



香港中文大學
The Chinese University of Hong Kong



B-1-17



Content

Special Lectures and Awards

Scientific Program Schedule

The 8th International Symposium of Ophthalmology - Hong Kong

Held in conjunction with

The 7th Asia-Pacific Vitreo-Retina Society (APVRS) Congress

The Inaugural Congress of the Asia-Pacific Strabismus and Paediatric Ophthalmology Society (APSPPOS)

The Inaugural Congress of the Asia-Pacific Society of Ocular Oncology and Pathology (APSOOP)

The 10th Asia-Pacific Society of Eye Genetics (APSEG) Symposium

The 24th Annual Scientific Meeting (Hong Kong Ophthalmological Symposium 2012)

Program & Abstracts



December 14-16, 2012

Hong Kong Convention and Exhibition Center

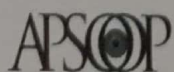


TABLE OF CONTENTS

1 FOREWORDS AND WELCOME MESSAGES		
1.1	FOREWORD - Congress President - Prof. Dennis Shun-chiu Lam	3
1.2	FOREWORD - Congress President - Calvin Chi-pui Pang	4
1.3	WELCOME MESSAGE - Chief Executive, HKSAR - Mr. Chun-ying Leung	5
1.4	WELCOME MESSAGE - Dean, Faculty of Medicine, CUHK - Prof. Tai-fai Fok	6
1.5	WELCOME MESSAGE - Secretary for Food and Health, HKSAR - Dr. Wing-man Ko	7
1.6	WELCOME MESSAGE - Chairman, Hospital Authority, HKSAR - Dr. Anthony Wu	8
1.7	WELCOME MESSAGE - Chief Executive, Hospital Authority, HKSAR - Dr. Pak-yin Leung	9
1.8	WELCOME MESSAGE - APVRS President - Prof. Ian Constable	10
1.9	WELCOME MESSAGE - APSPOS President - Prof. Frank Martin	11
1.10	WELCOME MESSAGE - APSOOP President - Dr. Michael Giblin	12
1.11	WELCOME MESSAGE - APSEG President - Prof. Govindasamy Kumaramanickavel	13
1.12	WELCOME MESSAGE - COHK President - Dr. Stanley Chi	14
1.13	WELCOME MESSAGE - HKOS President - Dr. Nancy Yuen	15
1.14	WELCOME MESSAGE - Director, ZOC - Prof. Yizhi Liu	16
1.15	WELCOME MESSAGE - Executive Vice Director, JSIEC - Prof. Mingzhi Zhang	17
2 COUNCILS AND COMMITTEES		
2.1	Host, Co-Hosts, Organizers, Organizing Committee & Central Secretariat	18
2.2	Scientific Program Committee	20
2.3	Submitted Program Reviewing Committee	21
2.4	APVRS Council Members	22
2.5	APSPOS Council Members	23
2.6	APSOOP Council Members	24
2.7	APSEG Council Members	25
2.8	COHK Council Members	26
2.9	HKOS Council Member	27
3 PROGRAM AT A GLANCE		
3.1	Program overview	29
3.2	Day 1- Dec 14, 2012 (Friday)	30
3.3	Day 2 - Dec 15, 2012 (Saturday)	32
3.4	Day 3 - Dec 16, 2012 (Sunday)	34
4 CONGRESS INFORMATION		
4.1	Congress Information	35
4.2	Social Programs	37
4.3	Floor Plans	38
4.4	Packaged Sponsors	40

