Date: 28 January, 2017
From: Nandita Barman (nanditabarman@gmail.com)
Subject: Collaboration to Enhance Optometry Education in Europe and Beyond

Researchers from City, University of London are collaborating with optometry schools internationally to enhance optometric education. Working with schools in the UK, Norway, Spain, the Netherlands, Israel and India, the OCULUS consortium aims to reform optometry curricula and to introduce evidence-based practice.

The aim is to bring optometry education in partner institutions in line with the high standards set by the European Council of Optometry and Optics. The City team includes Dr Catherine Suttle, Dr Byki Huntjens and Professor John Lawrenson from the Division of Optometry and Visual Science, who are working with three institutions in India, three in Israel and four in Europe. With their partners, they are developing content and teaching strategies with the eventual aim that the non-European partners will obtain the gold standard European Diploma in Optometry (DipE).

The OCULUS consortium believes that the majority of blindness and vision impairment can be avoided by good eye and vision care and in many regions optometrists are the primary providers of this service. It is hoped that through reforming the curricula, new graduates from the partner institutions will be equipped with the skills to help prevent the onset of such visual disorders.

The Israel Council of Optometry and the Association of Colleges and Schools of Optometry in India are full partners of the project with the European Academy of Optometry and Optics and the Norwegian Association of Optometry acting as associate partners.

The organisations will ensure that OCULUS results are distributed globally for maximum impact. For the complete article, please visit: https://www.aop.org.uk/ot/in-practice/career-development/2017/01/20/collaboration-to-enhance-optometry-education-in-europe-and-beyond

Date: 2 February, 2017
From: Sudipta Samanta (sudiptaboptm@gmail.com)
Subject: Optometry's Role in Preventing Falls in Elderly Patients
In an often-cited study published in the *Journal of American Geriatrics Society*, researchers randomized 616 subjects to undergo comprehensive eye exams, including any necessary spectacle correction and appropriate referrals to ophthalmology or occupational therapy, versus care as usual.

"What they found—or at least what is quoted—is that falls and fractures were more frequent in the intervention group than in the control group in the first six months, although there was no difference in the second six months. I don’t think this is what the investigators set out to find,” says Dr. Leat.

However, only 44 percent of the intervention group actually underwent some form of therapy. “And only 30 percent received new glasses. On the other hand, 72 percent of the control group visited the optometrist or ophthalmologist in that time period. This illustrates a confounding factor—crossover or contamination between the two groups. And it illustrates the difficulty of planning these studies. What is likely to happen is that the control group might be more likely to get an eye exam themselves—it triggers their memories.”

Furthermore, subjects with major changes (0.75 D or more in sphere or cylinder) had more falls. Accordingly, she says that when it comes to prescribing, “The one thing I believe is useful from that study is to try to avoid larger changes in power and larger axis changes as well. That means we could be giving a partial prescription to these patients if they have a change in fraction. That probably means that we need to see them more frequently. For example, if they are having an increase in their hyperopia or moving towards myopia, we ultimately need to keep up with that refractive change.”

While prescribing glasses, if it’s a change in the hyperopic direction, we can say, 'This is going to make things look bigger and closer to you. You might find that you miss an object on a table, or a step, so be extra careful.' And that adaptation period might be longer than two weeks for some of our older patients.”

She also suggested not giving new progressive-addition lenses (PALs) or bifocals to elderly patients, especially those at risk of falls. “And we don’t want to change that lens design unless we have a very good reason. If you really are going to give new PALs to a patient in this age category, then a soft design, and a shorter corridor, is recommended.”

