



MEDICAL EYECARE MISSION

Grenada 2025



EYES ON GRENADA

Joan Crawford
President, Mission Organizer

Joan Henry
Vice President, Mission Organizer

Maxwell Cheng, OD –
Lead Optometrist and Eye Care
Coordinator

Roy Vincent
Vice President, Mission Organizer

Dear Doctors,

This report by the Alliance of Jamaican and American Humanitarians (AOJAH), is presented to Grenada's Ministry of Health as an official record detailing our recently completed Medical Eyecare mission in Grenada.

Overview

AOJAH's 2025 4-day Medical Eyecare Mission in Grenada was conducted from April 14 – 17 and it was very successful. For the first time on the island, we conducted optometry clinics in 2 parishes while simultaneously performing cataract surgeries at the General Hospital. The number of patients we attended to at our clinics exceeded our projections but our team of volunteers was able to attend to everyone with patience and professionalism.

Our services were free to all who attended, and as usual, we distributed, free of charge, prescription glasses, sun glasses, medication and canes to all those who required them.

- On Monday and Tuesday, April 14 and 15, our optometry team attended to 543 patients at the Gouyave Medical clinic in the parish of St. Marks.
- On Wednesday and Thursday, April 16 and 17, we attended to 656 patients at the Youth Center in the parish of St. George. Our 4-day total for our optometry clinics is 1,199.
- On Monday April 14, our ophthalmology team performed triage on over 100 patients at the General Hospital. On Tuesday thru Thursday, they performed 47 cataract surgeries:
 - April 15 – 15 surgeries
 - April 16 – 18 surgeries
 - April 17 – 14 surgeries

In total, the optometry and ophthalmology teams saw over 1,350 patients, and treated 1,246.

We disbursed the following items to patients during our 4-day clinic:

- 1,047 eye prescription glasses



- 350 sunglasses
- 886 bottles of Timolol to 145 patients
- 6 White canes
- Provided a year's worth of glaucoma eye drops to patients

We also donated 2 boxes of OB supplies to the General Hospital; they contained labor and delivery lap sponges and approximately 15 electro surgical handpieces for cautery. Another 2 boxes were donated containing cataract surgery supplies.



As we did last year, we invited 2 "special" groups to attend our clinics and offered them preferential treatment in terms of expediting their service at the clinics. We saw 11 patients from the Grenada Council for the Disabled, and 7 Sickle Cell Anemia children.

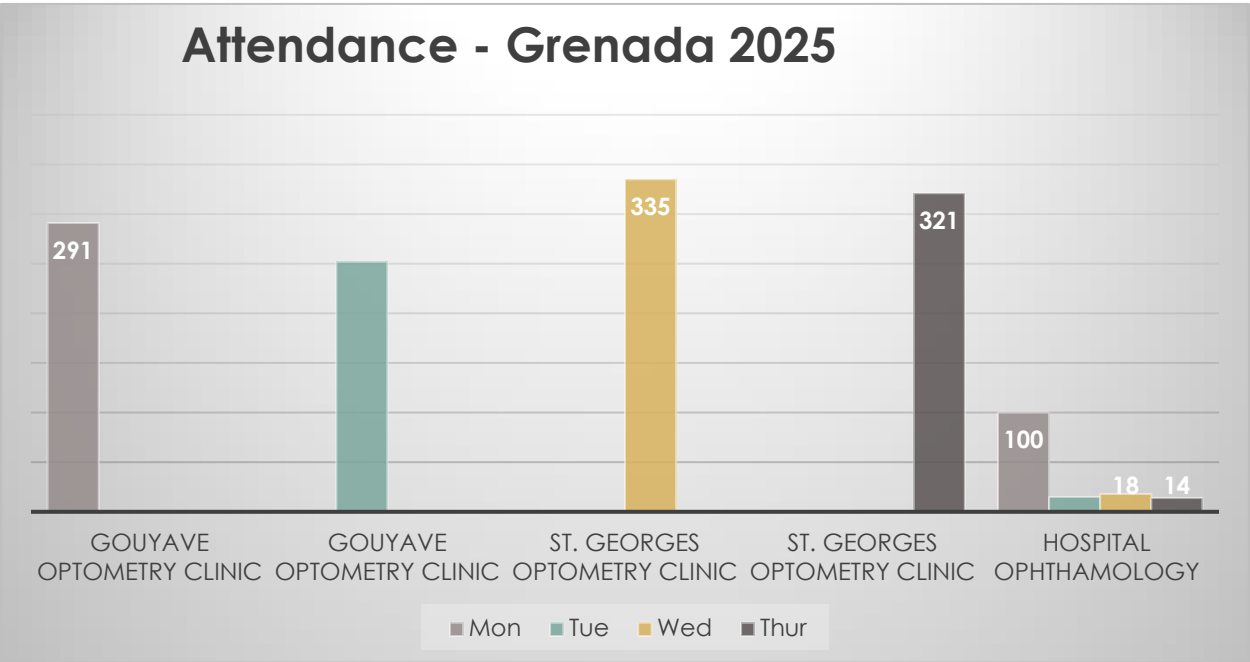
Of the 1,199 patients we attended to at the 2 clinics, we have identified 324 (27%) as requiring follow-up by the Ministry of Health. Paper copies of the diagnostic records of these patients will be submitted to at our meeting on April, 24.

