

On behalf of Vision Expo, we sincerely thank you for being with us this year.

Vision Expo Has Gone Green!

We have eliminated all paper session evaluation forms. Please be sure to complete your electronic session evaluations online when you login to request your CE Letter for each course you attended! Your feedback is important to us as our Education Planning Committee considers content and speakers for future meetings to provide you with the best education possible.



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Financial Disclosure – Justin Schweitzer, OD, FAAO

- Alcon – C/L
- Aldeyra - C
- Allergan – C/L
- Bausch + Lomb – C/L
- Bruder - C
- Sight Sciences – C/L
- Dompe – C/L
- Zeiss – C/L
- Visus - C
- Science Based Health – C
- Tarius – C/L
- Santen - C
- Sun – C/L
- Reichert - C
- Glaukos – C/L
- MedPrint – C
- LVC – C/L
- Avellino – C
- Ivatic bio – C
- Ocuphire – C
- Viatrix – C
- Thea – C
- Heru – C
- Eyenovia - C

All relevant relationships have been mitigated

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Beyond Dropout and Defects

Adjunctive Technology and the Importance of Quality of Life in Glaucoma

Justin Schweitzer, OD, FAAO
Vance Thompson Vision
Optometric Externship Director

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Case

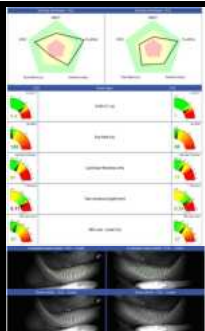
- 57-year-old Caucasian male
- Referred for GLC Eval
- Medical History: HTN, Hyperlipidemia
- BCVA: 20/20 -1 OU
- TMAX: 24 mmHG OU
- Medications: None

- IOP: 21 mm Hg OD; 21 mm Hg OS
- C/D: 0.60/0.60 OD 0.70/0.70 OS
- Pachymetry: 553 OD; 543 OS
- Corneal hysteresis: 8.0 OD 7.4 OS
- Gonioscopy: Open to CB OU w/ trace pigment in TM
- SLE: See next slide(s)
- VF's - See next slide(s)
- OCT's - See next slide(s)
- ONH - See next slide(s)

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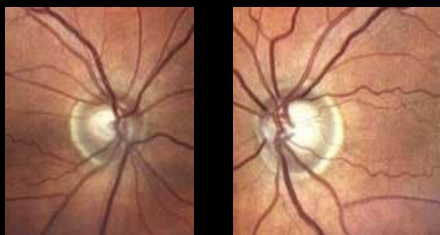
Ocular Surface Assessment

- Speed Score: 9/28
- Tear Osmolarity:
 - OD: 308
 - OS: 315
- MMP-9: Positive OU
- Lids: Normal, (-) blepharitis
- Meibomian glands:
 - Normal gland secretion

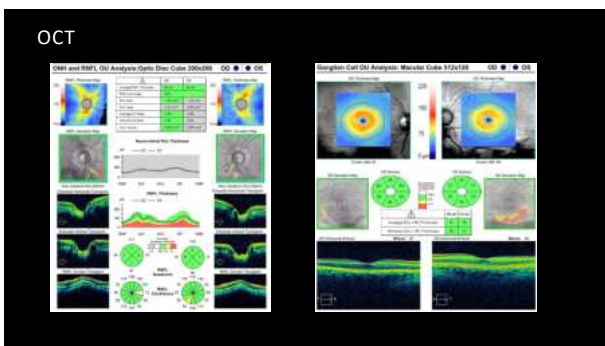


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ONH's



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Treatment Considerations

1. Must Treat the Dryness!
2. Glaucoma Treatment?
 - Monitor
 - Glaucoma Drops
 - SLT
 - Drug Delivery
 - Surgical Intervention

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Impact of Multiple Glaucoma Medications on Dry Eye Disease

Number of Drops	Incidence of DED among 61 glaucoma patients ¹	Incidence of DED among 19,665 glaucoma patients ²
1 	11%	51%
2 	39%	55%
3+ 	40%	60%

1. Fakhour RD et al. Cornea. 2010;29:1418-1421. 2. Shi C et al. Graefes Arch Clin Exp Ophthalmol. 2008;46:1593-1601. 3. Leung EW et al. J Glaucoma. 2008;17:350-355.


