

# Living experiences of people with refractive error – A qualitative study from Nepal

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## Abstract

**Purpose :** Although refractive error is the commonest ocular abnormality and the commonest cause of global visual impairment, qualitative studies exploring the impact of refractive error in people's lives are sparse. This study was therefore carried out to explore the impact of refractive error on quality of life.

**Methods :** We conducted 101 semi-structured in-depth interviews with people having refractive error, with or without corrections. Purposive sampling was applied to capture issues of people with diverse spectrum of refractive error. The interviews were recorded, transcribed and analysed using NVivo Software, Version 11 (QSR International Pty Ltd.). The thematic analysis was done using both inductive and deductive processes. We compared quality of life issues among people with various types of refractive error and among people with different refractive corrections.

**Results :** The median age of the participants was 29 (range: 18 to 74) years. More than half were male (n=55) and myopes (n = 56). Almost one fifth were surgical emmetropes (n = 19). Twenty-nine participants had presbyopia. Nearly half of the participants (n = 47) had uncorrected refractive error. In regards to the refractive correction, sixty participants used glasses to varying frequency. Similarly 20 had surgical correction and 17 used contact lenses.

During thematic analysis, 3,477 comments were coded into 381 nodes under 8 broad themes: Convenience, Activity limitations, Health concerns, Psychosocial well-being, Economic well-being, Visual symptoms, Ocular comfort-symptoms and General symptoms. Inconveniences wearing glasses was the most important issue in glasses wearers. Whereas, possibilities of having side effects or complications were the major concerns for participants wearing contact lenses. Similarly, concerns regarding the

possibility of having to wear glasses again due to relapse of refractive error were the major concerns for the participants who had refractive surgery. For participants with uncorrected refractive error, activity limitations and symptoms were the most important issues.

**Conclusions :** This study enriches the understanding of issues important to people with uncorrected and different types of refractive corrections. The quality of life issues identified in this study will be used to develop item banks to measure refractive error specific quality of life for developing country setting.

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