

UNIVERSITAT POLITÈCNICA DE CATALUNYA BARCELONATECH

Departament d'Òptica i Optometria

PARENTAL SOCIOECONOMIC STATUS, HIGH COMPLEXITY SCHOOLS AND MYOPIA

INTRODUCTION AND AIMS

- The aetiology of myopia is complex and still not fully understood.
- especially in young paediatric populations and in Europe.

The aims of this study are to investigate a possible association between the presence of myopia in children from southern Europe and parental educational level as well as employment status. The association between myopia and attending high-complexity schools was also investigated.

METHODS

A cross-sectional study involving child participants aged 8 years old were recruited from 16 schools located in the city of Terrassa, Barcelona, Spain (n=813). The data collection comprised an optometric screening and a parental questionnaire:

Optometric screening: lon **Refractive error** Habitual visual acuity, and nonclassification cycloplegic retinoscopy, while fogging the contralateral eye using positive lenses. Parental \mathbf{O} educational level Parental questionnaire: Parental Parental questionnaires to gather SES information employment status

RESULTS

- A total of 750 children were included in the study (46.5% males and 53.5% females, SE ranging from +6.50D to -10.50D (mean 0.276±SD1.15)). Data from 63 children were excluded due to incomplete parental questionnaires.
- Myopia was found to be more prevalent than hyperopia in the population sample, 11% (95% CI 8.8-13.3) vs 4.8% (95% CI 3.3-6.3); figure 1, with no differences between genders (p>0.05).
- A tendency to a higher prevalence of myopia in children with unemployed mothers was observed, but statistical analysis revealed no significant associations between SE or presence of myopia and parental employment status or educational status (p=0.051) (figure 2).
- A higher prevalence of myopia (2x) was found in high-complexity schools compared to non-high complexity schools (figure 3). Chi-square tests confirmed that the association between high complexity schools and SE was statistically significant (p=0.014).

CONCLUSIONS	The prevalence of myopia in our 8 ye Differences in prevalence between the
	There is no association between refu links between SES and SE. Further stu
	There is an association between refr
	We gratefully acknowledge the "Ajuntament de Terrassa", "Centr





Cohort Infantil de Salut Visual de Terrassa [Terrassa Infantile Visual Study Cohort]

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Besides genetics, multiple environmental risk factors for myopia have been proposed being time outdoors and education the two major risk factors identified.¹ • A link between income and myopia has been suggested in some Asian countries,² but the association between socioeconomic status (SES) and myopia has been less explored,





ear old sample population is of 11%, which is different to the prevalence recently reported in Spain.³ ese studies could arise from methodological study differences, in particular in the recruitment and sample population.

ractive error and parental educational level or parental employment in 8-year-old children, suggesting no udies are warranted to investigate if this persists for older child populations.

ractive error and high-complexity schools. Myopia was 2x higher in high-complexity schools.

re Universitari de la Visió", and "Centre de Cooperació per al Desenvolupament de la UPC" for their financial and logistic support. Vinuela-Navarro V is funded by "Ministerio de Universidades" and "European Union - NextGenerationEU". We also want to acknowledge our graduate and postgraduate internship students for their collaboration with the clinical measurements and analysis : Bonilla, N; Domínguez, L; ElGarbhi, M; Fedelich, G; Lacroizette, L; Morera, A; Olives, M.

refractive error as a continuous dependent variable and as a categorical dependent variable.

- was not normally distributed (continuous variable).
- (categorical variable).







Centre Universitari de la Visió (CUV) Visió Optometria i Salut (VOS research group)



• JASP v15 was used for statistical analysis and was twofold: considering spherical equivalent (SE)

• Non-parametric Kruskall-Wallis and Mann-Whitney tests were used for statistical purposes as SE

• Contingency tables and Chi-square tests were used to study associations between SES and SE

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