



RETINA : an insight

The official e-Newsletter of the VITREO RETINAL SOCIETY - INDIA

Vol. II - Issue 1 January - March 2009

Official Website: <http://www.vrsi.in/>

**CENTRAL THEME:
SMOKING CAUSES
BLINDNESS !!!**

From the President's Desk.....

Dear Friends,

Greetings for the New Year!

As I take over the reins from my illustrious predecessor and human dynamo, Dr. S. Natarajan, I feel privileged to be at the helm of this wonderful society. There is some apprehension too -whether I would live up to the expectations of our members and build upon the good work done by the stalwarts who have led our society since its inception in 1992.



Dr. Cyrus M. Shroff
President, VRSI

The XVIIth Annual Conference of the VRSI in the picturesque setting of Raichak was a great success. The scientific presentations were of a high order and trade participation was good without being intrusive. The cultural programme and entertainment was excellent. In keeping with the tradition of our annual meetings, a number of delegates were accompanied by their spouses/families. The Local Organizing Committee did a great job. Three cheers for them.

The next Annual Conference will be held in Palampur, Himachal Pradesh from 28th to 30th November 2009 and we will give you more information about this in subsequent issues of this Newsletter.

These are exciting times to be a Vitreo-Retinal Specialist. Knowledge is fast expanding, new frontiers like "Gene therapy" and "Nanotechnology" are becoming realities and a host of new therapeutic agents and instruments have become available with a number of others showing promise for the coming years. This has resulted in improved results but at the same time, has altered the relationship between industry, the retina specialist and the patient.

The challenge before us is three fold: (1) to sift the chaff from the grain by independently evaluating the scientific evidence (2) not allowing economic issues and pressures to influence patient care decisions and (3) not losing the human touch.

Through this Newsletter I will be reaching out to you all for thoughts and ideas about our society - its goals and activities and how the society can best serve the interests of its members and our *raison de etre* (the reason of our existence)- our patients.

Warm regards,

Dr. CYRUS.M.SHROFF

PRESIDENT, VRSI

VRSI GOVERNING COUNCIL

President : *Dr. Cyrus Shroff*

Vice President: *Dr. Gopal Verma*
shimo@satyam.net.in

Secretary: *Dr. Ajit Babu Majji*
ajit@lvpei.org

Jt. Secretary: *Dr. Vaishali Gupta*
vishalisara@yahoo.co.in

Treasurer : *Dr. V. Narendran*
narendran@cbe.aravind.org

Convenor Scientific Committee

Dr. Shobhit Chawla
shobhitcawla@hotmail.com

Members, Scientific Committee :

Dr. N. S. Muralidhar
retina@sify.com

Dr. Vasumathy Vedantham
drvasumathy@yahoo.com

Dr. Aravind Kumar Dubey
adubey36@sify.com

Ex-Officio

Immediate Past President :
Dr. S. Natarajan
ajeh@vsnl.com

VRSI SECRETARIAT

L V Prasad Eye Institute,
L V Prasad Marg,
Banjara Hills,
Hyderabad- 500 034,
India

Email : ajit@lvpei.org

EDITORIAL BOARD

EDITOR-IN-CHIEF
Dr. S. NATARAJAN

ASSOCIATE EDITORS
Dr. SYED ASGHAR HUSSAIN
Dr. ALOK PRATAP SINGH

EDITORIAL COMMITTEE

Dr. VASUMATHY VEDANTHAM

Dr. AJAY AURORA

Dr. HARSHA BHATTACHARJEE

Dr. ANANTHARAMAN GIRIDHAR



Editorial

SMOKING CAUSES BLINDNESS!!!

DONT LET SMOKE GET INTO YOUR EYES!



Dr. S. Natarajan

During my tenure as President, VRSI (2006-08), I had initiated the process of bringing a national awareness about the potential vision related hazards due to smoking. In fact, on behalf of VRSI, I made efforts towards submitting an appeal to Dr. Anbumani Ramadoss - Union Minister of Health & Family Welfare (MOH&FW), Govt. of India, New Delhi and also to Dr. Mrs. Rachel Jose – Addl. Director General Health Services, NPCB, MOH&FW, Govt. of India, New Delhi, in this regard.

“More people smoke today than at any other time in human history. One person dies every ten seconds due to smoking-related diseases.” To put it into perspective; these are the words of Dr. Gro Harlem Brundtland, Director-General of the World Health Organization (WHO). Almost one billion men in the world smoke tobacco in its various forms – about 35 percent of men in developed countries and 50 percent of men in developing countries. The startling facts about India are that, 16% of the entire population (1.5 billion), are smokers. Of this 29% are males and 2.5% females.

