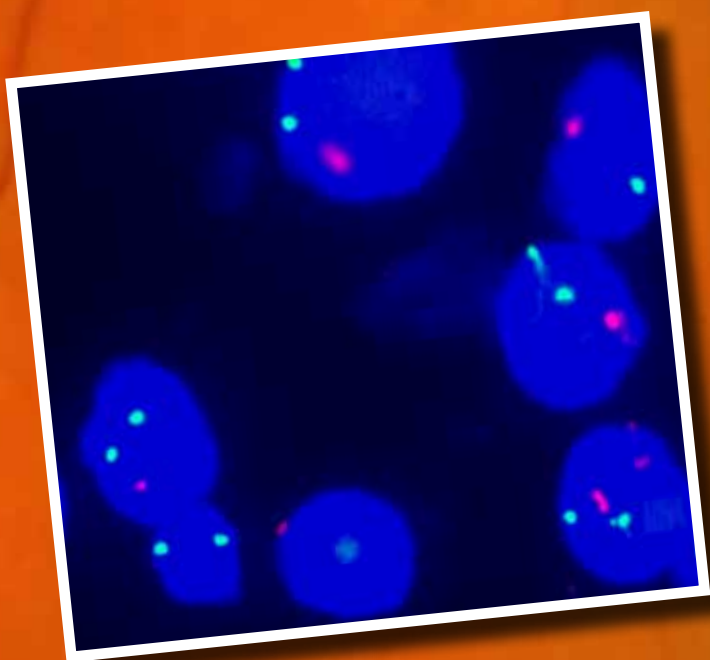


# OHIO STATE **BUCKEYE** OPHTHALMOLOGY

## Ocular Melanoma

Translating Research into Treatment

*...Faster*



Pioneering Genetic Diagnosis,  
Cancer Chemoprevention, &  
Family Risk Factors

**Spring2010**  
[www.eye.osu.edu](http://www.eye.osu.edu)





“In Ophthalmology we have a unique opportunity to improve the lives of others through the restoration of vision to the visually impaired and blind.

We are fortunate to have a medical center and a department that is flourishing in these challenging times. It is our goal to continue to contribute to the solution by training excellent physician leaders and by restoring sight and preventing blindness through clinical care and research.”



**Thomas F. Mauger, MD**  
Director and Chairman

# OHIO STATE BUCKEYE OPTHALMOLOGY

Volume 5 Issue 1  
Spring 2010

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Chairman - Thomas Mauger, MD  
Administrator - Robert LaFollette, MBA  
Outreach Director - Laura Sladoje, BS  
Program Coordinator - Christina Stetson, BA

**Cover Photo:** Retinal photograph of ocular melanoma  
**Cover Inset Photo:** Genetic test for high risk ocular melanoma  
**Top Photo:** New Eye & Ear Institute located near downtown Columbus  
**Bottom Photo:** Havener Eye Institute Lobby

For more information about this publication, contact Ophthalmology Outreach at (614) 293-8760 or email us at [eye@osu.edu](mailto:eye@osu.edu).



## TIME NAMES GEE NO. 1

*OSU President Tops Best in the Country List*

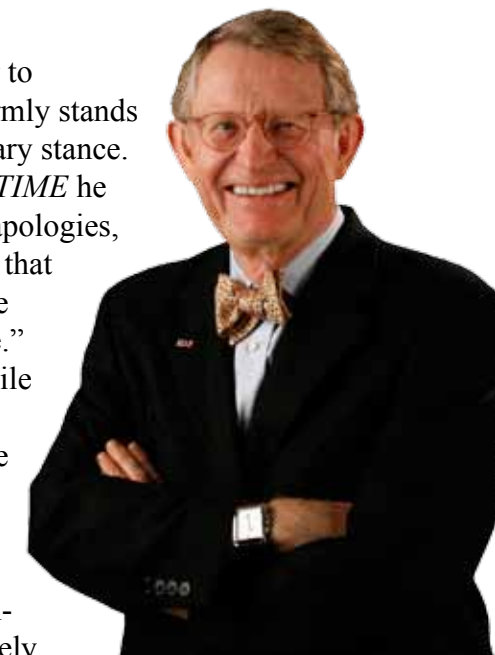
In the November issue of *TIME*, the magazine hailed The Ohio State University President E. Gordon Gee, JD, EdD the Best College President in America. That’s no surprise to us in the Buckeye State. Now in his second tenure as president of the academic giant with over 55,000 students, his popularity is unrivaled. He is an iconic figure, as *TIME* points out, “in a fresh-pressed suit, argyle socks, horn-rimmed glasses and a bright bow tie. [he is] Half Orville Redenbacher, half Harold Hill.”

With his signature carefree charm, he makes directing the second-largest university in the country, an annual budget of \$4.5 billion, 40,000 employees, and a nationally recognized medical center look easy. On any given day, you can find him in a board meeting with city and state officials, then stopping by the Wilce Student Health clinic to thank the nurses for their dedication, and rounding out the day at a frat party, where students in t-shirts and jeans will honestly compliment him on his colorful bowtie.

According to a Columbia Law School Magazine interview, the origin of his bowtie signature look began in high school. “I was a teenager sitting in a doctor’s office when I laid eyes on my first one. The guy untied and then retied it for me. I was hooked,” Gee says. To date, he is rumored to have over 1,000 bowties and a special system to ensure that he never wears the same one twice in a year.

His meticulous nature influences more than just his wardrobe. Dr. Gee is a man on a mission to take down the elitist myths surrounding academia. He is passionate about education in a way as unique as his appearance. Rejecting tradition in favor of innovation, he strives to make education practical and accessible to all Ohioans. He firmly believes universities are the vehicle of economic rebirth and that the wisdom of supporting and expanding them during the economic crisis will be repaid for years to come.

Dr. Gee is no stranger to controversy, but he firmly stands behind his revolutionary stance. In his interview with *TIME* he states, “We make no apologies, for working to ensure that our graduates have the skills needed to thrive.” He concluded that while traditional academic liberal arts degrees are an important part of education, learning to think critically need not conflict with learning to work productively.



