

FOCAL POINT

QUARTERLY NEWS BULLETIN

July 2014 - Vol.9

VasKon'14

22nd & 23rd March 2014 at
Taj Coromandel, Chennai.

VasKon, an yearly ophthalmology conclave was conducted by the world's largest eye care network, Vasan Eye Care on 22nd & 23rd March, 2014 at Taj Coromandel, Chennai.

"We have partnered senior National and International Ophthalmologists to have a scientific program, that would best allow them to disseminate their knowledge to the eye doctors in our country" said Dr. Anand Parthasarathy, Scientific Committee Chairman of VasKon conference.

This Year we got the best of international experts in the fields of Vitreo-Retina and Paediatric Ophthalmology to demonstrate the latest techniques in surgery.

Prof. Kenneth Wright from Los Angeles, USA was recipient of the VasKon Plenary Medal for his Lifetime Achievements and delivery the Plenary Lecture.

Dr. Kimiya Shimuzu from Japan, Prof. Usha Chakravarty from Ireland, Dr. Doric Wong and Ronald Yeoh from Singapore, and Dr. FY Rustomovich from Russia were other world

renowned Eye Surgeons who participated, Thru Video Conferencing, Surgeons demonstrated latest techniques from Vasan, Saidapet & Anna Nagar to Taj Coromandel. The program was attended by almost 800 doctors from pan India.

1. Prof. Wright demonstrated his expertise in complicated squint surgeries.
2. Dr. Kimiya Shimuzu from Japan, a pioneer in live surgery on latest Visian Implantable Contact Lens, simultaneously in both eyes together.
3. Keratokonius incidence in India is very high. Most patients do not even know, and suffer forever.

Dr. Anand Parthasarathy, Director of Cornea and Keratoconus Clinic in Vasan surgically demonstrated the latest Intra Corneal Ring Segments (INTACs) implants, which will enhance vision in these patients. "This new treatment in combination is a boon to Keratoconus patients and we encourage them to utilize our expertise" commented Dr. Anand Parthasarathy.

4. "VasKon is gaining momentum in India and has becoming a major academic event in India for Eye Doctors, this has been used by major eye companies to launch their products" commented Mr. PA Unni the organising secretary.
5. "Vasan eye bank which has done more than 2,400 corneal transplants, thus given sight to so many is the part of the CSR for Vasan Eye Care and soon will become Asia's

largest Eye Bank Network" commented Dr. K. Premraj the president, Vaskon. "The protocols & process of Vasan Eye Bank is now adopted by Eye Bank association of India" commented Mr. Govind Hari, chairperson, EBAI and launched MK corneal medium processed by Vasan eye bank.



Inside Story

VasKon 2014	1
Oculus 2014	2
World Environmental day	2
World Glaucoma week rally	3
EBAI - CME 2014 in association with Vasan Eye Bank	3
Refractive Surgery	4
A Rare Case of Congenital Inverse Duane's Syndrome	5
If summers are here, can conjunctivitis be far behind?	6
Rare Oculoplasty Procedure Done at Vasan - Howrah	7
Vasan Eye Care's New Advertisement Campaign	7
NABH Certification	8
Guess the 'Eye'con	8



OCULUS 2014

Oculus 2014 CME on Oculoplasty will bring together leaders in the field of orbit, oculoplasty and aesthetics for a comprehensive overview on this rapidly expanding subspecialty. The CME will be

Coimbatore Chapter

held in Coimbatore, at The Hotel Residency, Avinashi Road on the 6th of July, 2014.

The conference will cover topics relevant to daily practice as well as challenges in the field of oculoplasty.

Topic highlights are, Ptosis, Orbital tumours, Orbital inflammation, Ocular surface tumours, Thyroid eye disease, Orbital fractures, Socket reconstruction, Common oculoplasty surgical procedures (video based), Facial palsy rehabilitation, Blepharoplasty, Botox, Fillers and Customised ocular prosthesis.

Eminent faculty includes, Dr. Gangadhara Sundar (Singapore), Dr. Santosh Honavar (Hyderabad), Dr. Usha Kim (Madurai), Dr. Viji Rangarajan (Coimbatore), Dr. Roshmi Gupta (Bangalore), Dr. Shubhra Goel (Hyderabad), Dr. Aravind P.M (Chennai), Dr. Vidhya (Coimbatore), Mrs. Archana Murthy and the Team Oculoplasty of Vasan eye care hospitals across India.

