



Message from the President



Dear Members,

Welcome to the latest edition of our newsletter as we look back on what has been a very busy final quarter for the College and look forward to upcoming events to close the year.

I am honoured to be welcoming my friend and our esteemed colleague, Professor David Wong as this year's guest speaker for the Montgomery Lecture, which will be held on Friday 5th December in the RCSI. Currently the Chair Professor in Ophthalmology at the University of Hong Kong, David is well known to many of us and will talk about 'Physics in Everyday Ophthalmology and Vitreoretinal Surgery'. I look forward to seeing you all at the lecture.

I was delighted to see so many of our members at the Annual Retinal Meeting in Adare. The meeting was a fitting occasion to present this year's Bursary to Dr Meadh Rhatigan and to acknowledge the significant research being undertaken in the area of ophthalmology in Ireland.

The newly designed ICO website eyedoctors.ie is now live. Much work has gone into developing and enhancing the website to ensure it responds to visitor's needs, both the public and for our members. We would be delighted to hear your feedback.

In a previous issue I wrote of proposals on a new programme to support doctors health and wellbeing called Practitioner Health Matters. I am delighted to say this new programme, under the guidance of Dr Ide Delargey, which provides support to doctors with mental health and addiction problems is now up and running, you can read about the service in this edition.

May I take this opportunity to wish a very happy Christmas and a prosperous New Year to you and your families.

With best wishes
MARIE HICKEY DWYER

ICO Host Meeting to Debate Direct-to-Patient Advertising in Ireland



Patrick Ormond, Consultant Dermatologist, Billy Power, Marie Hickey-Dwyer, Margaret O'Donnell, President of the Irish Association of Plastic Surgeons and William Kennedy, Irish Medical Council

On Wednesday 24th September, the Irish College of Ophthalmologists hosted a multi-stakeholder discussion to review the regulation of direct-to-patient advertising and to debate whether tighter guidelines and possible legislation is required to safeguard patients and their ability to make fully informed decisions before undertaking a medical or surgical procedure.

Currently in Ireland, there are no requirements for advertisements or

marketing material to provide information on the health risks of procedures. The ICO, together with our colleagues from the specialities of Plastic and Reconstructive Surgery and Dermatology, has expressed concern that this lack of regulatory oversight impacts on patients' access to unbiased information.

In her opening address, President of the ICO, Marie Hickey-Dwyer told delegates that the purpose of the

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meeting was to exchange views with those working in the specialties whose patients are most impacted by direct-to-patient advertising, alongside the views of the regulators and the patient advocacy bodies.

The ICO was prompted to hold these discussions following a decision by the Advertising Standards Authority of Ireland (ASAI) not to uphold a formal complaint we made in July 2012 in relation to an offer of laser eye surgery as a competition prize. This prompted further reflection on the issue and led to the September debate.

As the expert and educational body for eye care in Ireland, the College is of the view that advertising and marketing practices should not trivialise the seriousness of surgical procedures and that questionable advertising may be misleading or inaccurate, and / or may fail to reveal important risks and potential complications of treatment to a patient

This view is mirrored by the President of the Irish Association of Plastic Surgeons, Ms Margaret O'Donnell, a key speaker at the September meeting, who said that "the patient should have realistic expectations of what can be achieved by cosmetic surgery and non-surgical procedures. Ms O'Donnell said this is not helped by the use of photographs of models that have never had cosmetic treatments, in cosmetic surgery advertising and websites. Use of such models and /or airbrushed photographs has been banned in some countries, including France and Denmark."

Ms O'Donnell said that there is any number of misleading advertisements on websites and in beauty salons and pharmacies at the present time which claim to eradicate wrinkles, and use before and after photograph results of which cannot possibly be achieved by the treatment suggested.

Presenting on the challenges in ophthalmology, Billy Power, Eye Surgeon at the Blackrock Clinic told the delegates, "We want the patient in



Ms Margaret O'Donnell, President of the Irish Association of Plastic Surgeons.

a position to make the most informed choice, without unrealistic advertising influencing their decision."

Mr Power highlighted that the increase in the proportion of refractive surgery legal cases is disproportionate to other areas of eye surgery and said the question must be asked whether patients were being given unrealistic expectations. He questioned why it has become acceptable to advertise and trivialise laser eye surgery, which has the potential to have risks and complications as any surgery does, when this form of advertising and promotion isn't common practice with other forms of eye surgery such as cataract surgery. The answer, he said, is because there is huge commercial interest in laser eye surgery.

Addressing delegates at the meeting, Frank Goodman, Chief Executive of the Advertising Standards Authority of Ireland (ASAI), said that "while a number of complaints in this and related areas have been upheld, the existing code is currently under review and discussions at today's meeting will be instrumental in informing the self-regulatory body on the views of key stakeholders on this matter. Changes may need to be implemented in the interests of appropriate advertising of medical products and services."

Also speaking from the regulatory perspective was William Kennedy, Director of Regulation for the Irish Medical Council and John Elliot,



Caroline Murphy, RTE, Conference Moderator.

Registrar of Solicitors and Director of Regulation for the Law Society.

Patient advocate, Stephen McMahon, CEO of the Irish Patients Association said that the current system of regulation isn't robust enough to protect the patient and that this is a patient safety issue which needs urgent action. He reflected on the example given by Mr Patrick Ormond, Consultant Dermatologist at St James' Hospital that it took 8 years of campaigning by the Irish Association of Dermatologists to achieve a ban on the underage use of sunbeds in Ireland and that he was appalled at the length of time it took to put this protection for the public in place. Mr McMahon believes legislation against these practices are necessary and that the Department of Health has a key responsibility, alongside other stakeholders, to develop a public awareness campaign to help inform and empower people.

Catherine Reilly, Journalist with the Medical Independent gave an overview of an investigative series she undertook earlier this year on the increased commercialisation of medicine in Ireland, which included an in-depth look into laser eye surgery practices. She stated that stronger sanctions in the realm of medical advertising, and potentially a new or adapted structure to monitor standards associated with advertising of medical treatments need to be considered, and that the Department

Primary Care Review Group Update



Stephen McMahon, Chief Executive of the Irish Patients Association.

of Health should have a role in this area.