*TIME* magazine’s David Von Drehle calls Gee “one of the most experienced university executives in the U.S., he is campaigning for a revolution in higher education at a time when the field is more important, and perhaps more troubled, than ever before.”

The article also cites a special commission of the U.S. Department of Education, which arrived at many of the same conclusions. “America’s colleges and universities, in some respects the best in the world, are failing to keep up with the nation’s growing needs. Higher education is ‘increasingly risk-averse, at times self-satisfied, and unduly expensive,’ the panel summarized. ‘It is an enterprise that has yet to address the fundamental issues of how academic programs and institutions must be transformed to serve the changing educational needs of a knowledge economy.’”

Combining his revolutionary ideas with his recognition by *TIME* magazine as the Top College President in the country helps us remember that while his appearance might put you in mind of the 1890s, Dr. Gee is well ahead of his time.

*The complete TIME article “The Big Man on Campus” by David Von Drehle is available at [www.time.com](http://www.time.com).*



## BuckEYE Golf Classic

### OSU Scarlet Golf Course • June 7, 2010

**E. Gordon Gee**, named #1 College President by *Time* Magazine, will be the special guest for the 2010 BuckEYE Golf Classic. Proceeds from this charity event will support ophthalmology resident research and education.

### Player Package - \$250

**Includes:** 18 Holes of golf on award-winning OSU Scarlet Course, Photo opportunity with President Gee, Drive Clinic led by Long Drive Champion Landon Colling, MD, Challenge Hole Competitions, Gift package & Ohio State Polo Shirt, Lunch, Dinner, Awards, & Trophy Presentation



**Special Guest:**  
**E. Gordon Gee**





## FIRST OSU OUTPATIENT SURGERY CENTER OPENS

In August 2009, the first OSU Outpatient Surgery Center (OSC) opened at the OSU Eye & Ear Institute. Located on the first floor, the OSC is managed by a multidisciplinary team of surgeons, anesthesiologists, administrators, and nurses. It has six operating rooms and twenty-five preoperative and post-anesthesia care units, and has been equipped with state-of-the-art technology, such as high-definition imaging equipment and electronic medical records (for more on EMR see page 4). The time from when a patient registers to when they are ready to be prepared for surgery is between 16 and 20 minutes. This is a reflection of the dedication of staff and the patient-minded mentality at the OSC.

“The Surgery Center was built with patients’ needs in mind,” said Linda Meikle, Surgery Center Director, “We paid special attention to the visually challenged in our communication to patients during their stay.”

Pictures and names of staff are found at each bedside so they can be identified easily, physicians and nurses wear color-coded scrubs based on their role in patient care, and furniture was selected based on ease of use; for example, chairs are elevated to allow patients to sit and arise comfortably. All of the areas for pre-op and post-op were designed to be large in comparison to most surgery centers, to enhance patient privacy.

Along the north side of the building is a covered entry/exit. “It’s our discharge area,” said Meikle, “so when the patient is done having surgery, they can have a friend or family

member pick them up right up under the covered entrance. It can also be used as an entrance area for someone coming in from a nursing home or for an emergency patient.”

There are nearly 25 dedicated staff members. All of the nurses are ACLS trained and demonstrate excellent ambulatory skills. “We just got a really great team,” said Meikle. “It’s really a multi-disciplinary team and we all know how to do each other’s job; it really promotes an atmosphere of caring and collaboration.”

Patients have noticed too, giving the OSC great patient satisfaction scores. Press Ganey, a health care survey group, has rated OSC in the top one percent across the country from day one.

*Top:* Linda Meikle, Surgery Center Director, shows visitors one of the surgical suites *Bottom:* Opening day at the nurses station in the OSC



## PATIENTNotes

*Excerpt from a patient’s letter to Peter Geier, the OSU Health Services President:*

September 8, 2009

“I have just completed the ambulatory surgery survey the OSU Medical Center sent me following my cornea transplant surgery on July 17, 2009. That was the fourth eye surgery I’ve had since an injury at home in November of 2008 left me with little or no vision. My experience as an outpatient at the OSU Medical Center has been positive each time. **The staff of the OSU Ophthalmology Department is unparalleled (in my opinion) in the professional, caring, and effective medical treatment they provide their patients.**

**In particular, I would like to recognize the “above and beyond” level of care provided by Dr. Tom Mauger.** From his initial treatment of my condition when he saw me daily seven days a week for nearly two weeks, he gave me his cell phone number and encouraged me to call him “if anything changed” with my condition. I have never before had a doctor who so willingly made himself available to his patients, which I think speaks volumes about his professionalism and commitment to his work and to his patients.

Following my cornea transplant surgery on July 17, Dr. Mauger called me at home that evening to see how I was doing. That is the first time in my life I ever had a doctor who personally called me to check on my condition. Not only is that overwhelmingly impressive to the patient, but I think it also shows what an excellent role model he is to his students and peers. My vision isn’t completely restored, but it’s improving all the time.

**Dr. Mauger has, in my opinion, earned the honor of being the department chair, not just because of his medical expertise, but more importantly because of the way he treats his patients.** He could serve as an example to all the doctors at the OSU Medical Center. He’s as good as they come, and I thought you ought to know.”

**John Moser**  
*Ophthalmology Patient*

## ELECTRONIC PATIENT CHARTS

*An Interview with OSUMC IT Director Tom Bentley*

*This is a big change, both financially and organizationally. Why did the Medical Center decide to convert to Electronic Medical Records (EMR)?*

**Tom:** The biggest motivating factor was patient safety and continuity of information. Patients often see multiple physicians, for multiple reasons, throughout their care. They might see a primary care physician, maybe they see a cardiologist, and perhaps they see another specialist or two. And when you are in a paper-based medical record paradigm, it is extremely challenging to have continuity of information across all of those physicians. We knew if all of the OSU physicians were documenting in one place, and we had one medication list, one allergy list, one set of documentation, our system would be much safer and more efficient.