Slide Courtesy of Paul Singh MD

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Effects on Meibomian Glands

Effect on lids/meibomian glands
 Study on glaucoma patients 18mo stable treatment with different medications.
 Reduced number of meibomian glands
 Reduced numbers of acinae and increased dysfunction in patients
 Patients on multiple medications with preservatives = increased dysfunction and reduced number of acinae

	OSDR score	OSD	IT	Control staining	Meibin score	Meibin score
Control	4.5±0.8*	12.6±1.1*	18.8±0.9*	9.7±1.4*	0.15±0.05*	1.36±0.31*
Group 1	16.8±1.9***	2.2±0.9**	9.2±0.7**	1.9±0.3	0.48±0.12	2.05±0.51
Group 2	16.3±1.9***	2.1±0.9**	9.2±0.7**	1.9±0.3	0.48±0.12	2.05±0.51
Group 3	16.3±1.9***	2.1±0.9**	9.2±0.7**	1.9±0.3	0.48±0.12	2.05±0.51



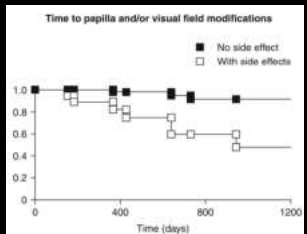
*p<0.05 vs group 1, 2 and 3. **p<0.05 vs group 2 and 3. ***p<0.05 vs group 1, 2 and 3. OSD = Ocular Surface Disease Index. IT = Intraocular Temperature. Meibin score = Meibomian Gland Dysfunction Index. OSDI = Ocular Surface Disease Index. OSDI = Ocular Surface Disease Index. OSDI = Ocular Surface Disease Index.

Agarwal L, et al. Br J Ophthalmol 2013.

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Treatment Challenges

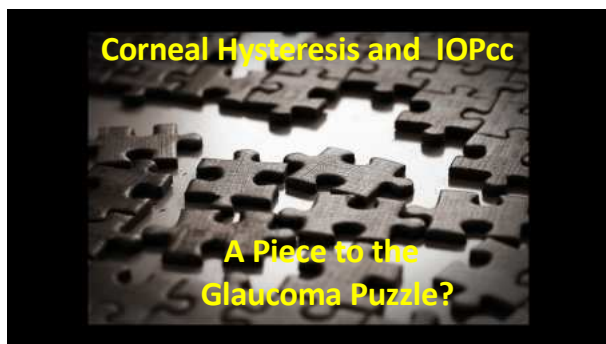
Time to papilla and/or visual field modifications



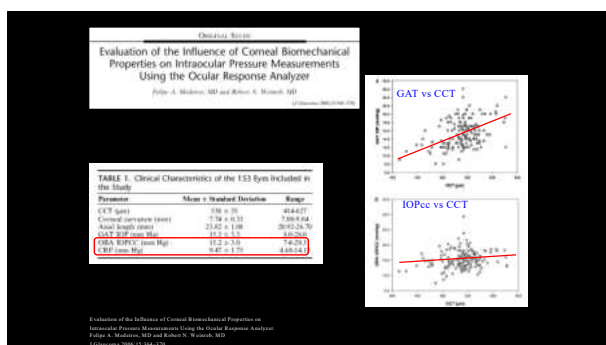
■ No side effect
 □ With side effects

*Doris, Philippe, et al. Medical outcomes of glaucoma therapy from a nationwide representative survey

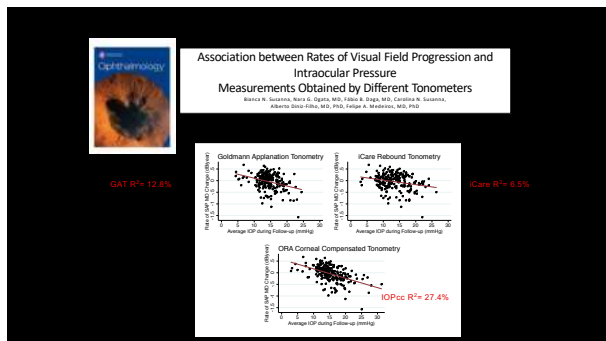
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Corneal Hysteresis (CH)

Corneal Hysteresis reflects the ability of the corneal tissue to dissipate energy¹
 Function of viscoelastic damping:

Provides insight into ocular properties that were not previously understood or conceived of