Ms Reilly highlighted that currently the self-regulating ASAI adjudicates on complaints associated with advertisements; however, in cases where communications are deemed by the Authority to have broken rules, the usual remedy is that the advertisement be withdrawn or amended. In the case of medical-related advertisements, which Catherine said may have already influenced vulnerable consumers and patients, this would appear to be 'too little, too late'.

Discussions on the day acknowledged the fact that the decision to have a medical or surgical procedure can have a profound impact on the health and wellbeing of both the patient and their families and while there is little doubt that a medical or cosmetic procedure can be positive for patients when undertaken by trained specialists, it was unanimously agreed that it is essential for patients to receive balanced, unbiased information in order for them to be in a position to make fully informed decisions.

The College has devised Guidelines for Refractive Surgery, including a section on advertising which are currently under final review following the feedback from the expert groups at the meeting.

A Full Report on the Medical Advertising in Ireland meeting can be expected in the coming weeks.

In August 2014 the HSE Primary Care Division convened a Primary Care Eye Services Review Group (PCESRG) to review all primary care eye services. The group, chaired by Brian Murphy Assistant National Director for Primary Care meets monthly and aims to have a draft report completed by early 2015 with recommendations for implementation throughout 2015-2016. ICO representatives Siobhan Kelly, Alison Blake, Paul Moriarty and Loretta Nolan sit on the Review Group, together with representatives from various HSE departments including the Primary Care Reimbursement Scheme, Public Health, Directors of Nursing and ophthalmists.

The role of the Group is to examine and document the primary care eye services currently provided to children and adults nationwide including HSE directly provided services and contracted primary care services and to determine the needs of the population for these services.

The group is also tasked with reviewing the current service in terms of quality, safety and consistency and to identify issues for action.

The evaluation process aims to provide a clear blueprint with recommendations for the delivery of primary care eye services which will ensure a high quality, safe and consistent service for patients. A priority is to focus on an action plan to address immediate primary care paediatric eye

services issues in the Dublin area.

There will be a consultation process in December 2014 which representatives from the Irish College of Ophthalmologists will attend. Other participants in this consultation group will include representatives from the allied health professional organisations, patient support and advocacy groups and the regulatory boards, including CORU and TULSA, the Child and Family Agency.

A detailed eye services survey has been circulated to all ISA Managers to collate data on WTEs and current waiting lists. It is aimed that data collation will be completed by December 2014. Feedback from service users will be collated throughout December 2014.

Specialty Training Programme in Ophthalmology

The closing date for receipt of applications for the specialty Training Programme in Ophthalmology is **Monday December 8th, 2014**

Applications are invited for entry onto the ophthalmology training programme for July 2015. This is a common entry programme for medical ophthalmology and surgical ophthalmology.

Further information on the training programmes and the application form is available on the ICO website

www.eyedoctors.ie

Electronic Applications only to marian.scully@eyedoctors.ie

Winner of the ICO/Novartis Eye Research

Research Aims to Investigate Role of Inflammation in AMD and Identify Patients at Increased Risk

The College is delighted to announce that the recipient of the ICO Eye Research Bursary is Dr Maedbh Rhatigan, a medical graduate of Trinity College who has just completed her intern year at St. James Hospital, Dublin.

Dr Rhatigan was announced as the winner of the research award at the 6th Annual Retinal Meeting in Adare, coordinated by Marie Hickey-Dwyer, President of the ICO and Eye Surgeon at University Hospital Limerick, for her project entitled 'Negative Regulators of Inflammation and AMD in a cohort of The Irish Longitudinal Study on Ageing'.

The study is being carried out under the supervision of Mark Cahill, Consultant Ophthalmologist and Vitreoretinal Surgeon at the Royal Victoria Eye and Ear Hospital and Sarah Doyle, Assistant Professor in Immunology at the Department of Clinical Medicine, Trinity College Dublin, and is being undertaken as part of an MSc by research in Clinical Medicine.

Explaining the project rationale, Dr Rhatigan said, "Age Related Macular Degeneration (AMD) is the leading cause of central vision loss worldwide. The estimated prevalence of AMD in Ireland is 7% with an annual cost over €130 million. The Irish Longitudinal Study on Ageing (TILDA) is a unique population based study on the over 50s in Ireland with a focus on measures of vision as one research theme.



President of the ICO, Marie Hickey-Dwyer is pictured with Dr Maedbh Rhatigan, winner of the ICO/Novartis Research Bursary 2014 and Oliver McCrohan, Medical Advisor in Ophthalmology, Novartis Ireland Ltd.

Inflammation is known to play a role in the development of AMD however the exact mechanisms remain unresolved. In collaboration with TILDA we plan to look at levels of negative regulators or 'off switches' of three key inflammatory mediators, elevated in the blood of people with AMD."

Dr Rhatigan continued, "This study will help to further understand the role of inflammation in AMD. It is our understanding these pathways may aid in identification of patients at increased risk of progression to more severe forms of AMD and may provide novel targets for therapeutic intervention".

Commenting on the how the bursary will aid the continuation of the project, Dr Rhatigan said, "The Novartis bursary will allow us to screen these 'off switches' in an unbiased manner using cutting edge technology without which we would have been more restricted in our project design."

Speaking with Dr Rhatigan at the Adare Retinal Meeting on Thursday, 2nd October, Loretto Callaghan, Managing Director, Novartis Ireland said, "Novartis Ireland is pleased to support such an important research bursary as part of our on-going commitment to ophthalmology. Dr Rhatigan's research is another



David Shahnazaryan, Dinah Minasyynn and Pathma Ramasamy.



Mark James, Sylvia Jungkim, Marie O'Connell and Philip O'Reilly.