5 SPECIAL LECTURES AND AWARDS	
5.1 Named Lectures	
5.11 APSOOP Jerry A. Shields Lecture - Bertil E. Damato	
5.12 APSOOP Lorenz E. Zimmerman Lecture - Mark OM Tso	
5.13 APVRS Tano Lecture - Steven T. Charles	41
5.14 ISO Prof Eugene YZ CHAN Lecture - Chi - Chao Chan	42
5.15 ISO Prof Guy H CHAN Lecture - Alexander J. Brucker	43
5.16 ISO Dr John CN CHANG, Sr. Lecture - Arthur SM Lim	44
5.17 ISO Prof Sek-jin CHEW Lecture - Xiaoxin Li	45
5.18 ISO Prof Arthur SM LIM Lecutre - Ian J. Constable	46
5.19 ISO Dr Timothy KC LIU Lecutre - Paul L. Kaufman	47
5.20 ISO Prof Winifred WS MAO Lecutre - Robert B. Nussenblatt	48
5.21 ISO Prof Mark OM TSO Lecture - Jerry A. Shields	49
5.2 Keynote Lectures	
5.21 Michael E. Giblin	50
5.22 Jia Qu	51
5.23 Kohji Nishida	52
5.24 Narsing A. Rao	53
5.25 Srinivas K. Rao	54
5.26 Donald TH Tan	55
5.27 Mark OM Tso	56
5.3 Plenary Lectures	
5.31 Jost B. Jonas	57
5.32 Shigeru Kinoshita	58
5.33 Ronald R. Krueger	59
5.34 Dennis SC Lam	60
5.35 Charles NJ McGhee	61
5.36 Robert B. Nussenblatt	62
5.37 Richard E. Packard	63
5.38 Ningli Wang	64
5.39 Tien-Yin Wong	65
5.4 Travel Grants	
5.41 APVRS Travel Grants	66
5.42 COHK-HKOS Travel Grants	67
6 SCIENTIFIC PROGRAM SCHEDULE	
6.1 Day 1 - Dec 14, 2012 (Friday)	68
6.2 Day 2 - Dec 15, 2012 (Saturday)	69
6.3 Day 3 - Dec 16, 2012 (Sunday)	71
7 FREE PAPER / POSTER	
7.1 Free Paper	78
7.2 E-Poster	89
8 EXHIBIT / INDEX	
8.1 Sponsored Symposium	95
8.2 Exhibitor Index	182
8.3 Participant Index	251
	252
	253

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Special Lectures and Awards

COUNCILS AND COMMITTEES

Scientific Program Schedule

claudin-5 and occludin in the rat retinal vessels were analyzed by double immunofluorescent staining. The expression level of acrolein, 8-OHdG and nitro tyrosine in the rat retinas was detected by immunofluorescent. Retinal ultrastructures were observed by transmission electron microscopy. The protein level of VEGFR2, Trx-2, Bcl-2, Bax, caspase-3, p53 and NF- κ B in the rat retinas was assayed by western blot. **Results:** Four months after subcutaneous injection, the diabetic rats treated by SS31 had better retinal ganglion cells structure, thinner capillary basement membrane, less IRRB leakage and lower expression of Bax, caspase-3, p53, NF- κ B and higher expression of Trx-2 and Bcl-2 than those treated by N.S. The levels of acrolein, 8-OHdG and nitro tyrosine in the retinas of diabetic rats treated by SS31 were decreased compared with those of treated by N.S. **Conclusions:** SS31 could protect the retinal structure and inhibit the breakdown of IRRB by reducing oxidative damage, increasing Trx-2 and Bcl-2 expression, and decreasing p53, NF- κ B, Bax, caspase-3 and VEGFR2 expression in the retinas of diabetic rats.

E-Poster No.: EP-0349

Study of 5 case presented with acute bilateral dimness of vision in acute glomerulonephritis with severe hypertension

First Author: Shobhana MANGE

Purpose: patient may present with acute bilateral vision loss in acute glomerulonephritis with severe hypertension. This study was done to evaluate fundus picture of acute glomerulonephritis with hypertension, as acute glomerulonephritis is emergency situation if patient first presented to ophthalmologist, it's very important to diagnose the condition and refer to Urologist/physician at the earliest. **Methods:** Systematic evaluation of presenting symptoms and fundus picture which typically shows combination changes of vasculitis, acute retinal ischemia and hypertensive retinopathy was done. detailed systemic workup of examination by physician and nephrologists, laboratory test, renal imaging and renal biopsy was done. **Results:** Patients of acute glomerulonephritis may present first to Ophthalmologists. Fundus picture due to combination of vasculitis, acute retinal ischemia and changes of malignant hypertensive retinopathy helps in diagnosis. Simple test like recording of blood pressure and serum creatinine level can confirm the diagnosis to start emergency treatment. **Conclusions:** Early diagnosis of patient presenting with acute vision loss having acute glomerulonephritis with severe hypertension can save mortality and morbidity in young patient.