*Is this a difficult transition?*

**Tom:** It’s tough, especially for the physicians. To go to someone that has practiced medicine a certain way for 20 or 30 years and say, ‘Here’s a whole new paradigm for how you are going to look at a chart, how you are going to document a chart, how you’re going to talk to your patients, how you’re going to talk to your colleagues,’ is huge, but in the end, physicians are motivated because they want to help their patients.

*Do you see any potential problems?*

**Tom:** We’ve learned a lot of lessons along the way. I think helping the physicians understand first why we are doing this, and second that the long-term benefits help them.

I think trying to customize the application to meet the unique needs of a given specialty is important. Ophthalmology has very different needs from Cardiology, so we end up having to add different tools, different workflows. Although it’s one system, it’s a very flexible one that lets us adapt it to those areas.

*What do you think is the biggest advantage?*

**Tom:** Flexibility is a key strength with this product. It is robust enough that it can be used in all the different specialties. Whether you go into the emergency department, a specialty clinic, a primary care clinic, or are a patient in the ICU, it’s still one patient record that everybody sees. Nothing can get lost in the cracks and, as a patient at OSU myself, I like the way that sounds.



HAVENER LEGACY MEMBER UPDATES

Dr. Garret & Kristina Mouser



Garret Mouser, MD graduated from the Havener Eye Institute in 2007. Since then, he has joined James Moses, MD in a thriving ophthalmology practice in Columbus with satellite offices in Canal Winchester and Washington Court House.

Dr. & Mrs. Mouser are the youngest Havener Legacy members, a group formed to recognize those who have generously donated \$10,000 or more. His name will be added to the list of distinguished donors that have made a philanthropic impact on the Department.

Dr. Mouser understands the importance of a solid educational foundation and is grateful for the training he received at the Havener Eye Institute. He wanted to make sure that the residents who came after him would have the best equipment possible to aid them in their studies.

“We are very excited to welcome Dr. & Mrs. Mouser into the Havener Legacy,” said Alan Letson, Residency Program Director. “He was a fantastic resident and their donation validates our daily efforts to ensure our residency program provides the best ophthalmic training possible.”

*Because of donations like the Mousers’, the Department has been able to purchase textbooks, pay for exams fees, and outfit the resident exam rooms with new slitlamps, visual acuity systems, and other key ophthalmic equipment.*

Dr. Dale & Bonnie Solze

Dale Solze, MD is a native Ohioan, born and raised in Green Springs, Ohio. With his wife Bonnie as his office RN, he opened his private practice in Fremont and has served the northeastern Ohio community for over a quarter of a century. He and Bonnie have four children and eight grandchildren.

He is an alumni of both The Ohio State University Medical School and the Havener Eye Institute. As a dedicated Buckeye, Dr. Solze is a member of the OSU Presidents Club, and actively supports the OSU Havener Legacy. Recent donations have allowed the Solzes to reach higher levels of giving in the Havener Legacy. They were awarded an engraved Bulova mantel clock in recognition of their timeless dedication that inspires us all.



George & Tina Skestos

A new tissue bank is being established at OSU Havener Eye Institute, due to a generous donation from real estate developers George and Tina Skestos. The \$100,000 donation was given to support research on Idiopathic Intracranial Hypertension (IIH).

IIH is a potentially blinding disease that affects women of childbearing age. Raised intracranial pressure in these patients can cause chronic headaches, hearing loss, ringing, reduced cognition, and even death.

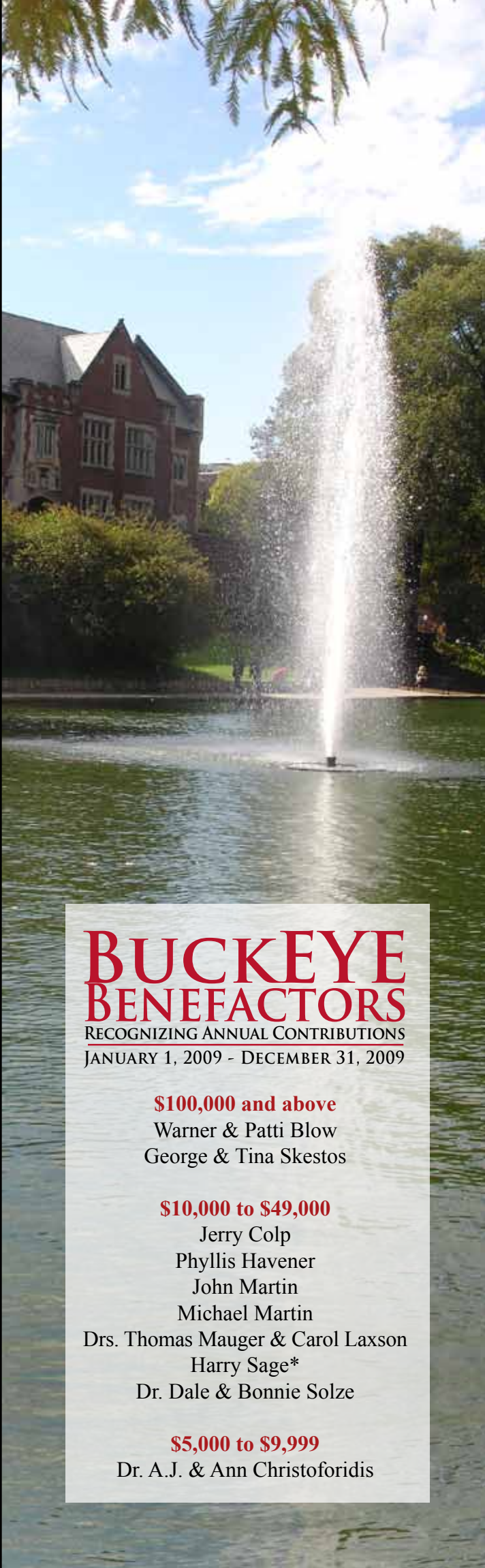
The Skestos’ generosity will enable the creation of a tissue bank of blood and cerebrospinal fluid from newly diagnosed patients with IIH prior to the initiation of treatment.



