

Tele-optometry: Expanding Eye Care Access in Rural India

Ragni Kumari¹, Jagdish Singh¹, Rashmi² and Vanshika Sharma²

¹Assistant Professor, Department of Optometry, UPUMS, Saifai, Etawah, India

²Student, Department of Optometry, UPUMS, Saifai, Etawah, India

Submission: August 31, 2026; **Published:** September 09, 2026

***Corresponding author:** Ragni Kumari, Assistant Professor, Department of Optometry, UPUMS, Saifai, Etawah, India

Abstract

Tele-optometry is an emerging branch of telemedicine that enables the remote delivery of eye care services using digital communication technologies. It plays a crucial role in improving access to ophthalmic care, particularly in rural and underserved regions where shortages of trained eye care professionals, inadequate healthcare infrastructure, and transportation barriers often result in delayed diagnosis and treatment of ocular diseases. In India, where a large proportion of the population resides in rural areas, tele-optometry offers a practical and scalable solution to bridge the gap between patients and eye care providers. This study explores the role of tele-optometry in expanding eye care access in rural India, with particular emphasis on its applications in screening, diagnosis, referral, and management of common ocular conditions such as refractive errors, cataract, diabetic retinopathy, glaucoma, and dry eye disease. Evidence from existing literature suggests that tele-optometry significantly enhances early detection of eye diseases, thereby reducing the burden of preventable visual impairment and blindness. It also improves patient satisfaction by reducing travel time, minimizing indirect costs, and providing timely specialist consultation. Advancements in digital health technologies, including smartphone-based retinal imaging systems and artificial intelligence (AI)-based diagnostic tools, have further strengthened the accuracy, efficiency, and scalability of tele-optometry services. These technologies enable trained optometrists and paramedical staff to capture and transmit high-quality ocular images for remote interpretation by specialists, improving the reach of eye care services in low-resource settings. Additionally, tele-optometry gained significant importance during the COVID-19 pandemic, as it ensured continuity of essential eye care services during periods of restricted mobility and heightened infection risk. Overall, tele-optometry presents a sustainable, cost-effective, and efficient model for strengthening rural eye care delivery in India. Its integration into primary healthcare systems has the potential to significantly reduce the burden of avoidable blindness and improve overall visual health outcomes.

Keywords: Tele-optometry; Telemedicine; Rural eye care; Teleophthalmology; Diabetic retinopathy; Artificial intelligence; Visual impairment; Smartphone imaging; Rural health services

Abbreviations: DR: Diabetes Retinopathy; AI: Artificial Intelligence; COVID-19: Coronavirus Disease 2019

Introduction

Tele-optometry is changing the way eye care services are provided by using telecommunication technology to offer evaluations, diagnoses, and treatment remotely. Tele-optometry has been introduced to overcome several challenges that patients, especially those residing in rural and underserved communities, must face in accessing expert eye care services [1]. Tele-optometry is defined as the utilization of advanced technology and telemedicine tools to provide eye care services at a distance location. The practice allows eye care professionals such as optometrists and ophthalmologists to assess, diagnose, monitor and manage patient care from distance [2]. This technique has become increasingly vital in India as most people living in rural areas are unable to gain access to specialist eye care facilities. Due

to scarcity of eye care specialists, transport problems and absence of adequate medical infrastructure, patients go without treatment [3]. The introduction of tele-optometry has come just at the right time because about 200 million Americans need corrective lenses; however, they delay their visit to an ophthalmologist until their problems become too serious. These delays might result in blindness, especially when considering the 61 million adults who are at risk due to the symptoms of eye disease that they disregard [1,2].

Methodology

This study is a narrative literature review focusing on the role of tele-optometry in expanding eye care access in rural India.

Relevant literature was collected from peer-reviewed journals published between 2014 to 2024, systematic reviews, scoping reviews, and authoritative reports related to telemedicine, teleophthalmology, and digital eye care. A comprehensive search was conducted using databases such as PubMed, Google Scholar, and ScienceDirect. Keywords used included “tele-optometry,” “teleophthalmology,” “rural eye care,” “telemedicine in ophthalmology,” and “artificial intelligence in eye care.” Studies published in English focusing on tele-optometry applications, rural healthcare delivery, AI integration, and patient outcomes were included.

Articles were selected based on their relevance to tele-eye care services, particularly those addressing screening, diagnosis, management, patient satisfaction, and implementation in low-resource settings. Both primary research studies and review articles were included to ensure a comprehensive understanding of the topic. The selected literature was analysed thematically under key areas such as accessibility of eye care, clinical applications, technological advancements (including smartphone-based imaging and AI), and challenges of tele-optometry implementation in rural settings. Findings were synthesized to highlight the role of tele-optometry in improving rural eye care services in India.

