## Is the focus on wait times blinding us to other healthcare issues?

newcomer to our community could be forgiven for thinking that the only healthcare services offered in Ontario are cataract surgery, cardiac procedures, cancer surgery, hip and knee replacements, and MRI and CT exams. That's because the bulk of the discussion surrounding healthcare revolves around wait times for these five services.

Our politicians have embraced the concept of wait time management as a means to ensure that our overburdened healthcare system is able to respond effectively and efficiently to patient needs. It's hard to disagree with this kind of investment in life altering and life saving procedures, but as wait times for these services continue to decrease, it's time for the government to take a second look at their investment in preventive eye care.

As an optometrist in Windsor and Essex County, I provide community-based eye care services every day. Eye examinations provided by an optometrist or physician are critical in the early detection of sightthreatening conditions including cataracts, age-related macular degeneration (AMD), ocular complications resulting from diabetes and glaucoma. Each year, Ontarians

rely on their optometrists to preserve their sight by diagnosing and managing these visual conditions and referring them for more specialized services as needed.

While our government's efforts focus on acute care services like cataract surgery, what becomes of the patient who

presents to my office with glaucoma or AMD? These chronic conditions are debilitating and are becoming increasingly common as the population ages.

While the government's commitment to reducing cataract wait times is laudable, whether a patient waits 8 weeks or 16 weeks for their surgery has little, if any, impact upon the success of the outcome. However, each and every day that a patient with glaucoma is denied treatment, irreversible and preventable vision loss results.



commentary

Dr. Todd Wilbee **Optometrist** 

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In Windsor and the surrounding area, 13.6 per cent of the population is over the age of 65. In the next 5 years, the population of Canadian seniors will grow by more than 14 per cent.

What plans does the government have to address the inevitable proliferation of chronic eye disease in our community?

My colleagues and I are locally available and able to contribute to a solution that

ensures that the provincial government's eye care funding is utilized in an efficient and cost-effective manner to meet the needs of patients in our community, and throughout Ontario.

Ultimately, the solution to these issues is found in recognizing and valuing the role that primary eye care professionals play in achieving the government's key eye health priorities. It means ensuring that the funding provided to accomplish these objectives is directed to preventive care as well as to acute care services. It means ensuring that we do not overlook one pressing eye health condition for the sake of another.

As the government contemplates budgetary decisions for the upcoming fiscal year, please consider pressing your MPP to ensure that the Minister of Health and Long-Term Care gives primary eye care the attention it desperately needs. One day, your vision, or that of a loved one, may depend upon it.

Dr. Todd Wilbee is an optometrist who lives and practices in Essex County.

<sup>1</sup>From April 2004 to March 2005 111,194 cataract surgery procedures were performed in Ontario. ICES Atlas: Access to Health Services in Ontario: 2nd

## LETTERS TO THE LDITOR

## Pelee Island crash victim finally home

After five months of being hospitalized, 20-yearold Justin Mullins of Maidstone was finally discharged on Jan. 19 to be home with his family.

Justin was involved in a car accident on August 19, 2006 on Pelee Island, which almost claimed his life. Alcohol was not a factor in the accident and the family believes unsafe road conditions on Pelee Island played

Unfortunately, Justin was not wearing his seatbelt and suffered severe head trauma among other injuries. He spent a lengthy stay in the Intensive Care Unit at Hotel Dieu Grace Hospital in Windsor. He was transferred

to Parkwood Hospital in London for intensive physiotherapy. He was then transferred to Windsor Regional Hospital. Now, he continues therapy at home and as an outpatient.

There are so many people to thank for their support and overwhelming concern for Justin. First, we are so grateful that the people with him in the accident, his girlfriend Nicole Mahon and friends Kent Hergott and Lindsay Moskal have since recovered and are doing well. We are also thankful to the entire group of health care professionals who treated Justice. Special mentions to first on the scene, Nurse Marlene and the Pelee Island Fire and Rescue Services, Neuro-surgeon Dr. Jhawar and ICU nursing staff.

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Wedding Invitations (Until Feb. 28/07)

We would also like to thank family, friends and neighbours for the cards of support, flower arrangements, gift baskets, food and gift certificates. A very special mention to Paul Mullins, who has always been there as a family friend.

Thousands of people throughout the karting world checked the website of Justin's accident and wanted updates on his recovery. To his large group of friends we are so glad that he has friends like you. The devotion of his girlfriend Nicole Mahon and long-time best friend Denny Dumas has been nothing but magnifi-

To our immediate families for their love and support, we are most grateful.

Justin's strong motiva-

tion, determination, will power, youthful age, good physical condition and his drive for life played a tremendous part in his recovery. When something tragic happens to a young person, it touches the heart

of many different people and they truly care.

Justin would like to thank everyone for their prayers and heartfelt concern. He would also like to send a message to everyone to please use a seatbelt. Putting on a seatbelt may save your

Justin's astounding recovery is truly a miracle.

> Grace and Jim Mullins, Melissa and Krista and their families