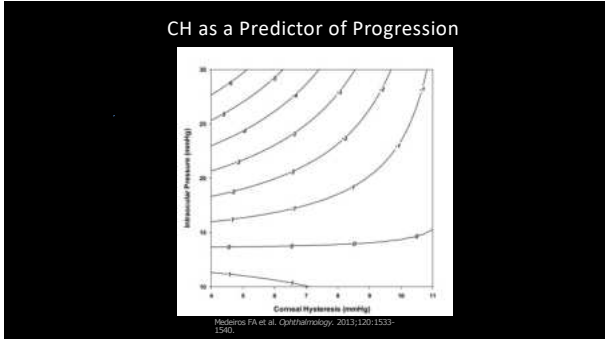
1. Lynn DA. J Cataract Refract Surg. 2005;31:1549-1550.
 2. Dupps WJ Jr. J Cataract Refract Surg. 2007;33:1499-1504.
 3. Glass DH et al. Invest Ophthalmol Vis Sci. 2008;49:3210-3220.

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Average CH in Normal Subjects

	N	CH
Brazil	105	10.1 +/- 1.8
UK	272	10.2 +/- 1.2
China	125	10.9 +/- 1.5
Japan	204	10.2 +/- 1.3
Spain	88	10.8 +/- 1.5
USA	44	10.5 +/- 1.2

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Corneal Hysteresis in Glaucoma
 Predictive of conversion to Glaucoma in pre-perimetric Glaucoma Suspects

Purpose: To investigate the role of CH as a risk factor for **development** of glaucoma in a prospective longitudinal study.

Results: Fifty four (19%) of the 287 eyes developed repeatable visual field defects during a 4 year follow-up.

CH was independently predictive of conversion to glaucoma even when adjusted for age, IOP, and CCT.

A Prospective Longitudinal Study to Investigate Corneal Hysteresis as a Risk Factor for Predicting Development of Glaucoma
 Am J Ophthalmol 2018;161:148-152; Fain Zhu, Alvaro Orozco, Lina M. Jorgensen, Felipe A. Medina

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Case Summary:

Ocular Surface Treatment:
 1. Immunomodulator bid OU
 2. Punctal Occlusion

IOP @ 6 weeks:
 16 mm Hg OD; 15 mm Hg OS

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Case- Demographics & Entrance Testing

- Glaucoma Evaluation – patient had previous CEX
- IOPcc → 14, Tmax 20 GAT → 14
- Meds: Artificial tears, PGA qd OU, fixed combo bid OU
- PACH → 550 CH → 7.2
- C/D → 0.75v CH → 7.2
- Gonio: open to CB OU, mild pigment

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Ocular Surface Assessment

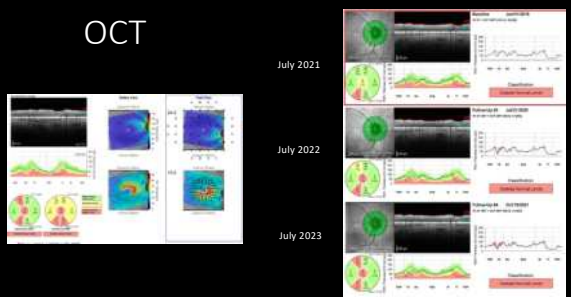
Speed Score: 12/28
Tear Osmolarity:
OD: 320
OS: 321
MMP-9: Positive OU
Lids: Normal, (-) blepharitis
Meibomian glands:
Turbid, minimal secretion



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OCT

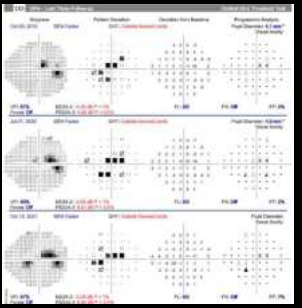
July 2021
July 2022
July 2023



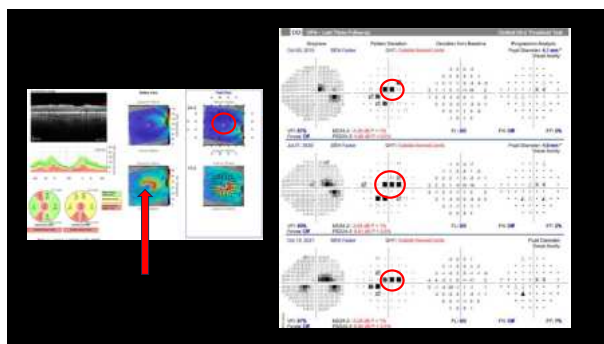
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VFT

