

# OUTLOOK



## September is Sports and Home Eye Safety Month



*On Wednesday, September 23, Dr. Richard Harper, along with Drs. Julie Shelton and Ryan Friedman, hosted a free lunch and learn on sports and home eye safety.*

More than 40,000 people a year suffer eye injuries while playing sports. For all age groups, sports-related eye injuries occur most frequently in baseball, basketball and racquet sports. Almost all sports-related eye injuries can be prevented. Whatever your game, whatever your age, you need to protect your eyes!

In the interest of reducing the occurrence of sports-related eye injuries and blindness among children and adolescents who participate in athletics, Prevent Blindness America makes these recommendations:

- School and youth athletic league programs must educate children, coaches, and parents about the importance of wearing appropriate sports eye protection.
- Appropriate protective eyewear for sports should be chosen only after consultation from an eye doctor, physician, or athletic trainer, and must be appropriate for the particular sport and the child's size.
- Children and adolescents should only wear sports eye protectors that meet the standards set forth by ASTM and ANSI.
- State legislators should adopt legislation requiring the use of protective eyewear among children of any age when participating in medium to high-risk sports through school, youth league and collegiate athletic programs.
- Protective eyewear should be mandatory for athletes who are functionally one-eyed.
- Sports eyewear that does not conform to the standards outlined by ASTM and ANSI should be banned by school, community and collegiate sport programs.
- Funding should be made available to help schools, community based and organized athletic programs pay for sports eye protectors for children who cannot afford them.



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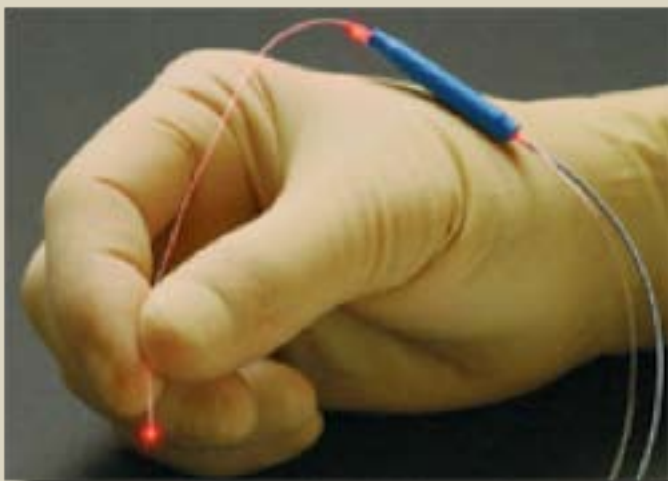
**UAMS**



HARVEY & BERNICE  
JONES EYE INSTITUTE

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES

## New Procedure in Surgical Treatment in Glaucoma: Canaloplasty



*Cannula with lighted tip to identify canal*

A trabeculectomy may effectively lower the pressure, though sometimes at the risk of vision loss and increased risk for infection. Therefore, recent interest has been shifted towards the procedures that do not penetrate the eye, but rather work at the outside eye wall.

Canaloplasty has been one of the latest procedures added to glaucoma surgical techniques to offset the complications of traditional glaucoma surgeries. Rather than removing tissue, the canal (essential part of drainage system) is identified and catheterized with a 250 micron (size of 1/10 cardiac catheter) without penetrating the eye. The canal is expanded circumferentially with a special gel and then a tension suture is placed in the canal which prevents it from collapsing and ensures it to stay open during the surgical procedure.

Dr. Inci Dersu, a glaucoma specialist at JEI, has performed canaloplasty at JEI. Her initial experience with the procedure has been quite positive. She has been impressed with the results at the first post-operative day patient visit. “The eye is quiet and no vision loss, almost as if the patient had no surgery at all. The pressure has come down nicely at the early follow-up. We are waiting to see long term results.” An international study group has released results from a two-year follow-up study recently. This study shows an average of 30 percent reduction in the baseline eye pressure as well as the success to reduce the amount of eye drops used prior to surgery. This latest surgical procedure has been more effective for those that had cataracts which were removed at the time when canaloplasty is performed. According to the researchers, there is a 42 percent reduction in the baseline pressure.

Dr. Dersu is excited that there are more surgical options available for our patients. One of her goals has been to improve or stabilize her patients’ lives without compromising their quality of life. This new surgery seems to fit in that respect.

Retrieved September 5, 2009 from <http://www.oteurope.com/ophthalmologytimeseurope/article/articleDetail.jsp?id=302103>

The **Ophthalmic Medical Technology Program** welcomed the 9th class on August 18, 2009 with a luncheon. The five new students are Aubrey Collachi, Jessica Kelsey, Leanne Robideaux, Kelly To and Lynsey Tolleson. Classes for the new and returning students began on August 24, 2009.

