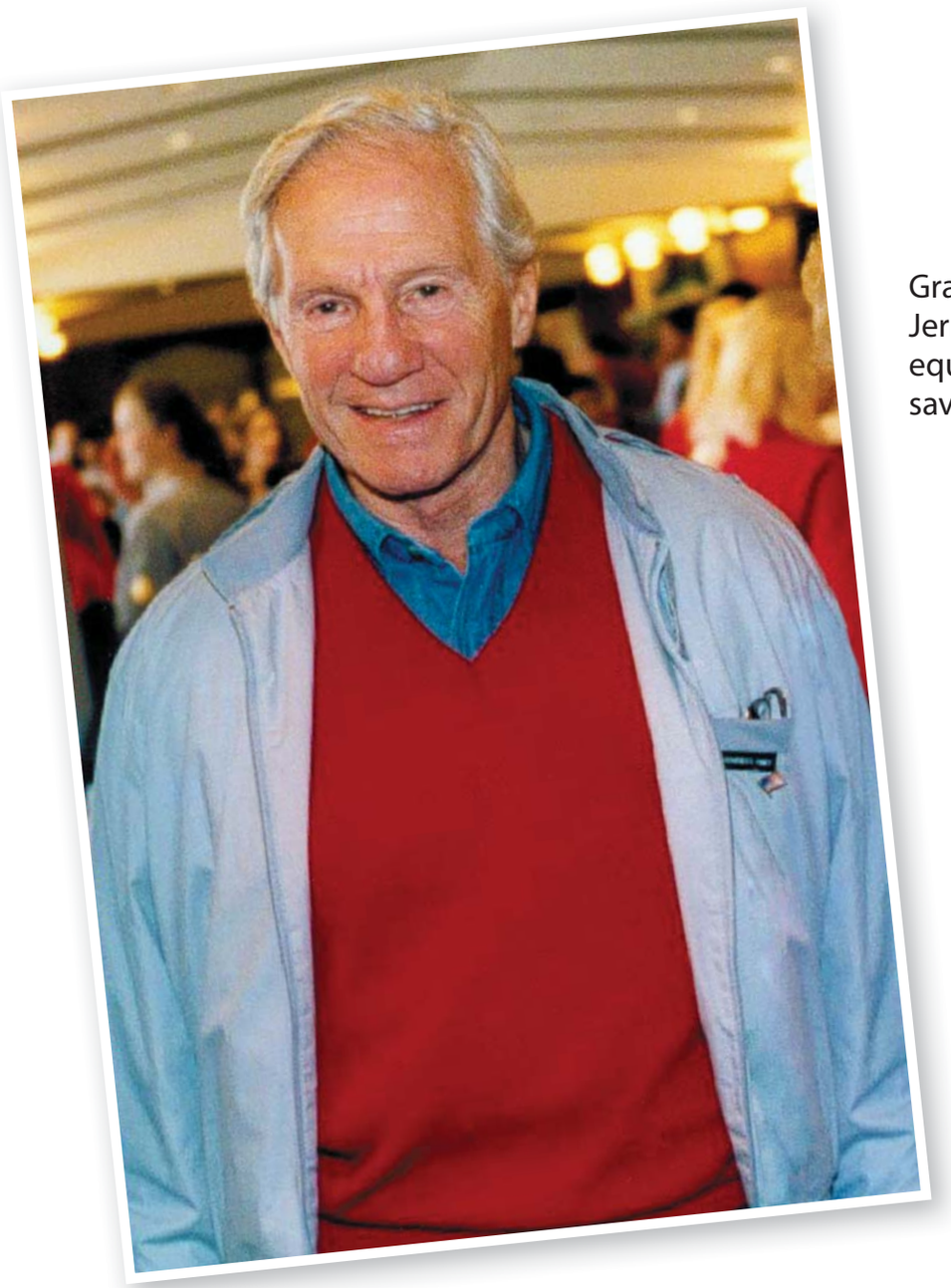
VOLUME 8, ISSUE 1 | SPRING 2013

BUCKEYE OPHTHALMOLOGY



Grateful patient, Jerry Colp, donates equipment to help save sight

Wexner Medical Center

Jerry Colp

"Over a period of 10-15 years through the [donated] equipment they've saved maybe a thousand eyes, then what's the money worth?"

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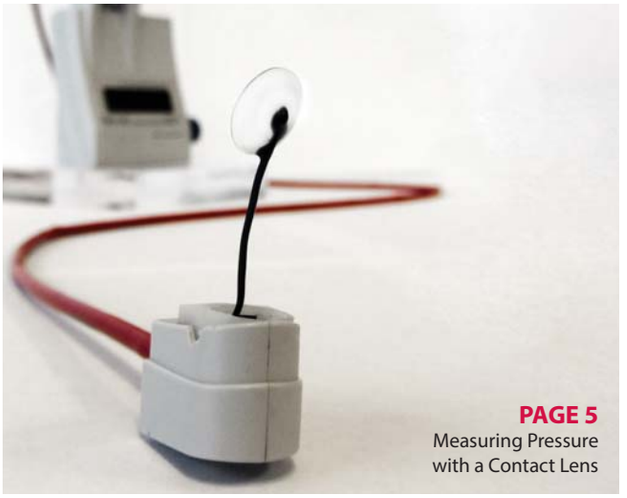

PAGE 5
Measuring Pressure with a Contact Lens

Table of Contents

OPHTHALMOLOGY OUTREACH
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Jerry Colp

A diagnosis of glaucoma had severely damaged Jerry's vision and the disease was progressing rapidly. Nearly 80 percent of his vision in his left eye and 20 percent in his right eye was gone, and standard treatment options were not succeeding.

