

About Sight and Smile Centre

Sight and Smile Centre is a state-of-the-art eye and dental care facility established in 2008 in the heart of the Indian capital, New Delhi with the aim of providing world-class healthcare services at affordable costs to all sections of society. Located in Central Delhi, 100 metres from the Patel Nagar Metro station (on the blue line of the Delhi Metro transit system), the facility is also easily approachable by road. Vehicle parking facility is available. Spread over an area of 7200 sq ft, the centre is fully air-conditioned and has an elevator facility for patient convenience. It complies with all fire safety regulations. The comforting ambience, the warm atmosphere and cleanliness make it stand apart. Medical records of patients are maintained for future reference. The facility prides itself in having a fully-equipped ultra-modern eye operation theatre, which is one of the largest in the city. The centre is registered with the Directorate of Health, Govt. of NCT of Delhi and functions from 9 am to 9 pm (Monday - Saturday). Emergency services can be availed round-the-clock. Dr. Pankaj Malik heads the eye department while Dr. Jyoti Malik heads the dental department. It is our constant endeavour to provide such preventive and restorative services to patients that they have the best of sight and smile.



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RETINOPATHY OF PREMATURITY (ROP)

A threat to a newborn's vision



Save



Sight

Early



Patient Information Brochure *Not valid for legal purposes

What is retinopathy of prematurity (ROP)?

ROP is a disease of the retina principally affecting prematurely born babies of low birth weight, especially those who have received intensive neonatal care, in which supplemental oxygen therapy is used on them because of incomplete lung maturation.

What is the genesis of ROP?

In neonates in whom retinal vascularisation is incomplete, abnormal proliferation of immature retinal blood vessels occurs due to relative lack of oxygen following the withdrawal of therapeutic oxygen. These vessels are fragile and prone to leakage. Significant retinal damage including retinal detachment may result.

Risk factors for ROP

- Prematurity.
- Birth at or earlier than 32 weeks gestational age.
- Birth weight 1500 grams or less.
- High exposure to oxygen therapy.

Screening protocol for premature babies

The most useful time to screen is between the post-conceptual age of 32 to 36 weeks. Repeated examinations may be needed depending on the stage of disease and its progress.

Treatment of ROP

Nearly 90% of cases of ROP are mild and regress on their own. Treatment becomes necessary only when the disease reaches a certain, well-defined stage.

Treatment involves ablation of the immature, avascular retina by cryotherapy (freeze treatment) or laser photocoagulation. Surgery is reserved only for removal of scar tissue causing a pull on the retina or in cases of retinal detachment.

Can ROP be prevented?

Preventing premature births by providing better antenatal care can reduce ROP risk. Close monitoring of oxygen levels and appearance of retinal blood vessels is essential in prematurely born babies to prevent ROP.