Storing these tissues will allow researchers the opportunity to discover the underlying etiology of IIH as well as the effects of pharmaceutical interventions.

The tissue bank will be instituted under the direction of OSU’s Dr. Steven Katz, a nationally recognized specialist in the field of neuro-ophthalmology. Dr. Katz will be working with Dr. John McGregor, OSU Neurosurgery, and Dr. Subinoy Das, OSU Otolaryngology, to create a team approach to provide excellent clinical care to patients with IIH and to spur multi-disciplinary research strategies.

George and Tina Skestos’ contribution will greatly increase our knowledge of this debilitating disease and how to treat it. We hope to establish the OSU Havener Eye Institute as a center of excellence in the care of patients with IIH.



BUCKEYE BENEFACTORS  
RECOGNIZING ANNUAL CONTRIBUTIONS  
JANUARY 1, 2009 - DECEMBER 31, 2009

\$100,000 and above  
Warner & Patti Blow  
George & Tina Skestos

\$10,000 to \$49,000  
Jerry Colp  
Phyllis Havener  
John Martin  
Michael Martin  
Drs. Thomas Mauger & Carol Laxson  
Harry Sage\*  
Dr. Dale & Bonnie Solze

\$5,000 to \$9,999  
Dr. A.J. & Ann Christoforidis

\$2,500 to \$4,999  
Dr. David Adam  
Dr. Colleen Cebulla  
Drs. Jack & Candace Hendershot  
Dr. Steven & Stacy Katz  
Dr. Garret & Kristina Mouser  
Drs. Jeffrey & Mary Oehler

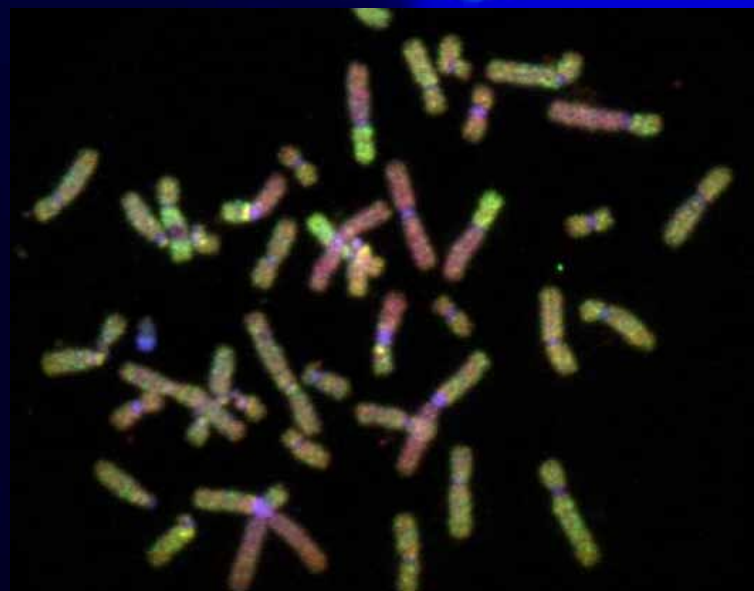
\$1,000 to \$2,499  
Dr. Louis Bloomberg\*  
Dr. Patrick Carroll  
Dr. Henry & Suzanne Croci  
Dr. Mark Gersman  
Dr. Ivan & Marcie Gilbert  
Carolyn Greshemer  
Charles Howarth  
John Kauffman  
Robert LaFollette  
Dr. Alan & Susan Letson  
John Marakas  
Dr. Robert McKinlay  
Dr. Carl Minning  
Dr. James Moses  
Drs. Stephen & Ami Orr  
Dr. Karl Pappa  
Dr. Leonard Quick  
Nancy Robinson  
Joseph & Lynne Romano  
Dr. Carl Shin  
Laura & Doug Sladoje

\$500 to \$999  
John Alberini  
Dr. Douglas Baker  
Dr. Thomas Bates  
Dr. Robert Chambers  
Kevin Henderson  
Dr. Laurence Karns  
Drs. Frank & Carol Kollarits  
Dr. Charles & Ellen Leone  
Dr. Robert Lytle  
Dr. Steven Meadows  
Dr. Bernard & Doris Mudrock  
Dr. William Penland  
Richard Poffenbaugh  
Paul Ritter, Jr.  
Dr. Mac Ronning  
Dr. Edward Schechter  
Robert & Helenor Smith  
Jim & Ellen Tressel  
David Ullman  
Dr. Albert Van Fossen  
Dr. Paul Weber  
Dr. John Wilding

\$100 to \$499  
Alan Alford  
Dr. J. Geoffrey Allen  
Virginia Armstrong  
Dr. Robin Beran  
Dr. John Burns  
Dr. Kenneth Cahill

