

the newsletter of the International Eye Care Fellowship of Rotarians

Volume 1, Issue 2

Chairman's Message

Dear Fellow Rotarians:

As we begin this Centennial Year under the leadership of President Glenn E. Estes, Sr., he has asked us to CELE-BRATE ROTARY. Thus it seems fitting to me that we take a new look at the organization and potential for our International Eye Care Fellowship of Rotarians.

I think you would all agree that we have had some difficulties in the infancy of this new fellowship as we all sought to follow up on the accomplishments of our Avoidable Blindness Task Force.

I urge you all to visit our web site: <u>www.rotarianseyecarefellowship.org/byl</u> <u>aws.htm</u> and review our "Draft Only" Proposed Bylaws. We are very fortunate to have the most capable and experienced web master in Harriett Schloer. She is doing an outstanding job in helping us to reorganize and develop new By Laws and procedures.

Our treasurer Lori Johnson Bende, O.D. maintained detailed records in handling all funds as our Fellowship Treasurer and recording 130 members in our fellowship. In addition, Past President Frank Devlyn has just turned in names and funds he collected in Osaka to add to our membership—to be added to the previous numbers.

While I welcome the members of Rotavision 2020 desiring to join and work with us, I urge us to stay the course and follow up on our mission as listed on the first page of our Eye Care Fellowship of Rotarians; "To bring together, in fellowship and service, those Rotarians who have an active interest in the prevention of blindness and the promotion of eye health and vision worldwide."

We have a history of working with many of the established eye care organizations, including CBMI, SIGHT SAVERS INTERNATIONAL, OWSP, MEDICAL MINISTRIES INTERNATIONAL WORLD CATARACT FOUNDATION, WORLD HEALTH ORGANIZAION— VISION 2020 PROJECT, ORBIS, and others.

I would also recommend to all interested in eye care to visit one of the finest Web sites with information about eye care maintained by the Ophthalmology Department of the University of Iowa. Go to <u>http:webeye.ophth.uiowa.edu</u>. Check Related Links and then eye resources.

Let's CELEBRATE with President Glenn and make this Centennial Year one of accomplishment in helping to reduce blindness around our world.

> O. Doyle Dannenberg;, O. D. Chairman IECFR



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Be sure to check out all the information on the Eye Care Fellowship website!

www.rotarianseyecarefellowship.org

Matching Grant Activities, RID 1250

An excerpt from 'Trev's Topics,' a 2-3 page monthly newsheet which is a carry on from PDG Trevor Powell's Governor Newsletter, District 1250.

Matching Grant completed \$40,000 for surgical ophthalmic equipment between the Rotary club of Sunderbans. District 3290 and the Rotary Club of Guildford. District 1250.

Matching Grant completed \$ 20,000 for Cataract surgery between Rotary club of Serampore. District 3290 and the Rotary club of Midhurst and Petworth.District1250.

Matching Grant completed \$40,000 for surgical equipment between the Rotary club of Dakshin Barasat. District 3290 and the Rotary club of Guildford District 1250 in association with the Rotary club of Farnborough. District 1140.

Matching Grant completed \$40,000 for surgical equipment between the Rotary club of Hooghli. District 3290 and the Rotary club of Guildford District 1250 in association with the Rotary club of Southend on Sea. District 1240 Matching grant applied for \$50,000 for Cataract surgery between Rotary club of Calcutta Metropolitan (to be confirmed) and the Rotary club of Reigate District 1250. This sum will be sufficient to carry out 2,500 Cataract removals.

A target has been set to carry out 10,000 Cataract sight-restoring operations to celebrate the Rotary Centenary by District 1250. 2,500 have already been confirmed by the Reigate club. Guildford and Arundel clubs, all within District 1250 have already collected sufficient funds to carry out another 2,500 Cataract operations and are looking to District 3290 to find a Matching Grant partner. Thus at 6,600 we have passed the half way target. -

Rotary clubs in District 1250 are heavily involved with the collection of useful unwanted spectacles which are sent to VISION EX-PRESS OVERSEAS to be repaired classified and sent to developing countries where they are fitted by opticians sent out to the developing world for that purpose. The Rotary club of Crawley. District 1250 is engaged on a project to supply funding to carry out 10 Cataract operations in their own town to poor people, to be carried out privately by an ophthalmic surgeon. Cost £10,000 (\$ 18,000). Fund raising is currently being carried out.