Bursary 2014

excellent example of Irish doctors' dedication to finding solutions for their patients. At Novartis Ireland, our research is driven by a clear scientific strategy where we focus on unmet medical needs. We are dedicated to helping patients in Ireland gain access to innovative treatments to help their condition."

Speaking on the significance of the award, Marie Hickey-Dwyer said, "We are delighted to present Dr Rhatigan with this Eye Research Fellowship for her project on AMD. As always, the standard of applications for this year were exceptionally high and the Annual Retinal Meeting in Adare is a fitting occasion to acknowledge and support the significant research being undertaken in the area of Ophthalmology in Ireland. On behalf of the ICO, I thank Novartis for their continued support and recognition of the important



Rob Acheson, Frank Kinsella, Deirdre Townley, Maire Hickey-Dwyer, Loretta O'Callaghan, Patricia Quinlan, Philip Cleary and Anthony Cullinane.

contribution this award makes in facilitating doctors to undertake a period of research or specific training in an eye care centre of excellence. "

Dr Rhatigan will present an update on the research project at the Irish College of Ophthalmologists 2015 Annual Conference.



Marie O'Connell, Sashin Thinagarar and Denise Curtin.



Robert Acheson pictured with Eamon O'Donoghue.



Alison Blake, Niamh Collins, Deirdre Townley, Yvonne Delaney & Sonia Manning.



Richard O Regan, Tom Stumpf, Richard Comer & Tim Horgan.

Obituary

Professor Peter Eustace FRCophth.

Professor Peter Eustace was a Consultant Ophthalmic Surgeon with a special interest in Neuro-ophthalmology.

He studied Medicine in University College Galway where he met his beloved wife Margaret.

His post graduate training was undertaken in Birmingham in general practice initially and subsequently in Ophthalmology.

He was appointed to the Mater hospital and Richmond Hospitals Dublin in 1975.

His energy was boundless and his enthusiasm was infectious

He had great interest in-patient care. He was readily available to colleagues and trainees in particular he enjoyed teaching and mentoring the trainees. He took a keen interest in their examinations and surgical training. He developed many research projects and encouraged the trainees to present at national and international meetings.

It is fitting that he was appointed as Professor of Ophthalmology to University College Dublin and the Mater Hospital Dublin in 1982.

He developed the Mater Eye Department with a number of Consultant appointments each with a sub-speciality interest. He forged strong links with Temple Street and the Beaumont Hospitals.

He is co-author of Neuro-ophthalmology which was published in 1998.

He established the first EBO diploma examination in Milan in 1995 to enable recognition of European training as he strongly supported the



European Board of Ophthalmology and the harmonisation of training in Europe.

The Peter Eustace medal for excellence in education is awarded annually since 2011 during the EBO exam in Paris.

He was a co-founder of the British Isles neuro-ophthalmology club with Bruce Noble (BINOC) in 1984. All attendees were required to present a paper. Peter organised the third meeting in Ireland which was the first of several meetings held in this country. Peter was always at the centre of the discussions and is remembered for his gentle wit and great scholarship. BINOC meets annually and is attended by distinguished neuro-ophthalmologists from the US and Europe and has brought great fellowship and support to all attendees.

He was President of the Irish College of Ophthalmology in 1993-95. He was a champion golfer and a member of Dun Laoghaire golf club all his life, and he enjoyed sailing.

A keen supporter of the arts when he retired he spent many months in Connemara painting and writing poetry.

He is sadly missed by his wife Margaret their children Ashling, Stephen, Nick, Joanne and Hilary his many grandchildren, friends and colleagues.

All who knew him benefited from his intelligence and his commitment; a leading figure in Ophthalmology he enriched countless lives with his advice and support. His dedication to patient care was exemplary.

Professor Andrew Elkington

Former President of the RCOphth

It was with sadness that the ICO learnt of the passing of Professor Andrew Elkington, who died peacefully on 11 September. Many of our members will have known him as a former President of the Royal College of Ophthalmologists (1994 – 1997), Honorary Fellow and a renowned teacher. The ICO express our sincere condolences to his family and friends.

British Oculoplastic Surgery Society

**Belfast,
June 17th-19th, 2015**

The British Oculoplastic Surgery Society will be holding its annual meeting in Ireland for the first time next summer at the Waterfront Hall in Belfast from Wednesday 17th to Friday 18th June. It is a friendly meeting which will touch on many aspects of lid, lacrimal and orbital disease and treatment.

International speakers will include Michael Kazim from USA, Jack Rootman from Canada and Willem van den Bosch from the Netherlands. The first day of the meeting is a recent advances and teaching day aimed a little more toward trainees. It will be followed by a drinks reception at the City Hall. The scientific programme with lectures and short research presentations covers the Thursday and Friday sessions.

The Gala Dinner will be held on Thursday evening in the new Titanic Belfast building. A golfing trip to Royal Portrush on Tuesday 16th is also available to those interested.

Full details, including registration fees and a short video about the meeting, are available on the BOPSS website <http://www.bopss.co.uk/meetings/bopss-2015-belfast/>

For booking before the end of April, 2015,

- £125 for the recent advances day and
- £300 [consultants];
- £210 [trainees] total for the remaining two days;
- After end April it rises to £155, £350 and £255 respectively;
- The gala dinner cost £80 for anyone attending.

MONTGOMERY LECTURE

Friday, 5th December, 2014, RCSI

The ICO is honoured to be welcoming our esteemed colleague, Professor David Wong as this year's guest speaker for the Montgomery Lecture, which will be held on Friday 5th December in the RCSI. Currently Chair Professor in Ophthalmology at the University of Hong Kong, Professor Wong will give a talk entitled 'Physics in Everyday Ophthalmology and Vitreoretinal Surgery'.

Professor Wong's research in the retina field focuses on detachment, proliferative vitreoretinopathy and macular degeneration, understanding their pathogenesis and conducting clinical trials of surgery with adjuvant therapy and developing new surgical techniques and tamponade agents.