In 1998, Jerry Colp traveled to the Havener Eye Institute from his home in Dayton, Ohio to try to save the remaining sight in his right eye. He met with Paul Weber, MD, and through laser surgery, his vision was saved.

Since his initial surgery, he has contributed funds to the Institute to acquire new research and clinical imaging equipment to advance the study of glaucoma as well as other vision-threatening conditions. Supporting the work of the researchers and physicians at Ohio State can create hope for others struggling with devastating eye disease.

"Just saying 'thank-you' is not good enough for me," says the retired real estate broker. "I want to help put the Havener Eye Institute on the map to be the finest in the United States. With this equipment, my hope is that the doctors will be able to save the eyesight of many, many people. That is what it's all about."

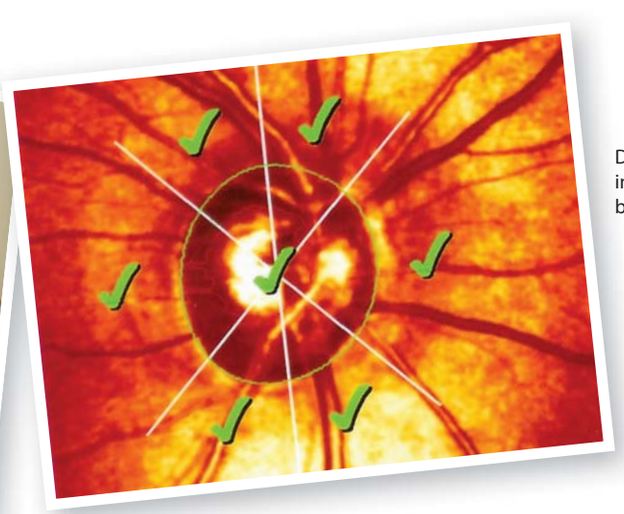
Jerry has donated several ocular imaging devices. He helped acquire the Stratus Optical Coherence Tomograph (OCT), which uses reflected light to create real-time cross-sectional images of the retina and optic nerve. Next, Jerry donated the Heidelberg Retina Tomograph (HRT), a confocal scanning laser ophthalmoscope which produces 3D images of the optic nerve head. Most recently, he donated the Optovue OCT—an ultra-high speed, high resolution OCT. Each of these machines enhances the probability of detecting subtle changes in the eye suggestive of glaucomatous progression—stopping glaucoma earlier than ever before. The OCT also is useful for monitoring a variety of retinal diseases including age related macular degeneration (AMD).

In addition to these devices, Jerry was instrumental in acquiring a Corneal Confocal Microscope, a device which produces in vivo corneal imaging used for the detection and monitoring of infectious and hereditary corneal diseases.

"If over a period of 10-15 years—through the [donated] equipment--they've saved maybe a thousand eyes, then what is the money worth?"

Many would agree with his words as countless number of patients have benefitted and will continue to benefit from Jerry's generosity for years to come.

An HRT imaging machine donated by Jerry Colp



Diagnositic imaging of the back of the eye

John Marakas

If you want to see a change, make one

It's easy to see a philosophy of active change working in John Marakas's life. From humble beginnings to President of Nationwide Life Insurance for 20 years, John has always believed that hard work and dedication make a difference.

Originally from western Pennsylvania, John had an early interest in the field of math. In high school, his teacher recognized his skills and recommended that he pursue Actuarial Science, a discipline that applies mathematical and statistical methods to assess risk in the insurance and finance industries.

It was a tough, unique field, but John was determined to succeed. At that time, it was only offered at two schools in the country, both of which were in the Big Ten. John chose "The School Up North" and graduated from the University of Michigan in 1949.

After graduation, John worked in Washington DC, Chicago, and Dallas. In 1971, he moved to Columbus to become a Vice President of Nationwide Corporation. One year later, he was elected President of Nationwide Corporation, where he remained until his mandatory retirement in 1991 at the age of 65.

After moving to Columbus in the early 70s, John and his family started seeing Marilyn Huheey, MD, an OSU ophthalmology alumnus. When he was diagnosed with glaucoma, a complex eye condition, Dr. Huheey referred him to Paul Weber, MD, a glaucoma specialist.

John was immediately struck by Dr. Weber's kind and thorough care. He wanted to help continue Dr. Weber's work, so he made a donation to support Dr. Weber's fellowship program.

The Weber Fellowship fund supports young physicians who want to specialize in caring for patients with glaucoma. This will ensure that the compassionate and knowledgeable methods that Dr. Weber has perfected will be shared with the next generation.