\$100 to \$499 (cont.)  
Dr. John Christoforidis  
Dr. Frederick Davidorf  
Dr. Jonathan Davidorf  
Dr. Jack Dingle  
Dr. Todd Dowling  
Catherine L. Fenderson  
Dr. Gloria Fleming  
Margery Forry  
Kelli Fox  
Mildred Glover  
James & Tally Grossman  
Dr. Deborah Grzybowski  
Robert Hamm  
Monica Hanson  
Dr. James Harris  
Ann Havener  
Audrey Henry  
Virginia Hess  
John Hummel & Mary Jayne Fox  
Dr. Gary & Nancy Katz  
Dr. Curtin Kelley  
Rhonda Lee Kitzler  
Barbara Landolfi  
Dr. Carrie Lembach  
Dr. Richard Lembach  
Dr. Max Lerner  
Elaine Lewin  
Dr. Stuart Marks  
Dr. Jeffrey & Sue McAdoo  
Dr. Mary Lou McGregor  
Kathryne McKinney  
Dr. Randy McLaughlin  
Tim McNemar  
Jill & Karl Milliron  
Dian Montgomery  
Lora Moore  
Fred & Cheryl Nicely  
Alla Nudel  
Marlene O’Dair  
Dr. Philip O’Donnell  
Drs. George & Ruth Paulson  
Georgiana Pearson  
Karen Price  
Trish Rebish  
Ann Roush  
T. Dwain Sayre  
Richard Scheetz  
Robert & Effie Shiff  
Bill Speer  
Graham & Christina Stetson  
Mike Steyer  
Dr. Michael Stone  
Chad Stuckey  
Dr. Amit Tandon  
Dr. Jonathan Walker  
James Weaner  
Brian Weeks  
Robert Wenz  
Lisa Williamson  
Dr. & Mrs. Jeffrey Wincko  
George & Janet Wintringer  
Dr. Katie Wulff





# Ocular Melanoma

## Translating Research into Treatment

### ...Faster

**Mohamed Abdel-Rahman, MD, PhD**  
**Colleen Cebulla, MD, PhD**  
**Elson Craig, MD**  
**Frederick Davidorf, MD**  
**Kari Kendra, MD, PhD**  
**Thomas Olencki, DO**

**Above & Left Insert:** Genetic testing for high-risk ocular melanoma **Right Insert:** Bernie Mudrock a patient of Dr. Frederick Davidorf and a 15-year cancer survivor **Top Right Page:** Researcher/Clinician Colleen Cebulla, MD, PhD with Researcher Getachew Boru, PhD **Bottom Right Page:** Researcher Mohamed Abdel-Rahman, MD, PhD performing genetic analysis in the lab

Many patients envision the sterile environment of the laboratory and wonder how hours of looking through a microscope relates to their care. The Ohio State Medical Center's answer can be found at the new OSU Center for Clinical & Translational Science (CCTS). The CCTS is a Medical Center-wide effort to fast track the breakthrough scientific findings from the labs to the clinics so patients can benefit from OSU's top-tier research institute. The Havener Eye Institute is on the forefront of this initiative with its dynamic, interdisciplinary ocular melanoma team working together to end this disease. In October 2009, the Havener Eye Institute was recognized as one of the leading centers for the treatment of ocular melanoma at the 1st Annual Ocular Melanoma Scientific Working Group.

The Havener Eye Institute has a long history of using a multi-disciplinary approach to the management of patients with ocular melanoma. Patients are evaluated by ocular oncologists Frederick Davidorf and Colleen Cebulla, medical oncologists Thomas Olencki and Kari Kendra, radiation oncologist Douglas Martin, and human cancer geneticists Mohamed Abdel-Rahman and Robert Pilar-ski. By pairing our researchers with our clinicians and consulting specialists from every field of oncology, the Havener Eye Institute is able to offer patients a more thorough approach to cancer care.

In the tradition of OSU's medical pioneers, the ocular oncologists at the Havener Eye Institute have always sought to improve diagnostic tools and treatments. Until the late 1960s, patients diagnosed with ocular melanoma had no choice but to have their eye enucleated (surgically removed). Then, under the leadership of the late William Havener, OSU Ophthalmology began the concept of "conservative management" of eye melanomas. Dr. Havener and Dr. Frank Batley, former head of Radiation Oncology, designed a radioactive eye ring, using brachytherapy (applying radiation directly to the cancer) to treat these tumors without enucleation. OSU was one of the first hospitals in the U.S. to use brachytherapy for ocular melanoma, which is now the standard of care.

*"My wife and I had a real sense of confidence that I was being treated by doctors who were the best in their field. We have been so fortunate to have been given all these years together since the diagnosis. For that, we thank Dr. Davidorf and the rest of the doctors and staff at the Havener Clinic."* **Bernie Mudrock**

In 1980, Dr. Havener passed the management of patients with ocular melanoma to Dr. Frederick Davidorf who established the Ocular Oncology Division. In 1985, The OSU Ocular Oncology Division participated in one of the National Eye Institute's largest clinical trial to date. The Collaborative Ocular Melanoma Study (COMS) lasted over fifteen years and succeeded in proving that radiation treatment was just as effective in curing eye cancer as enucleation.

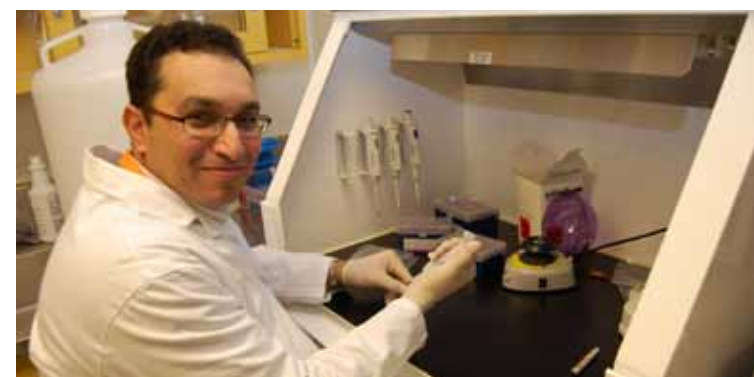
In addition to radiation, chemotherapy is also used to combat most cancers. While radiation is used to target and destroy cancer cells, chemotherapy uses toxic compounds which kill cells. Both methods have destructive side effects, and anyone who has witnessed the ravages of chemotherapy and radiation understand how difficult and



traumatic these treatments can be. In an effort to discover a less harsh therapy, Dr. Mohamed Abdel-Rahman and his collaborators are currently studying naturally occurring medicinal herbs to control the growth of melanoma cells. They had found several very promising, highly efficient and relatively non-toxic herbs that are able to alter the growth of cancer cells. It is their belief that these types of herbal medicines may be able to control the spread of cancer with minimal side effects to the patient.

