



Cornea Subspecialty Day back at AAO

This year, Cornea Subspecialty Day will be held at the American Academy of Ophthalmology (AAO) annual meeting on Saturday, October 27. This year's program will look at "What's Tried, True, and New." Program directors include **Carol L. Karp, MD**, Miami, **Jennifer Li, MD**, Sacramento, California, and **Sanjay Patel, MD**, Rochester, Minnesota.

Dr. Karp discussed some of the features of this year's subspecialty day. The program will include six sections: "Anterior Segment Imaging – Tried and True and a New View," "Concerning Keratoplasty – Stripping Away the Layers of Mystery," "Conjunctival Tumors – Is it a "Toomah"?" "Hot Topics," "Ocular Surface Disease – Whetting Your Appetite," and "Cornea Infections – Medical Therapy and Beyond." Dr. Karp noted that each section is going to take an evidence-based approach to the topic.

The day will be filled with national and international experts on anterior segment topics. The first section will cover anterior segment imaging in a variety of scenarios, including keratoconus, cataract surgery, LASIK, and infectious keratitis. Dr. Karp said that the focus will be imaging that can help

Cornea Subspecialty Day

In conjunction with the Cornea Society

What's Tried, True, and New

Saturday, October 27, 2018
McCormick Place, Chicago

surgeons decide how to approach the disease to best help the patient.

The section on conjunctival tumors will feature experts discussing common lesions that comprehensive ophthalmologists and corneal specialists encounter. Some topics to be highlighted include ocular surface squamous neoplasia, pterygium, and conjunctival lesions in children. Dr. Karp added that the Cornea Subspecialty Day program has not previously covered tumors in children.

Another section of the program will highlight what Dr. Karp referred to as the "ABCs of corneal surgery," and this will cover different topics in keratoplasty. Presentations will address DSAEK, DMEK, PK, DALK, Descemet's stripping only, and more. Dr. Karp said these are topics that have been addressed before, but there is "just so much to discuss in the field of selective keratoplasty."

The section on ocular surface disease will cover dry eye, meibomian gland dysfunction, neuropathic corneal pain, and more. Ocular surface disease is the "bread and butter" for cornea specialists and comprehensive ophthalmologists, Dr. Karp said, adding that there will be tips for detecting the disease and information on diagnostic tests.

The section on corneal infections will cover infectious keratitis, interface and wound infections, crosslinking for infectious keratitis, and more.

Finally, there will be a "Hot Topics" section, which will cover many updates from the DREAM Study, simple limbal epithelial transplantation (SLET), Fuchs' dystrophy, and the Cornea Preservation Time Study.

To keep the program lively, each section will feature case presentations and panel discussions. Audience members will have a chance to text in questions for panel members to answer.

Dr. Karp said she is looking forward to a valuable learning experience for corneal and comprehensive surgeons with a day full of excellent lectures, case presentations, and roundtable discussions with prominent leaders in the field of cornea. **CN**



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President's message

Dear Cornea Society members,

Hopefully, you have had some time over the summer to spend with family and friends as we recharge for the remainder of the calendar year. As I intimated in the previous newsletters this year, a number of important and exciting changes are coming to the Cornea Society in 2019.

Cornea360 is due to make its debut in Scottsdale, Arizona, in April 2019. As you may know, this is a cooperative effort among the Cornea Society, APEX, and CEDARS/ASPEN to bring not only the best but the most informative, interactive, and in-depth approach to all things cornea and ocular surface possible in a 2-day meeting. I have no doubt that this will be a meeting that will impact your thinking, approach, and practice of corneal disease more than any other throughout the year. Registration and housing is open, and space is limited. Visit Cornea360.org for details today.

Next, we will be revising our membership categories in 2019. For more than a decade, the Cornea Society has had a founding role in the AUPO Fellowship Compliance Committee (FCC) process of establishing and verifying the guidelines for cornea fellowship training in the U.S. and Canada. For those of you who may be unfamiliar with the process, these guidelines support not only the clinical and surgical training of cornea fellows, but also require mentorship in scholarship and research in cornea. Fellows provide feedback at the end of their fellowship to confirm compliance with these guidelines in order for programs to maintain their AUPO FCC compliant status. In fact, this system has proved robust and rigorous enough for AAPOS and the American Glaucoma Society to make it the primary determinant for membership in their respective societies. In May, the Board of Directors approved creating an additional fellow of the Cornea Society category, which will allow voting privileges as well as leadership opportunities to those who have completed an AUPO FCC fellowship. After 4 years in practice, an application and committee approval process will be put in place to admit these candidates to the new category. All other membership categories will remain largely intact, including the member-with-thesis category. Full details will follow as the policy is implemented in 2019.