E-Poster No.: EP-0350

Sub hyaloids haemorrhage following valsalva retinopathy

First Author: Pranathi KOMMINENI

Purpose: Purpose of the study was to report a case of sub hyaloids haemorrhage following valsalva retinopathy. **Methods:** This is a single case report. A twenty year old healthy male came with complaints of sudden diminution of vision in right eye since two days. Patient gives history of sudden diminution of vision in right eye since 2 days following bouts of forcible vomiting. On examination visual acuity was 20/200 in right eye and 20/20 in left eye. Fundus examination showed a premacular subhyaloid hemorrhage in right eye. Left eye fundus was normal B scan showed elevation of retina on temporal side of optic nerve insertion. **Results:** Nd YAG laser hyaloidotomy was done to facilitate evacuation of blood into vitreous and accelerate resolution and patient was advised to avoid strenuous activity. Patient was followed up for two months. At 2 months the visual acuity was 20/20 with complete resolution of sub hyaloid haemorrhage. **Conclusions:** Valsalva retinopathy is a rare cause of sub hyaloid haemorrhage in a young healthy adult with no other systemic disease. Visual prognosis is good with most patients returning to normal vision.

E-Poster No.: EP-0351

Sutureless transconjunctival 20 gauge vitrectomy and astigmatism

First Author: Gilbert W S SIMANJUNTAK

Purpose: To report result of sutureless transconjunctival vitrectomy and induced astigmatism during learning curve. **Methods:** The study design was descriptive study. A 20G MVR

blade was introduced beveled, slowly, parallel with the limbus, creating conjunctivo-scleral tunnel incision as long as possible. Unnecessary exchange of the instrument through the tunnels was avoided. At the end of the operation intraocular pressure was normalized. Automated-keratometry was done pre-operatively (K1) and day 7 postoperatively (K2). Intraocular pressure was measured and day 7 postoperatively. Healed inflammation preoperatively, day 1, day 3 postoperatively. Healed inflammation was evaluated at 3 weeks. All patients grouping in 3 groups consisted of 10, 10 and 12 patients. **Results:** Of 32 consecutive patients underwent vitrectomy with the technique, the surgeon observed no difficulties for maneuverings while doing vitrectomy as with conventional 20G vitrectomy. Comparing induced astigmatism, there was no significant difference between early learning curve (group 1 consist of 10 patient) with other groups. It was shown that clinically, the true learning curve were the first three patient as seen in group 1, and the rest cases need almost similar Total Surgical Time. **Conclusions:** Transconjunctival sutureless 20G needs induced non significant astigmatism during learning curve.

E-Poster No.: EP-0352

The aqueous levels of interleukin 6 and vascular endothelial growth factor in silicone-oil filled eyes

First Author: Yimin XU

Purpose: To determine the aqueous concentrations of interleukin 6 (IL-6) and vascular endothelium growth factor (VEGF) in eyes with silicone oil tamponade and proliferative vitreoretinopathy (PVR). **Methods:** 39 patients (40 eyes) undergoing vitrectomy were enrolled in the study prospectively and aqueous samples were obtained from these vitrectomized eyes, 14 patients (15 eyes) with silicone oil tamponade, 15 patients (10 eyes) with PVR and 10 patients (10 eyes) with idiopathic macular hole and epimacular membrane. The silicone oil filled eyes were also divided into subgroup 1 and subgroup 2 (according to the presence of recurrent epiretinal or subretinal membranes. The undiluted aqueous samples were collected by paracentesis and the levels of IL-6 and VEGF were analyzed by ELISA. **Results:** The aqueous level of IL-6 in the silicone oil tamponaded eyes was significantly higher than PVR and idiopathic macular hole and epimacular membrane eyes. The aqueous level of IL-6 in the eyes of silicone oil subgroup 1 was significantly higher than subgroup 2 and PVR eyes. There were no significant differences in the aqueous level of VEGF between silicone oil filled eyes and PVR eyes, but both were significantly higher than the eyes with idiopathic macular hole and epimacular membrane. **Conclusions:** The aqueous levels of VEGF and IL-6 in silicone oil filled eyes are significantly higher than PVR eyes.