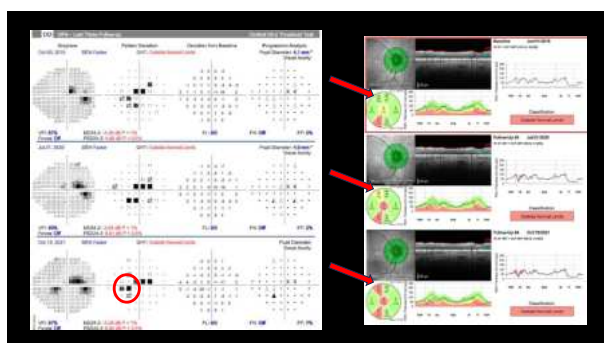
July 2021 PSD 4.96
July 2022 PSD 5.51
July 2023 PSD 6.82



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Treatment Considerations

1. Must Treat the Dryness!
2. Glaucoma Treatment?
 - a. Progression with Low IOP?
 - b. Minimize Medication Burden?
Drug Delivery, Surgery, SLT
 - c. CH Low?

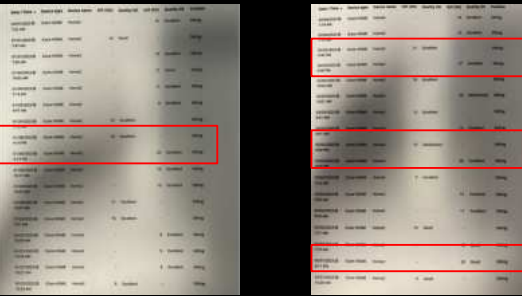
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Home IOP Monitoring

A device is intended as an adjunct for monitoring IOP of adult patients (self-use). The tonometer is designed for use at home or on the go.



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Corneal Hysteresis in Glaucoma Association with Normal Tension Glaucoma

- 82 progressing eyes of NTG patients under treatment
- Eyes were split into two groups: higher & lower than average CH

	β (95% CI)	P-value
Baseline VF MD (dB)	1.18 (0.96 to 1.44)	0.12
CCT (μm)	0.99 (0.97 to 1.03)	0.30
Subfoveal choroidal thickness	0.99 (0.98 to 1.00)	0.08
RNFL thickness (average)	0.96 (0.92 to 0.99)	0.04
RNFL thickness (temporal)	0.97 (0.94 to 1.01)	0.09
RNFL thickness (inferior)	0.98 (0.96 to 1.01)	0.13
Corneal Hysteresis (mmHg)	0.12 (0.17 to 0.62)	<0.01

- Of the 39 eyes with low CH, 26 (66.7%) showed progression
- Of the 43 eyes with high CH, 15 (34.9%) showed progression

These findings suggest that CH can be used as one of the prognostic factors for progression, independent of corneal thickness or IOP

Proc Ocul Optomol. 2015; Jan 2; 6(1): 39-44
© 2015 Optometric Society of America

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Corneal Biomechanics and Visual Field Progression in Eyes with Seemingly Well-Controlled Intraocular Pressure

460 eyes of 334 glaucoma patients
Follow-up – 4.3 years
Well controlled if IOP < 18 mm HG

CH (8.6 vs 9.4)
CCT (515 vs 531)

179 eyes well controlled
42 (23.5%) of those eyes had VF progression

68% higher risk of progression

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Ocular Spraying

- Neurostimulation
- IPL
- Heat & Expression
- Nutraceuticals
- Oral Medications

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Case Summary:

Ocular Surface Treatment:

1. Varenicline bid
2. Punctal Occlusion
3. Heat and Gland Clearing
4. Maintenance Therapy

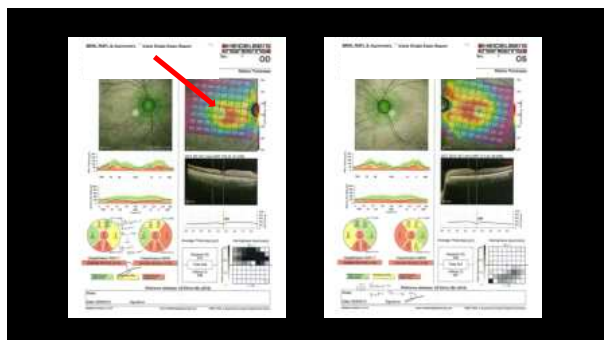
IOP @ 3 months:
13 mm Hg OD; 13 mm Hg OS
No medications