There are over 4000 substances in tobacco smoke, most of which are carcinogens. Smoking affects almost every part of the retino-choroidal anatomy. Active smoking is an accepted risk factor for many eye conditions viz. Age Related Macular Degeneration (AMD), Graves Ophthalmopathy, Cataract and Anterior Segment Disorders. Many ill effects of smoking have been observed in the retina by researchers. Some of these are supported by substantial evidences as in the case of AMD, whereas others still require further studies (viz., the relationship between Diabetic Retinopathy (DR) and smoking).

Tobacco smoking is the prime modifiable risk factor for AMD. Evidence indicates that more than a quarter of all cases of age related macular degeneration with blindness or visual impairment are attributable to current or past exposure to smoking. The 2004 report of the US Surgeon General suggested a causal relationship between current and past smoking and Neovascular as well as atrophic AMD. Pooled data from North America, Europe and Australia, obtained from the Beaver Dam Eye Study, the Rotterdam Study and the Blue Mountains Eye Study, on 14752 participants, disclosed a threefold increased risk of any type of AMD associated with current active smoking. The magnitude of risk was higher for Neovascular AMD as compared with atrophic AMD. The pathogenesis of AMD and the mechanism of action of smoking on the eye is not fully understood. Multiple biological mechanisms are likely to lead to the development of AMD, and smoking may be involved in one or more of them. Smoking reduces plasma levels of antioxidants and causes oxidative damage in the retinal pigment epithelium. Oxidative stress changes the ability of the retinal pigment epithelium to phagocytize cellular products. This leads to an accumulation of debris that interferes with nutrient exchange between the retinal pigment epithelium and choriocapillaries.



Association of uveitis and intraocular inflammation with smoking has grave implications. **Siverio, Cubillan and Cunningham in 2001**, assessed smoking as a risk factor for vision loss due to CME in patients with intermediate uveitis and smoking was significantly associated with reduced vision due to CME in these cases. It is a proven fact that tobacco and filter in a cigarette both contain endotoxins (the same pro-inflammatory molecules found in bacterial cell wall).

....Contd. in Page 3

SMOKING AND PHILATELY





Contd. from Page 2

Larsson, Szponar and Pehrson in 2004, conducted a study of mass spectrometry-based assay for identifying the endotoxin [Lipopolysaccharide(LPS)] marker, (R)-3-hydroxytetradecanoic acid in cigarette smoke particles and found that smoking involved inhalation of 17.4 pmol of endotoxin for each smoked cigarette. **Sebastian, Pehrson and Larsson in 2006**, documented elevated concentrations of endotoxin in indoor air due to cigarette smoking and that cigarette smoke contains large amounts of endotoxin. Thus, Environmental Tobacco Smoke (ETS) is one of the biggest factors in spreading endotoxins in the environment and might be related to many ocular and intraocular inflammations of unknown origin (one must remember the big load of idiopathic uveitis in eye clinics!).

Although it is possible that smoking could worsen Diabetic Retinopathy (DR), the evidence is inconsistent. The strongest evidence comes from the 4-year, 10-year and 14-year follow up of the **Wisconsin Cohort Study**. After 4 years, there were positive associations of smoking and incidence of DR in younger onset patients. It has been proposed that the effect of smoking on the retinal circulation contributes to the onset of diabetic retinopathy or to the progression of existing retinopathy. One mechanism of action suggested is hypoxia from chronic exposure to carbon monoxide, which may be toxic to retinal cells. Carbon Monoxide is also associated with separation of retino-choroidal vascular endothelial cells, leading to edema.

Acute Smoking is regarded as a major risk factor for Retinal Vascular Occlusions, Diabetic Retinopathy and Hypertensive Retinopathy. Microvascular changes have been well documented for these pathologies. Cigarette smoking is also reported to induce a decrease of blood velocity in the optic nerve head and possibly in the choroid, suggesting an increase in vascular resistance. Adverse effects of smoking on RPE have been seen in animal models. It has been shown that exposure to the cigarette smoke adversely affect RPE. **Fujihara et al** showed the evidence of increased oxidative stress in the RPE of mice exposed to cigarette smoke for 6 Months. Many reports of tobacco-induced electrocortical activation and decrements in ocular blood flow in VEP recordings indicated that this effect is mediated via nicotine's action on neuronal systems. Tobacco amblyopia is a condition in which the vision is lost because of the use of tobacco.