It is with mixed feelings that we announce a search for a new editor-in-chief for the Cornea Society's journal, *Cornea*. Alan Sugar, MD, our current editor, has signaled his interest in transitioning to a new editor at the end of his term in January 2020. Dr. Sugar and his team of associate editors, Editorial Board, and reviewers have done an exemplary job over the last several years in bringing the journal to new heights as a service to the science behind diseases of the cornea. The new editor will need the energy and expertise not only to manage the journal and editorial processes, but also to maintain the scientific rigor characteristic of the journal while innovating and advancing the scope and reputation. A search committee is in place and accepting nominations with the goal of having a candidate in place by the end of the year to transition to editor in 2020.

Make plans early to attend both the Cornea and Eye Banking Forum on October 26 and immediately following, AAO Cornea Subspecialty Day on October 27 in Chicago.

Elmer Tu, MD, president, Cornea Society



Elmer Tu, MD

Cornea and Eye Banking Forum to be held before AAO annual meeting



Cornea Society
Advancing the treatment of corneal disease



The 2018 Cornea and Eye Banking Forum, jointly hosted by the Eye Bank Association of America (EBAA) and the Cornea Society, will be held prior to the American Academy of Ophthalmology (AAO) annual meeting in Chicago on Friday, October 26, at the Westin Michigan Avenue.

Michelle Rhee, MD, New York, spoke about this year's program and why it's important to attend.

"This forum is a unique educational opportunity as it addresses multidisciplinary topics relevant to both corneal

surgeons and eye bankers, enhancing depth of knowledge for both professional groups," Dr. Rhee said.

The program will consist of approximately 25 free papers and two mini-symposia, said **Anthony Aldave, MD**, Los Angeles. The first mini-symposium, organized by the Cornea Society Young Physician Task Force, will focus on the learning curve in lamellar keratoplasty and will be titled "What I Learned From My First 50 Cases." The second mini-symposium, organized by Dr. Aldave and Dr. Rhee, will focus on

the prevention, diagnosis, and treatment of post-keratoplasty fungal keratitis and will be titled "Controversies in Eye Banking: Post-keratoplasty Fungal Infections."

Dr. Rhee said this year's forum will include more pro/con and multiple viewpoint presentations.

During the Cornea and Eye Banking Forum, several awards will be presented. A Best Paper of Session Award is given, along with \$1,500. This award is limited to current fellows, residents, and/or medical students.

Additionally, the Claes H. Dohlman, MD, PhD, Award, the R. Townley Paton Award, and the Troutman Cornea Award will be presented.

This year, the Claes H. Dohlman, MD, PhD, Award, will go to **Ronald Smith, MD**, and the R. Townley Paton Award will go to **W. Barry Lee, MD**.

"I encourage all corneal surgeons to attend this collaborative and multidisciplinary session," Dr. Rhee said. "It's a high yield way to get updated on the latest information before the AAO annual meeting." **CN**

Cornea Society University (CSU) programs



CSU
Cornea Society University

Dinner Series

Save the date: CSU dinner, Friday, October 26, Chicago

We are excited to announce a new dinner meeting developed by the Cornea Society Young Physician Task Force and sponsored by Cornea Society University (CSU). This educational program will be geared toward young physicians. The next dinner will be held on **Friday, October 26, in Chicago, 5:30–7:30 p.m.**, immediately following the Cornea and Eye Banking Forum.

This new dinner series concept will provide young physicians with an opportunity to interact and network with colleagues as well as learn more about professional development and practice building. Watch your inbox for the invitation.

CSU booth at AAO

Be sure to visit the CSU booth at the 2018 American Academy of Ophthalmology (AAO) annual meeting in October in Chicago. Stop by and recharge, grab a snack, and learn more about all CSU offers you. We look forward to seeing you in Chicago. **CN**

Business meeting announcement

The Cornea Society business meeting will take place on Friday, October 26, during the Cornea and Eye Banking Forum at the Westin on Michigan Avenue, 909 North Michigan Avenue, Chicago. All members are invited to attend.

