Ophthalmic nursing research: chronic neglect prompts grim diagnosis

A UK study indicates that ophthalmic nursing research is in critical condition after suffering chronic neglect, according to Professor Heather Waterman RN PhD, University of Manchester.

"I can’t but help view ophthalmic nursing research as rather like a sickly patient. It's on the critical list, it is not strong and needs a great deal of 'medicine' to improve," she told the Moorfields Bicentenary Scientific Meeting.

Prof Waterman conducted a review of the literature to establish exactly the state of research. Her review sought to identify the number, origin, quality and topic of ophthalmic nursing papers published, by nurses, since 1997.

Defining her study topic as research by nurses in the field of ophthalmology, she used a variety of search terms in databases such as CINAHL and Medline, and supplemented this work through a hand-search of key journals like Insight and ONJ.

The results indicate that since 1997 nurses published only 45 research papers, worldwide. She suggested that this number was probably an underestimate. For example, she was unable to locate one Swedish and two Finnish papers. Some journals do not report the qualifications of authors. These had to be excluded. She apologised to any authors of research papers that may not have been included in the review.

"There may have been some reviewer bias in this study, because I was the only one doing the review. There is also perhaps a bias towards the UK," said Prof Waterman.

In Prof Waterman's study the UK was the largest source of research, with 34 papers, followed by the USA with seven papers, while the Netherlands produced two, and Korea and China produced one each. Quality overall was average, with seven papers judged superior, 33 average and five poor.

There were 26 authors with links to universities, while 16 had no link and in three cases the links were unknown. Six authors had PhDs. Prof Waterman found that the quality of papers reviewed tended to be ranked higher among nurses with higher qualifications.

In terms of the topics tackled by the reviewed papers, evaluations of the nursing role topped the list, with 11 papers on this subject. Patient experience of blindness or eye disease shared second place with patient education, both with six papers. Patient satisfaction had four papers, as did pain, while management issues had three. Prof Waterman found two papers on epidemiology. Miscellaneous topics accounted for the remaining nine papers.

Multiple factors contribute to paucity of research

Prof Waterman concluded that ophthalmic research by nurses suffered from poverty and neglect.

"There was an average of 6.4 papers per year. Now given that there are 25 countries in EU that is less than one per country per year. The average per country is terrible," she said.

She said that some papers on issues concerning ophthalmic nursing lacked any authors who were nurses, and she believes this is a curious state of affairs.

"This means nurses were excluded from a large part of the research process, which is an anomaly when the topic is nursing," she said.

The situation is worrying because ophthalmic nursing research, carried out by nurses, is very important, said Prof Waterman.

"We do make a difference to patient outcomes."

They need to work with health education institutes to develop an R&D strategy. Healthcare providers must keep track of the nurses’ skills, participation and output of research. They need to make research part of career development, provide resources such as library and IT access. They need to make research part of their corporate plan and appoint a nursing research leader who has links to the health education institutes.

Health education institutes must develop a programme of research and provide research support.

New strategy needed

Prof Waterman proposed a strategy involving nurses, healthcare providers and health education institutes. Nurses need to take part in research when appropriate, and make research part of their career development and appraisal. They need to link to the researchers in their organisation, take part in studies and help establish priorities. The take home message: don’t do it alone.

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