This is a meeting for all ophthalmologists, Facio Maxillary and Plastic Surgeons. This also enables the post graduates and fellows to interact with stalwarts in the field, and enhance their skills.

World Environment Day



World Environment Day 5 June

The UN General Assembly declared 2014 as the International Year of Small Island Developing States (SIDS). World Environment Day (WED) 2014 was celebrated under the theme of SIDS, with the goal of raising awareness of their unique development challenges and successes regarding a range of environmental problems, including climate change, waste management, unsustainable consumption, degradation of natural resources, and extreme natural disasters. UNEP is also soliciting votes for the 2014 WED slogan through 5th March, 2014. The winning slogan will be used to call on the global WED community to take action for islands. The official slogan for the year, 2014 is 'Raise Your Voice Not The Sea Level'.

Vasan Eye Care Hospital, Coimbatore organised a public awareness event commemorating the 'World Environment day' on 5th June, 2014, the programme was inaugurated by Thiru M Senthil Kumar, IFS, District Forest Officer, Coimbatore. Dr. L Srinivasan, Medical Director, Dr. N Sathian, CMO, along with other Doctors of Vasan handed over the first sapling to our patient. Vasan Eye Care distributed over 900 saplings to patients who walked into our

hospitals in Coimbatore. We at Vasan are very passionate about making a difference in people's vision, making them visualise and relish the beauty of our universe. Simultaneously safeguarding the environment through our professional way of delivering eye care and effective waste

reduction and management. Across the country, we follow special waste reduction techniques, such as source reduction, reuse, recycling and effective segregation of waste as biomedical and others to reduce pollution and infections in the community and provide a healthy environment.





World Glaucoma Week

March 9 - 15, 2014

World Glaucoma Week Rally - Coimbatore

Vasan Eye Care organised a rally to create Glaucoma awareness among general public, commemorating "World Glaucoma Week - 9th to 15th March". The rally commenced at Koundampalayam, Opp. to old Kalpana Theatre, Coimbatore and concluded at Vasan Eye Care Hospital, Thudiyalur Branch. It is a joint effort by Vasan Eye Care Hospital & Lions Club of Coimbatore - R.S.Puram - East.

MJF Lion P. Sasikumar, District Governor Lions Clubs of International, Coimbatore, flagged off the rally in the presence of honorary dignitaries like Dr. L. Srinivasan, Medical Director, Vasan Eye Care - CBE Region, Dr. N. Sathian CMO & Head Glaucoma Surgeon, Vasan Eye Care - R.S. Puram, and Dr. Usha, Chief Medical Officer, Vasan Eye Care - Thudiyalur Branch.

Glaucoma is a group of disorders in which fluid pressure within causes irreversible damage to the vision (optic) nerve that connects the eye to the brain, to transmit visual images. Glaucoma is often referred to as the 'sneak thief of sight' as it can strike without any symptom. This is why most of the patients with Glaucoma are unaware about their disease. If damage to the optic nerve from high eye pressure continues, glaucoma

will cause permanent loss of vision. Without treatment, glaucoma can cause total permanent blindness within a few years.

It is the second leading cause of blindness worldwide. It is estimated that over 7 crore people are affected worldwide by the disease and nearly 10% of them turn blind. In India 2% to 4% people of the total population are affected by glaucoma, out of which only 7% utilized medical assistance at given time.

Speaking during the occasion Dr. N. Sathian, CMO & Head Glaucoma surgeon, Vasan Eye Care, said "Glaucoma is the

second leading cause of blindness worldwide and estimated 74 million people are affected by this disease. Blindness induced by Glaucoma is irreversible and around 15% of them are blind in both the eyes and 26% are affected in one eye. Lack of awareness about Glaucoma and misunderstanding about the disease are the main reasons for blindness".