David's lecture on December 5th will discuss how physics affects our daily living and how it is the basis to many applications in general

ophthalmology. A number of examples will be illustrated, focusing on those in David's own specialty, namely vitreoretinal surgery.

These will include:

1. Euclidian Geometry and Scleral Buckling Surgery.
2. Surface energy: do you need a helping hand to stop you slipping?
3. From Newtonian to Non-Newtonian behaviour: how to make fluids defy gravity.
4. The speed of light: how to make transparent structures visible and visible structures transparent.
5. From dressing salad to preventing glaucoma: is surfactant your best ingredient?

With such illustrations, a case is made for blue sky research that can yield some amazing and unexpected solutions and benefits to many of our problems.



Montgomery Lecture 2014 guest speaker, Professor David Wong, Chair in Ophthalmology, University of Hong Kong

David held the position of President of the British and Eire Vitreoretinal Society from 2010 – 2012 and was Vice President of the Royal College of Ophthalmologists from 2003-2007.

He has authored 206 journal publications and 22 chapters in 12 books, over half of which have been published in leading medical journals, including the British Journal of Ophthalmology and in Ophthalmology, Retina and Graefes.

ESCRS – Áine Ní Mhéalóid Presentation

Áine Ní Mhéalóid is pictured at the Congress of the European Society of Cataract and Refractive Surgeons (ESCRS) in London, 13–17 September, where she presented her talk entitled "Anterior Surface Opacification of Intraocular Lenses after Descemet Stripping Endothelial Keratoplasty", a case series involving four patients. Two of the lenses have been explanted and are currently undergoing laboratory analysis to determine what exactly the opacification is. Áine proposed a number of aetiologies for this opacification including breakdown of the blood-aqueous barrier and repeated intracameral injections of air.





Garry Treacy and Fiona Kearns pictured at the Medical Advertising in Ireland meeting.



Arron Mullaniff, NCBI and Rachel Rigley, Wellington Eye Clinic.



Frank Goodman, ASAI and Vivienne Ryan, Irish Competition Authority.



Avril Daly, Fighting Blindness, Una O'Rourke, Irish Medical Council and Caroline Murphy (RTE) Conference Moderator.



Matthew Graham pictured with Barbara Tynan and Kevin O'Donnell of the Health Products Regulatory Board.



Alison Blake and Mark Cahill.

Medical Advertising Meeting



Catherine Reilly, Medical Independent and John Elliot, Law Society of Ireland.



Siobhan Kelly pictured with Frank Goodman, Chief Executive of the Advertising Standards Authority of Ireland.



Paddy Condon and Yvonne Delaney pictured with William Donegan, Operations Manager, Irish Injuries Board .



Margaret O'Donnell, President of the Irish Association of Plastic Surgeons pictured with Billy Power.



Emer MacNeice and Kate Coleman.



William Kennedy, Billy Power and John Elliot, Law Society of Ireland.

The Dublin Uveitis Evaluation Tool (DUET)

A novel-evidence based method for detecting undiagnosed spondyloarthritis in patients presenting with acute anterior uveitis

Spondyloarthritis (SpA) is an inflammatory arthritis that predominantly affects the lower spine but may also cause an asymmetrical peripheral arthritis. SpA is an umbrella term that encompasses ankylosing spondylitis (AS), psoriatic arthritis (PsA), inflammatory-bowel disease associated arthritis (IBD-SpA), reactive arthritis (ReA) and undifferentiated (uSpA). The incidence is akin to that of rheumatoid arthritis at 1% with AS being the most common. It usually has an insidious onset with characteristic symptoms of lower back pain that improves with exercise. Back pain is a common complaint that may have a multitude of causes. Frequently, if symptoms respond to simple analgesia no investigations are carried out to elucidate the cause. Furthermore, if the back stiffness improves with exercise or if the pain resolves within an hour of waking, the patient may not consider these symptoms significant. SpA is associated with significant morbidity. Current available therapies such as non-steroidal anti-inflammatory drugs and biologics halt disease progression but do not reverse the inflammatory changes in the joint. One of the major obstacles for rheumatologists treating SpA therefore is the fact that patients with SpA present so advanced in the disease course. Early diagnosis is crucial as earlier recognition of SpA will lead to earlier intervention and treatment, improving patient quality of life.

The link between SpA and AAU

Anterior uveitis (AU) is the most common extra-articular manifestation of SpA. Although there is clear evidence that HLA-B27 is common to both SpA and AAU, the

exact mechanism linking joint and ocular inflammation remains largely unknown. Both conditions share similar demographics affecting 20-40 year olds with a slight male predominance.

Project Rationale

AU patients present within a few days of onset either directly to an ophthalmologist or indirectly through the GP or optician due to intolerability of symptoms of redness, pain, photophobia and mildly reduced vision. Back pain of insidious onset, which improves with exercise may go unnoticed for many years. Most cases of AU are not managed by a uveitis subspecialist but instead attend the ophthalmology emergency room or the general ophthalmology clinic. Therefore, all ophthalmologists have a role in identifying patients attending with AU who may have a concurrent SpA with the aim of earlier diagnosis. Referral to a rheumatologist for suspect cases will improve patient outcome in these patients. The question therefore arises, which patients presenting with AU should be referred?

In our **collaborative study** between Royal Victoria Eye and Ear Hospital (RVEEH) and St Vincent's University Hospital (SVUH) we recruited 104 patients presenting to the emergency department at the RVEEH with non-infectious AU with no known systemic association. Subsequently, these patients were screened by our rheumatology colleagues at SVUH for the presence of SpA. Based on the most statistically significant features of these patients an algorithm of referral was generated which was then validated in a further 74 patients.

