Study suggests odds of visual field testing for glaucoma decreased most for Hispanics in past decade

December 10 2012

The odds of individuals with open-angle glaucoma undergoing visual field testing decreased for all racial/ethnic groups from 2001 through 2009, but the odds decreased the most for Hispanic men and women in a study of enrollees in a large U.S. managed care network, according to a report published in the December issue of *Archives of Ophthalmology*.

Open-angle glaucoma (OAG) affects more than 3 million individuals in the United States and is a major cause of visual impairment. Studies have found the condition is more prevalent in racial minorities compared with whites, and that racial minorities are more likely to experience vision loss and blindness from OAG, according to the study background.

Joshua D. Stein, M.D., M.S., and colleagues at the University of Michigan, Ann Arbor, examined whether racial disparities exist in the use of ancillary testing to evaluate individuals with open-angle glaucoma. Researchers identified all enrollees age 40 years and older in a large managed care network who had retinal or optic nerve conditions that could warrant ancillary testing.

Among the 797,879 eligible enrollees, 149,018 individuals had open-angle glaucoma. Researchers performed statistical analyses to determine the odds and probabilities each year of undergoing visual field testing and other procedures for black (n=15,905), white (n=118,062), Hispanic (N=9,376) and Asian American (n=4,350) men and women and then

compared the groups, according to the study.

The odds of undergoing visual field testing decreased for all groups from 2001 through 2009, decreasing most for Hispanic men and women (63 percent and 57 percent, respectively) and least (36 percent) for Asian-American men. By comparison, the odds of undergoing other ocular imaging increased for all groups from 2001 through 2009, increasing most (173 percent) for black men and women and least (77 percent) for Hispanic women, according to the study results.

"While it is encouraging that black individuals are receiving similar or greater levels of monitoring of OAG relative to white individuals, it is disconcerting that there are significant disparities in glaucoma testing among the Hispanic population, the fastest growing racial minority in the United States," the authors comment.

The authors note further research should focus on reducing racial disparities.

"Although increases in glaucoma testing have been noted in recent years among Hispanic men and women for some types of ancillary tests, efforts should be made to better understand and overcome some of the persistent barriers to monitoring for glaucoma in this group," they conclude.

In an accompanying editorial, Eve J. Higginbotham, S.M., M.D., of the Association of American Medical Colleges, Washington, D.C., writes: "Yes, this is a perfect storm in which the stakes are high; however, our capacity to navigate this storm and unravel this puzzle of health equity has never been greater."

"Although there were increases across all ethnic groups for ocular imaging testing, Latinos and Latinas evidenced no significant differences

in the odds of undergoing these tests from 2001 to 2009. Moreover, there was a decrease in visual field testing during the observation period for all groups, but the greatest decrease in testing was noted among Latinos and Latinas," Higginbotham continued.

"There is light at the end of the tunnel despite a confluence of factors, such as inequalities among populations related to education and income. However, unless we pay continued attention to the adverse trends that have persisted for several years, disparities in health care will continue," Higginbotham concludes. "If, in our discipline, we place a priority on reducing inequity in testing and, by extension, treatment across all populations, we can lead the rest of the house of medicine to achieve health equity."

More information: *Arch Ophthalmol*. 2012;130[12]:1579-1588. *Arch Ophthalmol*. 2012;130[12]:1601-1602.