## Macular Degeneration—the Challenge and The Lions Low Vision Rehabilitation Network (LOVRNET) By PDG Richard Merriwether

Low vision refers to chronic disabling visual impairment that cannot be corrected with eyeglasses or with medical or surgical treatment

Most low vision in the U.S. is caused by age related eye diseases—with age related macular degeneration, diabetic retinopathy and glaucoma leading the list.

- Estimated between 4 to 5 million Americans have low vision;
- 80% of Americans with low vision are over 65... Average age is 77.

A recent survey of low vision patients seeking service in low vision centers throughout the country revealed that the majority of patients:

- 60% have disabilities that limit their ability to perform daily activities;
- 52% experienced a fall the previous year;
- 22% are depressed;
- 10% have significant memory problems;
- 39% live alone
- 81% depend on family & friends for transportation;
- 77% depend on family for other types of assistance
- 5% received help from the church; and
- 2% received help from community service clubs.

Low vision rehabilitation is a time consuming and labor intensive service because low vision affects so many aspects of a patient's life. For this reason many eye doctors are reluctant to offer low vision rehabilitation services in their practice. Missed appointments rates by low vision patients averaged 25%, usually because of transportation problems. This discourages doctors from offering their services.

Many of the patients live alone, have limited assistance during the day, and patients who are depressed or have memory impairments need close follow up and a need for continuing services.

The Low Vision Rehabilitation Network (LOVRNET) is a community based healthcare network governed and operating by local Lions in Multiple District 22 that is dedicated to the expansion, improvement and the use of local vision rehabilitation services. The Lions LOVRNET promotes, facilitates and coordinates care of patients in the community who have chronic vision impairments and are in need of low vision rehabilitation.

To this end, the Lions LOVRNET is designed to eliminate or minimize barriers to the provision of low vision rehabilitation services in the community.

In the case of low vision rehabilitation, the doctor and the therapist need to know the patient's medical and health, details of the activities that are important to the patient and are hard to

perform, and information about the patient's physical, psychological and cognitive capabilities, which determine rehabilitation potential. The information must reflect the patient's perspective, so it is not appropriate to elicit it from the patient's family members or caregivers.

Low vision patients cannot see well enough to put this information down on paper. LOVRNET has solved this problem by training the Lions to interview the patients. This is currently being done. The survey questions established by the eye doctors and therapists are displayed on the Lion interviewer's computer screen. The Lion interviewer will read the question to the patient over the telephone and will record the patient's response on the computer.

The Lion volunteers can conduct the interview from their home using their computers.

The interviewers will also make follow up interviews on the patients once they have been treated.

The Lion volunteers are required to complete and online Health Insurance Portability and Accountability Act (HIPPA) compliance training and a course in how to conduct an interview with low vision patients. The Lions will be able to do the training on their computers.

Lions will be trained to administer five different surveys over the telephone to LOVERNET patients.

(Richard managed to recruit three new interviewers for LOVRNET.)