Winter 2010

Eye Openers

Retina Consultants
of Southwest Florida®

RETINA CONSULTANTS' PHYSICIANS:
(back row) Dr. Tom Ghuman, Dr. Joseph P. Walker, Dr. Paul A. Raskauskas
(front row) Dr. Donald C. Fletcher, Dr. Ashish G. Sharma Dr. Glenn L. Wing

See Page 2 for EYE & VISION RESEARCH SYMPOSIA information.

THE BILL is on the Way

In the wake of the government's healthcare reform debate and pending legislation, The News Press invited Dr. Joseph Walker to take part in their Healthcare Proposal Roundtable Discussion. His medical background afforded him the opportunity to share his perspective regarding President Obama's healthcare initiative. In addition, the News Press published three of Dr. Walker's guest opinion pieces. Here is an overview of Dr. Walker's current position on the healthcare proposal.

Dr. Joseph P. Walker

The recent Congressional Budget Office Analysis of the Senate health bill found that insurance premiums in the individual market will increase by somewhere in the range of 10 to 15 percent more than they would if Congress were to do nothing. Typical family plans are expected to increase $2,000 to $3,000 a year. Unfortunately, this may be a gross underestimation of the real cost. The insurer, WellPoint, calculated that individual premiums could easily triple under the new insurance plans. In a 2008 paper, in the "Forum for Health, Economics & Policy", economists found that states having community rating laws, similar to what is being proposed in the health bill, ended up with increased costs of up to 35 percent for families. It noted that in New Jersey, which required "guaranteed issue", premiums increased approximately 230 percent. A Blue Cross Blue Shield study, noted in the Wall Street Journal, estimated that premiums would rise about 54 percent.

Increased cost will also be due to mandates and political handouts. For example, Senator John Kerry sponsored reimbursement for the Christian Science prayers as medical treatment in the Senate bill. It's not a coincidence that the Christian Science Mother Church is in Boston, in Kerry's home state of Massachusetts. Senator Mary Landrieu of Louisiana bragged that she obtained $300 million in new funds for Louisiana, as payment for her vote.

The costs continue. Part of the bill mandates an enormous increase in Medicaid coverage, which will dramatically increase costs to all states.

Robert J. Samuelson, writing in Newsweek, states that the congressional bills "would create new, open-ended medical entitlements that would probably expand deficits and do little to suppress surging health costs". He quotes David Walker, a former U.S. comptroller general, as stating that the claims of benefits from more efficient "fiscal responsibility" are "assumptions that are totally unrealistic based on past history". Mr. Samuelson also states that three separate studies, including one by the Center for Medicare and Medicaid Services, a federal agency, conclude that the congressional plans would "increase national health spending compared with no legislation". Additionally, John Cassidy, a strong supporter of health care legislation, writing in the New Yorker, admits the "U.S. Government is making a costly and open-ended commitment".

The health bill plans to take more than $400 billion out of Medicare at a time when the Medicare population will increase 25 percent.

There are other surprises that may develop as further review of the bill continues. Mr. Tom Scully, writing in the Wall Street Journal, notes that there are provisions to reduce Part D tax benefits. This could cause employers to drop coverage for seven million working seniors who are covered by employers for drug benefits.

A Washington Post article about tort reform stated that tort reform has a potential of saving $64 billion over ten years. However, there is provision in these health bills which would actually penalize states that have any form of limitation on judgments or attorney fees. It seems like we're going exactly in the opposite direction, as the trial lawyers get their payback.

According to the Congressional Budget Office, the House Republican plan would actually reduce insurance premiums by approximately five to eight percent in the individual market and seven to 10 percent for small businesses, without imposing any significant new taxes. Given the economy, one would think this might be a more logical way to proceed. Unfortunately, this is probably not going to be the case, as individuals, Medicare recipients, businesses, and states will need to get ready to write a gigantic check for the ultimate health bill.

