

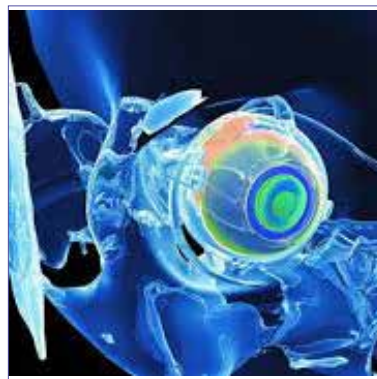
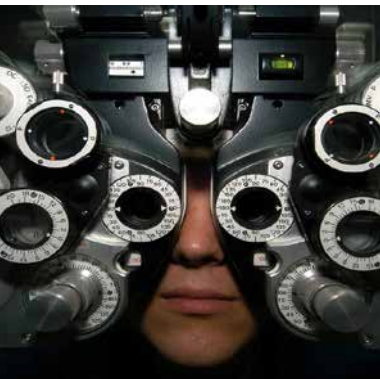
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# Keynote Forum

August 21, 2017

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## *Eye 2017*



3<sup>rd</sup> International Conference on

# EYE AND VISION

August 21-23, 2017 | Holiday Inn Toronto International Airport

970 Dixon Road | Toronto, ON | M9W 1J9

Toronto, Canada

# EYE AND VISION

August 21-23, 2017 | Toronto, Canada



## Andrew G. Lee

*Houston Methodist Hospital, USA*

### Five neuro-ophthalmic disorders you cannot afford to miss

**N**europhthalmic disorders may present to the general Ophthalmologist and mimic benign entities. Although comprehensive eye doctors are not expected to be a Neuro-Ophthalmologist, they are expected to recognize, triage, and refer. Five potentially vision or life threatening Neuro-Ophthalmic conditions will be discussed and should not be missed: They are: giant cell arteritis, typically presenting as visual loss in the elderly; pituitary apoplexy is a condition presenting as acute and severe headache and bilateral visual loss to Ophthalmologist; posterior communicating artery aneurysm presenting as a painful, pupil involved third nerve palsy; fungal abscess in an immunosuppressed patient but especially diabetic ketoacidosis; and arterial dissection of the vertebral or carotid artery producing an acute painful Horner syndrome with or without visual loss. All eye doctors should be aware of these five Neuro-Ophthalmic conditions that none of us can afford to miss.

#### Speaker Biography

Andrew G. Lee, M.D. was born in New York City but moved to Charleston, West Virginia in 1969. He graduated valedictorian from Charleston Catholic High School and attended UVA (cum laude, BA in biology). He completed medical school at UVA (Alpha Omega Alpha) in 1989 and internship at UVA affiliated hospital in Roanoke, Virginia followed

by ophthalmology residency and was chief resident at Baylor College of Medicine. Dr. Lee completed a Fight for Sight research fellowship and clinical neuro-ophthalmology fellowship at the Wilmer Eye Institute, Johns Hopkins Hospital, in Baltimore, Maryland in 1994. Following fellowship training, He joined the ophthalmology faculty at Baylor and UT MD Anderson Cancer Center in Houston. In 2000, Dr. Lee joined the faculty at the University of Iowa and was promoted to Full Professor in 2007.

In 2009, Dr. Lee returned to Houston to chair the Blanton Eye Institute at Houston Methodist Hospital and is currently Professor of Ophthalmology, Neurology, and Neurosurgery at *Weill Cornell Medical College*; Adjunct Professor at University of Iowa and Baylor College of Medicine and Texas A and M University; Clinical Professor at the University of Texas Medical Branch, UT MD Anderson Cancer Center, and University of Buffalo, SUNY.

