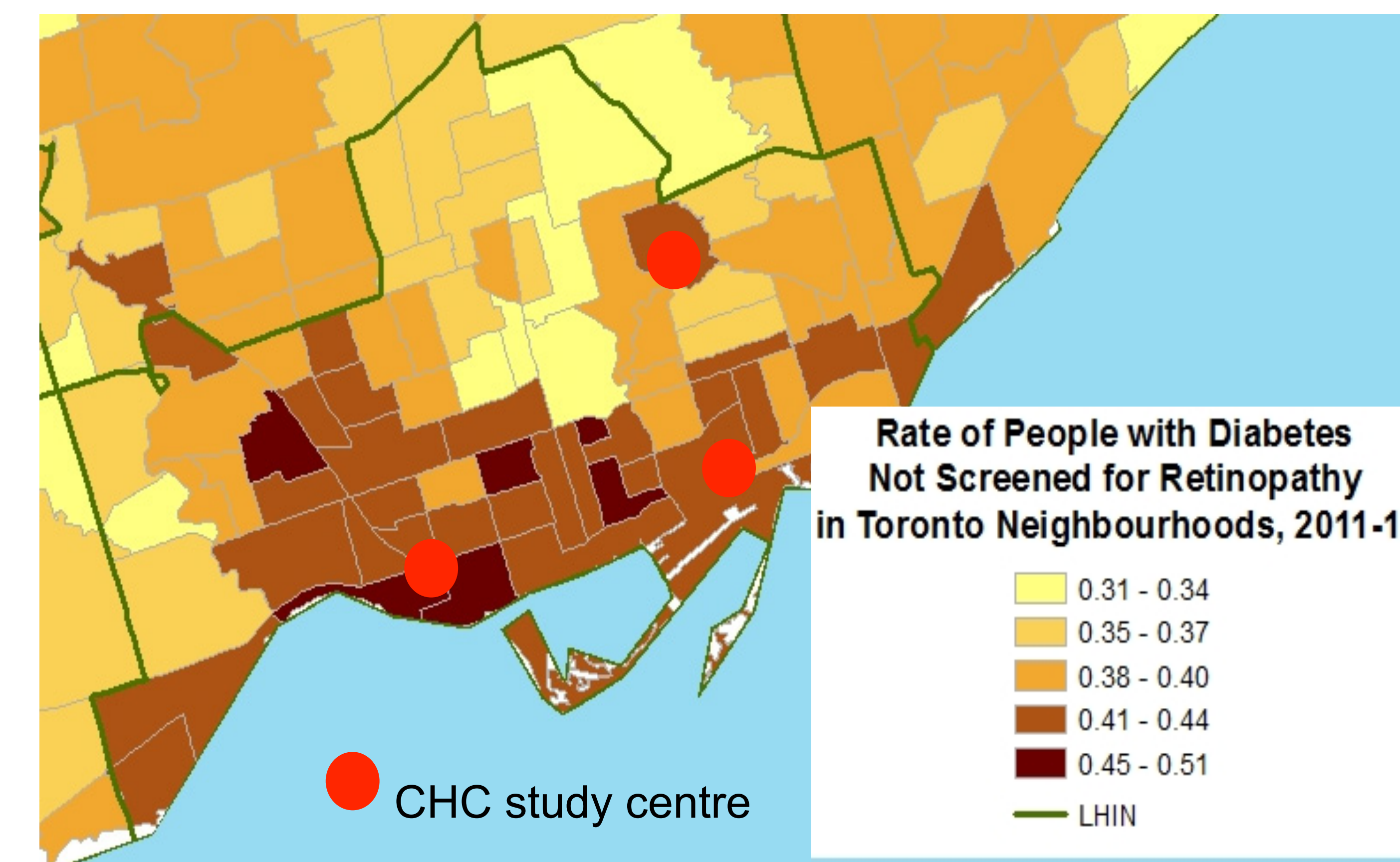
Using administrative health data, we developed a population based approach to DR screening at community health centres (CHCs).

Patients with diabetes who have not had DR screening in 425 days have been identified using linked provincial and community-based datasets.

Through a cohort disclosure process, patients are directly contacted and invited for screening and ongoing monitoring.

Results

We identified areas in Ontario with lowest DR screening rates, and engaged three culturally diverse CHCs in Toronto.



Through their electronic medical record, approximately to 2100 un-screened patients have been identified.

After obtaining consent, these patients are invited to attend DR screening using existing Tele-Retina services at the CHCs with referral to an ophthalmologist as clinically required.

Conclusions

- Our trial leverages existing digital health data and utilizes a population-based approach to DR screening in Ontario.
- This community-based approach could improve health outcomes by increasing awareness and DR screening accessibility, especially for vulnerable populations.
- If successful, this strategy could be expanded nationally, and provide an innovative approach to the management of other diabetes complications and chronic disease.

Acknowledgement

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