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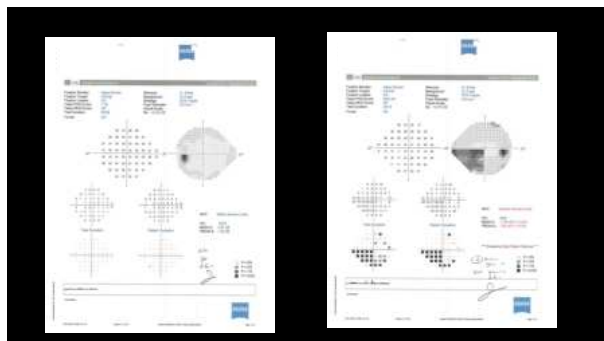
Case

- **56-year-old Caucasian female**
 - **Medical History:** HTN
 - **Family History:** HTN, DM
 - **BCVA:** 20/20 +1 OU
 - **TMAX:** Unknown
 - **Medications:** None
- **IOP:** 23 mm Hg OD; 18 mm Hg OS
 - **C/D:** 0.65/0.65 OD 0.65/0.65 OS
 - **Pachymetry:** 545 OD; 545 OS
 - **Corneal hysteresis:** 10.5 OD 10.5 OS
 - **Gonioscopy:** Open to CB OU w/ trace pigment in TM
 - **SLE:** Unremarkable
 - **VF's** – See next slide
 - **OCT's** – See next slide

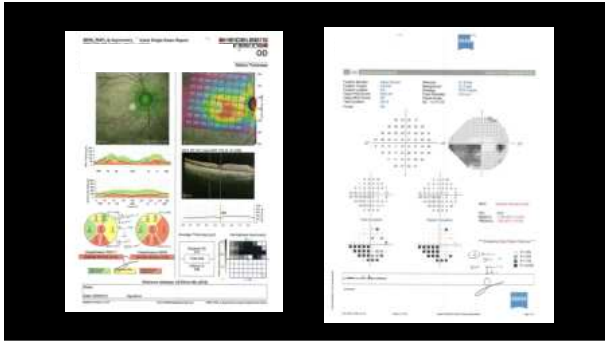
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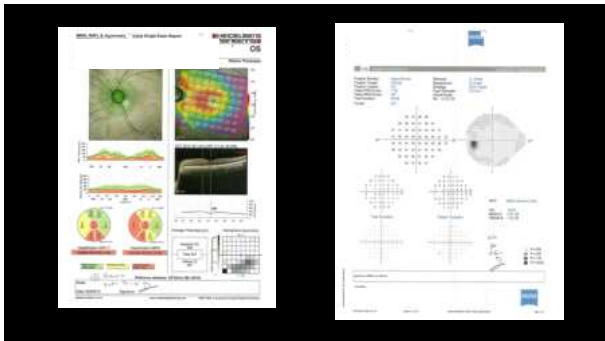
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Case Considerations

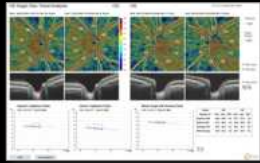
- Other Technology To Assist?
- Understanding Artifacts
- Understanding Red vs Green Disease
- Repeat Testing

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OCT Angiography: the Next Chapter

Correlates well with OCT Technology

Utilization:
High Myopia
Advanced Glaucoma




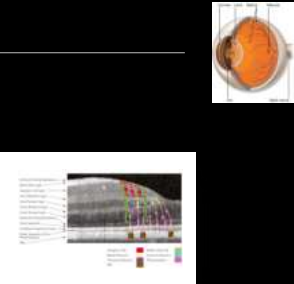
Reprinted courtesy of Eric D. Hudisheim, MD and Michael R. Goldbaum, MD of Shiley Eye Institute, University of California at San Diego, La Jolla, CA

Rao H., Pradhan Z, Suh MH, Moghimi S, Mansouri K, Weinreb RN. Optical Coherence Tomography Angiography in Glaucoma. J Glaucoma. 2020 Apr;29(4):323-324. doi: 10.1097/IJG.0000000000001463. PMID: 32053551; PMCID: PMC717362.