He also added "Glaucoma like diabetes or hypertension cannot be cured but can be controlled to retain existing vision. Any one above the age of 40 yrs those with family history of Glaucoma should have their eyes examined periodically for early detection and treatment of Glaucoma. Glaucoma patients should commit themselves for

lifelong treatment and periodical follow-ups. Glaucoma can be controlled or treated either with medicine, Laser or Surgery and the drug prescribed by Doctors should be used regularly at the specified time, to ensure round the clock pressure control".

In this rally, the staff of Vasan Eye Care and students from various institutions participated, which includes, Vasan Institute of Ophthalmology and Research, Government, Men's ITI, Coimbatore Institute of Technology, Civil Aerodrome Post, Coimbatore, SNS College of Arts & Science, GRG College of Arts & Science.



EBAI - CME, 2014 In Association with Vasan Eye Bank

Corneal Blindness is one of the leading causes of blindness in the world, affecting almost 2 million people in India. Unfortunately a majority of those affected are children & young adults with their whole life time ahead of them. Fortunately, majority of them can regain useful vision after treatment. In India currently we collect 45,000 eyes and perform around 25,000 corneal transplantations per year but we need to perform 1,00,000 corneal transplantations per year to eradicate corneal blindness. It means we need to collect approximately 2,00,000 eyes per year. Yes! it is difficult task but not an impossible task. If we all can work together

in the interest of the public and the nation. It can be possible in a short span of time.

This year EBAI - CME will provide Eye bankers various guidelines to reach in a position to perform 1,00,000 corneal transplantations & collect 2,00,000 corneas in India, following aseptic techniques, thus eliminating corneal blindness from our country.

The National EBAI- CME is being organised to reunion entire ophthalmic society including optom in a single platform and work as team to eradicate blindness from our country. And also this CME will help Eye Bankers and optom to obtain more standard practices & skills by practicing

with top eye banks in India & abroad.

Session Follows;

Please find the details in attachment

Seeking your active participation to make this CME grand success

Date : Sep. 26th, 27th & 28th 2014

Venue: Trident Hotel, Hitex City, Hyderabad.

For Registration Contact :

Mr. A. Aravind Kumar, Manager Vasan Eye Bank & Volunteer EBAI-CME 14 Organising Committee.

Phone: +91 7799281919.

E-mail: vasaneyebankhyd@gmail.com

Refractive Surgery – Excimer Laser Technology at its best!!

Dr. Sheena B, Refractive Surgeon, Bangalore

Lasik has been in vogue for decades and has been understood well with regard to safety and outcomes. Refinement in Laser has occurred in the form of speed, spot size, wavefront technology, eye tracking and type of laser used.

Previous studies suggests that natural corneal asphericity of most eyes is optimal and should be left unchanged. Therefore ideal ablation profile corrects the refractive error but leaves the corneal asphericity unchanged. Current approach is to use ablations that extend the refractive corrections as far to the edge of the optical zone as possible.

Furthermore, over the past 10 years, numerous improvements in excimer laser platforms such as faster repetition rates, faster eye trackers, and wavefront analyzers, (providing more accurate measurements), may have led to superior outcomes.

There has always been a comparison of results in Lasik using the wavefront guided technology and the wavefront optimised technology.

Wavefront Guided Treatment Profile

Principle: Broad beam lasers can't correct the small irregularities in the cornea. Most current devices use flying spot technology in which smaller beams (0.5 to 1mm) are used for better results in customized ablation. <1mm beam is required for correction upto 4th order aberrations and 0.6mm beam is required to correct upto 6th order aberration. VISX S4 (AMO) has an option of variable.

Shape of the beam is important to produce a smoother surface, which is achieved by optimised spot overlap. The energy is delivered in a Gaussian profile (greater energy in the centre than the periphery) with Allegretto and Mel 80.

Smaller spot size requires high speed tracking, else it can cause decentration of individual pulse and thus inducing aberrations. Decentration of >0.1mm can induce aberration rather than decreasing it.

Repetition rate correlates directly with the treatment time. Longer periods are associated with corneal stromal drying and loss of fixation. Broad beam lasers = 6-10Hz

repetition time. The scanning spot frequency should not exceed a rate that cannot be followed by the tracking system. There may be thermal damage if repetition frequency exceeds 60Hz. Machines like Scwind's Amaris Excimer laser can have frequencies upto 500Hz, but the thermal effect is reduced by applying the pulses sequentially in different locations of the cornea so that the repetition rate in a locale does not exceed 40Hz.



