

KVALITET ŽIVOTA SLEPIH I SLABOVIDIH

QUALITY OF LIFE OF BLIND AND VISUALLY IMPAIRED PERSONS

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SAŽETAK

Uvod: Slepilo je najteži oblik vidne nesposobnosti, kada je ostatak vida na boljem oku manji od 0,05 (3/60- broji prste na tri metra) pa sve do gubitka osećaja za svetlo. U kategorije slepih lica spadaju i osobe čije je vidno polje suženo na manje od 10 stepeni oko tačke fiksacije, nezavisno od vidne oštine. Slabovidnost je lakši stepen vidne nesposobnosti, sa ostatkom vida na boljem oku između 0,3 i 0,05 (3/60) ili suženje vidnog polja na 20 stepeni oko tačke fiksacije.

Cilj našeg istraživanja je procena kvaliteta života u uzorku populacije slepih i slabovidnih osoba.

Metod: Istraživanje po dizajnu studije preseka je sprovedeno na populaciji slepih i slabovidnih osoba koji su članovi Saveza slepih u Republici Srbiji (RS). Studijom su obuhvaćene 324 slabovide i slepe osobe širom RS. Naime, metodom slučajnog izbora (preko kompjuterskog listinga) bila su izabrana 11 udruženja slepih i slabovidnih osoba od ukupno 45 čiji su članovi učestvovali u ovom istraživanju. Istraživanje je sprovedeno u periodu od početka marta do kraja juna 2023. godine. Kao instrument za prikupljanje podataka kreiran je upitnik koji je autor osmislio posebno za ovo istraživanje. Upitnik se sastojao iz 96 pitanja.

Prvi deo upitnika se sastojao od grupe pitanja koja su se odnosila na sociodemografske karakteristike ispitanika (14 pitanja) i podatke o vidu (33 pitanja). Drugi deo upitnika ispitivao je kvalitet života povezan sa vidom, naime u drugi deo

upitnika inkorporirana je NEI VFQ-25 skala (National Eye Institute: Visual function questionnaire 25) koja je podeljena u 12 subskala (domena) koje se odnose na ispitivanje: opšteg zdravlja, vida uopšte, bola u oku, poteškoća u aktivnostima povezanim sa vidom na blizinu, poteškoća u aktivnostima povezanim sa vidom na daljinu, ograničenja u socijalnom funkcionisanju zbog problema sa vidom, mentalnih zdravstvenih problema zbog vida, funkcionalnog ograničenja usled problema sa vidom, zavisnosti od drugih osoba zbog problema sa vidom, poteškoća u vožnji, poteškoća sa kolornim vidom i poteškoća sa perifernim vidom.

Rezultati: Ovom studijom je obuhvaćeno 324 ispitanika, 46% ispitanika muškog i 54% ispitanika ženskog pola. Prosečna starost ispitanika bila je 50,86 ± 17,56 godina (srednja vrednost ± standardna devijacija (SD)). Većina ispitanika je prijavila da živi u gradu (49,1%), u dvočlanjoj (23,8%) ili tročlanjoj porodici (25,3%), da je završila zanat ili srednju školu (62,0%) i da ima mesečna primanja 20.000-50.000 dinara (66,4%). Većina ispitanika je navela da je u braku ili vanbračnoj zajednici (49,4%), sa dvoje dece (35,5%) ili bez dece (36,7%). Većinski ispitanici su prijavili da ne konzumiraju cigarete (57,7%) i alkohol (53,7%) i uglavnom vode sedentarni način života (31,8%).

Zaključak: Postoji potreba za pravovremenim i adekvatnim lečenjem osoba sa slabim vidom, kao i za zalaganjem za uspostavljanje odgovarajućih i funkcionalnih rehabilitacionih službi. Kvalitet života, koji meri ukupan uticaj bolesti na pojedinca, bio je nizak kod osoba sa slabovidnošću i slepilom. Usluge za osobe sa slabim vidom, koje uključuju rehabilitaciju, omogućiće sveobuhvatnu brigu o vidu i time poboljšati njihov kvalitet života.

Cljučne reči: Slepí, slabovidi, kvalitet života.

ABSTRACT

Introduction: Blindness is the most severe form of visual impairment, defined as having a remaining visual acuity in the better eye of less than 0.05 (3/60 - counting fingers at three meters) up to the complete loss of light perception. The category of blind individuals also includes those whose visual field is constricted to less than 10 degrees around the point of fixation, regardless of visual acuity.

Low vision represents a milder degree of visual impairment, with remaining visual acuity in the better eye between 0.3 and 0.05 (3/60), or a visual field narrowed to 20 degrees around the point of fixation.

The aim of our research is to assess the quality of life in a sample population of blind and visually impaired individuals.

Method: This cross-sectional study was conducted on a population of blind and visually impaired individuals who are members of the Association of the Blind in the Republic of Serbia (RS). The study included 324 blind and visually impaired persons from across the country. Using a random selection method (via computer-generated listing), 11 associations of the blind and visually impaired were chosen from a total of 45, and their members participated in this research. The study was carried out from the beginning of March to the end of June 2023.

As a data collection instrument, a questionnaire was specially designed by the author for this research. The questionnaire consisted of 96 questions.

The first part of the questionnaire included a group of questions related to the sociodemographic characteristics of the participants (14 questions) and information regarding their vision (33 questions).

The second part of the questionnaire examined vision-related quality of life. Specifically, this section incorporated the NEI VFQ-25 scale (National Eye Institute: Visual Function Questionnaire 25), which is divided into 12 subscales (domains) addressing: general health, overall vision, ocular pain, difficulties with near-vision activities, difficulties with distance-vision activities, social functioning limitations due to vision problems, mental health issues related to vision, role difficulties due to vision, dependency on others due to vision problems, difficulties with driving, color vision problems, and peripheral vision difficulties.

Results: This study included 324 participants, of whom 46% were male and 54% female. The average age of the respondents was 50.86 ± 17.56 years (mean ± standard deviation (SD)). The majority of participants reported living in urban areas (49.1%), in two-member (23.8%) or three-member households (25.3%), having completed vocational or secondary education (62.0%), and having a monthly income between 20,000 and 50,000 dinars (66.4%). Most participants stated that they were married or in a common-law relationship (49.4%), had two children (35.5%) or no children (36.7%). The majority also reported that they do not smoke (57.7%) or consume alcohol (53.7%), and generally lead a sedentary lifestyle (31.8%).

Conclusion: There is the need for prompt and proper treatment of low-vision patients and advocacy for the establishment of adequate and functional rehabilitation services. Quality of life which measures the overall impact of a disease on an individual was low in people with low vision and blindness. Low-vision services, which include rehabilitation, will provide comprehensive eye-care services and thus improve their quality of life.

Keywords: Blind, visually impaired, life quality.