Low Vision and Depression

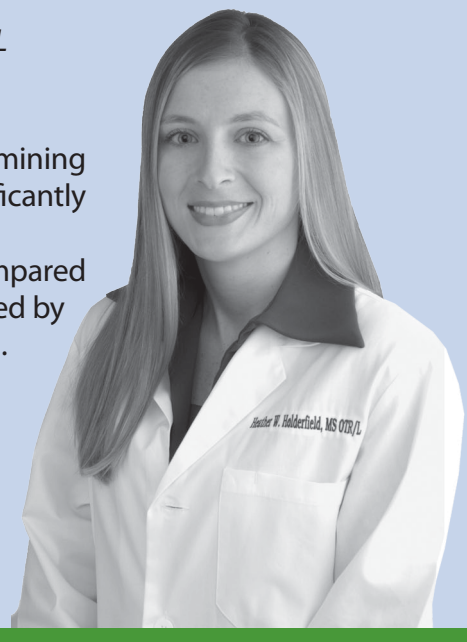
By: Heather Holderfield, OTR/L

New light is being shed on identifying patients with depression, especially those with low vision.

Clinicians have determined that a questionnaire based on self-reported symptoms may be the key to determining the effects of visual impairment on individuals' psychological well-being. They have found that low vision significantly impacts individuals' participation in activities of daily living and warrants increased support.

A study determined that rates of depression are two to five times higher in older adults with low vision as compared with similarly aged individuals with sight. Although a clinical diagnosis of depression may only be determined by a qualified health professional, various screening tools have been used to assess for symptoms of depression.

Regardless of the nature of visual impairment, any decrease in vision may be identified as a type of loss by the individual. As a result, some individuals may experience symptoms of depression. Therefore, individuals should visit their general practitioner or other qualified health care provider for appropriate medical assistance.



Heather Holderfield, OTR/L • *Occupational Therapist at Retina Consultants of Southwest Florida*

Vision –Saving Discoveries Discussed at 14th Annual Symposia

Age-related macular degeneration (AMD) can be a devastating disease to those affected by it. If certain cases are not treated early enough, AMD can destroy a person's central vision and, in turn, their ability to perform everyday tasks such as easily reading the newspaper, driving a car, or recognizing the faces of their loved ones. But, hope is on the horizon both here in Southwest Florida and in Boston. New vision-saving discoveries are being made every day in the effort of finding a cure for AMD.

Those discoveries will be the focus of Retina Consultants of Southwest Florida's 14th Annual Eye and Vision Research Symposia in January. This free event highlights the latest news on vision-saving research being done here in Southwest Florida and in Boston at The Schepens Eye Research Institute (SERI), an affiliate of Harvard Medical School.

"Retina Consultants is proud to announce that Dr. Kameran Lashkari, one of SERI's top research scientists, will join us this year," said Dr. Glenn L. Wing of Retina Consultants of Southwest Florida. "Dr. Lashkari will present his very latest research on his theory regarding the connection between systemic inflammation and the development of AMD."

Dr. Lashkari will discuss his findings into chemical substances produced by the body when inflammation is present and how it may be associated with the development and progression of AMD. This theory, he believes, could be traced by using the patient's blood. If this is true, Dr. Lashkari says a simple blood test might make it possible to identify AMD by using biomarkers in the patient's DNA before the onset of any symptoms of the disease are present.

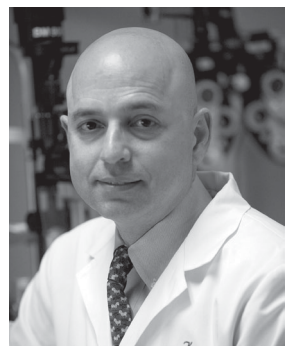
Dr. Lashkari also works closely with one of his SERI colleagues, Dr. Michael Young, who was the guest speaker last year at Retina Consultant's symposia. Dr. Lashkari will discuss the new information that he and Dr. Young have uncovered regarding stem cell research and the efforts to regenerate retinal cells to replace cells that are either damaged or dead.

