INTERVIEW

SCREEN

Insights into the work of our community screening sites

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What does a normal week in your practice look like, and where does I-SCREEN fit into it?

It is a mid-sized optometric and optical practice; our schedule for appointments is fully booked for two to three weeks, and we provide many specialised services (fitting speciality contact lenses, paediatric care, binocular vision problems, etc.). We receive many patients referred to us for these reasons, and we often make further referrals. I-SCREEN is a valuable addition to our services, as our patients frequently present with atypical problems, and macular pathology sometimes needs to be excluded.

What surprised you once you started?

First, I was surprised by how large a proportion of posterior pole pathology we actually detect – not only through I-SCREEN, but also in general. I-SCREEN improves the structure here, and the collaboration with clinics is exemplary. The technical surprise was that the image upload procedure was much more complex than expected. Also, follow-up and communication of findings take quite some time. But it is a pilot project, and we have had to accept this. For routine practice, it would need to be greatly simplified.

It also surprises me how the perception of AI has changed in only 1.5 years since we began the screenings: initially, no one was particularly concerned about AI being employed at any stage. Now, we sometimes need to emphasise that data are anonymised and that people's images will only be evaluated by AI in post-processing.

How do patients react when you explain I-SCREEN to them?

Most of them say: I trust you; do whatever you think is good for me. Besides, there are sometimes questions about AI and about their condition, of course. When they hesitate about the use of AI, it is not so much about their own data safety – it is more general, or political; some do not support using AI en masse at all.

Has anything changed in how you talk to people over 55 about their eyes?

Not much has changed – I think the cornerstone of communication is trust. I sense that in the near future optometrists will do a lot more screening, and telemedicine will be part of this. But the relationship and trust between practitioners and patients remain by far the most important factors.

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Find more information about the project on our website.

I-SCREEN website

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