Figure 1: Bausch and Lomb Technolas 217z with zywave and Orbscan (wavefront guided)

Wavefront Optimized Profile

Mrochen et al designed an optimised aspheric profile to compensate only for the spherical aberration induced with the conventional treatment, preserving the pre-existing optical aberration pattern of the eye. Since then, this algorithm of treatment has been introduced in several modern excimer laser platforms and is in theory, less dependent on technical aspects that are critical in wavefront-guided treatment. This profile has been developed considering the loss in ablation efficacy due to the angle of incidence of the excimer laser pulses in the midperiphery (ie. the cosine effect leading to an oval beam of reduced energy on the peripherally sloping cornea), which can lead to a decrease in the intended ablation depth in this region and an increase in spherical aberration. The optimised profiles compensate for this effect by increasing the

pulse energy in the periphery.

By reshaping the cornea, the lasers modify the curvature and asphericity in a way that induces an increase in HOAs, especially spherical aberration, due to the optical effect of the transition zone between the treated and untreated cornea. The amount of induced optical aberrations is correlated with the level of attempted refractive correction. It is well known that the effects of significant HOAs degrade the quality of the optical image on the fovea. Although some controversy exists, it has been suggested that the correction of HOAs could lead to an improvement in contrast sensitivity and visual acuity. Therefore, the introduction of a customised correction based on the wavefront pattern of the eye was promising to overcome the main issues found in the conventional treatment.



Figure 2



Figure 2: Allegretto wave light with oculus (wavefront optimized)

Wavefront-guided vs Wavefront-optimized

It was found that there was no significant difference between the outcomes in eyes with less than 0.30 of pre op HOA RMS. Above this the wavefront guided treatment

Contd...4

Refractive Surgery

was found to be better to reduce the existing HOA.

Feng et al 12 supported these findings in a meta analysis, including 7 studies and 930 eyes comparing wavefront-guided to wavefront-optimized LASIK for myopia.

They reported no difference between profiles in terms of UDVA, corrected distance visual acuity (CDVA), and induction of HOAs for patients with pre-operative HOA RMS 0.30 μm . However, in eyes with pre-operative HOA RMS 0.30 μm , the wavefront guided profile induced less postoperative HOAs than the wavefront-optimized profile. In a prospective, randomised, double-masked study of 200 eyes that underwent LASIK for myopia and

astigmatism.

Though with respect to subjective symptoms and visual acuity outcomes, there has been no significant difference between the two types of treatments.



Dr. Sheena B

A Rare Case of Congenital Inverse Duane's Syndrome

Chief author: Dr. Muralidharakrishna B.S., MBBS., MS., DNB., Phaco, Paediatric and squint consultant, Vasan Eye Care, Bangalore

Co- author: Dr. Sindhu B.S., MBBS., DOMS., (DNB)

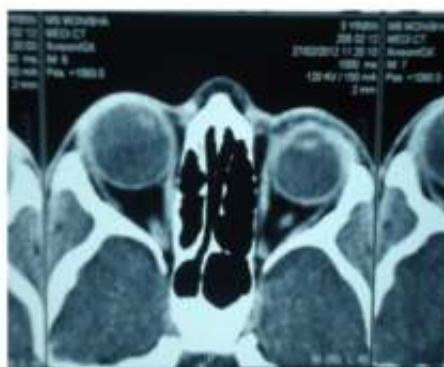
The author of this presentation does not have any financial interest

- A 5 year old girl presented to us with deviation of left eye and diminition of vision in left eye from birth.
- Her visual acuity was 6/9p with -1.00cyl at 170 in RE and counting fingers close to face in LE (not improving with glasses)
- There was no family history of strabismus.
- Her birth history was normal and there was no trauma during delivery
- On examination she had Left esotropia of around 45PD, left hypertropia.
- She had markedly limited left lateral rectus movement; and also there were limitation in down gazes.
- There was marked narrowing of the palpebral fissure on attempted abduction and prominent upshoot on abduction and retraction enophthalmos in left eye and slight widening of the palpebral fissure on adduction
- Her left eye showed vascularized growth over the inferonasal cornea.
- FDT under GA showed marked restriction of abduction.

