

2nd GLOBAL OPHTHALMOLOGY SUMMIT 2019

March 27-28, 2019 | Amsterdam, Netherlands

OPHTHALMOLOGY SUMMIT 2019



KEYNOTE FORUM DAY 1

2nd GLOBAL OPHTHALMOLOGY SUMMIT 2019

March 27-28, 2019 | Amsterdam, Netherlands

Lakhesh Chandra Madharia, Ophthalmol Case Rep 2019, Volume 3



Lakhesh Chandra Madharia

Ashirwad Laser & Phaco Eye Hospital & Diabetic Centre, India

BIOGRAPHY

Lakhesh Chandra Madharia after completing his MS in Ophthalmology in 1987 made his own way in the field of surgical ophthalmology and by acquiring various important positions and newer surgical techniques he has created several milestones in his vast experience of 31 years he has served with his best surgical capabilities under various govt and private organizations and performed more than 130,000 surgeries. He has several National and International awards & Research publications to his credit. His teaching experiences have been more practical than theoretical which has proved the boon to all the students who have acquired training under him to learn basics and advanced surgical ophthalmology. He is a most sought after guest speaker in various national and international conferences and have been associated with many charitable trusts. He is presently working as a Director at Ashirwad Laser Phaco Eye Hospital & Daibitic Center Bilaspur India.

dr.lakheshmadharia@gmail.com

PHACO IN MATURE AND INTUMESCENT CATARACT, ZEPTO DISPOSABLE CAPSULOTOMY DEVICE MADE IT EASY

Continuous Curvilinear Capsulotomy (CCC) is the key of success in all cases of phaco emulsification, but in cases of Intumescent & Mature Cataract many times we find difficulty to make precise capsulorhexis. Zeptoprecision nano-pulse capsulotomy device is FDA approved (US Food and Drug Administration), disposable and uses low energy pulses to create a precise central capsulorhexis, independent of lens density and pupil size. In this article, the authors report their experience of performing anterior circular curvilinear capsulorhexis with Zepto precision nano-pulse capsulotomy device in challenging cataract cases done at our centre. The Zepto handpiece device was inserted through 2.8 mm clear corneal incision. Results of our clinical experience of 50 cataract cases (intumescent, immature, mature and small pupil mature cataract) revealed that the precision pulse capsulotomy technology cleaves all 360° of the apposed capsule, creating CCC of 5.2 mm size.

2nd GLOBAL OPHTHALMOLOGY SUMMIT 2019

March 27-28, 2019 | Amsterdam, Netherlands

Mylene Leal Matsuhara, Ophthalmol Case Rep 2019, Volume 3



Mylene Leal Matsuhara

IOBH, Brazil

BIOGRAPHY

Mylene Leal Matsuhara is an ophthalmologist and coordinator of the Low Vision department of IOBH. She was teacher of ophthalmology in the universities UNI-BH and Unifenas. She is also a member of the board of Brazilian Low Vision Society 2003-2005.

mylene.matsuhara@yahoo.com.br

IMPORTANCE OF CONTACT LENSES USE ON LOW VISION PATIENT

Many are the possible benefits from the utilization of contact lenses in the rehabilitation process of low vision patients. Among such benefits, it can be mentioned: Decrease of Incapacitate Photophobia through the use of filtering lenses with specific colorization, colour perception improvement among colour blind patients, improving reading efficiency by decreasing nystagmus velocity, qualitative improvement in vision acuity, and last, but not least, self-esteem improvement through treatment towards leukaemia and visual corneal scares.

Possible hardships that may arise from such exam and adaptation can be relieved through careful clinic evaluation, which includes: accurate visual exam with proper acuity charts, visual functions appraisal (i.e: contrast sensibility, visual field and glare research). It is of great importance to emphasize the use of proof frames with the intention of favouring the utilization of the reminiscent visual field.

With this explanation, alongside with the exemplification of clinical cases, we intend to break the paradigm surrounding rejection towards use of contact lenses by low vision patients. Contact lenses shall be remembered as an important asset for the success of visual rehabilitation among low vision patients.