E-Poster No.: EP-0353

The clinical and spectral-domain optical coherence tomography findings in focal choroidal excavation

First Author: Christopher LEE

Co-Author(s): Sungchul LEE, Hee J KWON, Jeong H YI

Purpose: To describe the clinical and spectral-domain optical coherence tomography (SD-OCT) finding in Korean patients with focal choroidal excavation. **Methods:** The medical records of 9 patients (10 eyes) with focal choroidal excavation were reviewed. Clinical histories and SD-OT findings were analyzed. **Results:** The mean age was 49 years (range, 25-73). Seven (78%) patients were men. Mean refractive error was -4.7 diopters (range, -0.5 to -9.0), including two pseudophakic patients. In 7 (70%) eyes, SD-OCT showed no separation between the outer retinal layers and the retinal pigment epithelium (RPE). There was a separation between the outer retina and RPE in 3 eyes (30%). Three eyes were associated with central serous chorioretinopathy (CSC), two in the affected eye and one in the unaffected fellow eye. Two eyes were associated with chorioidal neovascularization. In two eyes, focal choroidal excavation was found after successful surgery for rhegmatogenous retinal detachment. **Conclusions:** Focal choroidal excavation is a recently described idiopathic entity and may be more common in Asian population. In some patients, there appears to be an association with CSC and choroidal neovascularization.

E-Poster No.: EP-0354

The investigation about the reduced scale of OCT

Intravitreal bevacizumab treatment

First Author: Yi-chieh POON
Co-Author(s): Jong-jer LEE, Chih-hsin CHEN

Purpose: To evaluate the treatment outcome after intravitreal bevacizumab (IVB) in patients with macular serous retinal detachment (SRD) secondary to branch retinal vein occlusion (BRVO). **Methods:** Seventy-seven patients with macular edema (ME) secondary to BRVO that received primary IVB (2.5 mg / 0.1 ml) were included in this study. ME was identified as cystoid macular edema (CME) and SRD by optical coherence tomography (OCT) examination. Visual acuity (VA), central macular thickness (CMT), and macular volume at baseline, and at 1, 3, 6, and 12 months after IVB were retrospectively analyzed and compared between patients with and without SRD. **Results:** CME was found in 70 patients (90.0%) and SRD in 26 patients (33.8%). The baseline CMT was $641.9 \pm 199.2 \mu\text{m}$ in the SRD group and $448.8 \pm 121.9 \mu\text{m}$ in the group without SRD. Six months after primary IVB injection, in the group with and without SRD, the change in CMT from baseline was $-41.5 \pm 227.2 \mu\text{m}$ and $-118.5 \pm 175.2 \mu\text{m}$ ($p < 0.001$), respectively, and changes of VA in logarithm of the minimum angle of resolution (logMAR) from baseline were -0.64 ± 0.52 and -0.28 ± 0.62 ($p = 0.015$), respectively. **Conclusions:** BRVO ME patients with SRD had greater improvements in CMT and VA after primary IVB therapy. The results of this study suggest that OCT morphological patterns of SRD may be a predictor of clinical response after IVB injection.

E-Poster No.: EP-0322 Management of double perforation of the eye eyeball -- a case report

First Author: Md RAHMAN

Purpose: Ocular double perforation is a devastating condition for the eye and chance of having good or reasonable vision after treatment is very rare. We tried to localize the posterior perforation and seal the perforation by keeping the existing blood clot in the posterior hole and by endolaser. **Methods:** Methods: A 45-year-old soldier was suffering from double perforation following grenade blast with inert foreign body of about 1 mm size in the optic canal, without involving the optic nerve. Diagnosis was made from history X-ray skull, B scan of the right eye and CT scan on the brain and orbit. The patient underwent pars plana vitrectomy, endolaser and gas endotamponade in CMH Dhaka. **Results:** Results: After six months follow up his visual acuity right (VAR) was 6/24 without proliferative vitreoretinopathy (PVR). **Conclusions:** Conclusions: Double perforation of the eye is a devastating condition. Early diagnosis and appropriate surgical manoeuvre can save the eye ball, with fair chance of visual recovery.

E-Poster No.: EP-0323 Management of traumatic hyphema with anterior chamber maintainer

First Author: Gilbert W S SIMANJUNTAK

Purpose: To describe the technique for the removal of bulky fibrin in persistent traumatic full hyphema by using anterior chamber maintainer (ACM). **Methods:** The ACM was used to reform and maintain the anterior chamber, and to flush out the clotted blood. The ACM cannula was inserted at the 6 o'clock position, then a 2 mm width contra lateral limbal incision was made. Slight pressure applied at the posterior lip of the incision facilitated the evacuation of the clot from the anterior chamber. Visible adherence of the clot was separated using the Sinsky hook, and firm fibrosis between fibrin and intraocular structure was cut by Vannas scissor. **Results:** All liquefied blood was removed through corneal incision. Any clot caught at the incision was removed by cutting the clot into smaller fragments with a Vannas scissor. **Conclusions:** ACM is a safer and affordable alternative compared to Simcoe's cannula or vitrectomy in the removal of persistent traumatic hyphema.

