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PROFILES

World-class eye care at London 2012

Dr Penny D'Ath and professor David Thomson, from City University, London, were involved in the organisation of a team of practitioners who provided eye care at the Olympic and Paralympic Games. Here they reflect on their experience

THE LONDON 2012 Olympic and Paralympic Games have been and gone. They brought with them sunshine, smiles, a stash of gold medals and a Brit who, despite only having one fully functional leg, could run 100m faster than it took any of us to switch between sports on the red channel.

Had anyone suggested in May that we would all have become avid fans of athletics, dressage, swimming and cycling, I think we would all have laughed. But now, here we are, not only fans but armchair experts on every nuance of the LEXI system. Suddenly, anybody who is anybody knows who ran the fastest, who jumped the highest and who lifted the heaviest weight. We marvelled at athleticism that we previously would not have paid any attention to, and names such as Usain Bolt, David Weir and Jonnie Peacock were interwoven into normal everyday conversations.

There is a poster as you exit the Olympic Park that reads: 'When the gloves came off, I was there.' And there indeed were our brilliant team of optometrists, dispensing opticians and ophthalmologists.

Planning

We started planning the project three and a half years ago – a task made more difficult by the dearth of information on the demand for eye care services at previous Games. We knew that in Beijing, optometry was the medical discipline with the second highest volume of use, accounting for some 12.8% of all services provided, but we didn't know why people had attended the clinic.

"Every athlete had a story to tell and it was inspirational to hear what many had achieved"

On the basis of the limited information that we had, we designed the eye care service to cope with up to 120 patients per day. A triage room, three consulting rooms and a dispensing room were allocated in the Ludwig Guttmann Polyclinic located in the Athletes' Village. Each room was equipped with the very latest instruments and gadgets. In fact, it resembled Optrafair by the time we had finished.



We suspected that the majority of patients would require an optometric service: eye examination, spectacles, contact lenses, management of minor eye conditions and onwards referral for anything more serious. On this basis, we whittled our volunteers down from 413 applicants to a team of 43 optometrists and dispensing opticians/CLOs who represented all four corners of the UK, plus nine enthusiastic ophthalmologists. The 'Purple Polyester Army' threw themselves into the task at hand with an abundance of good humour, enthusiasm and expertise. Nothing could dampen the team's enthusiasm, not even the somewhat lurid Games Maker shirts, nor the very long queue of patients, representing some 204 countries, who were trying to get an appointment.

The Olympics

We opened our doors on the first day with some trepidation. Would we have sufficient capacity to cope with the demand? Would we be 'twiddling our thumbs' all day? But from day one it was apparent that we were going to be busy, and when word spread that you could get an eye examination and spectacles for nothing, the turnstiles didn't stop turning.

Indeed, it was fortunate that medals were being awarded for athletic prowess and not for memory or organisational skills, as it seemed that approximately 99% of patients presenting to the optometry clinic had mysteriously 'lost' their glasses on their

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way to the UK. Interestingly, dentistry reported a similar problem, with many of the boxers having carelessly 'forgotten' to bring their mouth guards with them for the biggest sporting event of their lives.

While many of the patients simply required spectacles, there were some complex prescriptions among them, and it was immensely rewarding to be able to provide spectacles that we knew would not have been available in their home

countries. There was one team official who required -22.00DS, an athlete who presented uncorrected with a prescription of -9.00DS the day before his final, an amblyopic basketball player who proved that stereopsis is over-rated and a runner with -8.00D cyls, to list but a few. There were no serious eye injuries during the Olympics, although there were a few corneal abrasions, contusions from contact sports, a corneal ulcer and minor foreign bodies, including a few athletes who presented to the clinic the morning after the opening ceremony with fireworks debris. There were also patients who presented with advanced diabetic eye disease, glaucoma and one patient who suffered from trachoma. In these cases, the team ophthalmologist prepared a report so that the condition could be managed appropriately in their home country.

Our base for the duration of the Games was in the Ludwig Guttmann Polyclinic located in the Athletes' Village; initially home to approximately 12,000 finely tuned athletes and latterly to 4,200 Paralympians and their respective entourages. It was here that we beavered away between the hours of 6.30am and 11.15pm, carrying out eye tests through two booked and one walk-in clinic. Such was the volume of patients that we were fully booked one week ahead at peak times.

The Paralympics

As expected, the Paralympics brought some fascinating professional challenges: high prescriptions, corneal dystrophies, advanced glaucoma and a wide range of retinal and optic nerve dystrophies. While we were unable to help many of the visual impaired patients, we had a number of notable successes. There was a young athlete with congenital cataracts who presented with 1/60 vision. Nobody had thought that she might get some vision around the cataract, but 30 minutes later she was seeing 6/24 through +8.00 lenses.

Every athlete had a story to tell and it was truly inspirational to hear what many had achieved in the face of overwhelming challenges. There was a wide range of disabilities including polio, meningitis, car and motorbike accidents, injuries caused



by machinery, as well as congenital abnormalities. The Paralympians regarded a missing limb as an inconvenience rather than a disability. If anyone could inspire a generation then it would be these athletes.

We opened our clinic on July 16 with one optometrist and one dispensing optician and closed our service on September 12. At the peak, we had four optometrists and two dispensing opticians working together and were booking one week ahead as

three rooms were insufficient to cope with the demand. Over this eight-week period, we carried out approximately 2,500 eye examinations (mostly performed through translators) and dispensed approximately 2,000 pairs of glasses. Each patient had autorefraction, tonometry, pachymetry, OCT and fundus imaging. An optometrist then checked their vision, assessed their refractive error and performed additional tests as indicated. If required, patients were then seen by our team of dispensers or ophthalmologists.

It is difficult to put into words why this was such a fantastic experience. Was it the satisfaction of seeing a project that we had spent so many hours on for the last three and a half years come to fruition? Perhaps it was because we shared the home of the world's greatest athletes, or maybe it was because we were part of something bigger. Or was it just that London 2012 grabbed the nation by the throat and shook it into a great big smile. Whatever it was, we met some amazing people, had the most fantastic team and successfully showcased UK eye care at its very best.

We would like to thank the following people for volunteering their services at the Games:

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