

## GP Fact Sheet: Vision Impairment

### Evidence

- Cataract surgery: ↓ falls up to **34%** (Harwood et. al. 2005).
- Home safety assessment and adaptation: ↓ falls up to **41%** (Campbell et. al. 2005).



### Key points

- Older people with poor vision as a result of eye disease (e.g. cataract, macular degeneration, glaucoma, diabetic retinopathy) are at high risk of falls.
- Older people with vision impairment have difficulty in identifying obstacles, which in turn decreases the chances of making visuomotor responses in order to avoid or negotiate obstacles.
- Patients with cataracts who have a fall risk will benefit from expedited cataract surgical removal. Include your patient is a fall risk in the referral letter.
- An occupational therapy home safety visit is recommended for patients with severe and irreversible vision impairment.
- Older people should be advised to routinely have their prescription glasses checked. They should also be advised to take particular care with new corrective glasses to allow time to adjust to distant-contrast and depth perception.

### Referral and patient resources

- Occupational Therapy Australia: [Find an occupational therapist](#) (speciality: aged care).
- Patient education leaflet: [Falls Prevention - Eyesight](#) (click [here](#) for other patient flyers on the NSW Clinical Excellence Commission website).
- Low vision mobility training in NSW: [Guide Dogs NSW/ACT](#).
- For more information on eye diseases in the elderly: [Macular Disease Foundation Australia](#) and [Optometry Australia](#).

### References

Campbell, A. J., Robertson, M. C., La Grow, S. J., Kerse, N. M., Sanderson, G. F., Jacobs, R. J., Sharp, D.M., & Hale, L. A. (2005). [Randomised controlled trial of prevention of falls in people aged ≥75 with severe visual impairment: the VIP trial](#). *BMJ*, 331(7520), 817.

Harwood, R. H., Foss, A. J., Osborn, F., Gregson, R. M., Zaman, A., & Masud, T. (2005). [Falls and health status in elderly women following first eye cataract surgery: a randomised controlled trial](#). *Br J Ophthalmol*, 89(1), 53-59.

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