Date: Tuesday, January 12 2016
From: Sandhya Shekar (sandhya.shekar@indiavisioninstitute.org)
Subject: Amblyopia Treatment Goes High-tech

Programmable electronic glasses help improve vision in children with amblyopia.

A new study, presented at the American Academy of Ophthalmology annual meeting in November, found that programmable electronic glasses help improve vision in children with amblyopia just as well as patching. Researchers at the Glick Eye Institute at Indiana University completed a randomized clinical study of 33 children with amblyopia between the ages of three and eight who wore spectacles to correct their vision.

One group was patched for two hours daily, while the other wore occlusion glasses for four hours daily. During the study, the lens over the eye with better vision switched from clear to opaque every 30 seconds. The study found both groups gained two lines on a reading chart after three months to treatment.

“When you talk to adults who had to do patch therapy as a child, they universally comment about how much they hated it, and with good reason,” said Daniel Neely, MD, a pediatric ophthalmology professor at Indiana University who led the study. With the electronic occlusion glasses, “the upside is, because the good eye is covered for only 30 seconds at a time, the child may be less distressed and more compliant with the treatment. Not only does this make it more ‘fun’ or tolerable, but it may improve outcomes if the compliance is better.”

While the study only involved children with moderate amblyopia (20/40 to 20/100), the researchers hope to study effects of the new treatment option on patients with worse amblyopia or those whose treatment had failed in the past. They also hope to explore the outcomes after shortening the treatment intervals, possibly making “the treatment even more tolerable with almost seamless transitions and limited impact on the child’s function at play and school,” Dr. Neely said.

The glasses used in the study, Amblyz occlusion glasses (XpanD), have been approved by the FDA as medical devices

Article Source: http://www.reviewofoptometry.com/content/c/58442/
IACLE to welcome new Fellows from around the world

Contact lens educators in countries from Jordan to Ecuador could soon be adding letters after their names having successfully completed the International Association of Contact Lens Educators’ latest Fellowship Exam.

Held every two years, the Fellowship Exam took place in November 2015. Candidates with a successful outcome who have been IACLE members for 12 months or more can now apply to become Fellows of IACLE and use the affix FIACLE in recognition of their contact lens knowledge.

A total of 131 members from 29 countries in all three of IACLE’s global regions sat the latest exam and 39% were successful. More than half of candidates (56%) were from IACLE’s Global Priority Countries.

The Asia Pacific region fielded the most candidates, with 89 in total, followed by the Americas (29) and Europe/Africa-Middle East (13). China (24) and India (23) were the countries contributing the largest numbers, followed by Korea (18). The 2015 Fellowship Exam also saw countries such as Oman and Malawi represented.

A majority of candidates (107) were Educator Members, working full time or part time at a recognised teaching institution, and 24 were Associate Members of whom 13 worked in industry. All IACLE’s Platinum and Silver Sponsors fielded candidates. Most of those sitting the exam were optometrists (62%) although 8% were ophthalmologists.

The highest overall mark was scored by Educator Member Febry Corina, who teaches at Akademi Refraksi Optisi (ARO) Padang in Indonesia. Febry was one of seven candidates who re-sat the Fellowship Exam to refresh and update their knowledge, and is currently a FIACLE.

Two Educator Members from Korea who sat the exam for the first time took joint second place: Joonho Park of the Eulji University in Daejeon and Hansarang St Mary’s Eye Clinic, and Seongin Heo of Daegu Catholic University.

IACLE’s Global Education Manager Lakshmi Shinde commented: 'The Fellowship Exam is a challenge for any contact lens educator around the world. It’s a milestone that every contact lens educator wants to cross successfully in his/her career. IACLE congratulates all those who have successfully cleared the exam and wishes all of them a great future in the field of education and contact lenses. Wishing you all many more laurels in the profession in the years to come!'

The 2015 Fellowship Exam was the 10th administration. The next exam will be held in November 2017. Anyone interested should start to think about engaging with the IACLE’s Distance Learning Program now to aid their preparation for the next Fellowship Exam.

Click here for full details of the IACLE Fellowship Program.

Information on all IACLE activities and membership benefits is available at www.iacle.org.
UV rays damage your eyes, but many people ignore this

Unless you work outside for a living you will have experienced nearly 80% of your lifetime UV exposure by the age of 18! (pediatrics.org) As per the advisory of the American Optometric Association, Children’s crystalline lenses are more transparent than that of an adult making them twice as vulnerable to UV exposure.

**These are the types of UV rays that you should worry about!**

**UVA** rays have the longest wavelength (between 400nm and 320nm) allowing them to penetrate deep into the skin. This is the type of UV used in tanning beds where it is 12 times stronger than what you get from the sun. People who use tanning salons are 3 times more susceptible to develop squamous cell carcinoma.

**UVB** rays is another type of ultraviolet ray that you should be wary about. UVB rays are not just the cause of sunburn, wrinkles and photoaging, but skin cancer as well. Although they have a shorter wavelength (320nm to 290nm) they are more damaging than UVA rays.

**UV rays affect the different parts of your eyes**

**Eyelids** - 10% of skin cancer patients are suffering from eyelid cancer. 93% of eyelid cancer patients suffer from BCC, 5% are suffering from SCC, and 1% have melanoma.

**Conjunctiva** - Pterygium, Pinguecula, Conjunctival melanomas People suffering from atypical mole syndrome are highly susceptible to an occurrence.

**Iris** - Studies show that light-colored eyes are associated with increased risk or rare eye cancers such as iris and uveal melanomas.