He has served on the Editorial Board of 25 journals including *JAMA Ophthalmology*, the *American (AJO)*, *Canadian (CJO)*, and the *Japanese Journal of Ophthalmology (JJO)*, the *Asia Pacific Journal of Ophthalmology*, the *Journal of Neuro-ophthalmology*, *Survey of Ophthalmology*, and *Eye* and was the founding editor in chief of the *Journal of Clinical and Academic Ophthalmology*. He is on the board of and will be the President Elect of the North American Neuro-ophthalmology Society (NANOS).

He has published over 400 peer-reviewed publications, 40 book chapters, and nine full textbooks in ophthalmology. He has been the invited speaker at over 400 national and international eye meetings and has given 12 named lectureships. He has received the American Academy of Ophthalmology (AAO) honor award, senior honor award, secretariat award, and the life honor achievement award. He has a special interest in graduate medical education and has received the resident teaching award seven times at five different academic institutions.

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# EYE AND VISION

August 21-23, 2017 | Toronto, Canada



## Thomas C Royer

Royer-Maddox-Herron Advisors, USA

### Successful transformation strategies for the new health care environment

Healthcare, worldwide, is facing many challenges, which, in fact, have been present for many years. However, finding solutions to these challenges is becoming more critical as governmental funding sources are declining, private insurance premiums are becoming unaffordable, poor medical outcomes that vary significantly between high and low-income populations are being reported publically, expanding physician dissatisfaction is being captured in provider surveys, and the costs of labor and supplies are continuing to rise year after year. Hence, it is very clear that there is an urgent need for all healthcare related organizations to transform in order to remain on the cutting edge of clinical advancements, meaning education, and innovative research. To address these challenges, strong transformational leadership at all levels of the organization is a critical success factor. Fortunately, based on the presenter's work and experience, transformational leadership and strategies can be learned. A commitment to excellence is a mandate and this requires enhanced teaming between physicians, administrators, and governing bodies. Because all physicians are leaders, either informally or formally, whether in their individual practices or in their groups, they must understand and adopt the leadership competencies for success, which are somewhat different today than in the past. In addition, because change is never easy and creates much anxiety for many, resistors to change become visible. These must

be identified and minimized, or eliminated completely if possible. This is not happening on a routine basis because, unfortunately, many healthcare leaders and physicians are finding the challenges too numerous and complex. Some are finding the Value Equation, which is now mandatory for the achievement of excellence in medical outcomes, too hard to implement. And finally, moving from "sick care" to "well care", from "hospital-centric" to "ambulatory-centric", moving from "provider-centric" to "patient-centric" processes are, for many, mountains that are too hard to climb. All of this turmoil is causing a healthcare abyss which this presentation will not only address, but provide transformational tips for agents of change. This information is critical since we, physicians and other providers, are all responsible for doing what is necessary to participate in not only sustainable, but thriving medical care delivery wherever we live and work!

#### Speaker Biography

For 12 years Thomas C. Royer, MD served as founding CEO and President of CHRISTUS Health, transitioning to the CEO-Emeritus role in March 2011. He led CHRISTUS, an international health system, through a remarkable period of growth, making it one of the 10 largest Catholic healthcare systems in the country. Prior to CHRISTUS, he served as an integral part of the Henry Ford Health System, the Johns Hopkins Medical Services Corporation, and the Geisinger Medical Center. Dr. Royer is currently the CEO and Partner with Royer-Maddox-Herron Advisors. He has extensive experience in developing physician partnerships, focusing on providing measurable high quality patient care.