"These two scientists are approaching AMD at two very different angles," says Dr. Wing. "Dr. Lashkari is trying to stop the disease before it has a chance to cause damage. Dr. Young is working to repair damage that has or may be done in the future. Both aspects have the ability to transform countless patients' lives in the future."

In the meantime, groundbreaking new research is also taking place at Retina Consultants' office in Fort Myers.

"At our research facility, the National Ophthalmic Research Institute (NORI), we are taking part in 22 studies covering diseases such as macular degeneration, diabetic retinopathy, and retinal vein occlusion," said Dr. Wing. "We have some exciting news regarding some of the major ongoing studies and how they could affect our patients."

Dr. Glenn L. Wing



Dr. Kameran Lashkari

In addition to the discussion of the pioneering efforts of our research partners, Retina Consultants is proud to share the stage with the director of our Low Vision Rehabilitation Center, Dr. Donald C. Fletcher. As he has for the past 13 years, Dr. Fletcher will share inspirational stories of his patients' struggles and successes dealing with low vision.

Rounding out the symposia agenda is Rich Godfrey, SERI's patient liaison. He will discuss how his loss of vision, due to AMD, has given him the ability to empathize with patients while sharing the exciting news about the on-goings at SERI.

As in years past, Retina Consultants will provide time for attendees to visit with low vision device vendors and public service organizations before and after the program.

This is the seminar you've waited for all year!

This symposia series is free and open to the public. Registration is required.
Seats are limited and available on a first come, first serve basis.

14th Annual EYE & VISION RESEARCH SYMPOSIA

Sponsored by:

Retina Consultants of Southwest Florida®

The Schepens Eye Research Institute

NORI National Ophthalmic Research Institute®
Envision the Future®

Register Toll Free:
1.866.258.8505

Friday January 15, 2010

Registration: 9 am
Program: 10 – 11:30am

Broadway Palm Dinner Theater
1380 Colonial Blvd.
Fort Myers

(In the Royal Palm Plaza near the intersection of Colonial Blvd. and Summerlin Rd.)

Saturday January 16, 2010

Registration: 9 am
Program: 10 – 11:30am

Hilton Naples
5111 Tamiami Trail North
Naples

Located on Tamiami Trail/US 41 just south of the Pine Ridge Road intersection

Complimentary valet parking available

News From NORI®
National Ophthalmic Research Institute®

NORI
National Ophthalmic Research Institute®
Envision the Future®

What is the FDA and what is its function?

The Food and Drug Administration (FDA) is a U.S. government agency responsible for approving drugs and medical treatments for consumer use. The mission of the FDA is to:

Protect public health by assuring the safety, efficacy, and security of human and veterinary drugs, biological products, medical devices, our nation's food supply, cosmetics, and products that emit radiation. The FDA is also responsible for advancing the public health by helping to speed innovations that make medicines and foods more effective, safer, and more affordable; and helping the public get the accurate, science-based information they need to use medicines and foods to improve their health.

The role of the FDA is to evaluate clinical trial data to ensure that medical treatments are safe and effective for people to use. The FDA does this by meeting with clinical researchers, and performing inspections of clinical trial study sites to verify the quality and integrity of the study data and to protect the rights of study participants.

A clinical trial is a research study in which the safety and effectiveness of an investigational device or therapy is evaluated. When a pharmaceutical company wants to market and distribute its drug, they need to conduct numerous clinical trials. The FDA oversees every clinical trial and has strict rules and guidelines in place to make sure every clinical trial volunteer is treated as safely and fairly as possible. Once the research is complete, the FDA will examine the findings and determine if the drug meets the criteria for approval.

"Carefully conducted clinical trials are the safest and fastest way to find effective treatments and ensure the safety of these treatments," says Dr. Paul Raskauskas of NORI and Retina Consultants.