The Ocular Oncology Division is also studying three different aspects of the genetics of ocular melanoma. First, they are looking for markers that can identify patients with an aggressive form of the disease. This will allow researchers to follow these patients more carefully, and in the future select these patients for any potential systemic treatment. Secondly, they are pre-selecting patients who they believe will better respond to newly discovered treatments, and also decrease the toxicity of the medication. Finally, they are attempting to identify the genetic markers that a small subset of patients and their family members have inherited, which predisposes them to ocular melanoma and other tumors. Recognizing these patients will help in the early management of not only the patient, but of at-risk family members.

The future of ocular melanoma care is in today's laboratories. From Dr. Mohamed Abdel-Rahman, cancer geneticist, to Dr. Colleen Cebulla, clinician and researcher, we are bringing the latest understanding of disease processes from the laboratory and applying them to clinical situations. With experienced faculty and fresh ideas, the Havener Eye Institute is translating basic science into better patient care, every day.





## CARING FOR THE KIDS

*Residents at Nationwide Children's Hospital*

Nationwide Children's Hospital (NCH) has been caring for sick and injured children and adolescents for more than 110 years. As home to the OSU's Division of Pediatric Ophthalmology, NCH and OSU Havener Eye Institute have enjoyed a long-standing academic relationship built on a shared commitment to excellence in learning, discovery, and collaboration. NCH medical staff and research scientists hold faculty positions at OSU. NCH also serves as the pediatric ophthalmology training site for our ophthalmology residents.

"There is a variety of patients," said Chief Resident Dr. Cedric Pratt, "and a very broad spectrum of conditions. You get exposed to a completely different aspect of ophthalmology that you never see in an adult clinic. The Havener Eye Institute has a much stronger emphasis on pediatric ophthalmology training than a lot of other residency programs."

Pediatric ophthalmology focuses on the development of the visual system and the various diseases that disrupt visual development in children. Management of eye problems in children can include using glasses, medications, and complex eye surgeries, while keeping in mind their unique needs. As young children cannot always communicate effectively, alternative strategies must be employed to obtain a complete history from the patient.

"You have to be on your toes," said Dr. Alla Kukuyev, a second-year resident. "You have to be very flexible when you examine kids. They have to feel at ease. You can only expect them to sit still for so long—you have to play little games to keep them interested. It is a fun place to work."



*Top:* Ophthalmology Resident, Dr. Kukuyev, with a pediatric patient *Middle:* Main lobby of Nationwide Children's Hospital *Bottom:* The new main hospital expansion project (2012)

*OSU Pediatric Ophthalmology is the only subspecialty that is not housed at the Eye & Ear Institute. The faculty of the Pediatric Division provide oversight for the three residents that rotate in the clinic. Two optometrists and a very skilled nursing staff also contribute to the success of this active clinic.*



## POSTGRADUATE SYMPOSIUM

The 53<sup>rd</sup> Annual Postgraduate Symposium in Ophthalmology was held on March 5<sup>th</sup>, 2010 with over 150 participants in attendance. This year's course directors, Cynthia Roberts, PhD and Paul Weber, MD, brought many accomplished and knowledgeable speakers together to discuss Ocular Imaging.

*Top Left:* Speakers, Drs. William Dupps, Elias Reichel, & Paul Harton *Top Right:* Drs. Dave Adam, Garret Mouser, Jeff Wincko, & Carrie Lembach *Bottom:* Drs. Carl Minning, Amit Tandon, & Tom Dingle



## UPCOMING EVENTS

For more info on these events contact Trish Rebish at (614) 293-8117 or rebish.3@osu.edu.

### GRAND ROUNDS

**May 6, 2010 - 8:00 to 10:00 am**  
Uveitis Grand Rounds

**June 4, 2010 - 1:00 to 5:00 pm**  
Pediatric Ophthalmology Grand Rounds

### DAVIDORF LECTURESHIP SERIES

**April 8, 2010 - 8:00 to 9:00 am**  
Daniel Martin, MD—Chairman, Cleveland Clinic

**April 29, 2010 - 8:00 to 9:00 am**  
Andrew Pearson, MD—Chairman, University of Kentucky

### 20/20 SEMINARS

**April 20, 2010 - 6:00 to 8:00 pm**  
The Retina Division presents "Spots in Your Eyes." For more info, contact Lisa Williamson at lisa.williamson@osumc.edu.

**September 15, 2010 - 6:00 to 8:00 pm**  
The Neuro-Ophthalmology Division presents "Current Concepts in Neuro-Ophthalmology" For more info, contact Gina Coman at gina.coman@osumc.edu.