"With his donation, John wanted to provide the latest and best care for thousands of future patients with glaucoma," said Dr. Weber. "It's the story of his life; he wanted to see a change, so he made one."

Charles Howarth, MD

The Life of a Distinguished Alumni
1929-2012

Charles H. Howarth, M.D. was born on Christmas Eve 1929 to Charles and Thelma Howarth. He spent his early childhood in Amsterdam, Ohio, where his father was a coal miner and his parents gave him what he perceived to be the greatest gift of his life, poverty.

He later moved to Canton, Ohio where he graduated from Lincoln High School. He received his bachelor's degree in biology with honors from Hiram College in 1949.

In 1954, Dr. Howarth graduated from medical school and moved to a Hopi Indian Reservation in Arizona where he served two years with the U.S. Public Health Service, Division of Indian Health, and was made medical officer in charge of the hospital at the age of 24.

His experience on the reservation was one he cherished the rest of his life.

Upon completing his service, Dr. Howarth returned to Ohio and completed a three year ophthalmology residency at the OSU Department of Ophthalmology.

In 1960, he moved to Boise, Idaho and entered private practice. His office was located in what is now the Boise State University Alumni Center.

Dr. Howarth spent his life caring for his fellow man. He gave countless hours of his talents and resources to patients, friends and strangers both here and abroad. To the end, every conversation included his most often spoken words, "What can I do for you?"

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Dr. William Terrell
Roberta Todd
David Ullman
Marjorie Ward
Brian Weber
Audrey Weich
Dr. Jeffrey Wincko
George & Janet Wintringer
Danny Wray
Rita Writesel

2nd Annual Global Diabetes Summit

"Ask the Expert" Ophthalmology Session

Faculty, fellows, and residents are dedicated to preserving sight on and off the clock. Recently, several of the OSU ophthalmology family volunteered to help patients living with diabetes get answers and important vision screenings at the 2012 Diabetes Summit.

Gloria Fleming, MD, along with residents and fellows Drs. Megan Chambers, Adam Cloud, Sarah Escott and Leah Vaccarella, volunteered as Expert Consultants during the Second Annual Diabetes Global Summit community outreach extension. The event attracted over 700 attendees and the "Ask the Expert" section ranked as one of the top three favorite sessions.

Individual consultation was provided in the areas of diabetic eye disease, eye health and glaucoma awareness. Participants had an opportunity to ask questions, review ocular diagrams and receive educational materials.

Additionally, eye exam screenings were conducted with help from Havener Eye Institute's John Melnyk, OD.

