

## **Press pack for the 25<sup>th</sup> annual congress of the CSO**

### **I – The Cameroonian Society of Ophthalmology (CSO)**

The Cameroonian Society of Ophthalmology is a professional non-profit organisation, created in 1983 by a group of Cameroonian ophthalmologists. It brings together ophthalmologists of various nationalities and nurses specialized in ophthalmic care. Its membership presently stands at 120. The main objective of this learned society is to promote eye health.

This society is the fruit of a group of Ophthalmologists who desired to bring together different stakeholders in the domain of eye health care in order to re-enforce solidarity, share professional experiences, promote scientific research, re-enforce Continuous Professional Development with a goal of providing high quality eye health, care which will go a long way to fight against avoidable blindness.

#### **Officials:**

**President:** Pr Côme EBANA MVOGO

**Secretary-general:** Dr Danielle BELEHO

**Treasurer:** Pr Emilienne EPEE

**Auditor:** Dr Alice NCHIFOR

**President of the organizing committee** of the 2019 congress: Dr Caroline MVILONGO

**President of the scientific committee:** Dr Godefroy KOKI

### **II – LE 25<sup>th</sup> CSO congress**

Date: 21st to 23rd February 2019

Venue: Yaoundé City Council hall

Theme: Glaucoma

Sub-theme: Low vision

**Glaucoma** is a chronic disease of the optic nerve caused by the progressive destruction of the nerve fibres. It is the first cause of irreversible blindness. It has no symptoms at the onset and leads to progressive loss of sight. It has thus been referred to as the “silent thief of sight”. It is sometimes inappropriately being referred to as “ocular hypertension”, since the intraocular

pressure is often raised. Glaucoma can affect persons of all ages (congenital glaucoma, juvenile glaucoma, and adult-onset glaucoma). In adults, the risk of developing glaucoma is high after the age of 40, in the presence of a family history of glaucoma and/or diabetes. Screening is necessary for early diagnosis and management in order to prevent blindness.

**Low vision** is a term referring to severe visual impairment that cannot be improved by medication, eyeglasses, contact lenses or surgery. Low vision is said to exist when the better eye after optical correction presents:

- A visual acuity less than 3/10 but greater than 1/20 (counting fingers at 3 metres).
- A reduced visual field with a residual field less than 10° around the central fixation point.

Several ophthalmic pathologies, including glaucoma can lead to low vision. Visual aids such as magnifying glasses, video magnifiers and telescopes can be used to rehabilitate those with low vision to enhance the residual visual capacity in order to easily accomplish their day-to-day activities.

### **Relevance**

- Epidemiological:

Glaucoma is the second cause of blindness worldwide and the first cause of irreversible blindness. Sixty million people are affected worldwide and 7.5 million are blind.

- Diagnostic:

Late diagnosis is common since symptoms are rare and nonspecific. Also, there are several types of glaucoma. A comprehensive ophthalmic examination is therefore of great interest irrespective of the presenting complaint. Community-based screening is strongly recommended.

- Therapeutic:

Medical, physical and surgical means are used for the treatment of glaucoma. Medical treatment is expensive and lasts for a life time. Surgical treatment is effective but because vision is preserved for a long time and there is no pain, acceptance is quite low.

- Socio-economic:

Advanced glaucoma causes low vision and blindness which have an impact on the productivity of both the individual and the community.

**Such is the challenge of this dreadful disease.**

**Congress program**

- Opening ceremony
- Oral presentations on the theme
- Oral presentation of free papers
- Poster presentations
- Conferences
- Round table discussions
- Symposia
- Social event
- General assembly of the CSO

**Contact persons:**

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