I am extremely satisfied with the interest shown in District 1250, stemming from the fact that we had the honour of having PRIP Frank Devlyn as the Rl Official visitor to our district conference in 2001 -2002 and we have within our District, a Past Club President Sam Das, of the Guildford club, who is a consultant ophthalmic surgeon and a tireless worker' both here and in India for the cause of Avoidable Blindness.

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Experiences of a Rotary Foundation Volunteer in Ndola, Zamibia

Greetings to you.

This is Rtn DrRavishankar writing. I am happy to write to you my experiences in Ndola, Zambia where I served as TRF volunteer ophthalmologist for 2 weeks recently. I arrived after 24 hrs and changing 4 flights to the site of the project, Ndola. I was warmly received by President and doctors from the cooperating organization.

We started the work right away. Every day we saw dozens of indigent patients who otherwise would receive no eye care at all. In all we saw over 200 and operated 38 patients. Many of these surgical procedures are not available in Zam"Every day we saw dozens of indigent patients who otherwise would receive no eye care at all."

bia; residents have to fly out to South Africa to have these services and have to pay a lot of money. All who participated in this mission helped a lot of poor people who can not travel to have these services and it was a good exchange of technical skills as well.

Zambia has one ophthalmologist

per million people; something needs to be done in the international community about this.

A lot of time was spent in teaching and training Colleagues and paramedical personnel and giving lectures which were very well re-



Rtn DrRavishankar with Rotarians of RC Ndola & patients



Advanced eye disease in right eye and left eye operated during this visit.

ceived. RC Ndola spent a large sum of money to provide the medical supplies and food for the indigent patients.

One suggestion I have is that more effort can be made to help with equipment and supplies which are so difficult to come by in certain parts of the world. I carried some limited supplies and some were made available by cooperating ophthalmologist and RC Ndola. There can be a concept of loaning the equipment to missions like these, and there can be some provision for supplies by TRF which will go a long way. The staff at TRF has been a great help all the way through. They have been very prompt in communications. The grant came through in time and there were hardly any hassles as such.

I thank trustees of TRF and all staff at TRF and RI and TRF (India) for making this mission possible.

I want to thank PRIP Devyln, PDG Steve Brown, PDG Dr Doyle, PDG Dr Dilip Raval and PDG Rekha Shetty, who have always been very encouraging in all communications.

Above all, I owe a debt of gratitude to members of my club, who solidly



Rtn DrRavishankar with few operated patients and Rotarians of RC Ndola.

support whatever humanitarianmission I undertake, be it in our communities or elsewhere in the world. I can do very little without their active support.



Rtn DrRavishankar (third from left) with Rotarians of RC Ndola

This was my third mission as a volunteer and it was worthwhile and enjoyable; I look forward to more such challenges in future.

Regards,

Rtn DrRavishankar MD,FRCS (Edin)UK RC Mysore West RID 3180, India

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Healthy Eyesight Tips from RealAge®

Are You Concerned About Keeping Your Eyesight?

Our macular health naturally declines with age, but can also be worsened by other factors, such as genetics, eye color, smoking, high blood pressure, exposure to harmful sunlight, and poor diet, putting our eyesight at risk. 15 million Americans and millions more around the world have damage to the macula of the eye, where our sharpest central vision occurs, leaving them with only the outermost, peripheral vision and dim images or black holes at the center of vision.

The Important Role of Nutrition in Macular Health

New research shows that supple-

menting the daily diet with 10 mg of lutein (equivalent to eating 3-4 ounces of spinach) can increase the visual performance in individuals already showing signs of macular damage. Other research by the National Eye Institute shows that atrisk individuals who supplemented their diets with antioxidants and zinc had a significantly better chance of keeping their eyesight.