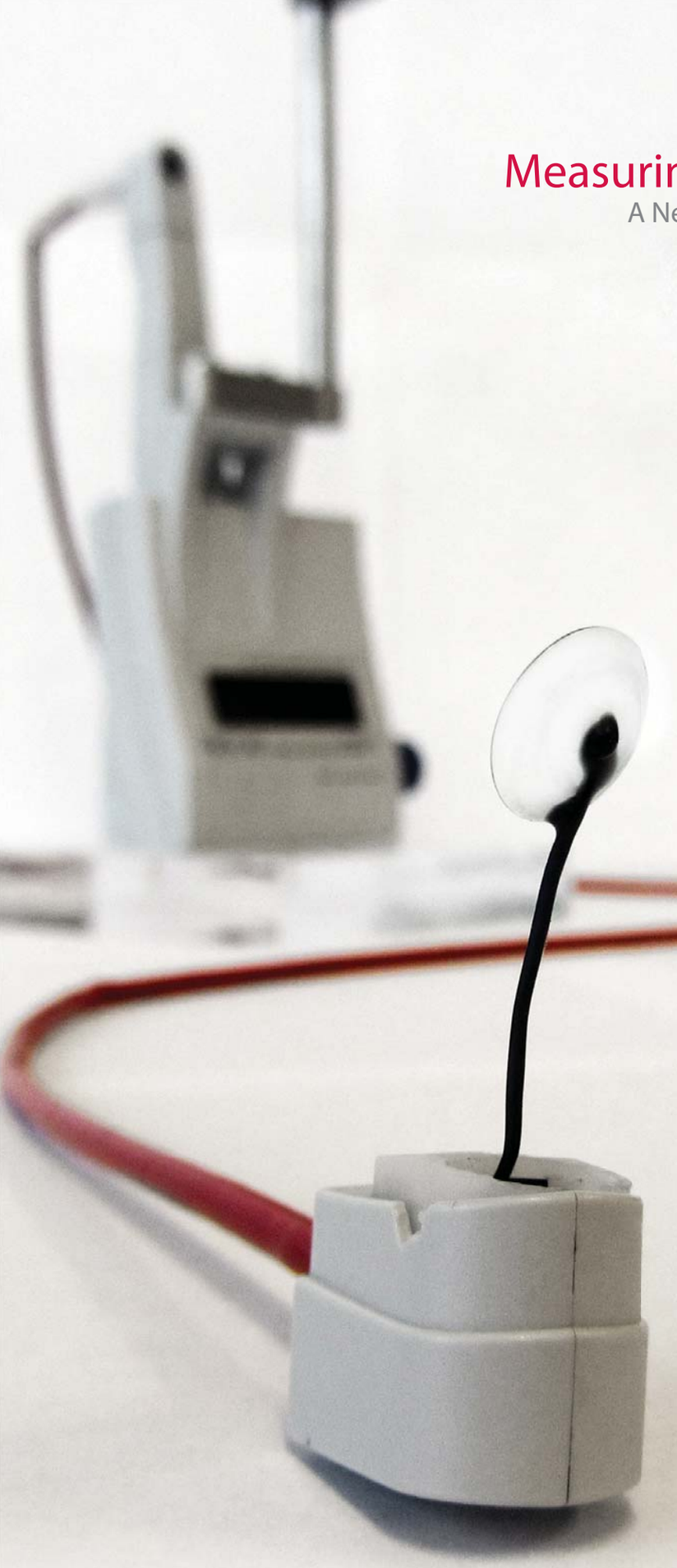
Ocular Melanoma Grant Awarded

Melanoma Know More and the Ocular Melanoma Foundation awarded a $12,500 research grant to Dr. Mohamed Abdel-Rahman from The Ohio State University for his pioneering work in studying herbal medicine and the treatment of melanoma of the eye.

Currently, there are molecular genetic tests that can detect patients who are at risk of developing an aggressive disease.

Unfortunately, there is no treatment available to these patients to prevent tumor spread. Dr. Abdel-Rahman's goal is to identify new therapeutic agents from herbal medicine that could be used safely in high risk eye melanoma patients to modify their disease outcome.

"We are happy to support this research grant to Dr. Abdel-Rahman to investigate groundbreaking herbal and naturally based treatments for uveal melanomas," said Dr. Susan Kindel, president of Melanoma Know More.



Measuring IOP with a Contact Lens

A New Study That May Redefine Glaucoma Care

Once again, researchers at the OSU Havener Eye Institute are proving that the future of eye care may not be very far. A recently published study in the journal *Glaucoma*, introduced a new contact lens sensor that measures pressure inside the eye.

Glaucoma is known as the "silent thief of vision" because of its nearly symptomless damage to the optic nerve caused by increased pressure. The importance of monitoring intraocular pressure (IOP) has long been established as crucial to helping halt the progression of glaucoma. Until now, IOP monitoring has been limited, and our understanding of the mechanisms behind glaucoma has been limited as well.

Currently, IOP readings are taken with either a Goldmann applanation tonometer or a dynamic contour tonometer (DCT). While the Goldmann tonometer is the current standard of care for measuring intraocular pressure, DCT more accurately assesses the true intraocular pressure by eliminating measurement errors caused by the shape, thickness, or elasticity of the cornea. It also provides a dynamic reading of the fluctuations in IOP with the heartbeat, while Goldmann provides a singular static reading.

During the contact lens sensor pilot study, researchers took measurements of patients both sitting and laying down with both the standard DCT and with the new contact lens DCT. This provided proof that the DCT contact lens was just as accurate as a traditional DCT. In addition, the lens' mobile nature and constant contact with the surface of the eye has opened the door to exciting research opportunities.

"The prototype is made by a company in Switzerland," says Cynthia Roberts, PhD, Research Division Director at the Havener Eye Institute. "It took me three months to convince them to let us look at it because they thought that with the wire it was too preliminary and they wanted it wireless. I had to convince them that we could do some important studies even with the wire on it. There are only three in the world, and Ohio State has two. We were trying to characterize the device and we found that the contact lens sensor gives us similar measurements to the DCT."

While corneal shape, thickness, and stiffness are known to affect IOP readings obtained by traditional tonometers, the clinical impact of other factors—including positioning changes (the effect of sitting versus standing versus laying supine on eye pressure) and ocular pulse amplitude (changes in eye pressure caused by heartbeats)—is not well understood. Now that the DCT contact lens has been validated, multiple studies are being planned in glaucoma and neuro-ophthalmology that promise to change our understanding and treatment of ocular disease.

Corneal Preservation Study

The Food and Drug Administration (FDA) has ruled that it is safe to use donated corneas that are preserved up to 14 days, but most surgeons aren't comfortable using corneas preserved for more than 7 days. A new National Institutes of Health (NIH) study is hoping to change that; opening the door to more patients in need of corneal transplantation and Ohio State is, once again, at the center of innovation.

Despite the FDA's standing that corneas up to 14 days old are safe to use, it is still more common for surgeons to only use corneas that are preserved up to 7 days. This limits the already short supply for transplant patients. According to the Eye Bank Association of America over 46,000 corneas were transplanted in 2011, but there is "always a need" for more.

To address this growing problem, the NIH is funding the Corneal Preservation Time Study (CPTS), which will help determine if there is a difference between corneas preserved 1-7 days (Group A) and corneas preserved 8-14 days (Group B).

The hope is that the study will prove that there is no increased risk of graft rejection rates in Group B and provide additional data in support of the FDA ruling. If more surgeons use corneas preserved up to 14 days, more corneas will be available for people to have transplants sooner.

