

What are the prevalent ophthalmic conditions in northern Israel? How do they differ from the UK?

The disease profile is very similar to the UK in most respects, with a couple of major exceptions. One of these is that the incidence of old trachoma is much higher in Israel than in the UK. This can be attributed to the large immigration of 60% of the Israeli population from Arab countries. Also prevalent are cataracts, diabetic retinopathy, aged related macular degeneration, ptosis, entropion, and ectropion..

How are ophthalmic services organised & delivered in northern Israel? How does it differ from the UK?

All medical services in Israel, are funded by a National Health system operated by compulsory state national medical insurance. There are four major providers, the largest being Clalit Health Services who cover approximately 3.8 million people, or 54% of the Israeli population. Clalit has a network of 14 hospitals, hundreds of primary care clinics, pharmacies and dental clinics throughout Israel. One of their hospitals is the Emek Medical Centre, where I spent my elective in the ophthalmology department under the guidance of the Chairman and Head Mr. Daniel Briscoe.

In general, a patient with an ophthalmic problem will present in the first instance to a primary care clinic in the community. The ophthalmologist seeing them may treat them in the clinic or refer them to a hospital. If the patient arrives at the hospital during work hours they are examined in the outpatient clinic, but after work hours they are examined in the ophthalmology department. Following examination, they are either admitted or discharged. Follow-up appointments may be made for sub-speciality consultations in the outpatients' clinic.

This organisational structure is similar to the UK, but the funding is completely different. In the UK we have a single-buyer health care system funded out of general taxation. The NHS is directly funded by the department of health, and it provides health care to the population free at the point of use. In Israel it is also funded out of taxation, but the money is transferred to the competing health care provider organizations.

Describe the diagnosis & management of the most prevalent ophthalmic condition in Northern Israel.

The most prevalent ophthalmic condition in Northern Israel is cataract. It usually presents with decreased visual acuity, sometimes with glare, and occasionally with myopic shift or monocular diplopia. The cataract may be seen on slit-lamp examination. This allows a diagnosis to be made without any laboratory test. Retinal examination must also be carried out in order to rule out retinal disease which may also cause a decrease in vision. Ultrasound imaging may be performed in order to rule out retinal pathology if the cataract obscures the examining doctor's view.

The definitive treatment for cataract is surgery using the technique of phacoemulsification and implantation of a posterior chamber intra-ocular lens. The technique involves removing the anterior part of the lens capsule. A probe with a needle is introduced into the anterior chamber of the eye, and ultrasound frequency waves break up the cataract while a pump sucks up the fragments through the tip of the needle. Once the entire lens has been removed, an artificial intraocular lens is implanted into the remaining capsular bag, provided the posterior capsule is intact. If it has been torn during the surgery, alternative placements of the intraocular lens include the anterior chamber and the sulcus. Modern intraocular lenses are foldable, and so can be introduced through the same small incision of less than 3 mm used for the phacoemulsification probe.

Does the specialty of ophthalmology play to my strengths? Would it be a sensible choice of career?

The best reason I have for thinking that ophthalmology is a good career choice is that I enjoy it. I tend, on the whole, to be good at things I enjoy, or perhaps to enjoy things I am good at. I find that I am highly motivated due to my fascination with Ophthalmology.

In addition, I am analytical; always a useful trait in any field of medicine or surgery. I have reasonably good manual dexterity, which can't hurt. I am told that I can communicate with patients well, which is another broadly useful skill. I also seem to have quite a good memory for many types of information, which is essential.

A career in ophthalmology would make use of all these strengths. Accordingly, I think it would be a good choice.