Results

After rheumatological examination, 42% of patients were diagnosed as having an SpA. Following step-wise statistical analysis, the algorithm in figure 1 was generated. This stated that patients less than 45 years old attending the ophthalmologist with non-infectious AU should be asked about the presence of back pain. Specifically, patients with back pain of any nature and present for greater than 3 months duration should have a blood test to check for HLA-B27. In addition, any patient who has attended their GP for back pain should also have HLA B27 checked. If HLA-B27 is positive in these patients, they should be referred to their local rheumatologist for assessment. If HLA-B27 is negative in these patients, they should be asked specifically about a history of psoriasis. If the patient has psoriasis, they should also be referred. This is because patients with psoriatic arthritis are less likely to be HLA-B27 positive. The sensitivity and specificity of this algorithm is 95% and 98% respectively.¹

Conclusion

The effective recognition of SpA amount patients with AU is an achievable goal using this simple but highly effective algorithm. This will result in appropriate and timely referrals from ophthalmologists to rheumatologists to the benefit of patients with spondyloarthropathies.

1. Haroon M, O'Rourke M, Ramasamy P, Murphy CC, FitzGerald O. A novel evidence-based detection of undiagnosed spondyloarthritis in patients presenting with acute anterior uveitis: the DUET (Dublin Uveitis Evaluation Tool). *Annals of the rheumatic diseases* 2014.

Retina 2014 – Fighting Blindness

The 15th annual Retina Conference was hosted in early November by Irish patient-led organisation, Fighting Blindness. Over the course of the three day event, more than 350 attendees participated in the conference, which included a clinical trials roundtable discussion, a scientific meeting for researchers and eye doctors, as well as a highly successful public engagement day, designed to bring patients and families together with experts in the field.

The event saw leading Irish and international experts share insights into curing and preventing blindness and heard how gene therapy and innovative technologies are already restoring eye sight in patients. Fighting Blindness was pleased to welcome Minister Leo Varadkar TD to open the conference and called on him for further funding and support for clinical trials in Ireland. The charity highlighted their dedicated registry development project, Target 5000, as a method for paving the way towards targeted gene therapy treatment in Ireland.

Speaking during his opening address, Minister Varadkar said, "This is an exciting time for the vision



David Keegan

health community, especially patients and families who are affected by sight loss. The innovative and pioneering work presented today is incredibly important and gives hope to the 224,000 people affected by sight loss in Ireland, and to future generations affected by genetic eye disease. It's really encouraging to hear about the huge progress being made in treating blindness, thanks to the dedication of those working in research and vision health, and the commitment of organisations like Fighting Blindness."

ICO member and board member of Fighting Blindness, David Keegan gave a presentation on Target 5000, which aims to provide genetic testing for the estimated 5,000 people in Ireland who have a genetic retinal condition. Through genetic screening of the person affected and their family members, Target 5000 will provide more detailed information about the nature and inheritance pattern of their eye condition. The overall aim is that patients will be able to access therapies targeted to specific genes and mutations as they become available. They will also be added to a national patient registry so that patients who are eligible for future

clinical trials can be easily identified. To date, almost 600 people have been recruited into the programme between the three sites in Dublin and Belfast.

A full conference report will be available at the end of November.

Fighting Blindness Launches 'A Guide to Conditions of the Retina'

Fighting Blindness will unveil a new patient guide to support people diagnosed with a range of retinal conditions on Tuesday, December 2 at 6pm.

The publication, A Guide To Conditions of the Retina, supported by Bayer Healthcare and proudly endorsed by the ICO, will be launched at an evening reception attended by ophthalmologists, scientists and patients in the Royal College of Surgeons in Ireland (RCSI) Atrium, Dublin.

The guide sets out information about a range of rare inherited retinal conditions including retinitis pigmentosa, Usher syndrome, Stargardt disease and many more, as well as information about more common conditions such as age-related macular degeneration and diabetes related sight loss. It provides information about the causes, symptoms, any available treatments and research into these conditions. It details how the eyes work and defines the technical terms used to detail the parts of the eye, as well as highlighting the roles of the various eye health professionals that people come into contact with and what tests may be carried out at an appointment.

Fighting Blindness are delighted to invite all members of the ICO to attend the launch event.

For more information please contact Anna Moran on 01 6789 004 or communications@fightingblindness.ie



Minister for Health, Mr Leo Varadkar is pictured with Avril Daly, CEO Fighting Blindness and ICO Member David Keegan

Research into Deafblindness in Ireland Reveals Extra Support Services Desperately Needed for Dual Sensory Loss Patients

Research funded by the Anne Sullivan Centre and Deafblind Ireland has shown that patients who are deafblind are at risk of falling between the cracks of vision and hearing services.

According to the Centre, the main aim of the research project was to gain a more accurate picture of the number of people who experience a combination of serious vision and hearing impairments in Ireland. In addition, a National Registry of people who are Deafblind in Ireland was established.

Anyone with a combined vision and hearing loss which causes difficulty with communication, access to information and mobility was invited to participate.

A question contained in the 2011 census which asked people to indicate whether they were blind or had a serious vision impairment or deaf or had a serious hearing impairment made providing an estimate figure of the number of people affected achievable. The CSO cross-tabulated the data on the Anne Sullivan Centre and Deafblind Ireland's behalf for the research purposes and revealed that 1,749 people have a combination of both impairments (699 under the age of 65, 1050 over the age of 65).

Laura English, the Anne Sullivan Centre's Research Coordinator, contacted vision support services including NCBI, DeafHear, Fighting Blindness, the Irish Deaf Society and other disability organisations, requesting they distribute a short survey to any of their service users who had a combination of serious vision and hearing impairment. In the four months that followed, 103 people returned surveys and agreed to add their details to the new National Registry.

The main findings of the research were:

- At least one third of the Deafblind population in Ireland are over the age of 65, representing the largest

diagnostic group within the Deafblind population

- Age Related Deafblindness, Usher Syndrome, CHARGE Syndrome and Congenital Rubella Syndrome are the leading causes of Deafblindness in Ireland.
- Almost 20% of the Deafblind population have a diagnosis of Usher Syndrome. Of this less than one quarter are engaged with a service provider.
- 90% of Deafblind children and young adults have one or more additional disabilities.
- Almost two-thirds of people who are Deafblind live with family. Fewer than 15% live alone and almost 20% live in a residential care facility.
- 55% of people who are Deafblind are not in receipt of any services.

