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he role of optometrists is evolving. Practitioners are no longer just carrying out sight tests and checking ocular health. They are having conversations with patients about lifestyle choices and how these are affecting their health.

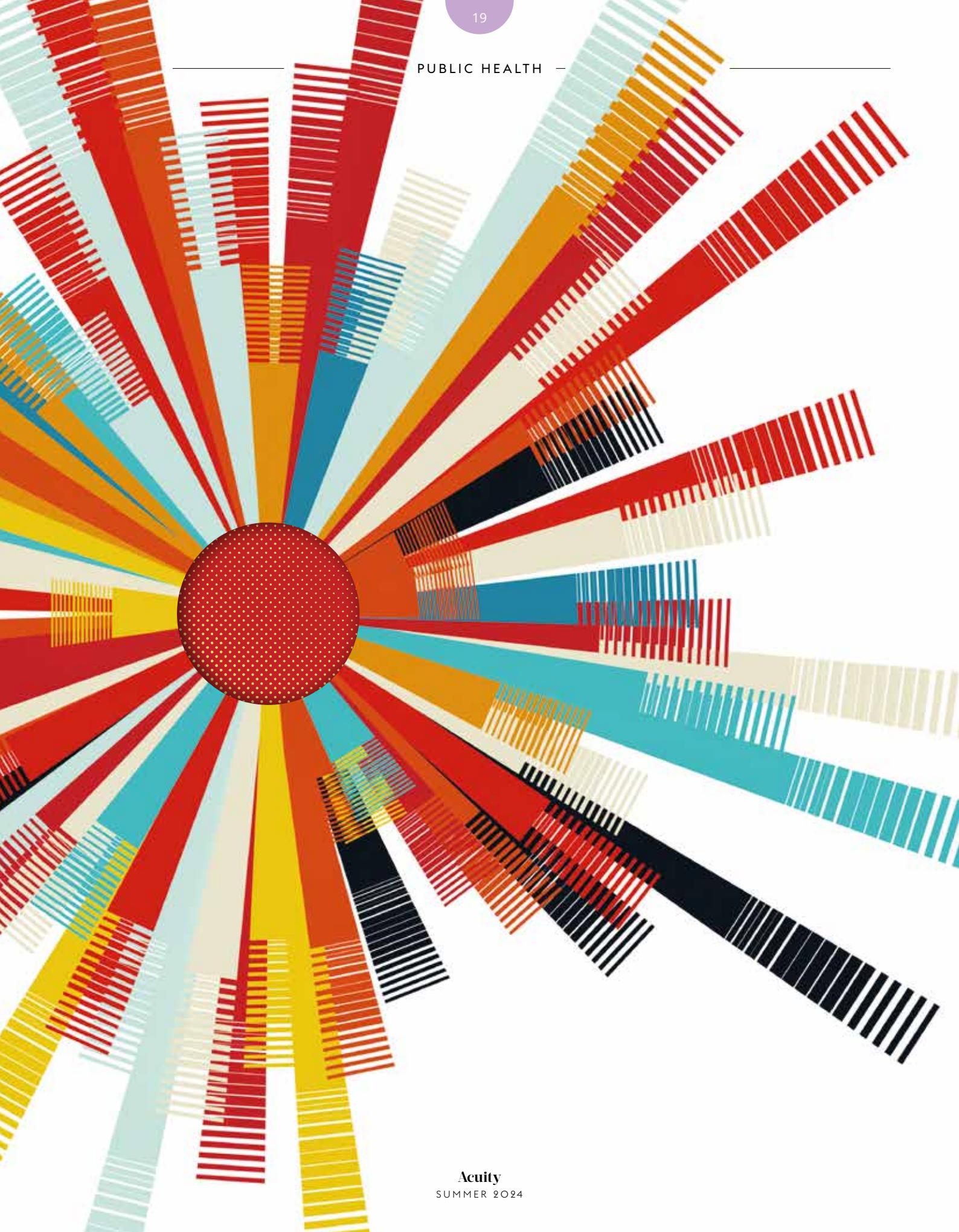
In autumn 2023 there were contract reforms for the NHS Wales optometry service (Welsh Government, 2023). Optometrists in Wales are now required to embed prevention and wellbeing into Wales General Ophthalmic Services eye examinations.

All optometry practice staff in Wales must carry out mandatory Making Every Contact Count (MECC) training. This shows them how to have conversations with patients about health, encourage people to make positive changes, and signpost to other services, including smoking cessation.

In Scotland, it is also mandatory for optometrists to ask patients whether they

Optometrists can play a vital role in encouraging patients to change unhealthy lifestyle choices and behaviours, says **Kellie Smith**.