With 40 research sites nationwide, including the OSU site led by Thomas Mauger, MD, CPTS has reached the halfway point in the goal to recruit 1330 patients.

CPTS is a "masked study" which means that neither Dr. Mauger, the study staff, nor the patients know if the patient receives a cornea preserved 1 to 7 days or 8 to 14 days. This helps everyone to remain unbiased toward one group or another.

As with any transplant, CPTS patients are seen very frequently following their surgery. Study patients are even more closely watched for any signs of graft rejection, monitoring with pachymetry (corneal thickness measurements) and confocal images (photos of the surface of the eye).

"There are so many patients waiting for a cornea transplant," said Dr. Mauger. "With the completion and success of the study, more patients will have access to this sight-saving procedure. I am proud to be a part of it."

New Research Studies

You may be eligible!

Branch Retinal Vein Occlusion Study

The experimental drug being investigated in this study, VEGF Trap-Eye, blocks VEGF and prevents the leaking of fluid from blood vessels in the eye. Branch retinal vein occlusion (BRVO) occurs when the blood flowing in a vein or segment of a vein in the retina is blocked. Blockage in the retinal vein also causes a loss of blood supply to the affected area of the retina, which in turn causes the production of a protein called vascular endothelial growth factor (VEGF).

Diabetic Macular Edema Study

The National Eye Institute is sponsoring a clinical trial to evaluate three different anti-VEGF injections for the treatment of Diabetic Macular Edema (DME). Injections into the eye of drugs that block a substance called vascular endothelial growth factor ("anti-VEGF drugs") have been used to treat DME because abnormal levels of VEGF can be produced by a retina affected by diabetes.

Corneal Preservation Study

The Cornea Preservation Time Study (CPTS) is a nationwide study sponsored by the National Eye Institute. CPTS seeks to determine whether studying the use of donor corneas preserved beyond seven days, within the FDA guidelines, may help increase the cornea supply available for transplants in the U.S.

FOR MORE INFORMATION:

Call Andrea Inman or Jill Salerno at 614-293-5287 or email research@osumc.edu.

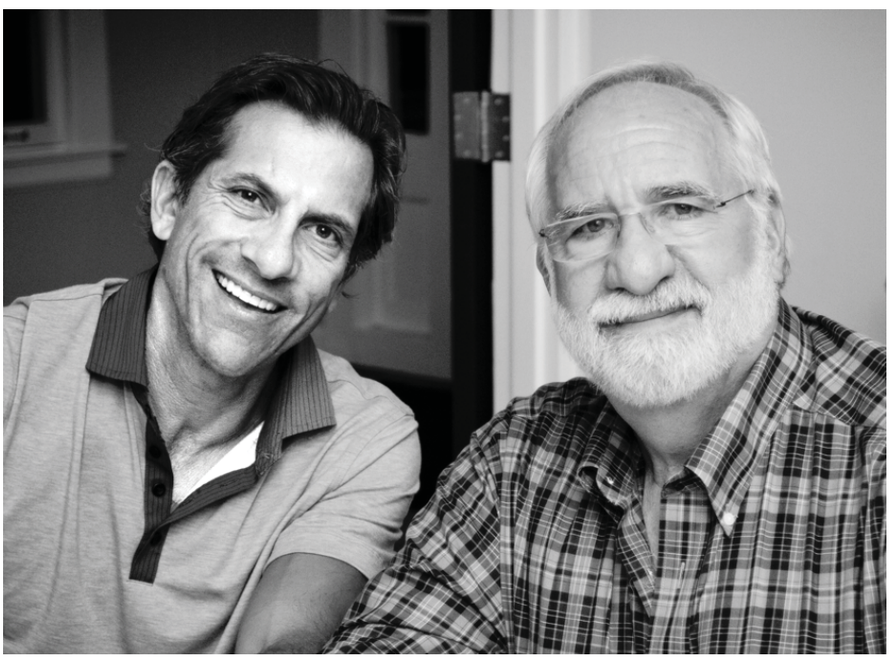
Davidorf Legacy: Fred ('69) and John ('96)

Fred is an Ohio native and was introduced to medicine by two uncles who were physicians. At an early age, he felt the frustration of being around seriously ill family members and not being able to help them.

During his pre-medicine years, he was involved in research at Battelle studying a hereditary cataract in the mouse which initiated his interest in abnormalities of the eye.

Fred received his medical degree from Ohio State, then headed west to Los Angeles General Hospital for his internship. After his year in the sun, he returned to Ohio State for residency, then went to Boston for a retina fellowship at Massachusetts Eye & Ear Infirmary. His love for Ohio State and his mentor, William Havener, MD, brought him back to Columbus, where he's spent the next 40 years in academic ophthalmology.

"Academic medicine is the best of all worlds," said Fred. "You get to practice medicine, fix eyes. You get to teach medical students, residents, and fellows. There is nothing like having inquisitive minds around. There is always someone over your shoulder saying, 'Why did you do that?' and it makes you think. You have to have an answer. So, it just makes you a smarter doc."