Tips to Protect Your Macular Health

- Wear protective sunglasses
- Decrease known risk factors within your control
- Adopt a diet rich in fruits and vegetables, in particular, green,

leafy vegetables

• Consider supplementation to ensure you receive adequate levels of key nutrients shown to protect eyesight

From cancer and disease prevention to diet and fitness, RealAge® provides personalized health information to help you reverse the aging process, look younger, and live longer. For more information, visit www.realage.com

Vocational Service: 5-Year Early Detection Project

Our club has done several vocational service projects, combined with community service projects. The biggest and most outstanding is this!

Avoidable Blindness: Five-Year Program of Early Detection of Students' Eye Health, consisting of four stages of activities:

First, the community activity: Donation of an Eye Ambulance to Dr. Yap Eye Hospital in Yogyakarta, complete with eye medical instruments, snellen charts, keratometer, trial lenses, etc. The purpose is to provide the hospital with a mobile eye hospital for the project.

Second, vocational activity: cooperating with the eye doctors from Dr. Yap Eye Hospital, we visit villages and perform a monthly training on Early Detection of Students' Eye Health to teachers, sports teachers, health teachers, and medical staff of the schools in rural and urban area in Yogyakarta. This vocational training is performed on the second week of the month. The purpose is to train the teachers and medical staff of the schools to be able to detect any visual handicap of their students, and report the cases to Dr Yap Eye Hospital for further treatment.

Third, community/vocational activity: the week after the training, we visit the villages again to examine and detect the students eye health. The purpose is to find students with eye problems for further treatment, and to give real examples for the teachers and medical staff of the schools to perform the detection themselves in the future.

"The purpose is to train the teachers and medical staff of the schools to be able to detect any visual handicap of their students"

Fourth, community activity: further treatment for those students with eve problems. Those in need of glasses will get free spectacles from our club. Those with the low vision or glaucoma problems, will be sent to Dr Sardjito General Hospital for further treatment, in cooperation with YPACP (a foundation from Europe specializing in donating the cost of operation for low vision). The students involved are about 6 -13 years old, at kindergarten or junior high schools. There are about 30 - 40 teachers involved in the training, and 200 - 300 students involved in the detection. In the remote villages the percentage of students suffering from eye defects is about 1 - 4 %, but in urban areas, about 10 %.

This project has run for 3 years, and will still need two years to finish, and come to the first village we visited before. It is a matching grant project, involving a lot of other organizations, such as:

1. Rotary Foundation (Matching Grant) + International Sponsors

2. Hoya Vision care, for the donation of lenses

3. Dr Yap Eye Hospital, for the operation of the ambulance and the Detection Activities

4. Dr Sardjito General Hospital, for the medical operation like trachoma, glaucoma, cataracts, low vision, etc.

5. Local Government Health Centers for financing the seminars and trainings of the teachers and medical staff.

6. YPACP (Foundation of Eye Defect Patients) for financing the medical operation for low vision and glaucoma.

The main problem is finances. We still need a lot to buy frames and more lenses, and for the cost of medical operations for glaucoma, cataracts and trachoma. The funds from the organizations above are not enough yet.

Yours in Rotary,

Keliek JS

RC Mataram Yogyakarta

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Rotary Centennial Vision Project-District 3290

Objectives: To provide the facilities, means & succor to those unfortunate people who suffer from Avoidable Blindness – especially cataracts.

Location of the Project: District 3290 - West Bengal & Anadaman Islands in India & Nepal

Summary: Project envisages to carry out 50,000 Inter Ocular Lens (IOL) surgeries to give light to those who suffer with cataracts, and to install balancing Medical Equipment at the 6 Rotary Eye Hospitals/Clinics and 10 other Rotary assisted Eye Hospitals/Clinics in order to achieve this target.

Financial Information: Clubs of District will arrange 30% of the Project cost in cash

Assistance required: Rotary Volunteers and International Partners (RI Districts &/or R.Clubs) for TRF M/G Projects

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