## MEET THE FELLOWS

### Sunday Olatunji, MD - Vitreoretinal Fellowship

**Medical School:**  
Rosalind Franklin University  
Chicago Medical School  
Chicago, IL

**Internship:**  
*Internal Medicine*  
Sinai Grace Hospital  
Detroit, MI

**Residency:**  
*Ophthalmology*  
Kresge Eye Institute  
Wayne State University  
Detroit, MI

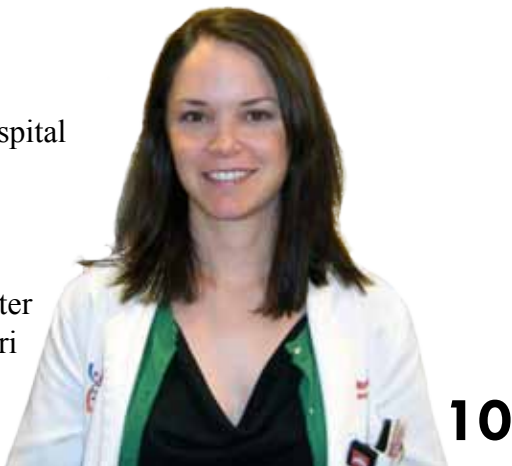


### Ashley San Filippo, MD - Glaucoma Fellowship

**Medical School:**  
Northeastern Ohio Universities  
Colleges of Medicine & Pharmacy  
Rootstown, OH

**Internship:**  
*Internal Medicine*  
Sisters of Charity Hospital  
Buffalo, NY

**Residency:**  
*Ophthalmology*  
Truman Medical Center  
University of Missouri  
Kansas City, MS





# NEW ANTERIOR SEGMENT, GLAUCOMA & RETINA FACULTY



## Anterior Segment - Andrew Hendershot, MD

Dr. Hendershot is originally from Findlay, OH. He studied biochemistry and pre-medicine at Ohio Wesleyan University before coming to Ohio State. He completed his Medical Doctorate, a general surgery internship, an ophthalmology residency, and an anterior segment fellowship all at Ohio State. “I have been at Ohio State so long, it just feels like the right place to be,” said Hendershot. “I will be helping patients with a variety of corneal diseases and disorders and giving back to the University that has given me so much.” Dr. Hendershot is available to see patients with cataracts, corneal abrasions, and all anterior segment conditions.

## Glaucoma - M. Iyad Azrak, MD

Dr. Azrak received his Medical Doctorate from the University of Aleppo in his native country of Syria. He immigrated to the United States in 2001 and completed an internal medicine internship at the Cleveland Clinic. At Louisiana State University, he finished his ophthalmology residency before coming to The Ohio State University for a glaucoma fellowship. “Glaucoma is such a terrible disease. It affects over 4 million people in the U.S.,” said Azrak. “It makes me happy to know that at Ohio State I’ll be able to help so many.” Dr. Azrak is available to see patients with ocular hypertension and all types of glaucoma.



## Glaucoma - Andrea Sawchyn, MD

Dr. Sawchyn graduated *Summa Cum Laude* from the University of Notre Dame with a BS in Science Preprofessional Studies. For both her medical degree and ophthalmology, residency she attended The Ohio State University. She continued her training with an internal medicine internship at Riverside Methodist Hospital in Columbus, OH and a glaucoma fellowship at Wills Eye Institute in Philadelphia, PA. She is passionate about helping patients with glaucoma in central Ohio. Dr. Sawchyn is available to see patients with ocular hypertension and all types of glaucoma.



## Retina - Michael Wells, MD

Dr. Wells hails from Texas where he completed a physics undergraduate *cum laude* at Rice University in Houston, home of the Fighting Owls. He acquired a Medical Doctorate from Baylor College of Medicine (Bears). An internal medicine internship at University of Texas Southwestern (Comets) was followed by an ophthalmology residency at the University of North Carolina Chapel Hill (Tar Heels). After a four-month rotation through the University of Minnesota (Gophers), he completed his training with a vitreoretinal fellowship at OSU where the official state nut, the Buckeye, reigns supreme. “Having trained at so many different universities is a great experience,” said Wells, “but figuring out who to root for on game day can be pretty confusing. It is nice for someone with such an identity crisis to find a home among fans that proudly proclaim themselves nuts.” Dr. Wells is available to see patient with all vitreoretinal conditions.

# ALUMNI RECEPTION 2009

Hotel Nikko, San Francisco, CA

The Havener Eye Institute holds a special reception during the American Academy of Ophthalmology (AAO) annual meeting in honor of the many excellent ophthalmologists that hail us as their Alma Mater.

This past fall we were joined by alumni, faculty, and colleagues as we celebrated both our alumni and the OSU Department of Ophthalmology’s 80<sup>th</sup> Anniversary at the Hotel Nikko in San Francisco. With old friends and spectacular views, the event was a great success.



Top: Dr. Wendy Smith, Dr. & Mrs. David Adams, Dr. Landon Colling, Dr. William Rummel and his daughter, and Dr. Cedric Pratt Bottom Left: Drs. Rebecca Kuennen and Katie Baston Bottom Right: Dr. William Anninger, Dr. & Mrs. Conley Call, Dr. Kenneth Cahill, and Dr. Steven Meadows



# FACULTY AWARDS

**Dr. Steven Katz** was selected to receive the Torrence Makley Research Professorship in recognition of the excellent care he provides to patients with neuro-ophthalmic and oculoplastic diseases and disorders. His efforts and extensive research have given hope to countless patients and their families.

The Martha G. & Milton Staub Chair for Research in Ophthalmology has been awarded to **Dr. Cynthia Roberts**. Dr. Robert’s scientific dedication, her teaching efforts, and her continued collaboration with our patient care physicians has changed lives through a better understanding of diseases and making more effective treatments available.



**AAO Annual Alumni Reception**  
Saturday, October 16, 2010  
Chicago, IL

**THE PENINSULA**  
Pierrot Gourmet  
5:30 pm to 7:30 pm

Direct questions to  
[eye@osu.edu](mailto:eye@osu.edu) or  
call (614) 293-8760.



## MISSION TO PERU

The faculty at the Havener Eye Institute are dedicated to sharing their clinical and surgical skills with underprivileged patients. One of our newest faculty members, Kelly Kingsbury, OD, participated in a mission led by Student Volunteers for Optometric Service to Humanity (SVOSH).

During their trip to Lima, Peru in September, the group saw approximately 1500 patients. They examined patients for glasses and dispensed hundreds of prescription lenses that they had brought with them. They also treated patients with infections, glaucoma, and other anterior segment conditions.

“One of our patients was a six-year-old girl who needed low-vision devices,” said Kingsbury. “This little girl was born with congenital cataracts and optic nerve hypoplasia. She was barely able to see 20/200 in each eye. She had just started school and was struggling with reading the board. We were able to give her several magnifying aids to help her see up close. We also trained her on how to use a telescope to ‘spot’ items far away. The cutest thing was when she learned to spot the sky and all she kept saying was ‘Hay nubles! Nubles!’ which means ‘There are clouds! Clouds!’”