Laura English told the ICO, "Since the publication of the research, a number of people who are Deafblind have expressed an interest in forming a peer support and advocacy group as none currently exists. The fact that people are geographically spread throughout the country, in addition to the communication difficulties faced by the population, makes this extremely challenging."

She added, "Currently, if a Deaf sign language user is diagnosed with Usher Syndrome it can be extremely difficult for them to obtain information about their RP or access support for adapting their communication skills as their sight deteriorates to a point that makes it impossible for them to see people sign to them. We are very anxious to campaign for support to be provided to this group

and others who, for a myriad of reasons, end up with very little usable vision and hearing and become isolated from society. "

According to the Centre, to ensure that Deafblind specific services are available in the future, there is a significant case to be made for mobilising the group along with their families, friends and the services they engage with, into action.

In 2004, the European Parliament passed a Written Declaration recognising Deafblindness as a separate and unique disability. Eight EU member states including the UK have adopted this but nobody to date, has made a noise about the declaration here in Ireland.

Having exhausted the option of reaching people who are Deafblind through the voluntary and community sector, the Centre has expressed that they feel it would be hugely beneficial to make health care practitioners – particularly audiologists and ophthalmologists – aware of the campaign. They believe that if people were given information on Deafblindness at the point of diagnosis it would be a huge leap toward having the disability recognised and developing the necessary services associated with dual sensory loss.

The research shows that the most common complaint from people who are Deafblind is that they fall between the cracks of vision services and hearing services. This research is an important reminder to medical and health care professionals of the impact of dual sensory loss can have on a patient and their family.

The ICO is currently liaising with the Anne Sullivan Foundation on ways to encourage greater cooperation between people who are deafblind, their families and the services providers.

Practitioner Health Matters Programme

Formally called the 'Sick Doctor Scheme', the 'Practitioner Health Matters Programme' (PHMP) is the new title of the scheme which provides appropriate care and support for health professionals who may have a substance misuse problem and other mental health issues.

The Programme is a not-for-profit charitable company. It is independent and separate from the regulatory bodies and has been endorsed by the Medical Council, representative organisations and training bodies.

The programme is led by Dr Ide Delargy, a GP with a special interest in Addiction and Substance Misuse problems. As well as being Chairperson of the former Sick Doctor Scheme since 2007, Dr Delargy's other roles include National GP Co-ordinator for the HSE Addiction Service and Director of the Substance Misuse Programme at the ICGP. She runs her own GP practice in Blackrock, Co Dublin.

The service is there to support any doctor who has a concern about their mental health or substance misuse.

They will receive confidential help from experts who will provide appropriate interventions, including advice, support, mentoring and appropriate specialist referrals, for doctors and dentists (including undergraduate medical students) who have a health problem which is interfering with their ability to practice safely.

Services may include access to a range of specialists who have a particular interest and experience in treating doctors. These specialties include psychiatry, psychology, occupational health, career mentoring, life coaching, addiction counselling and financial planning, drug and alcohol testing. Other services will be accessed depending on the individual's needs.

Access to PHMP will be free of charge to all practitioners. Where referral to another service or ongoing monitoring is required, patients who have health insurance can use this to cover the costs. Others may need to have treatment provided through the public healthcare system. In circumstances of financial hardship special arrangements may be required using our charitable funds. For patients treated privately, they will not be charged for care and treatments but we will welcome any contributions they offer.

The Practitioner Health Matters Programme operates on a not-for-profit basis and depends heavily on financial support they receive from professional representative and training bodies and contributions from health care professionals. Donations of any size are gratefully received. More information on the service or how to make a contribution is available at www.practitionerhealth.ie.

Re designed eyedoctors.ie is unveiled

We are delighted to inform members that the newly designed ICO website eyedoctors.ie is now live. Much work has gone into developing and enhancing the site to ensure it responds to visitor's needs, for both the public and our members. Our aim was to create a comprehensive website which is easy to navigate and home to reliable and up-to-date eye health information.

The updates are in response to the main findings of web traffic analytics which showed the most visited sections of the site to be information on eye conditions, the training pages, the press section and the eye doctor directory. The new layout has been designed so that visitors can more easily identify the relevant section or information to their search but also to enhance the overall access to eye health news and information in order to promote greater interest and navigation of the site by visitors.

The new trainee section contains updated information on the different training programmes and an insight into 'A Career as an Eye Doctor'. We hope members will find the updated

section 'For Doctors' more informative and in tune with their requirements. The College plans to put a greater emphasis on our work with GP's and a new dedicated section will keep our colleagues in general practice updated on our ongoing efforts in this regard.

The College also contacted patient support groups NCBI, Fighting Blindness, ChildVision and Irish Guide Dogs and asked them to inform the ICO of their guidelines for referral pathways of patients to their services by eye doctors, which is contained in the members section of the new site.

The new home page clearly highlights upcoming ICO and external meetings and events of interest. It also displays a live report on our social media activity on Twitter.

Phase two of the website development will be to enhance the eye doctor directory and the College will be in contact with our members to update individual biography and contact details to ensure we are responding to the search requirements for visitors to the site.

We would be delighted to hear any feedback or further ideas for the website that members may have as we continue to update.



Cost of Consumables for Cataract Surgery

We Fong Siah and Paul O'Brien

ICO members, Paul O'Brien and We Fong Siah have developed a survey to find out what ophthalmologists know about the costs of the consumables for cataract surgery.

Cataract surgery is one of the most commonly performed day case procedure in public hospitals in Ireland since 2005. It has been shown to be a highly cost-effective procedure, both in the developed and developing countries. The cost estimate of a cataract surgery can vary substantially worldwide. A case of cataract surgery was estimated to be €318 in Hungary, €1087 in Italy, €1261 in Finland, €760 in Sweden and USD2525 in the United States. Based on 2010 data in Ireland, a day case cataract surgery was estimated to be €1510.

