

Two days in 'GlasVegas'

Eyecare 3000 took place this month in Glasgow. **Bill Harvey** selects some highlights

Two days of high quality lectures and workshops divided by a Las Vegas themed casino night – what better way to start the new year? The first day of lectures began with a typically forthright presentation from Edinburgh-based optometrist **Ian Cameron**.

It should be expected in a busy contact lens clinic to come across the occasional complication. Management of these should be within all of our remits rather than letting these events put us off working with contact lenses. 'You need to be prepared and not cavalier about complications,' he explained. 'But too strong a desire to avoid them can fuel a conservative approach to contact lens practice, where practitioners are reluctant to use any lenses beyond a very small number that they can deal with easily. This can lead to some patients being told they "can't wear contact lenses" when in all that is required is basic management of complications.'

Ophthalmologist **Andy Luff** gave an excellent review of the latest uses of vitrectomy surgery. 'The indications for vitrectomy have changed dramatically over the last 10 years. Refinement of surgical technique, coupled with improved instrumentation and the development of superior viewing systems, has paved the way for a new



Dr Scott Mackie (left) and Teifi James enjoy the Las Vegas themed casino night

generation of surgical procedures. From the original indications of dense non-clearing haemorrhage and severe diabetic retinopathy, for example, we have now moved to the era of vitrectomy for epiretinal membrane, vitreomacular traction, subretinal surgery and symptomatic floaters. A local anaesthetic approach with sutureless incisions makes day case surgery possible and rapid rehabilitation a reality for most patients.'

Perhaps the most discussed of the day's lectures was that given by ophthalmologist **Mohan Varikkara** and optometrist **John Watt** who described a pilot study of a scheme in Ayrshire aimed at reducing the excessive hospital cost of anti-VEGF treatments for wet AMD. Thought to be the first of its kind, this pilot study used suitably trained optometrists to review post-Lucentis patients in a community practice setting, thus allowing the interval between hospital visits to be extended. The optometrists were trained to identify the presence or absence of 'change' in subsequent OCT macular scans and used this data, along with slit-lamp findings, to determine the next outcome for the patient. The study has proved effective in reducing costs and is popular

among the involved optometrists in enhancing their role in local healthcare. I am sure many readers would like to see such schemes develop in their locale.

Sex and drugs

A talk by yours truly on the ocular effects of illegal drugs (see *Optician* 16.12.11) was kicked off by a session chaired by **Dr Scott Mackie** for which ophthalmologist **Teifi James** gave an enlightening talk on the ocular manifestations of sexually transmitted diseases (STDs). James emphasised several key points. STDs are very common. Be cautious about history taking and examination in the optometry setting, as questions are personal and could be misconstrued. Appropriate treatments are available. Know how to refer appropriately and sensitively and always be aware of the social issues and stigma attached to STDs. 'Finally,' he said, 'please don't leave this lecture thinking that every case of iritis you see is an STD!'

Dr Julie Gandolfi (of Driving Vision Research) gave an excellent review of 'managing the older driver problem'. Older drivers are a growing population and are increasingly reliant on their vehicles. Physical, visual, cognitive and perceptual declines can develop gradually, but have serious effects on driver risk. Self-awareness of the onset of age-related problems is critical to maximising older driver safety, and the promotion of active and appropriate self-regulation holds the most realistic key to managing the older driver 'problem'.

The final, keynote lecture was given by **Professor David Thomson** (City University) who reviewed the various ways 3D images are produced and how many of the symptoms associated with 3D viewing may be alleviated by an accurate assessment of binocular and refractive status as well as ensuring viewing conditions and duration are optimal.

With a myriad of practical workshops available and a chance to spend what little money delegates had after Christmas on the Vegas-style roulette wheels, this was an excellent and useful conference which deserves its solid position in the CET calendar. ●



Nick Boys shows off the William Morris frame collections at the Eyecare 3000 Optofair exhibition