# HEALTHY INFLUENCE



smoke. This has been a requirement since 2006 (NHS Scotland, 2006). Eilidh Thomson MCOptom, Vice-Chair of Optometry Scotland, says that optometrists have a breadth of knowledge of many health conditions and how these can affect ocular health. "Asking a patient whether they smoke is part of an optometrist's standard routine in Scotland. They will be in the habit of asking in both General Ophthalmic Services-funded examinations and private ones.

### SMOKING AND DISEASE

This year marks 70 years since the UK government officially acknowledged the link between smoking and poor health. The government took no action on smoking until 1954, when Sir Richard Doll and Sir Austin Bradford Hill published conclusive proof in the *British Medical Journal* (Richmond, 2005).

Since 1954, further studies have shown that smoking affects people's health. For example, it causes at least 15 types of cancer, including lung, kidney, stomach and bowel (Cancer Research UK, 2023). It also increases the risk of developing coronary heart disease and stroke (NHS, 2022).

To mark this 70th anniversary – and to explore how optometrists can influence the general health of their patients – this feature looks at how lifestyle choices, specifically smoking and obesity, affect eye health. It covers what optometrists can do to help prevent health problems arising, using brief, holistic interventions that focus on healthy living. The milestone anniversary is particularly important as research shows that lifestyle choices, such as smoking, diet and exercise, are linked to eye disease (Veys and Desai, 2014).

### SMOKING LEVELS IN THE UK

Vaping numbers are on the rise in the UK, especially among children. A research report from Action on Smoking and Health (ASH) says that the proportion of

children experimenting with vaping has grown by 50% year on year (ASH, 2023a).

While vaping is on the rise, the number of people smoking cigarettes has fallen. In 1974, almost half (46%) of the UK population aged 18 and over smoked (ASH, 2023b). By 2022, this proportion had dropped to 12.9% (Office for National Statistics, 2023).

Smoking levels in the UK have decreased, thanks in part to several stop-smoking initiatives. These include the annual public health campaign Stoptober, which encourages people in England to stop smoking during October (Department of Health and Social Care, 2023). There's also an annual No Smoking Day, which has been running for 40 years (Department of Health and Social Care, 2024). NHS smoking cessation services are available across the UK.

However, the biggest change to smoking levels occurred when the regulatory environment changed. When the smoking ban in public spaces was brought in across the UK, more people began trying to quit and air quality improved (British Heart Foundation, 2017).

### ENCOURAGING CHANGE

Optometrists are in a good position to talk to patients about their general health, says Cerys Parker-Williams MCOptom, an optometrist and Welsh Clinical Leadership Fellow at Health Education and Improvement Wales.

"Optometrists have more time with their patients in the examination room than GPs. Optometry support staff will also spend time with patients outside the testing room for pre-screening, dispensing, collection of spectacles and adjustment. So, there are plenty of opportunities for an optometry team to initiate behaviour change conversations."

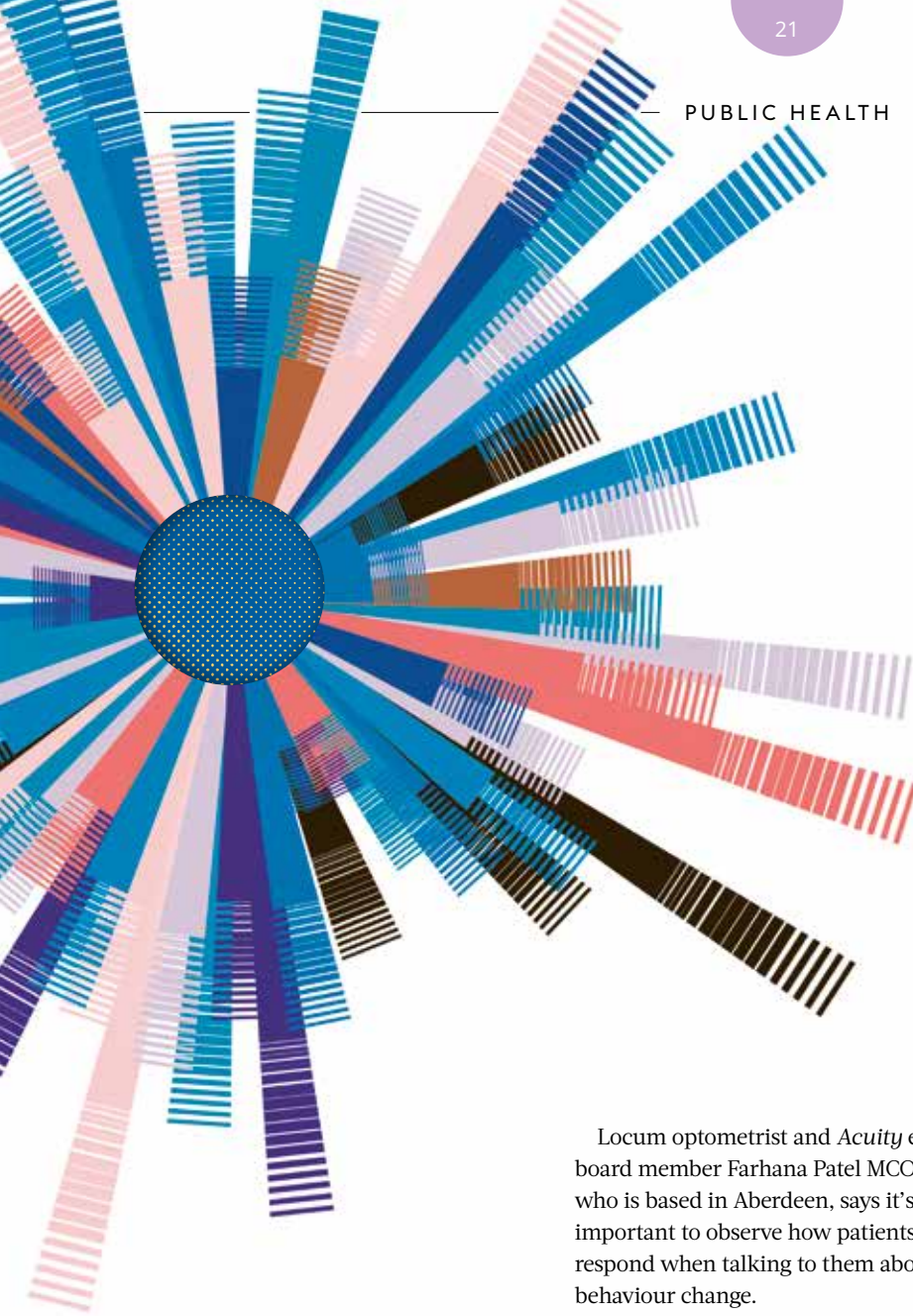
Cerys adds that a multidisciplinary approach to public wellbeing will help safeguard the future of the NHS by alleviating the strain on resources.