Check the Society website for updates: www.CorneaSociety.org.

Cornea Society symposium at AAO to highlight drugs, devices, and diagnostics

This year at the American Academy of Ophthalmology (AAO) annual meeting in Chicago, the Cornea Society will co-sponsor a symposium with the German Ophthalmological Society (DOG) titled “The Future of Cornea in 3D: Drugs, Devices and Diagnostics.”

Elmer Tu, MD, Chicago, president of the Cornea Society and one of the chairs of the session, spoke about the upcoming symposium.

“Every year, we try to highlight topics that are practical and that will have an immediate impact on both comprehensive and corneal specialists,” he said. “For this year’s symposium, we wanted to focus not on a particular condition but on technology and drugs that are currently available that have new or unique uses for the anterior segment

surgeon or products that are expected to be soon available that will have a significant impact on clinical practice.”

Dr. Tu added that there is “something for everyone in the symposium.” For the comprehensive ophthalmologist, he thinks that an understanding of the new biologic drugs for autoimmune scleritis and keratitis that are safer and more effective than corticosteroids as well as the evolution of new diagnostic imaging technologies for surgical and clinical care are especially useful. “There’s also a wealth of content for the cornea specialist addressing the use of VEGF inhibitors as well as the continued promise of molecular diagnostics for infectious keratitis,” he said.

Ophthalmologists have had the benefit of a wide array of therapeutics, especially with the ability to use drugs and

diagnostics topically, Dr. Tu said. “There are still, however, diseases that are difficult to treat or diagnose in a timely fashion, and we might help preserve vision if they are treated promptly,” he said. “This is the focus of the symposium, looking at techniques that offer the promise of faster, safer, and more effective treatment of those conditions where time matters because irreversible damage is occurring.”

Although uncommon, almost every ophthalmologist will see scleritis or infectious keratitis in his or her practice where the outcome will rely heavily on their initial and continuing management, Dr. Tu said.

The symposium will include presentations on a variety of topics and will feature several case discussions. “The case presentations are designed to highlight and reinforce the concepts presented in each session, posing a practical clinical scenario with input from all of the panel members as to the tools to use from the toolbox,” Dr. Tu said.

The symposium will also include the Castroviejo Lecture, this year to be given by **Alan Sugar, MD**, on the topic of “The Ethical Basis of Clinical Research.”

Dr. Tu said that the Castroviejo Award recognizes the highest level of achievement in the Cornea Society. “This is the Society’s highest award and is given in recognition of exceptional contributions in support of the Society’s mission: to promote knowledge, research, and understanding in cornea, external disease, and refractive surgery,” he said. “Dr. Sugar has published a plethora of impactful scientific work over his long career in every aspect of cornea and external disease and has contributed his time and expertise as editor-in-chief of the *Cornea* journal, amplifying his impact on the field of cornea.” **CN**

Update to the Declaration of Istanbul on Organ Trafficking and Transplant Tourism announced at international workshop

The first new edition of the Declaration of Istanbul on Organ Trafficking and Transplant Tourism, a seminal document that has helped to guide ethical practice in organ donation and transplantation around the world, was presented at an international workshop in Madrid, Spain in July.

The declaration is available in both English and Spanish from the Global Alliance of Eye Bank Associations at www.gaeba.org/publications.

The Declaration was originally published in 2008 after a meeting of The Transplantation Society (TTS) and the International Society of Nephrology (ISN) in response to concerns about international trafficking in human organs.