All the Grenadian personnel we encountered at the 2 clinic locations and the General Hospital were very friendly and accommodating. We would like to give special recognition to Kayla Patterson, Administrative Assistant at the Gouyave clinic, and also the security team. Also, Cordell Louison and his security team at the Youth Center, and Dr. Nathanya Julien at the General Hospital for her professionalism and flexibility.

Sincerely,

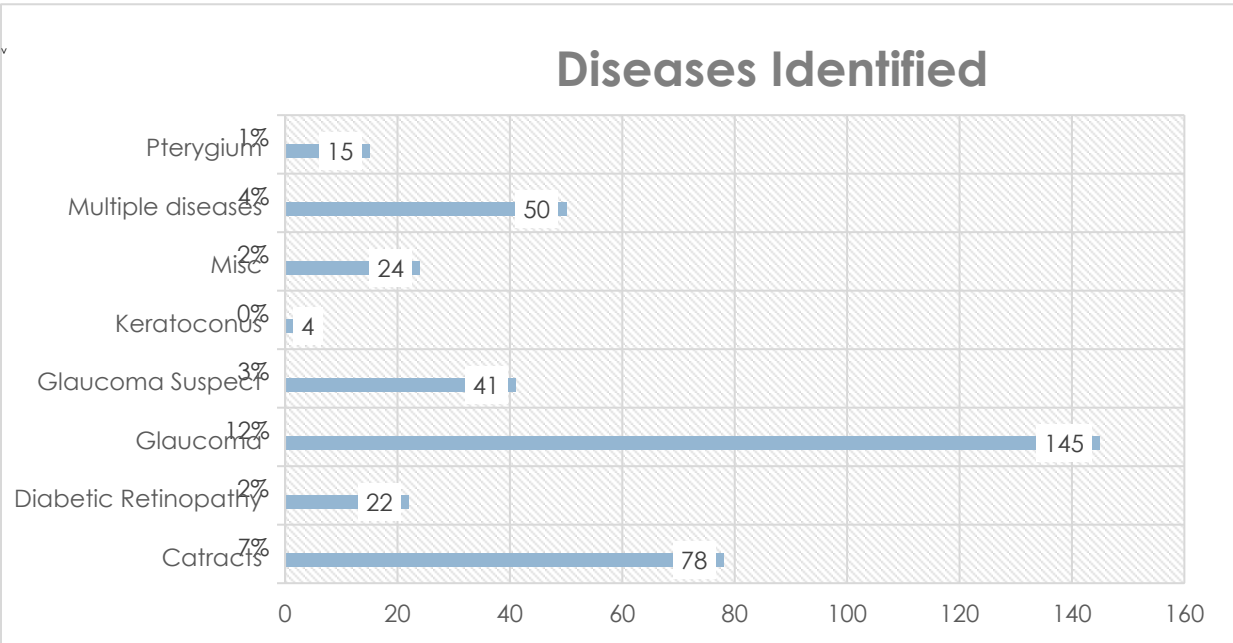
Roy Vincent

Patients Attended To

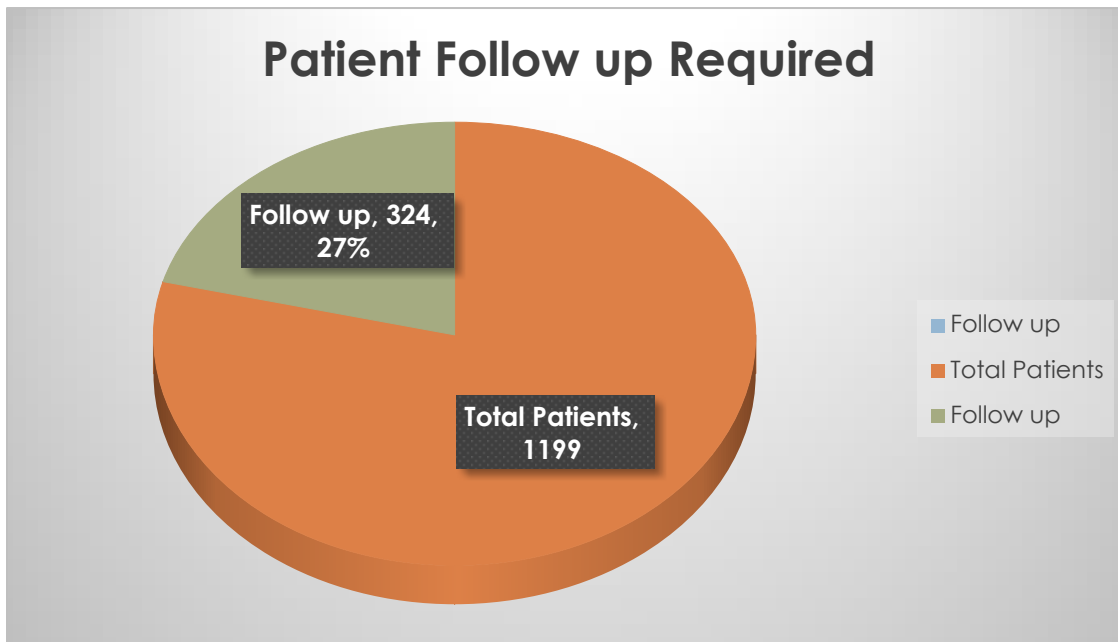


Diseases Identified

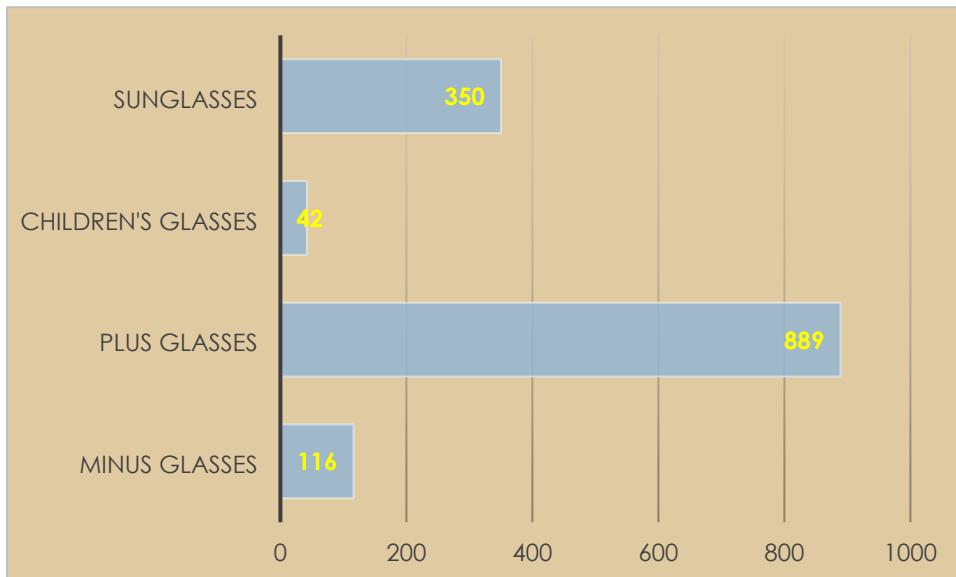
Diseases		
Cataracts	78	7%
Diabetic Retinopathy	22	2%
Glaucoma	145	12%
Glaucoma Suspect	41	3%
Keratoconus	4	0%
Misc	24	2%
Multiple diseases	50	4%
Pterygium	15	1%