In contrast to Fred, John spent his childhood in sunny California and only braved a trip to cold Ohio to visit his grandparents and Uncle Fred. That is until he decided to follow in the footsteps of his father, Bernie Davidorf, MD, and "Uncle Freddie" and study ophthalmology.

John excelled at patient care during his residency and appreciated the variety of cases he was able to see at OSU. An outdoorsman at heart, he also enjoyed a diverse array of cold-weather activities during his time in Ohio.

"It's was always fun to work with John," said Fred. "He did a great job and it was good for him to 'return to his roots' to do his training. I am very proud of him. He has really distinguished himself in the refractive world."

John will need to work a few more years to match Fred's 40+ years of experience in the field of ophthalmology, but luckily he says he's "up for the challenge.

New Faculty: Cate Jordan, MD

Cate Jordan, MD, joined the Department in 2012 as a pediatric ophthalmology specialist. She sees patients at Nationwide Children's Hospital. Her clinical interests include amblyopia, strabismus, pediatric cataracts and retinopathy of prematurity (ROP).

Dr. Jordan attended medical school at The Ohio State University, completed an internship at Riverside Methodist Hospital, followed by a three-year ophthalmology residency at the OSU Havener Eye Institute, where she was Chief Resident. Finally, she completed her pediatric ophthalmology fellowship at Nationwide Children's Hospital.

"I am very excited to continue my relationship with the Havener Eye Institute where I had an amazing training experience," said Dr. Jordan. "After finishing my fellowship at Nationwide Children's, I joined the faculty and am enjoying teaching residents at Children's."

Weber Receives Award

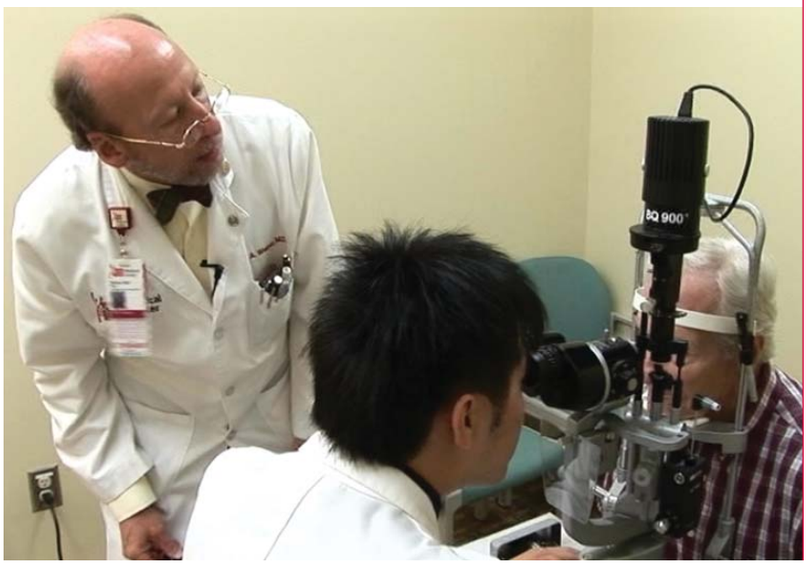
Paul Weber, MD has been recognized once again for his dedication to education by receiving one of the first two inaugural Mary Beth Fontana Wise, MD Master Teacher Awards.

The award, which is a part of The Ohio State University Wexner Medical Center, The Courage to Teach program, recognizes excellence in teaching and innovation in medical education. The recognition was established from an endowment provided by Dr. Fontana, an associate professor emeritus of Internal Medicine and includes a $2,500 grant.

"The grant will allow me to free up more time from my clinical responsibilities for education efforts," said Weber, who joined Ohio State in 1975 as an ophthalmology resident and as a faculty member in 1978. "This comes at a particularly good time because of the massive curricular reform we are embarking on. We're all having to rethink how best to educate students so I am in the process of learning new technologies to better present educational material in multiple formats."

Fontana, MD '66, joined Ohio State's faculty in 1970 and was often honored for patient care and teaching excellence. She was involved with the Independent Study Program and Integrated Pathway Med I & Med II programs, which were examples of the innovative learning methods that she promoted.

She established the endowment in 2012 with a pledge of $100,000 to honor faculty through the college's longstanding Courage to Teach program.



Meet the Fellows

Leah Vaccarella, MD
Comprehensive Ophthalmology Fellow

Evan Pike, MD
Cornea, External Disease, and Refractive Surgery Fellow

Adam Cloud, MD
Glaucoma Fellow

Jean Brian Kassem, MD
Neuro-Ophthalmology and Oculoplastics Fellow

Dominic Buzzacco, MD
Vitreoretinal Disease and Surgery - Community Fellow

Elena Geraymovych, MD
Vitreoretinal Disease and Surgery - First Year Fellow

Ahmad Tarabishy, MD
Vitreoretinal Disease and Surgery - Second Year Fellow

AAO 2012 ALUMNI EVENT

In November with 2012 drawing to a close, it was time again to host our annual alumni reception at the American Academy of Ophthalmology (AAO) and celebrate the Department's rich tradition. The well-attended event was held at the Fannie May Chocolate Company in downtown Chicago and included a special wine and chocolate tasting.