The Declaration of Istanbul Custodian Group (DICG) is an international group of transplant professionals and scholars that works closely in collaboration with its parent organizations, TTS and ISN, to encourage and support implementation of the Declaration’s principles around the world. In 2017 the DICG formed an international working group to draft a new edition of the Declaration, updating the definitions and principles in light of clinical, legal, and social developments in the field throughout the last decade. **CN**

Cornea360 meeting to debut in April in Scottsdale

Cornea360 is a new, 2-day meeting targeted to corneal specialists and those interested in diseases that affect the cornea and anterior segment. The meeting will be a collaboration among the Cornea Society, APEX, and CEDARS/ASPENS and will take place April 4–6, 2019 in Scottsdale, Arizona. Topics to be highlighted include the ocular surface, surgical challenges, infection, keratoconus and ectasia, inflammation, and cutting-edge cornea. **Marian Macsai, MD**, Glenview, Illinois, **Elmer Tu, MD**, Chicago, **Kenneth Beckman, MD**, Columbus, Ohio, and **Joseph Tauber, MD**, Kansas City, Missouri, were involved with the organization of the meeting. Dr. Tu, Dr. Beckman, and Dr. Tauber highlighted some of the unique aspects and reasons to get excited for this cornea-focused meeting.

“We’ve been hearing from the membership of the Cornea Society for some time about the interest and need for a meeting solely dedicated to cornea research and practice,” Dr. Tu said. “The meeting concept is a true amalgam of the three sponsoring societies, the Cornea Society, CEDARS/ASPENS, and APEX, all of which have their unique styles.” Dr. Tu said he expects this to bring evidence, energy, and enthusiasm to the sessions.

“While our emphasis is always evidence-based medicine, we have designed the meeting to be interactive and free flowing to encourage the exchange of clinical and research pearls that might not always find their way into the literature,” Dr. Tu said. “We have also built in time for personal interactions among attendees and faculty to create the collegial atmosphere characteristic of cornea specialists.

“While we have designated faculty, we expect them to be only the beginning of our discussions on various topics,” Dr. Tu continued. “The attendees bring different experiences and expertise and will be teaching the rest of us as much as we are teaching them.”

Dr. Tauber said he attended a meeting in Miami a couple of years ago that featured a wide range of international speakers and a variety of cornea topics,

and he was impressed with the scientific quality of the talks and found himself not wanting to leave the session room. Dr. Tauber said he wanted to see something like that meeting happen again, a high-quality meeting targeting the current and informed cornea specialist who still faces a wide range of unresolved clinical challenges. “We find there’s a lot of exciting areas in cornea,” he said.

The field is a little fragmented in terms of there being a few subspecialty societies that have interest in this area, he said. “We thought it would be good to bring all the societies together to co-endorse a meeting.”

“For years, members of the Cornea Society and cornea specialists have had corneal meetings tied to AAO and ASCRS,” Dr. Beckman said. “But they’ve never had a free-standing corneal-specific meeting.” It worked out that all three organizations had the idea to develop this sort of meeting at the same time, he said. The three groups decided to sit down and come up with something that would be exciting for the cornea specialist as well as the general ophthalmologist who does a lot of cornea work, Dr. Beckman said.

The meeting will highlight a number of major topics in the cornea field. “If you look at the list, it seems like the

bread and butter topics that you see for any other conference because they are recognized as the most important areas that cornea specialists practice in,” Dr. Tu said. “Our topics and speakers, however, will take it to the next level, blending experience and science in a way that there isn’t an opportunity to do in traditional didactic-style meetings.”

Dr. Tauber said he found it easy to find a number of topics that he was interested in and that explored problems that confront him.

Dr. Beckman added that the format of the meeting will be unique. “We didn’t want it to just be someone at the podium,” he said. “We want it to be interactive and fun.”

The meeting will feature panel discussions, audience participation, and more. “We want it to be a fun, high tech, innovative meeting,” Dr. Beckman said.

“I think it is important to bring the organizations together,” Dr. Tu said. “Although the membership overlaps among the three entities, there are different expectations from the organizations’ meetings.” They wanted the meeting to have broad appeal with all three societies’ strong commitment to the highest level of scientific rigor, he said. **CN**



Global agreement on donated tissue announced

On June 14, the global community of eye care and corneal transplantation organizations unveiled the world's first agreement on the use of donated human tissue for ocular transplantation, research, and future technologies. A number of Eye Bank Association of America (EBAA) members participated in the drafting and review of these guidelines, which were ratified by the EBAA's Board of Directors in April.

The document's launch took place during the World Ophthalmology Congress in Barcelona, which explains the title: the **Barcelona Principles**.

Kevin Corcoran, EBAA CEO, along with his counterparts from the other five multi-national eye banking associations, signed the Principles during a ceremony hosted by the Catalan government and presided over by the Minister of Health of Catalonia and representatives of the World Health Organization.