Pre-operative photographs



CT scan of the orbit:



Investigations

- CT scan of the orbit and brain with coronal and axial sections showed ? Short left medial rectus muscle and fibrous bands extending from the medial aspect of the globe into the medial orbital wall
- VEP showed delayed P100 response in left eye

Management

- The left eye surgery was planned under GA.
- FDT showed severe restriction of LMR.
- Limbal incision was put and the fibrovascular growth was excised; extensive fibrosis was noted in the subconjunctival tissue; the medial rectus was found to be attached at 5mm from the limbus. The recession was not possible and so tenotomy of the fibrosed left medial rectus was performed. Excess fibrous tissue was excised. FDT was repeated and showed slightly free movement
- Conjunctiva was closed.

Post operative course

- Severe tissue edema was noted on first post operative day.
- Esotropia significantly improved, the restriction of abduction also improved and eyeball could cross the midline now and even upshoot partly improved.
- One month after the surgery, refractive correction was given and partial occlusion therapy was done to treat amblyopia; however the vision did not improve significantly.

Contd...6

A Rare Case of...

Discussion

- Unlike Duane's syndrome, inverse duane's syndrome is uncommon.
- It is also known as Pseudo / reverse duane's syndrome
- Common causes are due the fracture of the medial wall of the orbit with entrapment of the medial rectus muscle. Other causes may be due to tumour infiltration of the area surrounding the medial rectus; metastasis or very rarely congenital.
- Congenital variety is due to fibrosis in the area surrounding medial rectus muscle and also there is documented evidence of shortened medial rectus muscle.
- Classically there is esotropia; marked limitation of abduction.
- The abduction is associated with

Post operative photographs



narrowing of the palpebral fissure, retraction enophthalmos and upshoot of the globe.

- The condition is usually associated with amblyopia
- Confirmation is done by FDT
- CT scan/ MRI of the brain and orbit usually shows shortened medial rectus muscle.
- The surgical outcome depends on amount of fibrosis and recurrence is common; in general the longer the condition is present poorer will be the prognosis.

References

1. Helen Lew, Jong-Bok Lee, A case of congenital Inverse Duane's retraction syndrome: Yonsei Medical journal; vol. 41, No. 1, pp. 155-158, 2000
2. Duane TD, Schatz NJ, Caputo AR. Pseudo-duane's retraction syndrome. Trans Am Ophthalmol Soc 1976;74: 122-32
3. Chatterjee PK, Bhunia J. Bilateral inverse duane's retraction syndrome – a rare case report. Indian Journal of ophthalmology 1991;39:183-5

If summers are here, can conjunctivitis be far behind?

Dr Sapna Mardi, MBBS, DO, DNB

Proper eye-care in summers and rainy season is essential to prevent conjunctivitis, a common health problem of the eyes. Also known as red eye, pink eye or Madras eye, it is an infection or inflammation of the conjunctiva, the thin, clear membrane that covers the white part of the eye and the inside surface of the eyelids.

Conjunctivitis is of three types: allergic, infective and chemical. While allergic conjunctivitis occurs due to seasonal allergies such as that of dust, smoke, and pollen, infective conjunctivitis is caused by bacterial or viral infection. Chemical conjunctivitis is the result of exposure of eyes to irritants such as shampoo, dirt, smoke, and pool chlorine. All the three types are much more prevalent in summers and rains.

Conjunctivitis caused by virus or bacteria is contagious and spreads from person to person through touching or contact, including contaminated hands, towels, handkerchiefs, and eye makeup. It is common among children, who mostly get it from friends at school, day care centres, playground, or elsewhere. Though harmless in children and adults, the

condition can be extremely dangerous in newborns. Untreated, it can result in permanent vision loss.

Conjunctivitis makes the eyes look red and blood-shot. There is increased tearing and secretion of mucous and pus, often leading to matting of the eye lashes, particularly after sleep. The infected person may experience an itching or burning sensation in the eyes, blurred vision or increased sensitivity to light (photophobia). Fortunately, conjunctivitis is self-limiting and usually runs its course in a week to ten days.