In the United States, it takes approximately twelve to fifteen years and about $800 million for an experimental drug to be developed and become available to the public. Only about five in five thousand drugs that enter preclinical testing will ever progress to human testing. Out of those, only about one of these five drugs that are tested in people is actually approved.

The FDA requires the following steps before approving a drug:

Preclinical Testing: A pharmaceutical company, or sponsor, must do certain studies before the future drug is ever given humans. Laboratory and animal tests are required to demonstrate the effect of the drug against the disease under study and the safety of the drug. These tests generally take about three and a half years.

Investigational New Drug Application (IND): The pharmaceutical company files an IND with the FDA to begin testing the drug in people. The IND must include the following information: the results of previous tests; how, where and by whom the new protocols will be conducted; the chemical structure of the treatment; how it is thought to metabolize; any toxic effects found in the animal studies; and how the treatment is manufactured. The IND becomes effective if the FDA does not disapprove it within thirty days.

Phase I: Phase I studies are usually the first tests of a drug under development in healthy volunteers. These studies usually involve about 20 to 80 volunteers. These trials are conducted to determine how the drug is absorbed, distributed in the body, metabolized and excreted as well as the duration of the therapy's effects. Phase I trials take on the average one to two years.

Phase II: Phase II clinical trials evaluate the drug's safety. It is during this phase that dosages and side effects are studied. These are slightly larger studies and generally involve one hundred to three hundred volunteer patients with the disease for which the drug is intended. Phase II typically takes about two to three years.

Phase III: These are the large randomized trials that are submitted to the FDA in order to obtain drug approval. This phase examines the effectiveness and safety of the new drug. These trials usually involve one thousand to three thousand patients in clinics and hospitals. Phase III takes generally about three to four years.

New Drug Application (NDA): After the Phase III Clinical Trial, the drug sponsor compiles and analyzes all the data from the study and files an NDA with the FDA (as long as the data appears to demonstrate the safety and effectiveness of the drug). The NDA contains all of the data gathered to date about the drug. The average NDA review time for new drugs can be anywhere from one to two years.

Phase IV: Phase IV is any collection of data from patients who are taking a drug that has already received FDA approval. Phase IV studies are commonly called "post-marketing studies."

This is the usual process for FDA drug approval, but there is another route called "fast-tracking." Fast track is a process designed to speed up the development, and to expedite the review of drugs to treat serious diseases and fill an unmet medical need. The purpose is to get important new drugs to the patient earlier and to provide a therapy where none exists or provide a therapy which may be potentially superior to existing therapy.

For more information about the Food and Drug Administration, please visit their website at www.fda.gov.

If you choose to participate in a clinical trial, you will be helping to develop promising new treatments, while at the same time, possibly receiving effective experimental therapies. While clinical trials are safe and supervised, we encourage you to learn as much as you can about what they entail.

NORI is currently looking for volunteers with the following diagnoses:

- Wet Macular Degeneration (With no previous treatment)
- Diabetic Macular Edema
- Retinal Vein Occlusion
- Retinal Detachment (repaired)

Please call our research department at 239-938-1284 with any questions.

For more details, please visit our website at www.nori.md.

Dr. Tom Ghuman

Retina Unharmed by Impotence Drugs

A new study published in the Archives of Ophthalmology suggests erectile dysfunction drugs, like Viagra and Cialis, don't appear to damage the retina.

"Cialis and Viagra have been linked to visual side effects such as light sensitivity, blurriness and even blue-tinted vision," said Dr. Tom Ghuman of Retina Consultants of Southwest Florida. "But this new study found no important clinical side effects after the use of the drug(s)."

The six month study detected no changes in vision, signs of damage to the retina or intraocular pressure after daily use of the impotence drugs.

The investigation involved healthy men with or without mild erectile dysfunction. They were 30-65 years old with no ophthalmic abnormalities or risk factors. The men were randomly assigned Viagra, Cialis, or placebo. 212 men completed the three month study while 155 of those men were watched for another three months.

