



## COVID-19 and The Eye

The COVID-19 pandemic immediately changed our world, and it greatly impacted the eye care profession from its onset. On March 18, 2020, the American Academy of Ophthalmology (AAO) issued a statement advising all ophthalmologists to restrict practice to only urgent and emergent cases. This required retina practices to reduce the number of patients being seen; although, retina care involves the management of ocular problems to prevent them from becoming critical.

Along with these restrictions, the public perception of eye care as being deferrable compounded the problem. The Retina Institute (TRI) measured how these policies and perceptions impacted patient care during the early months of the coronavirus.

Over the first 10 weeks after restrictions were in place, the physicians of TRI reviewed every chart and identified patients who could delay their eye care evaluation safely. Given the complicated nature of retina patients this amounted

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## Spring Retina Update

On April 10<sup>th</sup>, the Retina Research & Development Foundation (RRDF) sponsored the 7<sup>th</sup> Annual Spring Retina Update. Designed for optometrists, ophthalmologists, and ophthalmic technicians, the course discusses recent clinical advancements in the diagnosis and management of eye diseases as well as innovations in ophthalmic research.

For the second consecutive year, The Retina Institute (TRI) held the symposium remotely to ensure the safety of the participants. The online meetings proved to be very popular as turnout continues to grow for the event. According to RRDF coordinator, Nancy Bolozky, 235 people attended the conference this year. The online format allows eye care professionals from all over the country to take part in the seminar. Dr. Bradley Smith, co-moderator of the Spring Retina Update, acknowledged “Many of our old colleagues and former fellows were able to remotely attend.” He noted, “Today’s technology has made a lot of



*Dr. Bradley Smith prepares for the start of the meeting.*

things possible that were previously unimaginable.” For example, a chat feature made interaction with the speakers feasible. Dr. Smith did concede despite the benefits, “An online meeting lacks the social aspect of a live meeting,” and he emphasized the fact, “There is no substitution for personal interaction.”

This year, topics discussed included updates on myopia (nearsightedness), macular holes and diabetic retinopathy. The physicians also lectured on repairing serious conditions such as retinal tears and detachments. TRI doctor and symposium co-moderator, Sabin Dang presented the relevant talk *COVID-19 and the Eye: What We’ve Learned in the Past*

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Year. Case presentations and follow-up discussions appeared on the agenda as well.

Despite the hurdles caused by the pandemic, The Retina Institute and RRDF felt compelled to continue to hold the meeting. Dr. Smith stressed the importance of continuing to conduct the conference, “Unfortunately, people are still susceptible to vision problems even with the pandemic. It is important to do what we can to protect health and part of that is to stay at the forefront of diagnosis and management of retinal disease. It is our responsibility as physicians to share our knowledge and learn from each other. The Spring Retina Update gives us an opportunity to accomplish these goals.”



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to approximately 10% of scheduled visits. However, it was noted that during this period clinic volume was reduced by up to 50% with patients canceling their own appointments, treatments, and surgeries. Throughout this timeframe, new patients who were seen were often found to have serious sight-threatening conditions such as retinal tears and retinal detachments which required emergent interventions.

The retrospective data collected by TRI through RRDF indicated that many patients elected to delay their care. This decision could prove to be problematic. Certain ocular conditions could worsen by postponing examinations. Examples include age-related macular degeneration patients developing hemorrhages, macular holes increasing in size, and diabetic retinopathy evolving into retinal detachments.

Likewise, TRI physicians have been studying how COVID can cause eye disease. During the pandemic, a significant percentage (20-25% of ICU patients) in critically ill COVID patients showed development of blood clots. While any inflammatory state can increase risks of coagulation, COVID-19 seems to be exceptional in its ability to cause clots. At TRI, we are actively monitoring the rates of blood clotting disorders of the retina and correlating with COVID diagnoses to better inform the public about the risks of eye diseases developing after a COVID infection.

While the coronavirus has yet to be defeated, vaccines and increased safety precautions have made the world more secure. Reestablishing connections with an eye care specialist should be made to ensure that pre-existing conditions or new disorders can receive the treatment they require.

### WHAT IS THE RETINA RESEARCH & DEVELOPMENT FOUNDATION?

Since its establishment in 1969, the Retina Research & Development Foundation (RRDF) has dedicated itself to providing voluntary support for the training of retina specialists for research and development in the field of retina surgery.



their formal ophthalmology residency and seek additional instruction in the diagnosis and treatment of retinal diseases.

**Research:** RRDF funds research to develop the safest and most effective means of treating

various ocular conditions.

The Foundation strives to accomplish its goals in the following ways:

**Fellowship Program:** The Retina Research & Development Foundation assists in the training of fellows who have finished

**Active Studies:** The Foundation sponsors educational courses to better inform the ophthalmic community of the latest research on the management of diseases of the retina and vitreous.