

ACO Cert in Public Health & Leadership

The Australian College of Optometry's (ACO) Certificate in Public Health and Leadership commences on 25 May 2020.

The course equips eye care and health professionals with skills to improve the health of communities through rigorous exposure to key aspects of public health and practical assessments. Topics include health promotion, impact assessment, healthcare systems, eye care for disadvantaged and vulnerable populations, policymaking and research for eye disease and injury prevention. Of particular interest to public health-oriented practitioners is a dedicated module exploring roles of leaders and the process of leadership in impacting organisational performance and broader social outcomes across private, public and non-profit contexts.

The ACO was established in 1939 and operates Australasia's largest public optometry clinic. With a strong focus on public health impacts, the Certificate course strongly aligns with its values and aims to broaden the perspectives of optometrists interested in public health.

Graduate Michael Li said an innate interest in public health inspired him to take the course. "As a profession I found that we have relatively low integration and understanding of the broader health system. This led me to undertake this Certificate to improve my knowledge in an area which is typically not covered extensively at University."

The course eschews traditional exams, requiring candidates to submit capstone projects, a personal leadership and development plan, and a public health working project. Candidates are encouraged to tailor their projects to their own areas of development and interest. Visit www.aco.org.au/professional-development.

Government Invests in Macular Disease Education

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The GP program aims to include eye health with:

- chronic disease health checks among people aged over 50 years,
- health checks among people with a family history of macular disease,
- Aboriginal and Torres Strait Islander health checks, and
- health checks among people with diabetes.

MDFA will provide evidence-based information and resources for GPs to share with their patients in addition to building stronger referral pathways to support better patient outcomes.

"We also need to utilise the skills and connections of pharmacists. They're often the people who have weekly connections with patients in high risk groups. There's an enormous amount of trust in local pharmacists. Education content to pharmacists will aim to increase understanding of the disease processes, nutritional supplementation recommendations, the symptoms of disease and the importance and frequency of eye examinations."

Ms Hopkins said the program would leverage existing staff training resources, produced by MDFA, for residential aged care facility staff. Aboriginal health workers and practitioners would also be targeted, with educational content aimed at helping them understand the disease processes, risk factors, symptoms and referral pathways.

Impact of COVID-19 On Contact Lens Wear

WRITER Dr Nicole Carnt

Health advice about the novel coronavirus (SARS-CoV-2) that causes the respiratory disease, COVID-19, is changing rapidly as scientists learn more about the characteristics of the virus. SARS-CoV-2 has been found in the tear and conjunctival secretions of one patient with COVID-19 pneumonia and concurrent conjunctivitis, but was absent in 29 other COVID-19 pneumonia patients without conjunctivitis.¹ In a larger study of 1,099 COVID-19 patients, only nine (0.8%) had conjunctival congestion.² These studies suggest SARS-CoV-2 can cause conjunctivitis, although cases are very rare.

ADVICE FOR CL WEARERS

Advice to all contact lens wearers when ill with cold/flu/COVID-19 should be to cease wear until at least 24 hours after symptoms resolve. It is well established that 'strep throat' (and colonisation of contact lenses by other bacteria in addition to Streptococcus) is associated with increased risk of contact lens associated inflammation.^{3,4} In addition to the risk of microorganism transmission to contact lenses while ill, there is the dampened immune response while fighting the infection, that may increase the risk of inflammatory events.

If contact lens wearers are well, they do not need to interrupt wear as long as they practise basic hygiene. This involves washing hands with soap and running water prior to any contact lens handling, including touching the eye. If soap and water are not available, the next best alternative is to use a 60% alcohol hand sanitiser. In both cases, the WHO method covering all hand surfaces and lasting 20–30 seconds is essential.

For contact lens wearers, extra attention should be given to tips of fingers and thumbs which touch the lenses. SARS-CoV-2 can survive on surfaces so it is important to be particularly

careful after travelling on public transport for example. An important point to emphasise is that SARS-CoV-2 is a virus enveloped in fat. This means that soap will repel the virus and break down the coating.⁵ Alcohol 60% is also effective against coronavirus within 30 second exposure.⁶ It is imperative after washing hands with soap to rinse the virus off with running water and dry with a clean paper towel. The Centre for Disease Control, in the US, has a video which highlights scenarios when it is difficult to follow prescribed hand hygiene.

Contact lens wearers washing hands before touching lenses is something practitioners might take for granted. However a recent survey of over 950 daily disposable wearers in the US, found 44% did not wash hands before lens insertion.⁷ Stapleton et al, found that the microbial keratitis severe and moderate disease load in daily disposable wearers can be halved by washing hands.⁸

Not only is this COVID-19 situation a good opportunity to revisit hand hygiene, it is a chance to re-educate on other aspects of healthy contact lens wear.

These include:

- One time wear of daily disposables,
- Disinfecting re-usable contact lenses after each wear (following manufacturers' guidelines),
- Avoiding water exposure to contact lenses,
- Maintaining contact lens case hygiene and timely disposal, and
- Avoiding overnight wear unless prescribed.

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References available at mivision.com.au