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THE SIGNIFICANCE OF CLINICAL - DEMOGRAPHIC AND SOCIAL PARAMETERS IN THE EVALUATION OF THE QUALITY OF LIFE OF BLIND PEOPLE WITH GLAUCOMA AND DIABETIC RETINOPATHY

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Blindness represents a terminal stage of many ophthalmological diseases, prevents proper orientation in space and synchronised functioning of the organism as a whole and normal performance of everyday functions, activities and professional duties, because of its crucial influence in socialization and quality of life, with glaucoma and diabetic retinopathy as the most common causes of eventual loss of vision. The study aimed to examine the significance of clinical-demographic and social parameters in the evaluation of quality of life of blind people with glaucoma and diabetic retinopathy and to determine any differences in quality of life between these two conditions. The study enrolled 70 people with glaucoma and 70 with diabetic retinopathy, over the age of 18, in whom by way of ophthalmologic examination the diagnosis of blindness was established, in accordance with the MKB-classification and abiding by the examination protocol and using adequate equipment. The following clinicodemographic and social parameters were taken into account and analyzed: etiology, gender, age, place of living, occupational status, marital status, living conditions, Braille literacy, social life, comorbid conditions, mobility, selfcare ability, everyday activities, pain/inconvenience and anxiety/depression. The analysis of the clinical parameters of mobility, selfcare, everyday activities, pain/inconvenience, anxiety/depression and comorbid states indicate a significant contribution to better quality of life for blind people with glaucoma compared to those with diabetic retinopathy. The examinees were of both genders, came from urban and rural areas, most of them were not Braille literate, were over 65 years of age, married, with a place to live, pensioners, and in relation to these parameters tehere were no significant differences in quality of life assessed in the study. Acta Medica Medianae 2016;55(4):37-45.

Key words: blindness, glaucoma, diabetic retinopathy