In Wales, optometry teams have been screening patients for depression since 2018. They are now also sharing important messages about smoking and healthy eating as part of the 2023 contract reforms.

Eilidh at Optometry Scotland adds that having a good relationship with patients is important when trying to encourage behaviour change. "If an optometrist has a good rapport with a patient, this will make it easier to discuss smoking and other lifestyle choices with them. Optometrists need to provide health advice in the context of protecting the patient's eyesight."

### ENCOURAGE CESSATION

Chris Evans MCOptom, a Director at Gwynns Opticians in South Wales, says the MECC training has given him and his colleagues helpful advice on how to start conversations about smoking with patients. "It shows you how to bring the topic up naturally and how to do it in a way that



let them know about any support services they can access in their local area.”

## CONVERSATIONS ABOUT WEIGHT LOSS

Cerys – who is carrying out a research project for NHS Wales on how optometry support staff can have conversations with patients about general health – says that optometrists can positively impact a range of health issues but they need to be sensitive when talking about them with patients.

She explains: “Behaviour change discussions can be delicate, especially issues like obesity, nutrition, physical activity and drug use. It’s important to make sure the workforce is adequately trained and has the knowledge and information to have these conversations.”

Chris adds that obesity is a huge issue for ocular health but that optometrists need to make sure patients feel comfortable talking about it. “You need to be careful. If patients aren’t happy talking about weight management, they may go to another optometry practice. The best approach is to give patients leaflets about healthy eating and eating healthily for your eyes. If someone tells us they are diabetic, or have high blood pressure, we give them the leaflets to read in their own time.”

## HEALTHY LIVING IN ENGLAND

Unlike in Scotland and Wales, it is not mandatory for optometrists in England to ask patients if they smoke in NHS eye examinations. But there is some work going on at a local level to promote optometry teams having conversations about general health.

In 2014, the Healthy Living Optical Practice (HLOP) programme was set up in Dudley as a two-year pilot. The aim was to support optometry teams in having conversations with patients about health and lifestyle choices, including smoking, weight management and alcohol

Locum optometrist and *Acuity* editorial board member Farhana Patel MCOptom, who is based in Aberdeen, says it’s important to observe how patients respond when talking to them about behaviour change.

She explains: “Some patients may be happy to open up to you about their smoking habits. If they seem keen to chat and make changes, talk to them about what you’ve found in the eye test and connect this to their lifestyle choices. Then

doesn’t take over the whole eye exam. For example, if someone says they smoke, I follow up with: ‘How long have you smoked for?’ Then, at the end of the test, I’ll say: ‘Have you thought about quitting?’ or ‘If you want to think about quitting, the evidence says it’s much easier to do it with support than on your own’. If they are interested, I can direct them to support services. Some people want information to read at home, so I give them leaflets about the Help Me Quit service.”