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Electroretinography

Measures the electrical responses of various cell types in the retina, including the photoreceptors (rods and cones), inner retinal cells (bipolar and amacrine cells), and the ganglion cells in response to a stimulus.

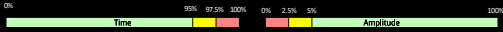


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Interpretation

How should I think about yellow/red results?

Yellow and red results require closer attention and other tests to confirm disease.



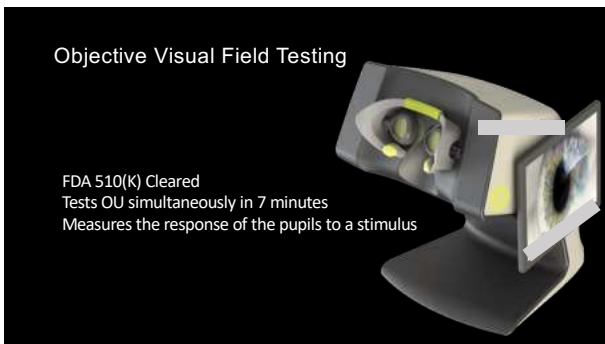
SLOW IMPLICIT TIMES

- Too Slow: Possibly indicative of cellular stress

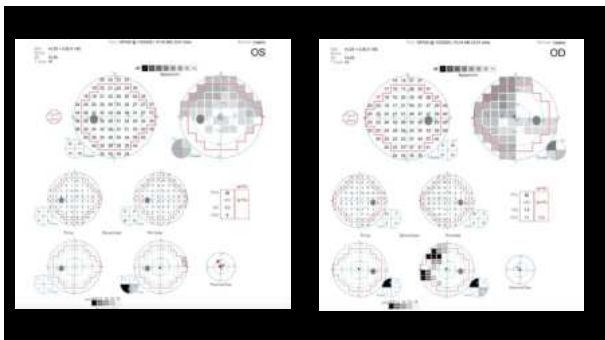
AMPLITUDES

- Too Small: Possibly indicative of cell damage

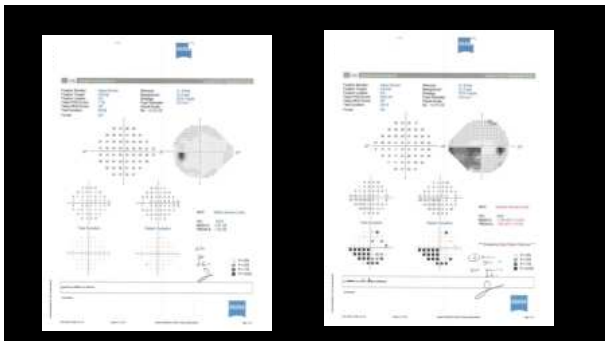
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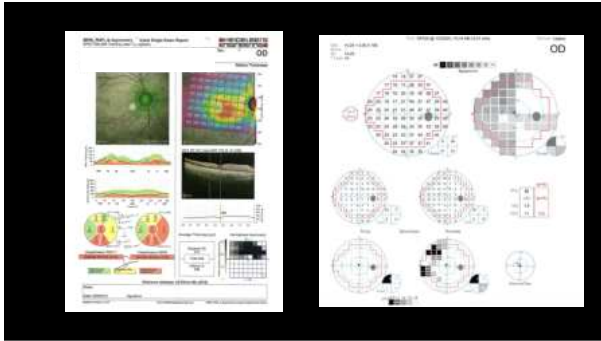
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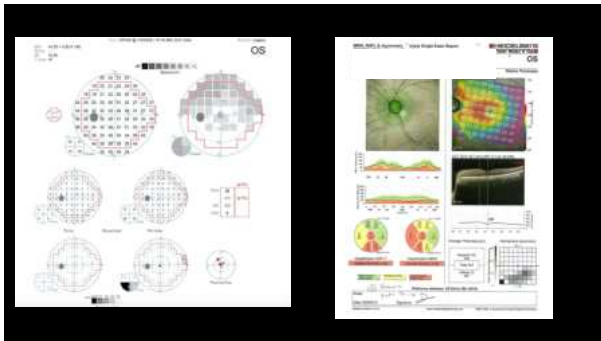
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VS

SLT ?

Case Summary:

IOP @ 6 weeks:
13 mm Hg OD; 13 mm Hg OS
No medications

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