### *2009-2011 OPHTHALMIC MEDICAL TECHNOLOGY STUDENTS*



*Aubrey Collachi*



*Jessica Kelsey*



*Leanne Robideaux*



*Kelly To*



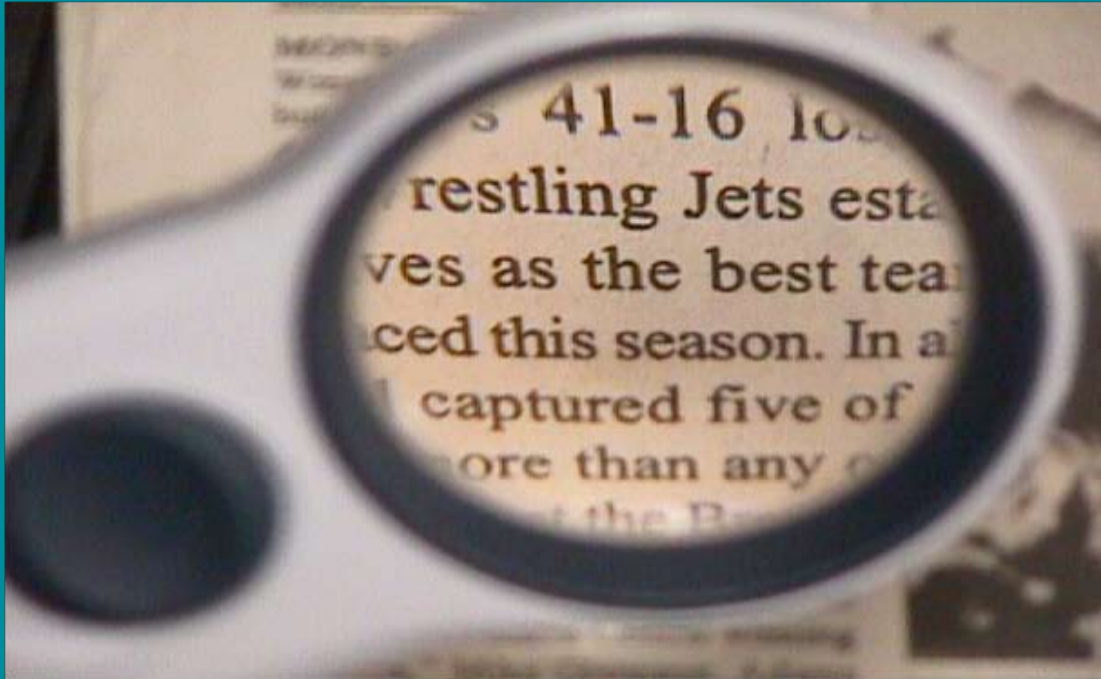
*Lynsey Tolleson*

In September the OMT students assisted with the back-to-school vision screenings for the UAMS Head Start program, which has more than 1,000 three- to four-year-old children enrolled to help prepare them for elementary school. The OMT program has assisted with the required routine vision and hearing screenings each fall since 2006.



## The Low Vision Clinic

*by Donna Mattingly*



“The purpose of the Low Vision Clinic is to help people adapt to vision loss when there is no other standard way to restore their vision,” according to Dr. Richard Harper in a recent interview. Dr. Jennifer Anderson and Dr. Richard Harper are the Low Vision physicians. They perform the initial workup and diagnosis, and make recommendations. “Patients often feel they have been heard for the first time, and they feel understood. Patients need to know that it’s okay to have the emotions they experience, and that we understand and acknowledge that they may feel their life as they knew it may be over.” The Low Vision team wants to give help and hope to patients rather than saying, “There is nothing else we can do for you.” Dr. Harper states, “Instead of patients wishing for how things used to be, we come up with a plan for them on how to deal with this situation; how to live with it; how to use the vision that the patient still has, but in a different way.”

That is where rehabilitation—the key word in the Low Vision Clinic—takes over. Fawnda Steelman is a key person, thoroughly trained in rehab, and works directly with the patients, teaching them how to adapt. She has even been known to make house calls and recommendations for home care and changes needed (lighting, etc.). Leora Hansberry schedules the patients for us. Penny Hinton and Robbie Sanders serve as the Point of Service Coordinators for this clinic, and Meredith James handles the calls coming in through the call center.

“Eccentric viewing” (a technique by which the person looks slightly away from the subject in order to view it peripherally with another area of the visual field) helped a Fairfield Bay retired gentleman who only wanted to play golf and couldn’t because of his vision loss. After treatment at our Low Vision Clinic, this patient said, “Now I can do anything I want except drive (a car).” This result is not always the norm, of course, but this was the result for him after visiting our clinic and following successful rehab with Fawnda, and proof that there can be happy endings.

## **Jennifer Doyle - Enucleator, Arkansas Lions Eye Bank and Laboratory**

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Jennifer Doyle was born and raised in Fort Smith, Arkansas. She graduated from Southside High School in 2002 and continued her education at Oklahoma State University. She graduated from OSU in December 2005 with honors and received a Bachelor of Science in both Biological Sciences and Psychology. In the spring of 2006, she studied abroad at Lund University in Lund, Sweden, with the Bailey Memorial Trust Fund Scholarship. After returning from her semester abroad, she started medical school at UAMS in August 2006.