Joining faculty, residents, and fellows were many of our distinguished alumni, including Drs. David Adam, Will Anninger, Doug Baker, Kristen Burwick, Conley Call, Lou Caravella, Lena Chheda, Lou Chorich, Sireesha Clark, Tom Coffman, Stephen Collins, Bryan Costin, Aaron Davis, Alan Downie, Alice Epitropoulos, Mark Gersman, David George, Greg Gibb, Linda Greff, Max Henry, Honey Herce, Jennifer Jaworski, Karen Klugo, Grace Levy-Clark, Ted Loizos, Thomas Mauger, James McHale, Steve Meadows, Carl Minning, Garret Mouser, Christina Nye, Mitch Opremcak, John Pajka, Evan Pike, Rachel Reem, Cynthia Roberts, Anne Schroeder, Carl Shin, Wendy Smith, Brian Stahl, Amit Tandon, Lloyd Taustine, Billy Terrell, Petra Von Kulajta,Palak Wall, Paul Weber, Rick Whitehead, and John Welling.

For more information about next year's reception in New Orleans, contact us at (614) 293-8760 or eye@osu.edu.

SPECIAL GUEST: THOMAS SPOOR, MD, FACS

OSU EYE ROUNDS

"My Retina Is Normal, But I Still Cannot See!"

JACOB MOSES, MD LECTURESHIP
THURSDAY, APRIL 25, 2013 • 5:30-7:30pm

Join us for a complimentary CME & dinner event at OSU Eye & Ear Institute (915 Olentangy River Rd.) in the 3rd floor conference room. The 1.0 hour CME lecture will be presented by Thomas Spoor, MD, FACS, a nationally renowned oculoplastic and neuro-ophthalmic surgeon from Grosse Pointe Farms, Michigan.

RSVP at (614) 293-8760 or email Christina.Stetson@osumc.edu
Learn more, visit us online at: www.eye.osu.edu

March Meeting 2013

Advances In Corneal Disease

This year marked the 56th Annual Postgraduate Symposium in Ophthalmology. The course directors for "Advances In Corneal Disease," Rebecca Kuennen, MD and Andrew Hendershot, MD, welcomed several world-renown speakers, including:

Esen Akpek, MD - The Wilmer Eye Institute at Johns Hopkins
Renato Ambrósio Jr, MD, PhD - University of Rio de Janeiro
Michael Belin, MD - University of Arizona College of Medicine
William J. Dupps Jr, MD, PhD - The Cleveland Clinic, Cole Eye Institute
Jonathan Lass, MD - Case Western Reserve University
Shahzad Mian, MD - University of Michigan, WK Kellogg Eye Center
R. Doyle Stulting, MD, PhD - Woolfson Eye Institute, Stulting Research Center

With topics from keratoprosthesis to corneal crosslinking to ectasia, the attendees, ophthalmologists and optometrists from Ohio and surrounding states, enjoyed a varied and informative two day conference.

TOP LEFT: Drs. Ted Loizos, Carrie Lembach, Anne Schroeder, and Tom Dingle TOP RIGHT: Drs. Todd Whitaker, Scott Buck, Kevin Kegler, Nick Rogers, and James McHale BOTTOM: Drs. Jonathan Lass, BJ Dupps, Michael Belin, Cynthia Roberts, Andy Hendershot, and Renato Ambrósio

Fact or Fiction

with Dr. Jain

I've already been checked for glaucoma. Do I really have to be rechecked?

FACT: "Glaucoma is a disease of the optic nerve, which connects the eye to the brain. Most of the time people do not have any symptoms. It's important to have a yearly eye exam. The doctor will examine your optic nerve, check your eye pressure, and test your peripheral vision to help determine if you have glaucoma."

My grandparents have glaucoma, should I be worried?

FACT: "Several factors including family members with glaucoma, elevated eye pressure, older age, eye trauma, steroid use, and race can put you at an increased risk for developing glaucoma."

I've been told to take glaucoma eye drops, but do they really help?

FACT: "Damage from glaucoma to the optic nerve is permanent, but lowering the eye pressure has been shown to decrease the risk of glaucoma getting worse. Taking certain eye drops can help lower the eye pressure."

Shelly Jain, MD

Ophthalmology International Missions: Ethiopia

"This was my first mission trip and it was amazing to see how health care is provided in a developing country. It was really eye opening. The amount of good that the Ethiopian doctors do is so great, even when they are so handicapped by supplies and everything else, it is really challenging. It's amazing what they do, it really is." Amit Tandon, MD

Ethiopia is often referred to as the "cradle of civilization" because it is widely believed to have been the origin of the human race. Today, it is home to over 80 million people and has the largest economy in East and Central Africa. Despite this, 30% of the population lives below the International poverty line and 85% of the population live in rural areas.

There are fewer than 100 qualified eye doctors in Ethiopia with the majority located in the capital city and the biggest towns. Consequently, there are only 15-20 eye doctors serving the remaining 70 million people. It is estimated that more than 1.2 million Ethiopians are blind and that half of those people are blind from cataracts.

"That is a huge number and it is just terrible," said Dr. Tandon. "Cataracts are a reversible condition, something that can be fixed. They just need to have access to eye care and cataract surgery."