It’s important for patients to make up their own mind about quitting smoking, rather than feeling nagged. “We want the conversations to be positive for patients, so they’re more inclined to take the next step.”



Patient rapport makes it easier to discuss lifestyle choices



consumption. Optometry support staff were trained to carry out NHS health checks in practices and signpost patients to local services to access support.

During the pilot, optometrists and support staff at eight practices in Dudley recruited 36 people into a smoking cessation service, with a 42% quit rate (Royal Society for Public Health, 2019). They performed 316 NHS health checks, which identified 247 people as being overweight or obese, 51 people with high blood pressure and 88 people with raised glucose levels (Royal Society for Public Health, 2019).

Ten years later and the HLOP programme is still running in Dudley, although the NHS health checks are no longer carried out in optometry practices due to a lack of funding. Patients can still access the health checks – but through a privately run company. Alcohol screening is, however, still taking place in optometry practices.

Optometrist Shamina Asif MCOptom, who set up the programme, says that the NHS health checks in optometry practices were effective as a patient could see someone straight away. “If you tell a patient to see their GP, or access another service, there’s more chance of losing them in the process as it’s an extra effort to go elsewhere. If you tell them you’ve got somebody outside who can do a health check, they’re more likely to take up that service and see the results and make changes.

“I’m pushing the local ICB [integrated care board] to bring in blood pressure checks in optometry practices as it’s a big issue in the West Midlands, as well as full NHS health checks.”

### WHAT OPTOMETRISTS NEED

Cerys says that being compassionate towards patients is important, but optometrists need the support of the whole optometry team to change people’s behaviours effectively.

She explains: “With all their clinical responsibilities, optometrists may find it

## Smoking–health link

**The following key developments have taken place since the UK government accepted the links between smoking and poor health:**

**1950** Sir Richard Doll and Sir Austin Bradford Hill publish a study in the *British Medical Journal* about the health impact of smoking.<sup>1</sup>

**1954** The UK government accepts that smoking causes cancer after Doll and Hill publish further studies in the *British Medical Journal*.<sup>1</sup>

**1965** The UK government bans cigarette advertising on TV.<sup>2</sup>

**1971** Health warnings are put on all cigarette packets sold in the UK.<sup>2</sup>

**1983** A report from the Royal College of Physicians looks at the dangers of passive smoking.<sup>3</sup>

**1986** Smoking is banned across the London Underground.<sup>2</sup>

**1998** The Scientific Committee on Tobacco and Health says passive smoking causes lung cancer and heart disease.<sup>4</sup>

**2001** Nicotine patches and gum are made available on prescription on the NHS.<sup>5</sup>

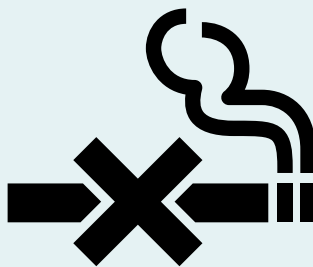
**2002** The British Medical Association calls for a ban on smoking in public places to protect non-smokers.<sup>3</sup>

**2003** Cancer Research UK launches a campaign to show the public the health risks of smoking “light” and “mild” cigarettes.<sup>6</sup>

**2006** Scotland bans smoking in public places.<sup>7</sup>

**2007** Smoking is banned in enclosed public places in Wales and Northern Ireland.<sup>8</sup>

**2007** A smoking ban comes into effect in England.<sup>9</sup>



References: 1. Richmond. (2005); 2. UK Parliament. (2000); 3. Institute for Government. (2007); 4. British Medical Journal. (1998); 5. ASH. (2024); 6. Cancer Research UK. (2003); 7. Public Health Scotland. (2016); 8. Centre for Public Impact. (2019); 9. House of Commons. (2015).



challenging to fully engage in behaviour change. Support staff play a crucial role in integrating social prescribing into optometric practice. Empowering and educating all staff to engage in these conversations ensure there is a team approach and that they provide patient-centred and holistic care”.

Training on how to broach conversations with patients about behaviour change is important. NHS Wales plans to develop further training and resources for optometrists over the next year, to support them in influencing the health of patients.

In Scotland, there is no specific training on how to talk to patients about their health. Farhana says: “Optometrists in Scotland could benefit from training on how to bring up smoking, obesity and other lifestyle changes with patients.”

For optometrists to influence the general health of patients, more funding is needed. In 2022, Optometry Scotland provided input during an inquiry into how patients access primary care in Scotland (Optometry Scotland, 2022). It looked at the different sources of healthcare that exist beyond GPs. As part of the inquiry, the representative body called on the Scottish government to better fund the optometry profession, so it can fulfil a vital role in reducing pressure on GP services.

In addition, optometrists need the support of their employers if they are to undertake the relevant training and have the opportunity to provide holistic health advice. Any additional health services above routine eye care would need to be fully funded. 🔄