



Patients are sometimes told to visit their community optometrist to have their eyes checked because they are taking hydroxychloroquine or chloroquine.

It's important for practitioners to be aware of the latest guidance on this topic because these patients should now be monitored by a dedicated retinopathy monitoring service, once they have been taking the medication for a certain period of time.

Background information

The prevalence of retinopathy following long-term use of hydroxychloroquine is around 7.5%, and this can increase to 20-50% after 20 years of therapy, depending on dose and duration of the medication. Retinopathy is manifest as damage to the photoreceptors and subsequent degeneration of the Retinal Pigment Epithelium (RPE). This may lead to "Bull's eye maculopathy" and central visual loss, requiring a change or cessation of the medication.

Current guidance

Patients who take hydroxychloroquine should be offered annual retinopathy monitoring once they have been taking the medication for 5 years. Patients who take chloroquine (or take hydroxychloroquine but have additional risk factors) should be offered retinopathy monitoring once they have been taking the medication for 1 year.

Community monitoring

Monitoring for hydroxychloroquine and chloroquine retinopathy is not part of a routine private or GOS sight test. In the past, community optometrists have sometimes been asked to monitor patients using simple checks, such as reading charts, retinal

photography, visual fields and colour vision testing. This is no longer considered adequate, and patients on these medications should be seen in a dedicated monitoring service once they meet the criteria above.

If you encounter a patient who meets the criteria above but is not being monitored, you should refer the patient to a local community monitoring service (if available in your area) or contact the patient's GP and ask them to arrange monitoring elsewhere. There is no specific recommendation for patients to receive annual community optometry assessments, or any specific form of self-assessment before monitoring commences.

Further information on this topic can be found on the AOP website.

Hydroxychloroquine retinopathy

If you have any further questions, please contact regulation@aop.org.uk.



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