**Lens/Crystaline lens** - UVB exposure amounts to around 12% of cataract cases.

**Retina** - Although macular degeneration is age-related, it is believed that is UVA is a potential cause due to accumulated UVA.

**Cornea** - Keratitis (or photokeratitis) also known as a sunburn of the eye, or snow blindness. Snow and water sport enthusiasts are advised to wear polarized sunglasses with a UVB block, even better if mirrored.

**Other benefits of sunglasses**

- Prevents dry-eye syndrome
- Reduces glare
- Less squinting & Eye strain
- Alleviates jet lag- Chris Idzikowski further explained “Wearing Sunglasses 2 to 3 hours before the flight and during your overseas flight alleviates jet lag.” (More of this [here](#))
Sunglasses health benefits are enhanced through strict manufacturing process!

There are different processes that manufacturers strictly adhere with to be able to offer the best sunglasses with features that work for your eyes.

**UV Protection Markings** - Most designer sunglasses come with a familiar CE mark (which means Conformité Européene in French or European Conformity in English) on the temple which indicates standard UV protection or 99% UV protection. This means that less than 5% of UV rays under the 320nm wavelength only passes through the lens. “UV 400” sign on the labels of your shades – this means no UV Rays with 400 nm wavelength and below is allowed to pass through the lens.

**Darkness of The Tint** - The darker the tint the more soothing and relaxing to the eye. Combined with a mirror coating or a backside anti-reflective coating for the glare works best.

**Types of lenses and how they work to improve sunglasses health benefits:**

**Tinted Amber Lens** – They provide extra protection against blue light and are worn by outdoor enthusiast (surfers, drivers and skiers), protecting them from UVB Ray reflection from snow, haze and water.

**Polarized Lens** – Polarized sunglasses do not offer added UV protection unless the lens material is polycarbonate. However, it eliminates sun glare completely, thus reduce squinting of the eye. Consider glare reflective lens or polarized lens for optimal performance when on the road, or skiing downhill.

**Photochromic Lens** – Modern photochromic lens are made of high quality plastic which contains naphthopyrans, a carbon-based molecules that react to UV Rays. The reaction causes the lens to darken when exposed to sunlight and clears when light is low.

**Trivex & Polycarbonate lens** – Although trivex lens offers crisper vision than polycarbonate lens, they are both designed to endure impact when engaging in extreme events.

**Mirrored lens** – Very effective type of tint when it comes to light reduction and glare reduction.

**Gradient Tinted lens** – Single-gradient lenses are best for driving and reading since it is dark at the top area and light on the bottom area.


Date: Monday, 8 February 2016
From: Sneha A (sneha.krishnan@indiavisioninstitute.org)
Subject: Zika Virus Damaging Eye Development in Unborn Babies

Macular atrophy is being reported in children born in Brazil with severe birth defects after exposure to the Zika virus in utero.
Two girls and one boy with microcephaly have had their eyes analysed by researchers from Brazil’s Federal University of Sao Paulo and HOPE Eye Hospital.

All three infants were discovered to have gross macular pigment mottling in the ocular tests, including biomicroscopy and a fundus examination. These findings were published in a correspondence paper in The Lancet last month.

The babies were also found to have suffered loss of the foveal reflex – critical for central, fine-detail vision – and fundoscopic alterations in the macular Region. One child also had well-defined macular neuroretinal atrophy.

Paper authors Camila Ventura, Mauricio Maia, Vasco Bravo-Filho, Adriana Gois and Rubens Belfort Jr said: “To our knowledge, this is the first report of ocular findings in infants with microcephaly born after the Zika virus outbreak.”

This week the World Health Organization declared the current outbreak a Public Health Emergency. The virus, which is primarily spread by a tropical mosquito species, is now in 25 countries across Central and South America.

Symptoms of the typically mild illness include conjunctivitis, fever, rashes and joint pain. However, it has been linked to birth defects in the infants of pregnant women who contract the disease at any stage of pregnancy.

There is currently no specific treatment or vaccine for the infectious disease. Prior to this year’s outbreak, Zika virus had been seen in parts of Africa, Southeast Asia and the Pacific.

As well as vision loss and intellectual disabilities, babies exposed to Zika virus are also thought to suffer hearing loss and seizures.


Original article source: http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(16)00006-4/fulltext

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From: Hari Krishna (harikrishna@lvpei.org)

Subject: Optometrist (Job Opening)

The L V Prasad Eye Institute (LVPEI) is seeking to hire bright and enthusiastic Optometrists for their patient care services at our Kode Venkatadri Choudhary campus, Vijaywada, Andhra Pradesh. The candidate shall be engaged in managing patients visiting our out-patient and diagnostics services at the campus.

Candidates will require to apply with their latest copy of resume with a neatly drafted cover letter to Mr Hari Krishna at harikrishna@lvpei.org and Mr P V Kiran at pvkiran@lvpei.org Candidates will undergo a series of interviews and a clinical assessment (wherever applicable) before being selected for these positions.

LVPEI offers excellent career opportunities for optometrists in patient care, academics (research and teaching) and administration. The selected candidate shall have the
opportunity to interact world-class faculty at the institute and visiting faculty from outside of the institute. The recently revised financial package for this position are on a very competitive scale and at par or above with market offerings.

**Location**
L V Prasad Eye Institute Kode Venkatadri Chowdary Campus Tadigadapa, Vijayawada Andhra Pradesh, India

For further information, please write to harikrishna@lvpei.org

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