# Ophthalmology International Missions

## HOW CAN YOU HELP?

OSU Alumni *Drs. John Pajka, Mark Drabkin, and Jonathan Walker* Share Advice on Volunteering

Developing countries have large numbers of indigent patients, but neither the government nor the patients have any way of providing revenue to cover the cost of obtaining and maintaining sophisticated ophthalmic equipment. The result is often a cycle where fewer and fewer resources are available to treat more and more patients. However, this logjam actually creates an opportunity to make focused interventions that can have exponential returns in terms of a country's ability to care for its own people. An example of this is the ongoing effort to help the Centro Nacional de Oftalmologia (CENAO) in Managua, Nicaragua.

CENAO is the only teaching and charity hospital for all of Nicaragua. It is charged with caring for the entire indigent population and with training new ophthalmologists. Unfortunately, it is impossible to do this effectively without functioning equipment. A number of doctors have worked both independently and with other organizations (such as the Rotary Club and SEE International) to try to provide equipment to overcome this problem.

These efforts have resulted in the donation of everything from operating microscopes and surgical machines to lasers, slit lamps, and even very simple (but crucial) things like textbooks in Spanish for the residents. Each one of these donations has helped overcome at least one obstacle to providing care and has allowed the program to become more effective.

One important aspect of a project such as this is simply choosing the most appropriate equipment. A lot of medical equipment donations consist of older devices that break down and cannot be repaired. The money used to purchase and ship such equipment is basically wasted—the material ends up in the hospital junkyard. Physicians can be invaluable when it comes to finding the best equipment because they already know the ins and outs of the various machines and they know what a practicing surgeon needs to provide the best care. Doctors also routinely interface with representatives from the manufacturers and are well positioned to ask for help.

There are other advantages to this type of project. For instance, some doctors may be at a point in their career where they cannot easily leave their practice to go on a surgical mission. Obtaining donations can be done right from a doctor's office—the possibilities are limited only by how much time a physician is willing to devote to gathering equipment. Or, doctors may be hesitant to perform surgery in the more unpredictable setting of a medical mission. For these doctors it can be much easier to go



on a shorter mission that focuses simply on ascertaining needs and providing equipment.

To those who are interested, there are a number of ways to begin. Start by speaking to organizations such as SEE International or Orbis—the AAO website has a list of organizations that can link you to locations in need. Or get in touch with service groups where you live, such as the Lions Club or local churches. These groups often have ongoing mission projects in developing countries and can help you contact the medical community in the region that they visit. Next, learn about the needs of the region and decide what you can do. It is relatively simple to visit such places when one does not have to gear up for an entire surgical mission. Such trips can be a real pleasure—help others, meet new friends in faraway places and, because these tend to be shorter trips that do not involve long surgery days, it can be easier to bring family members.

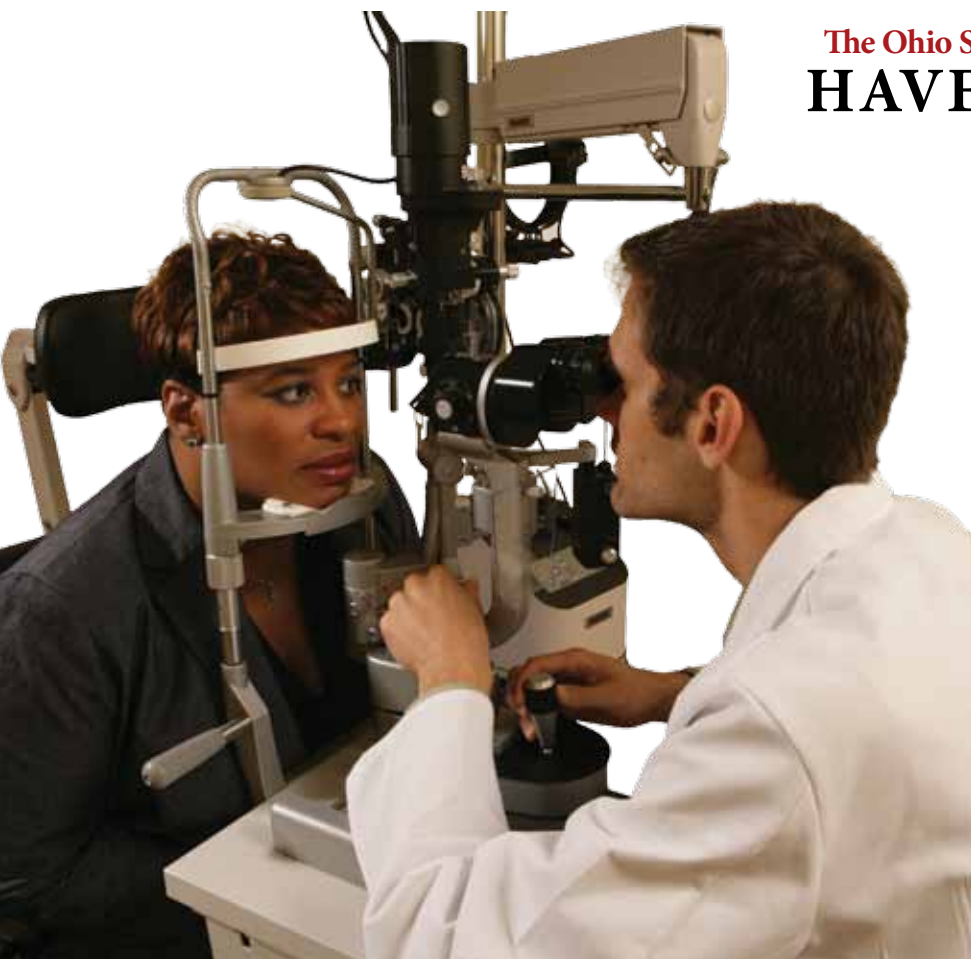
*Drs. Pajka, Drabkin, and Walker are alumni of the Havener Eye Institute. They have shared their surgical and clinical skills all over the world and plan to continue for years to come. **Top Photo:** Patients line up outside of CENAO **Bottom Photo:** Nicaraguan ophthalmologists perform surgery using a microscope donated by Dr. Pajka.*





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