"Despite the positive outcome of the study, the sampling was relatively small and involved healthy men with no preexisting eye or vision problems," said Dr. Ghuman. "These results may not be the same for men who have systemic and/or retinal diseases. My best advice: if you are taking one of these medications and notice changes in your vision, see your doctor right away."

Retina Consultants
of Southwest Florida®

Fort Myers
6901 International Center Blvd.
Ft. Myers, FL 33912
(239) 939-4323

Other Office Locations

Cape Coral
106 Del Prado Blvd., S.
Cape Coral, FL 33990
(239) 772-4323

Bonita Springs
Bonita Community Health Center
3501 Health Center Blvd., Suite 2420
Bonita Springs, FL 34135
(239) 939-4323

Naples
2335 Tamiami Tr., N., Suite 209
Naples, FL 34103
(239) 263-3337

Port Charlotte
2525 Harbor Blvd., Suite 302
Port Charlotte, FL 33952
(941) 627-4422

website: www.eye.md

Aspirin Has No Effect on AMD Progression

New study results just released show that prophylactic aspirin therapy does not have an effect on new-onset age-related macular degeneration (AMD).

As sited in Ocular Surgery News Magazine, nearly 40,000 women participated in the Women's Health Study. The study investigated low-dose aspirin therapy and vitamin E and whether they could prevent cardiovascular disease and cancer in those women.

"Because cardiovascular disease and ocular pathology, such as AMD, share common risk factors, researchers theorized that the aspirin therapy could also benefit the eyes as well as the heart," said Dr. Ashish Sharma of Retina Consultants of Southwest Florida. "Unfortunately, that is not the case. After a decade of treatment and observation, almost the same number of cases of advanced macular degeneration appeared in the treated group as compared to the placebo group. Even though aspirin therapy patients had an 18% lower risk of developing advanced AMD, the difference is not statistically significant."

The study authors did note the effect of aspirin may have been modified by the use of multivitamins by study patients. Scientists said they noticed a significant decrease in the risk for developing advanced AMD in participants who did not use multivitamins with aspirin therapy compared to those participants who took multivitamins with the therapy.


Dr. Ashish Sharma

"Be sure to check with your doctor regarding your use of multivitamins and supplements," said Dr. Sharma.

"Science does not know its debt to imagination."
– Ralph Waldo Emerson

Retina Consultants Gives Back

Retina Consultants is proud to announce that we have teamed up with several community organizations to help treat the less fortunate.

All of our physicians see and treat patients who are part of Plan of Collier County, Neighborhood Clinic of Naples, and patients associated with the Charlotte County Health Department.

In the meantime, two of our physicians have partnered with the Lions Club to offer eye examinations and treatment to those less fortunate.

Dr. Ashish Sharma dedicates time each month to work with the Bonita Springs Lions Club. He specializes in retinal exams and treatment for the indigent.

"I see patients who may otherwise not have received the ophthalmic care needed," said Dr. Sharma." "It is very rewarding to share my time and knowledge with people who could potentially lose vision because they can't afford to seek ophthalmic treatment."

Dr. Joseph Walker volunteers with the Naples Nites Lions Club performing retinal related surgeries on patients who can't afford treatment.

The Bonita Springs Lion Club has been a leader in funding eye care in Lee County and surrounding areas. Two years ago, the club created an independent eye clinic for the medically indigent. The facility, which is housed on the campus of the Lions Club at 10346 Pennsylvania Avenue in Bonita Springs, provides comprehensive eye care examinations and therapeutic care for adults and children who meet the economic federal guidelines for care.

Known for working to end preventable blindness, The Lions Club International participates in a vast variety of projects important to their communities. They are the world's largest community service organization with clubs around the globe. Lions are an international network of 1.3 million men and women in 205 countries and geographic areas who work together to answer the needs that challenge communities around the world.

For more information about the Bonita Springs Lions Club, or to volunteer, please call **(239) 992-4011**.