During medical school, Doyle has served as Class Secretary, Appeals Committee Chairman and Alumni Student Ambassador. She has been involved in several volunteer opportunities, including Smoking Awareness Education for Children, the Student Sight Savers Program and the Student Mentor Program. She was the inaugural recipient of the Annie Schoppach Memorial Scholarship, created for female medical students active in leadership positions. She has also received the T.H. Barton and Luis Zimmerman Endowed Scholarships.

Doyle began working for the Eye Bank in August 2007. She was given the opportunity to help Jason Chang, Ph.D., with a research project, looking at the corneal endothelial cell count of donors with history of diabetes, alcohol consumption or tobacco use. It was her work at the Eye Bank that led to her current interest in a career as an ophthalmologist, and she is now in the process of applying for residency in ophthalmology. She will graduate from the College of Medicine in May 2010.



# ALL EYES ON YOU

KAREN CALL



**What music or books are you currently enjoying?** The Twilight Series, and it's all Donna Mattingly's fault, our resident Vamp(iress).

**Who has most influenced your life?** My two sons. They make me a better person. (You should have known me before I had children.)

**What inspires you?** A problem to be solved, a project to manage, a marathon to run, a 100-mile bike ride to complete. Basically I am motivated by goals. (Surprise, Surprise.)

**Tell us about your family.** I am the second of five children – four girls and one boy. (Poor guy—he once complained to my mother, “I want a top for my bathing suit, too.”) I have two sons. My youngest is an engineer here in Little Rock (gee, I wonder where he got that black and white

thinking from). My oldest is a cook in Fayetteville (I used to cook all day on Sundays for those boys). I have a 4 ½ year old grandson who calls me “Kiki.”

**What do you generally enjoy most when you are away from work?** Running the streets of Little Rock (no, I mean literally running—my friends call me “coach”), biking, sewing, cooking dinner for friends, working on yard projects such as a pondless water feature I just built in my yard with the help of the Labor brothers, you know Manuel Labor and his other brother, Manuel.

**Where would you go on a dream vacation?** I go on my dream vacations every year. I still want to go snorkeling in the Caribbean.

**What do most people not know about you?** That I live for cheeseburgers, French fries and nachos.

*Karen Call is an Administrative Assistant to Drs. Barber, Chacko, Kharod and Thomas. Among the many tasks she performs each day, she is also our JEI fitness guru!*

## Calendar of Events, Birthdays and Anniversaries

by Brenda Hull

### Birthdays

September 2 – Dr. Romona Davis  
September 3 – Dr. Thomas Cannon  
September 4 – Debbie Terry  
September 4 – Deanna Ely  
September 5 – Jamie Green  
September 13 – Staci Grimes  
September 18 – Dr. Joseph Chacko  
September 22 – Karin Aletter  
September 25 – Dr. Michael Wiggins  
September 28 – Dr. Michael Brown  
September 30 – Deborah Troillett  
October 3 – Dr. A. Henry Thomas  
October 6 – Susan Cunningham  
October 7 – Donna Mattingly  
October 13 – Jennifer Doyle  
October 15 – Meredith James  
October 19 – Amanda Dozier

### Anniversaries

September 1 – Dr. Paul Phillips, 12 years  
September 1 – Dr. Jennifer Anderson, 1 year  
September 3 – Kim Carman, 1 year  
September 8 – Dr. Christopher Westfall, 12 years  
September 19 – Angi Eubanks/Covert, 11 years  
September 23 – Ymelda Aldridge, 2 years  
October 1 – Ruslana Tytarenko, 3 years  
October 1 – Dr. Bhairavi Kharod, 2 years  
October 9 – Louise Geer, 3 years  
October 24 – Mary Rinke, 26 years  
October 24 – Deanna Ely, 4 years  
October 30 – Amanda Dozier, 9 years  
October 31 – Allison Johnson, 10 years

# October

				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31 Halloween

**FREE LUNCH & LEARN SEMINAR**

# *Eye Lid Lifts*



**Do your eyelids  
turn in or out?**

**Bothered by eyelashes  
stabbing at your eyes?**

Eyelid surgery can open your world by increasing what you see and giving you more independence. We can help.

**Wednesday, October 21  
11:30am to 1:30pm  
Reynolds Institute on Aging  
Jo Ellen Ford Auditorium**

**Led by Dr. Christopher Westfall  
and Dr. Romona Davis**

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**THE LUNCH AND SEMINAR ARE FREE, BUT REGISTRATION IS REQUIRED.**

Call Anna Latta at 526-6000 ext 2600 or email her at [AMLatta@uams.edu](mailto:AMLatta@uams.edu).