Br J Ophthalmol 2005;89:1478-1482 doi:10.1136/bjo.2005.074146

- Clinical science
  - Extended reports

Delay in presentation to hospital for surgery for congenital and developmental cataract in Tanzania

1. J Mwende1,
2. A Bronsard2,3,
3. M Mosha2,
4. R Bowman4,
5. R Geneau2,
6. P Courtright2

+ Author Affiliations

1. *[1]Department of Ophthalmology, Tumaini University/KCMC, Moshi, Tanzania*
2. *[2]Kilimanjaro Centre for Community Ophthalmology, Tumaini University/KCMC, Moshi, Tanzania*
3. *[3]Department of Anthropology, Université Laval, Quebec, Canada*
4. *[4]CCBRT Hospital, Dar es Salaam, Tanzania*

1. Correspondence to: Dr Paul Courtright Kilimanjaro Centre for Community Ophthalmology, Tumaini University, PO Box 2254, Moshi, Tanzania; pcourtright@kcco.net

- Accepted 6 June 2005

Abstract

Background: Childhood cataract is a leading cause of blindness in children in eastern Africa. High quality surgical services have been established at a few tertiary facilities in the region; however, there appears to be delay in presentation to hospital.

Methods: Parents or guardians of all children presenting to KCMC Hospital or CCBRT Hospital with congenital (recognised since birth or within the first year) or developmental (cataract leading to reduction in vision after 1 year of age) cataract were interviewed regarding the actions taken (and timing of these) before coming to hospital. Demographic information was also collected. For analysis children were grouped as either late presenters (more than 12 months after recognition) or not late presenters (within 12 months of recognition) and predictors of late presentation were assessed.

Results: Among 178 children (74 congenital cataract and 104 developmental cataract) analysed, the mean delay between recognition by the caregiver and presentation to hospital was 34 months, almost 3 years. The median delay was 18 months—9 months for congenital cataract and 24 months for developmental cataract. Long delay in presentation was associated with having developmental cataract, living far from the hospital, and low socioeducational status of the mother. Among children with congenital cataract, having another sibling increased the likelihood of early presentation.

Conclusion: Delay in presentation remains a significant problem for children needing surgery for congenital or developmental cataract. Parents who have multiple children may be more likely to seek early treatment, possibly because their expectations of achievable sight at a young age are based on previous experience of their older children. Educational efforts should aim to reach the most "unreachable" (those living the furthest from the hospital and having the lowest socioeducational status of the mother).