2nd GLOBAL OPHTHALMOLOGY SUMMIT 2019

March 27-28, 2019 | Amsterdam, Netherlands

Margarita Rozhdestvenskaya, Ophthalmol Case Rep 2019, Volume 3



Margarita Rozhdestvenskaya

Tonom GmbH, Germany

BIOGRAPHY

Margarita Rozhdestvenskaya has an expertise in regulatory strategies, medical device registration standards, quality management system compliance and in-country regulatory representation. From 2013 she is a director of the Tonom GmbH that is the European Authorized representative for Diaton technology. Tonom GmbH fulfills the obligations of the Medical Device Directive MDD 93/42/EEC and acts as legal entity towards the European authorities as well as providing additional services regarding the technical information of the medical devices within the European community. Her expertise and proficiency as well as interest to science, innovation and a culture of operational excellence contribute to offer technology, services and support in order to improve the quality of people's lives.

Margarita_Roz@tonom.de

INDEPENDENCE OF THE TRANSPALPEBRAL SCLERAL TONOMETRY FROM THE THICKNESS OF THE EYELID

Increased intraocular pressure (IOP) is one of the important risk factors for glaucoma. An accurate IOP assessment is crucial for early detection, diagnostics and monitoring of glaucoma. Non-corneal IOP measurement with Diaton tonometer is performed through the eyelid. There are no a direct contact to the cornea or to the conjunctiva. Diaton tonometer is indicated for corneal diseases, postoperative conditions of the cornea, for a bedside diagnosis, etc. Here we examined a dependence of the transpalpebral scleral tonometry on the thickness of the eyelid in an unexplained sequence of patients during the consultation.

Methods: 43 patients, 15 males and 28 females (a total of 86 eyes) with age range from 16 to 80 years old: 51.0 (31.5-69.0) years [median (1st quartile - 3rd quartile)] was investigated. The eyelid thickness was measured using the Tomey ultrasound device DU-800. Measurements were performed sonically by immersion on each eye tarsus-parallel and perpendicular to the tarsus.

The mean of these two measurements was defined as eyelid thickness. The IOD measurement on each eye was performed by Diaton (Tonom. Ltd, Muenster). The data were analyzed with non- parametric statistics.

Results: The average of right eyes IOP was: 15.0 (12.0-17.0) mmHg, left eyes: 14.0 (12.0-16.0) mmHg, $p = 0.605$. The average of right eyelids thick-

2nd GLOBAL OPHTHALMOLOGY SUMMIT 2019

March 27-28, 2019 | Amsterdam, Netherlands

ness was: 0.490 (0.462-0.510) mm and left eyelids: 0.489 (0.467-0.508) mm, $p = 0.394$. IOD values showed no significant correlation with the eyelids thickness on the right eyes: $\rho = -0.051$, $p = 0.747$; as well as on the left eyes: $\rho = -0.183$, $p = 0.240$. In addition, no significant correlation of eyelids thickness with age was found: on right eyes: $\rho = -0.069$, $p = 0.662$; and on left eyes: $\rho = 0.115$, $p = 0.463$. When the group was divided into two subgroups with low ($n = 20$, 12.0 (12.0-12.6) mmHg) and high ($n = 23$, 16.0 (15.5-19.0) mmHg) IOP-values (cutoff: 15 mmHg), the average eyelids thicknesses of both subgroups hardly differed from each other: 0.494 (0.479-0.505) mm vs. 0.489 (0.469-0.503) mm, $p = 0.470$.

Conclusions: The results of the study demonstrate that in the range of normal IOP values at not pathologically changed eyelids the non-corneal transpalpebral scleral tonometry does not depend on the thickness of the eyelid. In addition, our data revealed no significant age-related alterations of eyelid thickness.

2nd GLOBAL OPHTHALMOLOGY SUMMIT 2019

March 27-28, 2019 | Amsterdam, Netherlands

OPHTHALMOLOGY SUMMIT 2019



KEYNOTE FORUM DAY 2

2nd GLOBAL OPHTHALMOLOGY SUMMIT 2019

March 27-28, 2019 | Amsterdam, Netherlands

Said Abdulkader Jamaledine, Ophthalmol Case Rep 2019, Volume 3



Said Abdulkader Jamaledine

Saudi Arabia Ministry of Health, UAE

BIOGRAPHY

Said Abdulkader Jamaledine completed his MBBS from Cairo University in 1980. After that he became MD ophthalmic Specialist-Syria in 1985. Then he got Syrian Board certificate in 2015. In 2016 he got Saudi Commission certificate. He served as an Executive director of ophthalmology department at Ministry of health al watani hospital Homs-Syria from 1986 to 1990. 1991 to 2018 he has taken part in many congress and meetings showcased his research works there. He has developed three state of art surgical techniques for glaucoma and closed DCR and Squint surgery.

dr.jamal19@gmail.com

EFFICIENCY OF NON-SUTURE MYECTOMY TECHNIQUE FOR LARGE-ANGLE HORIZONTAL STRABISMUS SURGERY

Large angle strabismus is a grey zone for surgeon and there are no clear surgical rules. And very frequently reoperated many times and the results unpredictable. The author will evaluate and explain this surgical technique for huge squint.