It is clear that we are in a race against time. We must come out of our slumber and take active guard against the habit of smoking. We must realize the fact that an anti-smoking drive will not only be limited to the legislative bans, statutory warnings on cigarette packs, and ban on public smoking. Instead, the need of the hour is a "Social Awakening" to the horrific ill effects of smoking and tobacco use on the society in general and its relation to blinding ocular conditions. In fact, pressure ought to come from the populous itself, to tackle the tobacco industry with an iron fist.

In addition to the existing Governmental Legislations and Laws, the awareness of **Smoking related Blindness** could be a novel and compelling reason to discourage people from all forms of tobacco use. Ophthalmologists now have moral obligation to rise to the occasion and join the **war on tobacco**.

Dr. S. NATARAJAN

IMMEDIATE PAST PRESIDENT, VRSI (2006-08)

EDITOR-IN-CHIEF

This graphic image is displayed on a Tobacco product packaging as specified under the Trade Practices (Consumer Product Information Standards) (Tobacco) Regulations (2004) of AUSTRALIA.
Image Source: www.mdfoundation.com.au/riskfactors.aspx



OBITUARY



Dr. B. PATNAIK, MD, MS,

Formerly Assoc. Prof. of Ophthalmology
Maulana Azad Medical College and
Guru Nanak Eye Centre, New Delhi

A renowned Vitreo Retinal Surgeon, he was one of the Founder Members and a Past President of VRSI. He left for his heavenly abode on 18th Jan'2009.

After obtaining his M.B.B.S. Degree from SCB Medical College, Utkal University, Cuttack, Orissa and M.S. Degree from A.I.I.M.S., New Delhi, the versatile Dr. Patnaik obtained a M.D. Degree for completing a Research Fellowship And Doctorate from University of Berne, Switzerland.

He was a staunch advocate of Vitrectomy using Indirect Ophthalmoscopy, till a very late phase in life, when he learnt the use and practice of BIOM. This was a remarkable feat. He was the first to carry out Fluorescein Angiography in India in 1969. He was also the first to use Cryopexy to treat Proliferative Retinopathies in the world. He was first to treat Subretinal Neovascular Membrane (ARMD) in India. Together with Dr Kalsi, he was the originator of the new concept of Central Serous Retinopathy and the use of drugs for tuberculosis in CSR.

He was among the first few modern Retina and Vitreous Surgeons of the country for over 30 years. He has over 65 original publications. He was the only ophthalmologist to have been the Convener of 3 Symposia for All India Ophthalmological Society. He has given Instruction Courses at American Academy of Ophthalmology for several years. Along with 2 other Senior Colleagues he was among the first Indian Ophthalmologists to participate in a major Symposium at the Annual Meeting of American Academy of Ophthalmology, 1997. He has written a chapter on invitation for the Ophthalmology Clinics of North America (Dec 1998).

The President, Secretary & all members of VRSI are deeply saddened by this irreparable loss and offer condolences to the family.

Source of information:
<http://www.vrsi.in/>
<http://www.patnaikb.com/frame.htm>



Message from the Secretary.....

Dear Colleagues,

It gives me great pleasure to address the members of this esteemed society. I am proud to serve as Hon. Secretary of this society, representing more than 400 specialists in the area of retina & vitreous. We are growing from strength to strength each year and I am confident that we will soon be a force to reckon with globally. All of this of course depends on how well we utilize our intellectual property. **The first step** towards this would be to have a well-run journal in this sub-specialty. We have already begun making an effort in this direction. I appreciate Dr. Natarajan and members of the editorial board for their initiative. I will be a happy man if this news letter grows into an indexed journal and draws the attention of the international community. I request all of you to contribute towards making this happen. **The second step** would be to enhance the level of interaction among the members. To this end, we plan to have an online discussion forum. This will facilitate more intensive scientific discussion among members. I am confident that Drs. Lalit Verma and Dharmesh Kar will come out with a user friendly web-based discussion forum under the aegis of the Society. **The third step** is to honor high-level scientific work in our specialty. In this direction the introduction of the Sohan Singh Hayreh Award has provided a major fillip. The society is thankful to late Dr. Bijayanand Patnaik for his generous donation towards the institution of this award. This Award will be given to an Indian who contributes significantly to science in the area of retina and vitreous. I hope this award will stimulate all those interested in our specialty to contribute significantly to knowledge building in this area.