With the increasing awareness on the growing cost of healthcare, there is now a shift towards a more cost-conscious surgeon. The aim of the survey is to evaluate the awareness of the surgeon on the cost of consumables for cataract surgery.

Methods

The questions in the survey were focused on the following items:

1. Instruments and medications that are commonly used for providing anaesthesia
2. Peri-operative ocular medications (antibiotics, mydriatics, steroids etc.)
3. Ophthalmic viscoelastic device
4. Intraocular lens implant
5. Other devices for cataract surgery

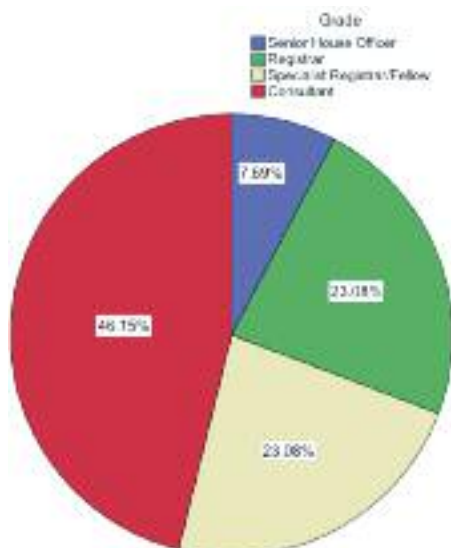


Figure 1. Grade of respondents

A list of cataract surgery consumables prices was obtained from a single eye unit in Ireland. We designed the survey using the SurveyMonkey online service. A total of 37 questions were generated. The survey was circulated by email to all members of the Irish College of Ophthalmologist. Only one entry per person was accepted and the data collection period was over 1 month, from the 1st of October to 31st October 2014. Data collected were analysed using Microsoft Excel and SPSS (Version 22).

Findings

A total of 26 individuals responded to the survey. Fifteen (57.7%) respondents are currently working in the public sector only, 5 (19.2%) only work in the private sector and the remaining 6 (23.1%) work in both public and private sectors. Twelve (46.2%) of the respondents are Consultants while the remaining are NCHDs (Figure 1). Half of all respondents have carried out greater than 500 cases of cataract extraction and lens implant surgery.

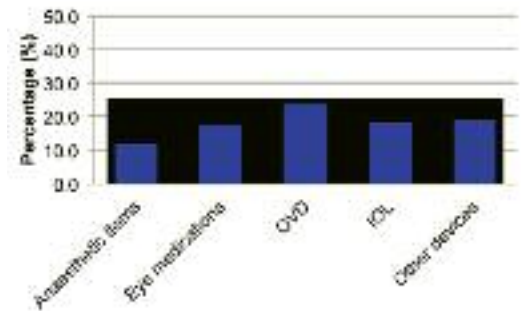


Figure 2. Graph showing the overall correct responses for each group of consumables. OVD = Ophthalmic viscoelastic device; IOL = Intraocular lens

1. Instruments and medications used for providing anaesthesia - 9 items

One third of the respondents correctly identified the cost for a single use subtenon anaesthesia pack and peribulbar needle respectively. The majority of respondents perceived a higher cost for anaesthetic medications used in cataract surgery.

2. Eye medications - 11 items

Overall, this survey revealed that the understanding of the cost of eye medications used in cataract surgery was poor. Majority of respondents assumed that the cost was higher than usual.

Consumables for Cataract Surgery		Estimate price* (excluding VAT)
Anaesthetic Items	Single use subtenon anaesthesia pack	€16
	Peribulbar needle	€1.53
	Hyalase 1500 IU (1 ampoule)	€12
	1% Lidocaine hydrochloride, 5ml (1 box of 20 units)	€6.72
	2% Lidocaine hydrochloride, 5ml (1 box of 20 units)	€3.10
	1% Propofol, 200mg/20ml (1 box of 5 ampoules)	€8.90
	Pentaryl, 100mg/2ml (1 box of 10 ampoules)	€2.46
	Midazolam, 10mg/2ml (1 box of 10 ampoules)	€3.14
	Morphine hydrochloride, 10mg/ml (1 box of 10 ampoules)	€4.57
	Eye medications	G. Proxymetacaine hydrochloride 0.5% (1 box of 20 minims)
G. Phenylophrine hydrochloride 2.6% (1 box of 20 minims)		€18.12
G. Pilocarpine sodium phosphate 0.5% (1 box of 20 minims)		€6.15
Steroid S.D.U. (1 box of 12 units)		€4.44
G. Moxifloxacin		€2.15
G. Moxitrol		€2.63
Oc. Moxitrol		€2.11
G. Chloramphenicol		€2.55
G. Chloramphenicol 0.5% (1 box of 20 minims)		€6.88
G. Enoxon		€3.03
Oc. Fluothalmic		€3.10
OVD	Armasol	€22
	Healon5	€20
	Healon OVD	€30
	Vitreosol5	€54
	Vitreosol8	€51
IOL	AcrySul Acpul Ac	€102
	CT-Acphina	€87
	Acrysol IQ	€110
	Tecris Acrylic	€85
Other devices	MochliE, 25mg	€13
	Valon blue springs (0.06% Trypan Blue)	€25
	Morcher capsular tension ring	€106
	Iris hooks (1 unit of 5 hooks)	€74
	10-0 nylon suture (1 box of 12 units)	€10

*Indicates price per unit of item unless specified otherwise.

Figure 3. Table shows the estimate price for cataract surgery consumables. OVD = Ophthalmic viscoelastic device; IOL = Intraocular lens

3. Ophthalmic viscoelastic device - 5 items

Ten (40.0%) respondents correctly identified the cost for Amvisc®. The cost for Visthesia® and Viscoat® were accurately determined by 14 (53.9%) and 7 (28.0%) respondents respectively. The question on the cost for Healon® and Healon GV® were answered incorrectly by all respondents; all of them over-estimated the cost.

