



Service Priorities and Programmes
Electronic Presentations

Convention ID: 41

Submitting author: Dr S T MAK

Post title: Associate Consultant, United Christian Hospital, KEC

Corneal transplant recipients: quality of life and service needs

Mak ST(1), Wong ACM(2)

(1) Department of Ophthalmology, Caritas Medical Centre (2) Department of Ophthalmology, Union Hospital Mak is now with the Department of Ophthalmology, United Christian Hospital

Keywords:

corneal transplant

quality of life

visual function

Introduction

Corneal transplant is the most common type of human transplant surgery performed worldwide. In Hong Kong, Hospital Authority is the main service provider of corneal transplantation. However, little is known about the quality of life and service needs of corneal transplant recipients.

Objectives

To assess the vision-related quality of life of corneal transplant recipients using the National Eye Institute Visual Function Questionnaire-25 (NEI VFQ-25), and to identify the socio-demographic factors that associate with patients' self-assessment of perceived visual function.

Methodology

Thirty patients who received corneal transplants were included in this prospective observational, cross-sectional study. Socio-demographic and clinical data, including age, sex, systemic health status, employment status, visual acuity, reason of corneal transplantation, laterality of corneal graft, and follow-up period were collected. NEI VFQ-25 was scored using Rasch analysis. Subgroup analyses were also performed.

Result

Age, sex, visual acuity, and health status had no significant correlation or association with the Rasch-transformed score. Patients who received bilateral corneal grafts were significantly less able socioemotionally than those with unilateral graft. Patients who became unemployed or retired after transplantation were also significantly less able in both visual functioning and socioemotional status. Conclusion: Corneal transplant recipients had a decreased vision-related quality of life as demonstrated by the NEI VFQ-25. Apart from anatomical success and visual acuity, clinicians and service providers should also consider other aspects of visual outcome. In particular, those who received bilateral grafts require more socioemotional attention. Employment programmes should be part of corneal transplantation rehabilitation planning. A multidisciplinary rehabilitation team involving doctors, service planners, social workers

and psychologists would be of value.