I wish the Society a great future and deem it a privilege to have contributed in some measure towards the fulfillment of our collective dreams. I would be very happy to see similar contributions from all the members of the society.

Sincerely

AJIT BABU MAJJI

HON. SECRETARY

Message from Convener Scientific Committee.....

I would like to thank all the members and executive committee of Vitreo-retinal Society of India for their confidence in electing me to the post of Scientific Convener of our prestigious society. The specialty of vitreo-retinal surgery has advanced rapidly in our country. The membership of our society has also increased tremendously. We have witnessed a growing interest in both are meetings and membership amongst young colleagues who have started working in this field after training. My predecessor Professor Mangat R. Dogra has been instrumental in giving opportunity to our younger colleagues to present this work at our meeting. His crusade to make our meetings a forum of active participation for all has been well received and appreciated. My salutations to him for the good work rendered.

At this moment I would like to put forth a quote from Albert Einstein; "It is in fact nothing short of a miracle that the modern methods of instruction have not entirely strangled the holy curiosity of inquiry". He further adds in another quote "Imagination is more important than knowledge. For while knowledge defines all we correctly know and understand, imagination points to all we might yet discover and create". My Endeavour for our next two meetings will be to further consolidate our previous efforts. We well try to layout new format for some interactive sessions, of course retaining the essence of the Free Paper and Poster session. Our President Dr. Cyrus M. Shroff is trying to have a joint meeting for 2010 in conjunction with the Asia Pacific Vitreo-retinal society; which will give is a bigger forum for exchange of ideas & thought. Our next meeting is in November 2009, in the pristine surroundings of Palampur. Prof Claus Eckardt has confirmed his participation and will deliver the Nataraja Pillai Oration in this meeting. I would be happy to welcome any suggestions from our members on my email and would try to make the scientific program a productive experience for all participants.

With regards,

SHOBHIT CHAWLA

CONVENOR SCIENTIFIC COMMITTEE

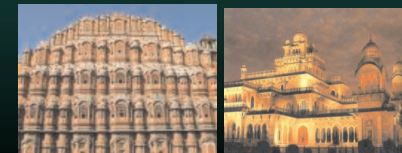
AIOC 2009 - GLIMPSES



The recently held AIOC 2009 at Jaipur was an educative scientific programme studded with lectures by renowned International and National faculty on varied aspects and latest trends in Ophthalmology, with a display of latest scientific gadgets and instruments in a well organized exhibition. The AIOC 2009 was marked by over 100 Instruction courses, current status Programmes, Interactive sessions and updates in the entire gamut of Ophthalmology from the obvious to the obscure. Also, Key note addresses by several invited Foreign and Indian faculty & Special awards sessions. More than 30 free paper sessions, 2 National symposia, quizzes, debates and other special sessions. Sessions conducted by European Society of Ophthalmology (SOE), American Academy of Ophthalmology (AAO) and Argentinean Society of Ophthalmology and many others. Continuous facility for viewing selected videos in personalized kiosks at will and pleasure was provided on all four days of the conference. Continuous wet labs for hands on training on a variety of diagnostic modalities and surgical treatment were held.

On January 6, the Mid Term Governing Council Meeting of VRSI was held during the AIOC 2009. Amongst other things, it was decided that an Advisory Committee consisting of Past Presidents would be formed with the versatile and dynamic trio- Dr.S.Natarajan, Dr.Namperumalsamy and Dr.Rajvardhan Azad, to address the issue of "Diabetic Retinopathy Awareness" and the "Smoking Causes Blindness" campaigns at the National level.

Historical Trivia: The Pink City of Jaipur, was established in 1727 A.D. by the famous ruler Sawai Jai Singh, is well known for its planning and architectural marvel. It has magnificent forts, palaces, gardens and antiquities. Jaipur is famous for gems and jewellery, tie & dye work, unending tales of beauty and valor, an enviable skyline, the famous Aravalli ranges and above all, the traditional hospitality and warmth of the Rajputs. This conference provided a treasure trove of memories to all of us.





Remembering Yasuo Tano, MD

President, Asia-Pacific Academy of Ophthalmology
Immediate Past President, Japanese Ophthalmological Society



It is with great sadness and admiration that the Vitreo Retinal Society - India recognizes the passing of Professor Yasuo Tano.

Dr. Tano was a true pioneer, and had earned a position as one of the leading vitreoretinal surgeons in Japan. He was a leader in ophthalmology worldwide, as well as a significant international partner to the American Academy of Ophthalmology .