4. Intraocular lens (IOL) – 4 items

Only 8 (30.8%) individuals correctly identified the cost for Akreous Adapt Ao IOL. Less than 20.0% of respondents correctly determined the cost for CT-Asphina IOL, Acrysof IQ IOL or Tecnis Acrylic IOL.

5. Other devices for cataract surgery – 5 items

A quarter of the respondents were aware of the cost for Miochol-E (20mg) and Vision Blue (0.06% Trypan blue). Four (15.4%) respondents correctly determined the cost for the Morcher capsular tension ring and the iris hooks respectively. Only 3 (11.5%) respondents accurately identified the cost for 10-0 nylon sutures while a striking majority under-estimated it.

Figure 2 shows the overall correct responses for the above grouping of consumables. Figure 3 shows the estimate price for the cataract surgery consumables.

Discussion

This survey revealed that the majority of the respondents were not familiar with the cost of consumables for cataract surgery. With the increasing ageing population, there will be a rise in the demand for cataract surgery and this has significant implications on the overall cost of healthcare. It is therefore fundamental that surgeons who are performing cataract surgery be willing to consider the cost implications of consumables used.

However, there are limitations to this survey. Firstly, the number of respondents was small and therefore does not represent the majority of the surgeons who perform cataract surgery in Ireland. Secondly, the cost of the cataract surgery consumables were based on the pricing obtained from one single eye unit in Ireland. It is likely that the pricing of consumables may vary from one eye unit to another i.e. bulk discount.

Nevertheless, we hope that this survey will influence cataract surgeons to be more cost-conscious and to encourage a positive attitude towards healthcare cost considerations.

Report on UEMS Section of Ophthalmology Plenary Session

Floriana, Malta June 2014

UEMS Irish Representatives: Dr Alison Blake and Dr Denise Curtin

The 68th Plenary Session of the UEMS Section of Ophthalmology was held in Floriana, Malta 14th-15th June 2014.

The Union of European Medical Specialists is an EU wide representative body liaising with the EU Commission divided into sections by specialty. UEMS represents over 1.6 million medical specialists in all the different specialties. It also has strong links and relations with European Institutions (Commission and Parliament), the other independent European Medical Organisations and the European Medical/Scientific Societies.

The UEMS has 39 Specialist Sections, which represent independently recognised specialties. They each created a European Board as a subgroup, in conjunction with the relevant European Society, with a view to defining European standards of medical education and training. They also contribute to the work of Multidisciplinary Joint Committees (MJC) which address fields of a multidisciplinary nature. The Section of Ophthalmology encompasses the European Board of Ophthalmology which awards the EBO Diploma.

The current President (4 year term) is Constantino Bianchi from Italy, General Secretary Guy Aflalo (France) and Treasurer Eija Vesti from Finland.

Elections were held at the meeting for Treasurer and Vice Presidents (5) Eija Vesti was returned unopposed as Treasurer. The five Vice Presidents are Wagih Adimandos(UK), Ivan Haefliger (Switzerland), Pavel Rozsival(Czech Rep), Renata Ivekovic (Croatia), Toomas Sepp. (Estonia)

President Bianchi finishes his term of office at the end of the year and Hank Bonnemaier (Netherlands) assumes the role of President in January 2015.

Accounts are held in Brussels and the annual accounts were accepted by the Section.

EACCME (European Accreditation Council for CME) plays a major part in setting the standards for CME/CPD throughout Europe. This leading role is being increasingly recognised by political organisations (European Commission and Parliament), provider and funding organisations, and doctors. It has mutual recognition with the AMA.

Symposium on the future of Surgery in Europe

Attended by Hank BONNEMAIJER, the two main topics were - the need to harmonize the training in Europe and the advent of robots in surgery training.

EFAB (European Forum Against Blindness) and IAPB (International Agency for the Prevention of Blindness) Advocacy Coalition

President BIANCHI was asked to participate in the creation of a "European Coalition for Eye Health" on behalf of the Section of Ophthalmology, and was invited by the CEO of IAPB (International Agency for the Prevention of Blindness) to participate in a meeting held on this subject in October 2012 under the European Parliament in Brussels.

Clearly this coalition, although initiated by the associations with the aim of safeguarding the vision, consists mainly of representatives of the medical industry, optical, opticians and optometrists, with its costs borne by the pharmaceutical industry. The stated goals of the coalition are generous and ambitious, but do not specify what is the exact position played in it by ophthalmologists, and concerns may arise about the ethical aspect of its sponsoring.

The Bureau is very reluctant to give its backing for such venture, but agrees to participate as an observer.

Retinal Imaging Society of Ireland meeting

Retinal Imaging Society of Ireland. Chaired by Prof. Alan Bird, Emeritus Professor of Medical Ophthalmology, Honorary Consultant Moorfields Eye Hospital and Mr. David Keegan, Ophthalmic Surgeon, Mater Misericordiae Hospital Dublin.

Trainee and consultant grade ophthalmologists from throughout Ireland attended the meeting held at the Croke Park Conference centre.

The meeting comprised case presentations by several ophthalmologists from Ireland and internationally of clinically challenging retinal conditions. The cases were presented to allow discussion of clinical management and further investigations that may be warranted. This followed an open exchange of clinical experience between the ophthalmologists which is the aim of RISI events.



Daragh McCabe, Bayer and Mr. James Morgan, Louth County Hospital.



Lyndsay Sullivan, Bayer, Aileen Hogan, Hermitage Clinic and Catherine Cleary.



Sarah Kwan and George Vartsakis



Paddy Condon, Waterford, Mark Pennesi, Casey Eye Institute, Oregon Health and Science University, USA and Max Tracey, Royal Victoria Eye and Ear Hospital.



Professor Alan Bird, Professor of Medical Ophthalmology, Honorary Consultant Moorfields Eye Hospital, UK and Mr David Keegan, Consultant Ophthalmic Surgeon, Mater Hospital Dublin