Methods and Material: A retrospective random study filtered from my original article which published two years before. Forty cases at different hospitals in Syria, Libya, and Saudi Arabia, age and sex not defin. Complete evaluation of the patient medical and psychological history is made, and orbital CT scan investigation was performed after the surgery to evaluate the adjustment of the muscles. We operated 38 primary strabismus patients (XT-ET) and four secondary cases re-operated using this new technique. All patients were evaluated clinically and imagery and the Follow-up were conducted for up to three years.

Results: Out of 40 cases, 38 (95%) were successful (less than 10 pd) with high ocular motility within one month. under correction only appeared in two cases (5%). One cases reoperated and the second refused. No major complications were recorded during and after the surgeries, the results are supported by documents and images.

Conclusions: This technique is remarkable in our ophthalmic field because it didn't interrupt the integrity of the normal ocular motility and it's simpler, easier, with higher successful rate, require less time, without suturing, much more efficient, with less complications and short learning carve.

2nd GLOBAL OPHTHALMOLOGY SUMMIT 2019

March 27-28, 2019 | Amsterdam, Netherlands

Gaurav Arora, Ophthalmol Case Rep 2019, Volume 3



Gaurav Arora

Dr. Agarwal's Eye Hospital, India

BIOGRAPHY

Gaurav Arora is a vitreo-retinal consultant and regional medical head at Dr. Agarwal's Eye Hospital, Hyderabad. He has vast experience in diagnosis and management of various retinal conditions. He has skill, proficiency & experience of managing vitreoretinal conditions, with expertise in Phacoemulsification surgeries. He has special expertise in sutureless Glued IOL technique. He has extensive experience of managing diabetic retinopathies, vasculopathies, retinal holes and breaks etc. He has presented many papers and videos at national level. He has worked with Dr Lipshitz (Israel) for the unique Mirror Telescopic Intraocular (MTI) lens study. He has also participated as an Ophthalmologist in WHO- N.P.C.B's rapid assessment of Trachoma survey and as an Epidemiologist in the N.P.C.B's rapid assessment of avoidable blindness survey in 2006. His current area of interest is research in macular pathologies.

drarora_gaurav@yahoo.com

HAS ANTI-VEGF TAMED NAMD?

Neovascular Age related Macular Degeneration (neovascular AMD) is a chronic, complex disease driven by multiple pathogenic mechanisms. Upregulation of vascular endothelial growth factor (VEGF) is a well-documented pathogenic mechanism in neovascular AMD. VEGF is released by Retinal Pigment Epithelium (RPE) as a stress signal and hypoxia that initiates a cascade of angiogenic responses at the choroidal endothelium level. This increases vessel permeability (causing fluid leakage) and promotes the growth of abnormal blood vessels (neovascularization) under and/or within the retina.

Anti-VEGF therapy can yield excellent visual outcomes by selectively binding to or deactivating the transmission of VEGF and causing rapid resorption of sub-retinal fluid. Keeping the retina dry seems to be important to achieve these best outcomes. However, despite optimal Anti-VEGF therapy, vision may decline in the long-term because it may lead to more retinal atrophy.

This research is a systematic review of the effect of Anti-vascular endothelial growth factor therapy in neovascular AMD. It covers the various aspects of treatment protocol in neovascular AMD by comparing fixed with flexible treatment approaches. A formal search of Embase, Cochrane and Medline were performed for consistent and well-documented long-term visual outcome of anti-VEGF in neovascular AMD. Different treatment regimens were investigated. Studies were reviewed independently for methodology, inclusion and exclusion criteria and endpoints. Benefit/risk ratio of treatment is a key consideration in treatment of neovascular AMD.

It can be concluded by the research that flexible dosing regimens allow personalized therapy, avoid over- or under-treatment and facilitate the maintenance of optimal outcomes whilst minimizing treatment burden.