For the complete article, please visit: [http://optometrytimes.modernmedicine.com/optometrytimes/news/optometry-s-role-preventing-falls-elderly-patients](http://optometrytimes.modernmedicine.com/optometrytimes/news/optometry-s-role-preventing-falls-elderly-patients)

Date: 8 February, 2017
From: Phani Krishna Athreya (pkatherya@ggn.amity.edu)
Subject: New Research Designed to Open Eyes on Space Travel and Microgravity

In space, during long-duration flight, astronauts experience changes to their bodies—including globe flattening of their eyes—due to prolonged weightlessness in space. Bone density drops. Muscles lose strength. And body fluids, instead of shifting generally downward toward the feet under the force of gravity, shift upward toward the head. This fluid shift can set the stage for the production of ocular anatomic anomalies that may lead to chronic visual acuity changes during and after long-duration space flight.
Those anomalies might include disc edema, globe flattening, choroidal folds, and nerve-fiber-layer thickening.

"In 2011, a report from the Space Medicine Division of the National Aeronautics and Space Administration proposed that elevated intra-sheath cerebrospinal fluid pressure (CSF) within the orbit was a possible mechanism that might explain optic disc edema, globe flattening and other findings reported in astronauts during and after long-duration space flight," says C. Robert Gibson, O.D., who provides eye care at NASA’s Flight Medicine Optometric Clinic at the Johnson Space Center in Houston, Texas. He adds, "This elevation in CSF pressure within the optic nerve sheath is thought to be caused by a rise in intracranial pressure transferred down the optic nerve sheaths from the brain and/or by the sequestration of fluid within the nerve sheaths as a result of localized events occurring at the orbital level with or without a rise in intracranial pressure.

What doctors of optometry should know
An important takeaway is—unless a solution can be found—astronauts will continue to report blurred vision and anatomic changes to their eyes during long-duration space flights. "These changes will undoubtedly result in visual acuity anomalies in some space travelers that, while correctable, may be unpredictable in magnitude," Dr. Gibson says. "As space travel becomes more commonplace and available to larger numbers of people, it would be appropriate for optometrists to be familiar with the possible impacts of space travel on the visual acuity of these space travelers."


Date: 16 February, 2017
From: Nirmal Debnath (debnathnirmal2016@gmail.com)
Subject: Health Matters: How an Eye Exam Can Detect More Than a New Prescription

When doing our everyday activities like reading or driving, we may notice when our vision begins to make a significant change. But getting a checkup with an optometrist may reveal much more than you might think.

Eye sight is one of the senses that guide you through life. "The interesting thing about the eye is really it’s the only place in the body that you can evaluate the blood vessels without doing some sort of invasive surgery," said Dr. Alexander Moses, an Optometrist with Essentia Health.

It’s in retina where your optometrist can find symptoms of a common but life changing condition.

Diabetes
The optometrist can see signs of Diabetes before there is any change to your vision. “It can be anything from bleeding in the back of the eye to blockages," he added. Dr. Moses said he feels like a gatekeeper in a sense, because he may be the one bringing up the possibility for the first time to the patient. “It happens quite often which, you know, obviously isn’t always the easiest conversation,” he said.
Dr. Moses recommended you see your optometrist once a year, especially if you have other risk factors for diabetes. It will only take about one hour of your time.

For the complete article and video, please visit: [http://www.kvrr.com/2017/02/15/health-matters-how-an-eye-exam-can-detect-more-than-a-new-prescription/](http://www.kvrr.com/2017/02/15/health-matters-how-an-eye-exam-can-detect-more-than-a-new-prescription/)

Date: 8 February, 2017
From: Paula Mehta ([info@optometrycouncilofindia.org](mailto:info@optometrycouncilofindia.org))
Subject: Optometry Council of India (OCI): World Sight Day Event Video

Optometry Council of India (OCI) celebrated World Sight Day through a Public Awareness Campaign regarding eye care. This activity was done in collaboration with Indian Optometry Federation (IOF) and Association of Schools and Colleges of Optometry-India (ASCO). The activity was supported by three industry sponsors: Alcon, Bausch&Lomb and CooperVision India.

To view the video, please click here [https://www.youtube.com/watch?v=8-f761AgNMs](https://www.youtube.com/watch?v=8-f761AgNMs)

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