About the Barcelona Principles

According to Associate Professor Graeme Pollock, Global Alliance of Eye Bank Associations representative, "The Barcelona Principles evolved from the global community seeking guidance on current

ethical dilemmas, where they seek to improve tissue access to millions of waiting recipients without compromising their personal moral integrity and professional custodial responsibilities to the donor, recipient and the extended community.

"The global community is concerned about the emergence and development of a 'market mentality' around donations, and the Barcelona Principles include a clear statement—that it is our collective responsibility to protect and retain stewardship of altruistic donations as a public resource for the shared benefit of all," Associate Professor Pollock said.

The agreement's key nine strategies include:

1. Respect the autonomy of the donor and their next-of-kin in the consent process.
2. Protect the integrity of the altruistic and voluntary donation and its utility as a public resource for the shared benefit of all.
3. Support sight restoration and ocular health for recipients.
4. Promote fair, equitable, and transparent allocation mechanisms.
5. Uphold the integrity of the custodian's profession in all jurisdictions.

6. Develop high-quality services that promote ethical CTO management, traceability, and utility.
7. Develop local/national self-sufficient services.
8. Recognize and address the potential ethical, legal and clinical implications of cross-border activities.
9. Ensure ethical practice and governance of research (non-therapeutic) requiring cells, tissue, and/or organs.

The Barcelona Principles adhere to the World Health Organization's Guiding Principles on Human Cell, Tissue and Organ Transplantation. They were developed in partnership with the Global Alliance of Eye Bank Associations, along with the International Council of Ophthalmology, International Agency for the Prevention of Blindness, the Cornea Society, and various ophthalmology societies around the world.

Copies of the Barcelona Principles can be downloaded from the Cornea Society website at www.corneasociety.org/publications. **CN**

Editors' note: This was reprinted from the Eye Bank Association of America.

Cornea journal report

The Cornea Society is seeking an editor-in-chief of *Cornea* to begin January 1, 2020. A committee has been empaneled to begin this process, with the hope of selecting an editor by the end of 2018. The editor elect would then spend 1 year as an associate editor, learning the journal's procedures before assuming full duties.

The search committee has suggested several characteristics for a desirable editor. These include: knowledge of the ophthalmic literature, publishing experience, an understanding of and commitment to research and publishing ethics, and ability to devote time and effort to this role. A more specific job description is in development.

If you wish to be considered for this position, please send a letter of interest and a curriculum vitae to Alan Sugar, MD, at asugar@umich.edu or Gail Albert at Galbert@CorneaSociety.org. **CN**



Cornea journal news

The *Cornea* journal's latest impact factor for 2017 is 2.464, which is a 23% increase over the 2016 impact factor of 2.01. The journal ranks 19 out of 59 in the Ophthalmology category. Congratulations to Dr. Sugar on this accomplishment. The top cited article contributing to the 2017 impact factor was "Global Consensus on Keratoconus and Ectatic Diseases." **CN**

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Mitch Jackson, MD
Jackson Eye, IL

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Cynthia Matossian, MD
Matossian Eye Associates, NJ

The nice thing about the OPD-Scan III placido disk rings is they are in black and white and easy for patients to understand. If the circles aren't crisp and sharp, there's something wrong. If they're warped and irregular, most people can understand that this is a diseased tear film and therefore treatment is needed.



Larry Patterson, MD
Eye Centers of Tennessee

There are a few things that I really need in my practice; none of my surgical coordinators, nor I, ever want to perform cataract surgery on anyone without the OPD. It's one of the reasons that we detect OSD. Previously, I didn't always notice with the slit lamp how dry their ocular surface was.



Neda Shamie, MD
Maloney Vision Institute, CA

The OPD allows you to determine the impact of the ocular surface disease on the visual system, and in turn, gives you points to talk about with the patient. The mires and the measurements help gauge not just your decision on what you can offer the patient, but to also create a more reasonable expectation for the patient.



Toby Tyson, MD
Tyson Eye, FL

We're seeing more and more ocular surface disease; maybe it's because we're finally noticing it, but probably because we now have ways to treat it. I do find that the OPD really helps us out. The OPD mires quickly show you and your technicians any corneal distortions.



TO VIEW THE POWER FORUM III: PART 4
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