Follow Up Required



Glasses Disbursed



Doctor's Reports

Dr. Maxwell Cheng, OD

The Optometry team consisted of 7 Optometry doctors from the US (Dr. Maxwell Cheng, Dr. Daphne Chan, Dr. Curt Simmons, Dr. Jennifer Hua, Dr. Amy To, Dr. Nicolas Gonzalez III, and Dr. Ogarth Hutton). There were also 2 techs (Katrina Santos, Cindy Carballo) and an optician (Iva Prosser) who joined the team, as well as a team of nurses and volunteers, Grenadians and expats, who were invaluable to making the medical mission a success (Dr. Terence Marryshow, Velma Purcell, Desiree Dabreo, Allyson Clouden, Anita Cromwell, Cheryl Allen, Margaret Marryshow Vincent, Brenda Peters, Brenda Whiteman, Marcel Belmar, Valarie Gordon, Andrea Welch, Marina Bedeau, Edlyn Williams, Delores Clark).

Close to 1200 patients were seen in the Optometry clinics. Of these, 324 patients (27%) required follow up care, 145 patients (12%) were treated for glaucoma with a year's supply of medication, 78 patients (6%) had cataracts that needed surgery, 22 patients (2%) had diabetic retinopathy, and 50 patients (4%) had multiple eye diseases.

The Optometry team also made special accommodations for children with sickle cell anemia and individuals with disabilities. Free eyeglasses, glaucoma medications, and other eye drops were provided if needed by the patients. Over 350 pairs of sunglasses were given out to patients to prevent the development of cataracts and pterygia due to the very high ultraviolet light exposure in the Caribbean.

The waiting list for cataract surgery already is several hundred people long, but only a few hundred cataract surgeries are done each year in the country. Therefore, increasing the opportunity for more Grenadians to get cataract surgery and allowing them to see again was quite impactful. In addition, the team did laser surgery to help treat glaucoma, which is an eye disease that can lead to permanent blindness if untreated and which is very prevalent in Grenada. The Ophthalmology team also included an internal medicine doctor (Dr. Jessica Siak), a nurse (Lakha Mathewkutty), and the local host Ophthalmologist (Dr. Nathanya Julien) who assisted on the eye surgeries.

The AOJAH Medical Mission hopes to return in the future, recognizing the urgent need for more eye care in the Caribbean. Eyecare has been shown to be the most effective development intervention for any country, with every dollar spent on eyecare results in 36 times in returns on investment for adults. In children, this return on investment shoots up to 72 times. Therefore, eyecare has been proven to be one of the most effective ways to improve the lives of not only individuals but also of their families and communities.

Dr. Garrick Chak, MD

We saw about 100+ patients on Monday to triage and preop for surgery or laser.

Over the course of our service, we performed:

glaucoma selective laser trabeculoplasty for 8 eyes (6 patients)

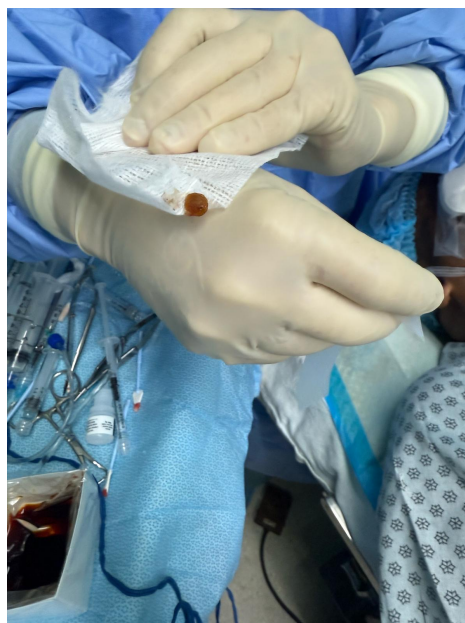
We performed 2 different approaches of cataract surgery -- manual small incision cataract surgery, and also phacoemulsification cataract surgery (a minimally invasive clear corneal approach that involves no bleeding) for around 50 patients.