With this in mind, Dr. Tandon, along with current ophthalmology resident Kristen Burwick, MD, recently traveled to Ethiopia to perform much-needed cataract surgeries. Because of the rural conditions and lack of supplies, they had to perform extracapsular cataract surgery (removal of the cataract in one piece) instead of the more modern phacoemulsification (the cataract is broken into tiny pieces using sound waves and is removed using suction).

"It is the old-fashioned way to do it," said Dr. Tandon, "but it still works. We were able to perform about 70 surgeries in a week."

Dr. Tandon and Dr. Burwick were also able to spend time with residents and faculty of a newly established residency program. The program, which is just three years old, is getting ready to graduate its first class. They are very open to having visiting ophthalmologists teach, lecture, and demonstrate western medical techniques.

"They are very eager to learn and pass it on to their residents," said Dr. Burwick. "They need education so badly. They are also very dependent on outside people for any type of supplies."

With the successful trip now behind him, Dr. Tandon is making plans to return and do more to help.

"We went to help do cataract surgeries," said Dr. Tandon. "But, we also wanted to learn what is needed there and to see how they practice medicine. The plan for the future is to go back, to take supplies, and to teach them how to do phaco surgery. That way they can be more efficient, see more patients, and help more people."

Pannee: Strong Survivor & Grateful Patient

Pannee McKinley is well-known for her strength and good-nature. A Thai native and five-year breast cancer survivor, she has never been daunted by a challenge or a diagnosis. That is until she heard that her vision was deteriorating due to age-related macular degeneration (AMD). "I didn't cry when I found out that I had breast cancer," said Pannee. "I drove myself to chemo and I stayed strong. But, when I found out that I could go blind, I was devastated. Your vision is so important. You close your eyes and think about not ever being able to open them again...it's terrible."

Originally from Thailand, Pannee learned to be strong and independent from an the early age when her mother immigrated to Washington, DC. Pannee remained in Thailand with her father, but it wasn't easy growing up with her mother 8,000 miles away.

After graduating from college with an accounting degree, she was able to follow her mother to the United States, where she met Gary McKinley. She and Gary later married and moved to Bellevue, OH. Pannee began working in insurance and remained in Bellevue for 20 years, before settling in Columbus and taking a job at Nationwide Insurance.

In the late 90s, she lost central vision in her left eye and went to Alan Letson, MD. Her left eye was down to count fingers vision and she was diagnosed with a form of advanced Age-Related Macular Degeneration (AMD). Wet macular degeneration is caused by abnormal blood vessels that leak into the macula, the center of the light-sensitive layer on the inside back (retina). Left untreated, wet AMD can result in complete vision loss in the center of your field of vision. Irreparable damage had already been done to her left eye, but Dr. Letson was determined not let her lose the vision in her right eye. Pannee monitored her right eye for any signs of wet AMD, and was evaluated every four months.

In early 2006, Pannee was diagnosed with breast cancer and spent the next year in chemotherapy. Early detection and diligent treatment saw her cancer-free in 12 months, but in August of 2007 she noticed a rapid change in her vision. The vision in her right eye had been 20/25—nearly perfect—but suddenly she was only seeing 20/300. She was terrified. Dr. Letson saw that she had developed significant wet AMD in her right eye. He immediately started her on intraocular anti-VEGF injections to slow the growth of the abnormal blood vessels.

"It's scary to you hear that you could lose your vision," said Pannee. "I mean, when I first heard about injecting AMD medicine into the eye and it made me so nervous, but when you know you could lose your vision, you say, 'Do whatever you need to do to try and save my sight!"

Her initial series of anti-VEGF therapy produced no improvement. With her vision down to 20/400, Dr. Letson switched her to a different anti-VEGF injection and added Photodynamic Therapy (PDT) laser. Finally, her vision began to improve, and reached 20/40—good enough to drive again—but her eye troubles weren't over yet. Her vision began to decrease. If she were dining out, she would have to take the menu outside into the sunlight to see.

Pannee had begun to develop cataracts, a clouding of the lens inside the eye. Because she had only one useful eye, the cataract surgery was delayed until the benefits far exceeded the risks. She finally had to give up driving—a big blow to her independent spirit.

In April of 2008, with the cataracts fully developed, Dr. Letson referred Pannee to Amit Tandon, MD who removed the cataract from her left eye. She went from count fingers vision to 20/200. Dr. Tandon performed the second cataract surgery and Pannee's right eye went from 20/80 to 20/25.

"After the first surgery, I could immediately tell the difference," said Pannee. "It was so hard to wait the three weeks until I could have my second eye done, but then, it was like a miracle. I could see!"

Pannee is still receiving anti-VEGF injections to keep the wet AMD from returning, but they are less frequent and her vision is holding. She is grateful for having the right doctors and expertise at the right time.

"I would give my last dollar, the last one in my pocket, to help stop diseases like breast cancer and AMD," said Pannee. "The research is so important. If not for Dr. Letson and Dr. Tandon, I would be blind. I want to make sure not one else has to face what I did."

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