

National Programme for Control of Blindness & Visual Impairment (NPCBVI)

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Source: *PIB and Ministry of Health & Family Welfare*

National Programme for Control of Blindness and Visual Impairment (NPCB&VI) was **launched in the year 1976 as a 100% centrally sponsored scheme** (now 60:40 in all states and 90:10 in the NE States) with the goal of reducing the prevalence of blindness to **0.3% by 2020**.

The prevalence rate of blindness and targets

- Prevalence of Blindness – 1.1%. (Survey 2001-02).
- Prevalence of Blindness – 1. %. (Survey 2006-07).
- National Blind Survey (2015-18) prevalence of blindness is around 0.45%.
- Prevalence of Blindness target – 0.3% (by the year 2020).

Main Causes of blindness

Cataract (62.6%) Refractive Error (19.70%) Corneal Blindness (0.90%), Glaucoma (5.80%), Surgical Complication (1.20%) Posterior Capsular Opacification (0.90%) Posterior Segment Disorder (4.70%), Others (4.19%) Estimated National Prevalence of Childhood Blindness /Low Vision is 0.80 per thousand.

Main objectives

- **To reduce the backlog of avoidable blindness through identification and treatment of curable blind at primary, secondary and tertiary levels**, based on the assessment of the overall burden of visual impairment in the country

- Develop and strengthen the strategy of NPCB for **“Eye Health for All”** and prevention of visual impairment; through the provision of comprehensive universal eye-care services and quality service delivery
- **Strengthening and up-gradation of Regional Institutes of Ophthalmology (RIOs)** to become the centre of excellence in various sub-specialities of ophthalmology and also other partners like Medical College, District Hospitals, Sub-district Hospitals, Vision Centres, NGO Eye Hospitals
- Strengthening the existing infrastructure facilities and developing additional human resources for providing high-quality comprehensive Eye Care in all Districts of the country
- To enhance community awareness on eye care and lay stress on preventive measures
- Increase and expand research for prevention of blindness and visual impairment
- To secure participation of Voluntary Organizations/Private Practitioners in delivering eye care.

Best practices adopted under the programme:

- To reach every nook and corner of the country to provide eye-care services, provision for setting up **Multipurpose District Mobile Ophthalmic Units** in the District Hospitals of States/UTs as a new initiative under the programme. Few states have set up these Units. There is a need to replicate the same by other States.
- Provision for distribution of free spectacles to old persons suffering from presbyopia to enable them for undertaking near work as a new initiative under the programme. The activity needs to be expedited in all the States.
- Emphasis on the **comprehensive eye-care coverage by covering diseases other than cataract like diabetic**

retinopathy, glaucoma, corneal transplantation, vitreoretinal surgery, treatment of childhood blindness including retinopathy of prematurity (ROP) etc. These emerging diseases need immediate attention to eliminate avoidable blindness from the Country

- **Strengthening of Tertiary Eye-Care Centres** by providing funds for the purchase of sophisticated modern ophthalmic equipment.
- Ensure setting up of super-speciality clinics for all major eye diseases including diabetic retinopathy, glaucoma, retinopathy of prematurity etc. in state-level hospitals and medical colleges all over the country.
- Linkage of teleophthalmology centres at PHC/Vision centres with super speciality eye hospitals to ensure delivery of best possible diagnosis and treatment for eye diseases, especially in hilly terrains and difficult areas.
- Development of a network of eye banks and eye donation centres linked with medical colleges and RIOs to promote the collection and timely utilization of donated eyes in a transparent manner.