He received his undergraduate, medical school, and initial residency training at Osaka University in Osaka, Japan. He completed his residency at the Matsuyama Red Cross Hospital in 1975. After his residency, he came to the United States in 1977 for a research fellowship at the Bascom Palmer Eye Institute in Miami, Florida. Additionally, he then completed a Vitreo Retinal Fellowship under the direction of Dr. Robert Machemer at Duke Eye Center in Durham, North Carolina. He then returned to his native Japan to become the Director of the Vitreo Retinal Service at Osaka University Hospital in 1980, holding this position through 1985. Dr. Tano added a Doctorate of Science degree to his credentials from Osaka University in 1981. He then became the Director of Ophthalmology at Osaka National Hospital until 1991, when he accepted the Chairmanship of the Department of Ophthalmology at Osaka University Medical School. During his past decade tenure as Department Head, his department has achieved an international reputation particularly within the field of Vitreo Retinal diseases and surgery.

Dr. Tano led two important Ophthalmological societies, the Asia-Pacific Academy of Ophthalmology and the Japanese Ophthalmological Society. In addition, he was instrumental in the growth of the International Council of Ophthalmology and was devoted to improving the quality of education available to ophthalmologists worldwide. His contributions to the world's literature are exhaustive, as well as his leadership role on numerous journals. He was the Executive Editor of the Japanese Journal of Ophthalmology as well as a member of the Editorial Board of 10 other English journals including the American Journal of Ophthalmology, Graefe's Archives of Ophthalmology, Survey of Ophthalmology, and Investigative Ophthalmology & Visual Science. Additionally, he was the Editor-in-Chief of five separate Japanese language journals including Folia Ophthalmologica Japonica and the Journal of The Japanese Ophthalmologic Society.

Since his first article was published in 1974, Dr. Tano's personal contributions to the world's literature have been extensive, having authored 180 articles in peer-reviewed English journals, an additional 240 articles in peer-reviewed Japanese journals, along with 9 book chapters. While many book authors are content to publish one or two textbooks throughout their career, Dr. Tano to date has produced an amazing 31 textbooks in ophthalmology. He has authored and co-authored over 600 English and Japanese publications, and delivered prominent lectures both domestically and internationally including Pyron Lecture at the 19th Annual Meeting of the Vitreous Society and the LIX Jackson Memorial Lecture.

Dr. Tano was also one of the first ophthalmologists to perform pars plana vitrectomy in Japan and was considered one of the leading surgeons in Vitreoretinal surgery. He dedicated his time to train aspiring surgeons in the field of Vitreoretinal surgery and paved the way for continuing excellence. It is clear that Dr. Tano understood the world stage for ophthalmology and devoted himself to advancing the profession. In his absence, we hope to carry on with the same determination and standard of excellence. Moreover, Dr. Tano was a good friend to many and a role model for all. Neither his name nor his influence will be forgotten. (Information Sources : <http://www.aao.org/international/ytano.cfm>
<http://www.zoominfo.com/Search/ReferencesView.aspx?PersonID=54801805>)

UPCOMING CONFERENCES



10th ANTWERP VITREORETINAL COURSE

SITE AND COURSE DIRECTOR :
Dr. Carl Claes, M.D.

DESCRIPTION: Practical course for updated treatment of vitreoretinal diseases. The course will consist of open discussions of each topic and round tables, with priority given to surgical videos and techniques.

SPEAKERS :

Dr.S.Natarajan (India)
Dr.Florin Balta (Romania)
Dr.David Chow (Canada)
Dr.Donald D'Amico(USA)
Dr.Claus Eckardt (Germany)
Dr.Mark Humayun (USA)
Dr.Ferenc Kuhn (Hungary)
Dr.Yannick Le Mer (France)
Dr.Klaus Lucke (Germany)
Dr.Athanasios Nikolakopoulos (Greece)
Dr.Grazia Pertile (Italy)
Dr.Rajat Agrawal (USA)

TOPICS : Expanded indications of sutureless surgeries, Intravitreal injections, Diabetes, New instrumentation, New techniques, Trauma

DATE : March 19-21, 2009
LOCATION : Antwerp, Belgium
FAX : Fax: +32 3 443 45 80
WEBSITE : www.avcantwerp.info
E-Mail : info@avcantwerp.info

For information / registration, please contact :
Mrs Rita Denie, Organizing Secretary