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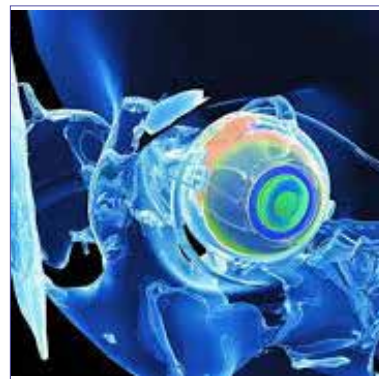
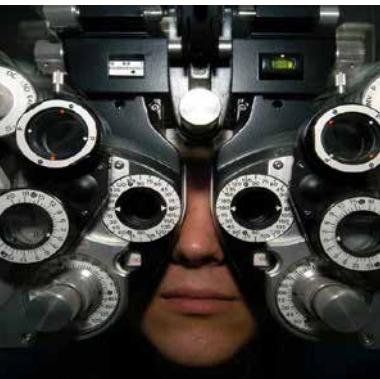
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# Keynote Forum

## August 22, 2017

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### *Eye 2017*



3<sup>rd</sup> International Conference on

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## Naj Sharif

Santen Inc., USA

### Ocular hypotensive and neuroprotective treatments for glaucoma

**G**laucoma is a blinding disease encompassing a multitude of retinal/optic neuropathies. Primary open angle glaucoma (POAG) is the most prevalent form that afflicts >70 million people world-wide and is projected to increase as better diagnosis is accomplished. Currently, there is no cure for POAG, and only the common symptom of elevated intraocular pressure (IOP) can be treated. However, there are patients whose IOPs are considered normal, whose vision continues to deteriorate, and their glaucoma remains uncontrolled. These patients may need alternative interventions such as neuroprotective agents that can retard their vision loss. While FP-prostaglandin agonists (FPGAs) are first-line therapy for reducing IOP and preventing retinal ganglion cell demise, most FPGAs are losing their patent protection and there are many patients who are refractory to FPGAs-treatment and/or are highly sensitive to the drug or its preservative formulations. Additionally, there is the issue of dosing non-compliance of patients due to infirmity, forgetfulness, and/or simple abstinence of treatment in view of the ocular side-effects like hyperemia, ocular irritation and ocular allergies. Furthermore, many patients with POAG and ocular hypertension (OHT) require more than one type of drug to control their IOPs. Therefore, research and development of new drug candidates and devices to lower and control IOP, including non-peptide bradykinin B2-receptor agonists (e.g. FR-190997), is being pursued world-wide. However, just lowering IOP is insufficient to prevent

the visual impairment that ensues due to OHT and glaucoma. Therefore, it is now accepted that direct neuroprotective therapy, in addition to lowering IOP, is necessary to help patients afflicted with glaucomatous optic neuropathies. This presentation will discuss some of the novel IOP-lowering drugs (e.g. Omidenepag Isopropyl [DE-117]; Rhopressa [AR-11324]; Netarsudil); drug conjugates (Latanoprostene Bunod [Latanoprost-nitric oxide donor), and combination products (e.g. Rolatan [Latanoprost + AR-11324). Furthermore, innovative devices coupled with surgical procedures (e.g. iStent; Innfocus Microshunt) (MIGS) as ocular hypotensives, and potential neuroprotective strategies will be discussed.

#### Speaker Biography

Naj Sharif completed his graduation from Southampton University, England (UK), where he received his BSc (Joint Honors: Biochemistry and Physiology) and his PhD (Neuroscience). He has been in the pharmaceutical industry for >30-years holding leadership positions spanning discovery research, drug development and regulatory affairs. He has worked at Pfizer, Syntex (Roche), Alcon-Novartis, and is currently at Santen Inc. (Executive Director, R&D). His 23-tenure at Alcon resulted in his contributions to the discovery/development and US FDA approvals of Travatan®, Patanol®, Simbrinza®, and Pazeo® to treat glaucoma/ocular hypertension and ocular allergies. He is a Fellow of ARVO (FARVO), and Fellow of British Pharmacological Society (BPS) (FBPhS). He was honored as the first recipient of the inaugural Dr. Roger Vogel Award for ocular pharmaceutical research (2014), and the "Sir James Black Award" for contributions to drug discovery from BPS (2017). He serves on the editorial boards of numerous scientific journals and is an Adjunct Professor at several universities. He has published 200 scientific articles and edited 2 books, and is the holder of 23 issued US and EU patents.

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