Importance in Rural India

The prevalence of visual impairment and avoidable blindness remains a significant public health issue in India. The rural community is at greater risk since eye check-ups are frequently ignored until there is a noticeable decline in eyesight [3,4]. Tele-optometry can be considered to deliver eyecare in areas where healthcare would otherwise be difficult to obtain, such as rural and underserved areas [5]. Tele-optometry may assist in minimizing the problem through early detection and referrals for refractive disorders, cataracts, diabetic retinopathy, glaucoma, and dry eye syndrome [2] optometrists in rural locations who are involved in teleophthalmology delivery directly benefit by having greater access to teleophthalmology services available when seeking timely specialist consultation [6]. The increase in the usage of smartphones, increased access to the internet, and higher levels of knowledge about telemedicine have contributed to the success of tele-eye care in India [7]. Tele-optometry emerged as very useful during the time of the COVID-19 pandemic since it helped provide essential eye care without physical visits to hospitals.

Telehealth is the use of technology like electronic communications to deliver health care services remotely. Telehealth can be practiced within the discipline of ophthalmology considering that it is image-intensive in practice. Teleophthalmology involves the utilization of telehealth in ophthalmic medicine for purposes such as remote screening, monitoring of treatments, follow-ups, and even remote diagnostics and interventions in some cases. The interest in teleophthalmology

has greatly intensified after the Coronavirus Disease 2019 (COVID-19) due to the risk of viral infection in eye examination procedures [7,8]. The virus has an incubation period of more than 14 days, 2 and is easily transmissible between people.³ In order to contain the virus outbreak, several countries have resorted to lockdown and social distancing, thus posing problems with regard to access to healthcare services and maintenance of long-term treatment, leading to the exploration of other options such as telemedicine [8-10].

Applications of Tele-Optometry

There are various uses of tele-optometry in clinical and public eye health care services. Vision screening can detect cases of refractive error amongst school-going children and other adults who belong to disadvantaged populations. Teleconsultation is beneficial in screening for cataracts, diabetic retinopathy, glaucoma, dry eye, and postoperative cases [4,11]. The smartphone retinal imaging devices as well as the slit lamp devices have greatly enhanced the efficiency of the tele-eye care initiatives [12]. The trained professionals can take the image and transmit them to the specialists for analysis. There is also an effort to integrate artificial intelligence screening technologies to enhance detection of the various retinal diseases [13]. Tele-optometry also facilitates patient education. It offers counselling to the patients on issues such as wearing glasses and contact lenses and adherence to medication [1].

Benefits of Tele-Optometry

Tele-optometry offers several advantages for rural healthcare delivery. One of its major benefits is improved accessibility to specialist eye care services in geographically isolated areas [3]. Patients can obtain consultation without travelling long distances, thereby reducing transportation expenses and loss of working hours [14]. Teleophthalmology enables the definitive diagnosis of most eye diseases. The monitoring of ocular opportunistic infections in the HIV-positive community can be done easily via teleophthalmology [15]. Teleophthalmology is affordable, especially in rural communities, as it eliminates patient transportation over large distances and allows for immediate consultation.

Eye condition screening and triaging can be done through teleophthalmology. The screening of diabetes retinopathy (DR) and other eye conditions can be done successfully by training paramedical optometrists on slight smartphone modifications and applications. Some research indicates that telemedicine is appropriate for addressing patients' eye conditions, and both patients and healthcare workers are satisfied with the results. Teleophthalmology involving artificial intelligence (AI) has demonstrated its usefulness in meeting the demands for eye care services, especially in resource-poor communities [16-23].

Limitations of the Study

Despite the considerable promise of tele-optometry in improving access to care services in rural and underserved regions, several limitations need to be acknowledged. One of the primary challenges is the dependence on stable internet connectivity and adequate digital infrastructure, which may not be consistently available in remote and resource-limited settings in India. Interruptions in connectivity can affect the timely transmission of ocular images and delay specialist consultations, thereby reducing the efficiency of care delivery. Another important limitation is the variability in image quality and diagnostic accuracy, which largely depends on the training, skill, and experience of paramedical staff and optometrists responsible for capturing retinal and ocular images. Inadequate training may lead to poor-quality images, resulting in misinterpretation or the need for repeated imaging.

Furthermore, tele-optometry cannot fully replace comprehensive in-person eye examinations, especially in cases requiring slit-lamp bio microscopy, intraocular pressure measurement, or surgical intervention. Certain complex ocular conditions still require direct clinical evaluation for accurate diagnosis and management. Data privacy and security also remain significant concerns, particularly when sensitive patient information is transmitted through digital platforms. Ensuring secure data storage and compliance with ethical standards is essential but not always uniformly implemented. In addition, the initial cost of implementing tele-optometry systems, including imaging devices, software platforms, and artificial intelligence integration, may be a financial barrier for widespread adoption in low-resource settings.

