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## **Dynamics of the case rate age cataract population of the amur region**

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**Abstracts:** The structure of ophthalmic pathology in adults important place age-related cataract. During the study period (1999-2010) the proportion of the total cataract in the Amur region ranged from 18.4% to 22.7%, while the share of primary disease from 12.5% to 18.3%, which may indicate the deterioration of the epidemiological situation of this nosology. Differences share a common cataract among the urban and rural populations were minimal and similar in terms of dynamics. However, we observed a more dynamic growth in the share of primary disease of the rural population (73%), which may indicate, as inadequate access to surgical care, as well as the deterioration of the epidemiological situation of this nosology.

**Key words:** cataract, primary disease, the overall incidence, the Amur region.

The saved up experience of ophthalmologic practice testifies that the most frequent reason of a blindness and a slabovideniye at persons of the senior age groups is the age cataract [1, 3]. The number of elderly people is enlarged progressively among the population of the whole world. During 1980-2020 the estimated augmentation of the elderly population in the developed countries will make 186%, in developing countries – 356%. On the basis of it WHO believes that by 2025 about 50 million aged people of 60 years will have various degree of intensity of a phacoscotasmus. From them about 17 million will need surgical treatment [1, 4]. Only in Russia more than two hundred thousand operations for a cataract [5, 7] are annually carried out. Thus in recent years rather accurate tendency to augmentation of number of patients in group able-bodied (till 55 years) age at which the importance of this disease in structure of the reasons of disability on vision makes about 6% [2, 6] becomes perceptible. Due to the postareniye of the population of economically developed countries of the world and Russia the problem of cataracts is one of most socially actual. The ophthalmology saved up enough of the facts, testifying that this disease multifactorial. Epidemiology of a cataract bind to various factors which number, in particular, treat: racial accessory, character of a delivery, environmental pollution (including, salts of serious metals), composition of drinking water, smoking, pathological changes of microelement structure of a lens, application of medicinal preparations and senilism of an organism [4, 7].

### **Materials and methods**

Research at regional level was conducted on materials of annual statistical reports of LPU for 1999-2010, provided in the Amur medical information and analysis center. On the basis of the received melon were calculated and analysed the specific gravity of the general and primary case rate by an age cataract of inhabitants of the Amur region.

### **Results and discussion**

In structure of ophthalmologic pathology at adults of the Amur region the important place is taken by an age cataract. For the studied period (1999-2010) the specific gravity of the general case rate a cataract in the territory fluctuated from 18.4% to 22.7%, and the specific gravity of primary case rate from 12.5% to 18.3%. In comparison with 1999 to 2010 specific gravity of the general

case rate an age cataract it was enlarged by 16.5% (with 19.5 to 22.7%). Similar and even more expressed body height was observed on the specific gravity of primary case rate by a cataract – for 26.5% (with 14.4 on 18.3%). More detailed analysis of dynamics of specific gravity of the general and primary case rate an age cataract of the population of the Amur region testifies that similar changes on an orientation happen both among city, and among country people. Among urban population for a surveyed time interval body height of specific gravity of the general case rate made 12.5% (with 20.3 to 22.9%), and primary case rate - 15% (with 15.1 to 17.4%) with a tendency to further body height.

Among country people of loudspeaker of specific gravity of the general and primary case rate an age cataract I had more aggressive character. So from 1999 to 2002 we noted depression of studied indicators for 34% of specific gravity of the general case rate (from 20.1% to 13.2%) and for 24% of primary case rate (from 12.1 to 9.2%). Further since 2002 for 2005 we noted body height of specific gravity of an age cataract for 80% (from 13.2 to 23,8%) the general case rate and for 91.5% (from 9.2 to 17.6 %) primary case rates. And by 2006 depression of studied indicators on the average for 26% was observed. To 2010 specific I carried cataracts in oftalmopatologiya structure among country people I made 21.6% among the general case rate and 20.9% among the primary. Thus, for all studied period (1999-2010) body height of specific gravity of the general case rate by an age cataract made 7.5%, and primary 73% with a tendency to further body height. Differences of specific gravity of a case rate a cataract among urban and country people were minimum.

### **Conclusions**

Thus, for the last 12 years in the territory of the Amur region body height of specific gravity of the general and primary case rate by an age cataract, both among city, and among country people that can testify to deterioration of an epidemiological situation on this nosology becomes perceptible. We noticed more dynamic body height of specific gravity of primary case rate among country people (73%) that can testify to insufficient availability of the ophthalmologic microsurgical help to country people.

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