If you notice first signs of conjunctivitis, immediately visit an ophthalmologist who is better qualified to identify what type of conjunctivitis it is and prescribe proper medication. To avoid inappropriate treatment, don't be your own doctor and avoid self-medication.

You can do several things to prevent and combat conjunctivitis: Avoid touching or rubbing the infected eyes.

Wash your eyes with cold water several times a day, especially after returning home from a long day outdoors. Avoid sharing articles such as towels, napkins, pillows,

beds, and eye cosmetics that can transmit the infection to you or to others. Wear glasses over contact lenses and never use anyone else's contact lenses. Shield your eyes with shades while traveling on two-wheeler. Never swim without wearing goggles.

Wash your hands before and after using eye drops and ointments. Do not apply ointments or drops used for an infected eye into an uninfected eye. Avoid direct interaction with people who have conjunctivitis until their condition is healed. Do not touch or shake hands. Another key factor in eye-care during summers is keeping yourself hydrated. Drink around 8 glasses of water daily, in addition to juices. Eat foods rich in cereals and greens as these are good for the eyes. A well-rested body and a good night's sleep show in bright healthy eyes. Chilled cucumbers or tea bags applied over eyes refresh them and reduce tiredness.

Dr. Sapna Mardi is senior consultant, medical retina and glaucoma services, at Vasani Eye Care Hospital.

(This article was featured in The Hindu, Metro Plus on 4th June 2014)

Rare Oculoplasty Procedure Done at Vasan Eye Care - Howrah

Patient was a 70 year old woman from neighbouring state. She came with upper lid ulcerating mass in her right eye for almost 1 year. Clinical diagnosis was Meibomian gland Carcinoma. But excision biopsy indicated towards Squamous Cell CA.

On table, sub-total upper lid excision done. Tarso-conjunctival free flap taken from other eye 1mm short of length leaving 3.5mm tarsal plate in donor eye. Graft sutured in place with 5-0 vicryl. Then, on the graft, skin cover created with bipedicular myo-cutaneous flap from above. Gap created there filled with free skin graft from post auricular area. Slight lid lag covered with a small tarsorrhaphy, donor eye left unsutured.



Vasan Eye Care's New Brand Campaign

Vasan Eye Care has come up with a new ad campaign in April, 2014. This is a patient centric campaign (Testimonial). The focus was on depicting real patients of Vasan and their life before and after treatment at Vasan. In this communication

exercise, a detailed research was done across India to find out the patients who lead a happy and normal life after treatment. After optioning a long list of patients, four patients were selected. And

the campaign was shot in Delhi & Kullu Manali. The theme of the campaign was "Happiness Begins Here". The story line was the actual incidents in the life of those 4 patients.



Vasan Eye Care Hospital, Saidapet has been accredited by the National Accreditation Board for Hospitals & Healthcare Providers

This standard consists of stringent 600 plus objective elements for the hospital to achieve in order to get the NABH accreditation. These standards are divided between patient centered standards and organisation centered standards. To comply with these standard elements, the hospital will need to have a process-driven approach in all aspects of hospital activities – from registration, admission,

pre-surgery, peri-surgery and post-surgery protocols, discharge from the hospital to follow-up with the hospital after discharge. Not only the clinical aspects but the governance aspects are to process driven based on clear and transparent policies and protocols. In a nutshell NABH aims at streamlining the entire operations of a hospital.



Guess the 'Eye'con



Guess the names of these FIFA World Cup winning captains



Manuscripts are invited in the categories of review articles, case reports, practical tips, instruments, journal reviews and conference reviews. Awards and accomplishments by doctors will also be included.

Manuscripts & Suggestions to be sent to focalpoint.vasan@gmail.com or Vasan Healthcare Private Limited, No. 70, Dr. Radhakrishnan Salai, "Lancor West Minster", IV Floor, Mylapore, Chennai – 600 004, Tamil Nadu. For more details, call: 044-39890950.

Knowledge Team: Dr. Gayathri, Dr. Anand Parthasarathy, Dr. Shibu Varkey, Dr. Rajashekar, Dr. R. Prema, Mr. P.A. Unni and Team Brand Communication

/vasanhealth