Future Directions of Tele-Optometry

The future of tele-optometry lies in strengthening its integration with advanced digital health technologies and primary healthcare systems. One key priority is the improvement of digital infrastructure in rural and remote regions to ensure stable internet connectivity and uninterrupted teleconsultation services. Government and private sector collaboration will be essential in achieving this goal. Artificial intelligence (AI)-based diagnostic systems are expected to play an increasingly important role in enhancing the accuracy and efficiency of tele-optometric services. AI algorithms can assist in the early detection of conditions such as diabetic retinopathy, glaucoma, and age-related macular degeneration, thereby reducing dependence on specialist availability.

The development of low-cost, portable, and smartphone-based ocular imaging devices should be prioritized to make tele-optometry more accessible and affordable for rural populations. Such innovations can significantly reduce equipment costs while maintaining diagnostic quality. Additionally, structured training programs for optometrists, paramedical staff, and primary healthcare workers should be expanded to ensure

standardized image acquisition, patient counselling, and referral protocols. Future research should also focus on large-scale, long-term population studies evaluating clinical outcomes, cost-effectiveness, patient compliance, and health system integration. Finally, supportive policy frameworks and national-level guidelines are needed to ensure sustainable implementation of tele-optometry within India's public health system.

Conclusion

Tele-optometry represents a highly promising and transformative approach to improving eye care delivery, particularly in rural and underserved regions of India. By enabling remote screening, consultation, diagnosis, and referral services, it effectively addresses major barriers such as shortage of ophthalmologists, geographical distance, and limited healthcare infrastructure. The integration of digital health technologies, including smartphone-based retinal imaging systems and artificial intelligence, has significantly enhanced the accuracy, efficiency, and scalability of tele-optometric services. These advancements have made early detection and timely management of ocular diseases more feasible, thereby contributing to the reduction of preventable visual impairment and blindness.

Tele-optometry also improves patient accessibility and satisfaction by reducing travel time, lowering indirect healthcare costs, and enabling timely specialist consultation. Furthermore, its importance was strongly highlighted during the COVID-19 pandemic, when it ensured continuity of essential eye care services despite movement restrictions and infection risks. Although challenges such as infrastructural limitations, training requirements, and security concerns remain, these can be addressed through coordinated efforts in policy development, technological innovation, and workforce training. Overall, tele-optometry offers a sustainable, cost-effective, and scalable model for strengthening primary eye care services in India and has the potential to significantly improve long-term visual health outcomes.

References

1. Celia Chen, Gurfarmaan Singh, Reema Madike, Sudha Cugati (2024) Central retinal artery occlusion: a stroke of the eye. *Eye (Lond)* 38(12): 1324-1332.
2. A Dagra, BL-Wold, K McGrath, I Mehkri, Y Mehkri, et al. (2023) Central Retinal Artery Occlusion: A Review of Pathophysiological Features and Management. *Stroke: Vascular and Interventional Neurology* 4(1): e000977.
3. Kambara A, Yamamoto Y, Sato H, H Kakita, F Shimizu, et al. (2025) Central retinal artery occlusion associated with carotid artery occlusion: case report and literature review. *Surg Neurol Int* 16: 352.
4. Tripathy K, Sharma YR, Venkatesh P (2024) Central retinal artery occlusion. In: StatPearls Internet. Treasure Island (FL): StatPearls Publishing.
5. BM Grory, M Schrag, V Biousse, KL Furie, MG Herman, et al. (2021) Management of central retinal artery occlusion: a scientific statement from the American Heart Association. *Stroke* 52(6): e282-e294.

6. Seetge J, Cséke B, Karádi Z, Szalai E, Gaál V, et al. (2024) Subsequent Acute Ischemic Stroke in a Patient with Monocular Vision Loss Associated with Isolated Internal Carotid Artery Occlusion: A Case Report. *Neurol Int* 17(1): 3.
7. Tiwari V, Bagga SSJ, Prasad R, Mathurkar S (2024) A Review of Current Literature on Central Retinal Artery Occlusion: Its Pathogenesis, Clinical Management, and Treatment. *Cureus* 16(3): e55814.
8. Pang F, Yin C, Zhan J, He X, Lou H, et al. (2025) Successful intra-arterial thrombolysis for central retinal artery occlusion secondary to chronic internal carotid artery occlusion: a case report. *BMC Ophthalmology* 25(1): 404.



This work is licensed under Creative Commons Attribution 4.0 License
DOI: [10.19080/JOJO.2026.14.5558688](https://doi.org/10.19080/JOJO.2026.14.5558688)

**Your next submission with Juniper Publishers
will reach you the below assets**

- Quality Editorial service
- Swift Peer Review
- Reprints availability
- E-prints Service
- Manuscript Podcast for convenient understanding
- Global attainment for your research
- Manuscript accessibility in different formats
(Pdf, E-pub, Full Text, Audio)
- Unceasing customer service

Track the below URL for one-step submission
<https://juniperpublishers.com/online-submission.php>