The range of cataracts varied from a 21-year-old female with a thin posterior polar type (in the "bulls eye" of visual axis) to legally blind brunescent nuclear cataract, which changed a life from preop light perception only to being able to see one's face the first day after surgery.

Photo attached as an example of a blinding cataract successfully removed from one's eye during our service.

Challenges, Commendations, and Recommendations:

Dr. Julien demonstrates exceptional resourcefulness in maximizing the utility of available resources. However, her effectiveness could be significantly enhanced with the addition of essential equipment—specifically, a surgical microscope for the operating theater and an Optical Coherence Tomography (OCT) machine for the eye clinic, which enables imaging for details too small for the naked eye to examine. Notably, Dr. Julien has been requesting an OCT for the past four years. Providing one device at each location would empower a clinician known for her conscientious judgment and judicious resource use, ultimately yielding substantial benefits for the Grenadian community.



A successfully removed dense Brunescent cataract

Dr. O'Reese Knight, MD

Logistically, the Eye Operating Theater has 2 beds, 1 operating microscope, and 2 cataract surgery machines that have been rendered obsolete. One machine is no longer functioning properly and the vendor has stopped producing a necessary piece that would allow the second machine to function.

We asked Dr. Julien about her cataract case load and she mentioned a backlog of 350 cases and a current throughput with the existing resources of 6 cases per week between her and Dr. Lugo. This is a backlog of 58 weeks. And as you may know the 2nd leading cause of blindness (uncorrected refractive error is #1), the prevalence increases with the age of the population, and leaving it untreated has significant downstream consequences in terms of workforce productivity losses. Further, on a volume basis - as is the case with the ophthalmology department at any hospital - a larger percentage of the hospital's patients are seen by Drs. Julien and Lugo than any other department at the hospital.

Providing 2 modern operating scopes would allow an immediate increase in surgical capacity, and having at least one functional cataract surgery machine would significantly decrease the duration of a cataract case. Currently, Drs. Julien and Lugo complete an MSICS case in maybe 30-45 minutes. A phacoemulsification case with the proper visualization can be completed in 10-25 minutes. Investing in these 2 items would raise the level of care they are able to provide, reduce morbidity, expand the numbers of patients that can be served and significantly increase clinical revenue for the hospital.

There are additional efficiencies that can be gained and perhaps a discussion is a better forum, but these capital expenditures would be immediately transformative.

Dr. Brian Lee, MD

I agree with both Dr. Garrick and Dr. O'Reese that more resources are needed. The mission made that patently obvious.

The surgical backlog is huge and another ophthalmologist might help.

The space allocated for eye exams is rather small and more space might help.

Both Drs Julien and Lugo seem very dedicated.

Our Volunteers

Dr. Maxwell Cheng, OD	Dr. Daphne Chan, OD	Dr. Nicolas Gonzalez III, OD	Dr. Jennifer Hua, OD	Dr. Amy To, OD
Dr. Curt Simmons, OD	Dr. Ogarth Hutton, OD	Dr. Brian Lee, MD	Dr. Garrick Chak, MD	Dr. O'Rese Knight, MD
Lakha Mathewkutty, RN	Katrina Santos	Iva Prosser, Optician	Cindy Carballo	Dr. Terence Marryshow, MD
Desiree Dabreo	Velma Purcell, RN	Christine Moore	Cheryl Allen, RN	Allyson Clouden, RN
Anita Cromwell, RN	Brenda Peters, RN	Brenda Whiteman, LPN	Marcel Belmar	Edlyn Williams
Joan Henry, RN	Joan Crawford, RN	Delores Clarke	Margaret Vincent, RN	Valarie Gordon
Andrea Welch	Jessica Siak, MD	Marina Bedeau	Roy Vincent	