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Effect of a Home Visit–Based Low Vision Rehabilitation Intervention on Visual Function Outcomes

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Given the increasing incidence of visual impairment with increasing age, and the global trend toward an aging population, it is unsurprising that the prevalence of visual impairment is high.¹ There is strong evidence that low vision service provision can improve clinical and functional ability in people with visual impairment.² However, to date, there has been a marked lack of evidence to support the effectiveness of social care support in visual rehabilitation.³ Hence, the trial by Acton and colleagues⁴ presented in this issue, evaluating a home-based social care intervention, is timely and clinically highly significant. The intervention included repeated visits by a visual rehabilitation officer to assess the needs of the individual with respect to aspects of daily life ranging from activities, such as household tasks and personal hygiene to welfare entitlements. Participants were randomly assigned to receive the intervention, or to a waiting list control arm. Outcome measures, including primary outcome the Veterans' Affairs Low-Vision Visual Functioning Questionnaire, were assessed at baseline and 6 months later. At follow-up, the primary outcome measure showed improvement in both groups, with a significantly greater improvement demonstrated in the intervention group. The moderate effect size of 0.55 suggested a positive effect, which warrants investigation in a larger trial incorporating other aspects such as an economic evaluation and mental health intervention. The strength of this exploratory trial lies in the use of a waiting list control arm, where much of the previous research in the field of visual impairment interventions is limited to relatively weak uncontrolled before and after studies, or nonrandomized controlled trials.³ This study is of particular significance as it provides the first robust evidence to demonstrate a positive effect of home-visit based social care visual rehabilitation on visual function outcomes.

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