Quantifying the economic and emotional impact of cataract surgery on patients by gender in Honduras

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BACKGROUND:

Vision impairment affects over 1.1 billion people globally and approximately 90% of global vision impairment is due to either uncorrected **refractive error** or **cataracts**, both treatable causes of disability. Most affected individuals are in low- and middleincome countries, with women, rural populations, and ethnic minorities disproportionately impacted. Vision impairment is linked to poverty and a reduction in productivity by up to 30%. Cataract surgery improves income-generating activities, quality of life, and work attendance among patients and former caregivers. Reversing vision impairment has demonstrated significant economic and health benefits, but much of the research into the impact of cataract surgery has focused on the developed world.

Additionally, vision impairment is also associated with mental health issues, particularly depression and anxiety. Cataract diagnosis nearly doubles the risk of depression at 12-year follow-up, and anxiety is more common among those who have visual impairment. Women are 12% more likely to experience vision impairment. This study focuses on the economic and emotional impact of cataract surgery by gender on a cohort of patients in Comayagua, Honduras.

METHODS

Full-length article:

Site

This was a prospective, cohort survey-based study of 75 patients undergoing cataract surgery in March 2023 in Comavagua, Honduras, Surveys were completed in-person prior to surgery and by telephone four months postoperative. Economic questions included the Simple Poverty Scorecard tailored to Honduras, guestions on work, and the effect of vision impairment on work. Mental health questions included the Patient Health Questionnaire-9 to assess depression, and the

Generalized Anxiety Disorder-7 to assess anxiety. Table 1 Baseline of all metrics by set

	TOTAL (n=52)		Female:	s (n=32)	Males (n=20)		t-test	
	Mean	SD	Mean	SD	Mean	SD	p-value	
Age	66.6	13.1	65.0	14.8	69.0	9.7	0.30	
LogMAR VA Better Eye	0.80	0.67	0.78	0.67	0.84	0.69	0.76	
PHQ-9	6.1	4.2	6.3	3.8	5.8	4.9	0.65	
GAD-7	3.2	3.0	2.8	2.8	3.8	3.3	0.27	
							X2	
Work outside home for pay	17% (n=9)		16% (n=5)		20% (n=4)		0.69	
Income below poverty line	79% (n=41)		87% (n=28)		65% (n=13)		0.05	
Vision interferes with work	88% (n=46)		88% (n=46)		90% (n=18)		0.78	



Focused Vision, Scattered Insight

Is international cataract surgery still a success if it worsens anxiety?



- > Meta-analyses of mental health and vision impairment indicate that depression and anxiety are present in up to 25% of patients with vision loss
- > Vision impairment is also associated with mental health issues, particularly depression and anxiety.
- >75 patients had successful cataract surgery with 69% follow-up rate at 4months

≻Baseline:	Poverty Rate - 79%	Work Rate - 17%	GAD7 - 3.2	PHQ9 -
6.1 ≻4-month: 6.0	Poverty Rate - 56%	Work Rate - 37%	GAD7 - 5.6	PHQ9 -

Cataract surgery increased income and work outside the home but also

Table 4. Effect of Cataract Surgery - Linear Regression Models				. .	Table 5. Effect of Cataract Surgery - Logistic Regression Models				
	ß	95% CI	р	· ·		OR	95% CI	р	
Simple Poverty Score	0.23	-4.12, 4.58	0.92		Work outside the home for pay	3.47	1.15, 10,48	0.027	
Income Group	0.69	0.33, 1.05	<0.001		from outside the nome for puy	0.17	1.10, 10.10	0.027	
PHQ	-0.15	-1.97, 1.66	0.87		Personal income below poverty line	0.30	0.11, 0.80	0.016	
GAD	2.42	0.82, 4.03	0.003		Vision interfering with ability to work	0.39	0.13, 1.12	0.090	







GLOBAL HEALTH IMPACT:

Quantifying the impact of cataract surgery on individuals, families, and their communities across various geographic and socioeconomic settings is needed in order to motivate the development of effective programs for addressing preventable visual impairment.

This study utilizes pre-procedure, 4-month, and 8-month surveys to objectively measure the economic and emotional impact of cataract surgery by gender on a cohort of patients in Comayagua, Honduras creating a launch point for future studies in Honduras and similar Latin

Results:

- > **Income group** increased in the whole cohort (1.81 to 2.53). p<0.005), among women (1.66 to 2.53, p=0.001) and when controlled for age and gender (ß=0.69, p<0.001).
- > Participants were more likely to **work outside the home** following cataract surgery (17% to 37%, p=0.03).
- > Anxiety scores increased among the whole cohort at follow-up, among women, and when controlled for age and gender.
- > A majority of participants (75%) reported that vision continued to interfere with their ability to work post-cataract surgery.

Table 2. Comparison of baseline and outcomes at four months (n=52)								
	Baseline		4 Month Folle	Paired t-test				
	Mean SD		Mean SD		р			
Simple Poverty Scorecard	55.8 12.7		56.1	15.5	0.92			
Income Group	1.81	1.1	2.53	1.1	<0.005			
PHQ	6.1 4.2		6.0	6.1	0.87			
GAD	3.2 3.0		5.6	6.1	<0.005			
					McNemar's Test			
Work outside the home for pay	17% (n=12)		37% (n=19)		0.03			
Income below poverty line	79%(n=41)		56% (n=29)		0.02			
Vision interfering with ability to work	88% (n=46)		75% (n=39)		0.14			

Table 3. Comparis	son of b	aseline	e and out	comes	at four	months (n-	52)			
			Baseline			4 month Follow Up				
	Females (n=32)		Males (n=20)		t-test	Females n=32	Paired t- test	Males n=20	Paired t- test	
	Mean	SD	Mean	SD	р	Mean	р	Mean	р	
Simple Poverty Scorecard	54.3	13.6	58.3	13.0	0.29	53.2	0.51	60.8	0.70	
Income Group	1.66	1.0	2.11	1.2	0.21	2.53	0.001	2.53	0.13	
PHQ	6.3	3.8	5.8	4.9	0.65	7.3	0.43	3.8	0.14	
GAD	2.8	2.8	3.8	3.3	0.27	6.0	0.004	5.1	0.38	
					X ² test		McNemar's test		McNemar test	
Work outside the home for pay		n=5)	20% (n=4)		0.69	25% (n=8)	0.51	55% (n=11)	0.04	
Income below poverty line	88% (r	1=28)	65% (n=13)		0.05	53% (n=17)	0.01	60% (n=12)	0.99	
Vision interfering with ability to work	88% (r	1=28)	90% (n=18)		0.78	75% (n=24)	0.34	75% (n=15)	0.45	

Conclusions:

Cataract surgery had the anticipated effects of increasing income and work outside the home. It also had the unanticipated effects of increasing anxiety scores and failure to restore vision that facilitates work. These results challenge assumptions about the impact of cataract surgery in the developing world, and indicate that further research into the economic and emotional impacts of eye care is needed.

	SAINT	







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