E-Poster No.: EP-0324 Neovascular glaucoma & ocular ischemic syndrome -- case report

First Author: Olga MARTINEZ
Co-Author(s): Isaac ALARCON, Daniel NAHRA

Purpose: Ocular ischemic syndrome (OIS) is a chronic process secondary to total or partial obstruction of the carotid artery, reducing blood flow to the eyeball. Neovascular glaucoma is an uncommon initial manifestation. **Methods:** A 57-year-old man with history of diabetes mellitus 2, hypertension, occlusion of the internal right carotid artery, which developed an ischemic stroke right, presented decreased visual acuity in the right eye. In the ocular examination had counting fingers vision with an intraocular pressure (IOP) of 34 mmHg. In the anterior segment presents episcleral tortuous vessels, iris neovascularization and the fundus revealed widespread arterial narrowing with areas of ischemia without neovessels. In the angiogram shows delayed arterial filling time and obstruction of central retinal artery. Following the treatment with panretinal laser photocoagulation, he presented an improvement of the visual acuity (0.4) and normal IOP. **Results:** OIS developing neovascular glaucoma is a rare entity that should be suspected if there is no diabetic retinopathy or venous thrombosis. The mortality is high, 40% at 5 years, because of cardiovascular disease association therefore they need a multidisciplinary management. **Conclusions:** OIS developing neovascular glaucoma is a rare entity that should be suspected if there is no diabetic retinopathy or venous thrombosis. The mortality is high 40% at 5 years, because of cardiovascular disease association therefore they need a multidisciplinary management.

E-Poster No.: EP-0325

Observation of combined scleral buckling surgery and phacoemulsification for rhegmatogenous retinal detachment and cataract

First Author: Xinrong DUAN
Co-Author(s): Xiaoqing ZHU

Purpose: To report the technique and results of simultaneous scleral buckling surgery and phacoemulsification for rhegmatogenous retinal detachment and cataract. **Methods:** Twenty-nine patients (29 eyes) with rhegmatogenous retinal detachment accompanied with dense cataract were retrospectively investigated. All the eyes were undergone a combined surgery involving scleral buckling and phacoemulsification (25 eyes also combined posterior chamber IOL insertion). Among those, 8 eyes combined with intravitreal injection of C2F6, 1 eye with filtered air. Postoperative follow up was 3-24 months, mean 5.6 months. The visual acuity, IOL position, retinal reattachment status and complications of the surgery were observed. **Results:** A clear intraoperative view of the fundus was obtained in all cases and retinal breaks were identified. The best corrected visual acuity were improved in 22 eyes (75.86%) in the last follow up, among which 16 eyes (55.17%) improved by 2 or more lines, remained unchanged in 7 (24.14%) eyes. The retina was reattached by combined surgery in 28 cases (96.55%) during the last follow up, partially reattached in 1 eye (3.45%). There was no instance of IOL dislocation and severe complications happened. **Conclusions:** Combined scleral buckling and cataract surgery spares the patient repeat surgery and may improve the visual function outcome by avoiding delay for detachment.

E-Poster No.: EP-0326

Ocular albinism

First Author: Rahmi YUSTICIA
Co-Author(s): Heksan HEKSAN, Weni HELVINDA

Purpose: Ocular albinism is a group of genetic disorders in which reduced pigmentation of the eyes is associated with decreased visual acuity, nystagmus, strabismus, and photophobia. Pigmentation of the skin and hair is normal or may have slightly lighter skin and hair compared with other family members. **Methods:** a 10 years old young girl came with photophobia and nystagmus since she was child. the VA of RE and LE were 0.12. Anterior segment and lens were normal. there was nystagmus in eye movement. Funduscopy examination in both eye found the RPE was absent, choroidal vascularisation see., decreasing red light reflex. Laboratory examination found no abnormalities. Chest X-ray was normal. The treatment only for visual disorder with using spheris 4 D giving the best VA until 0.6. **Results:** in this case fundus examination showed choroidal vascularisation due to absent of RPE, therefore, we diagnose this patient with ocular albinism suspect. **Conclusions:** in this case fundus examination showed choroidal vascularisation due to absent of RPE. Therefore, we diagnose this patient with ocular albinism suspect.

Sutureless Transconjunctival 20 Gauge Vitrectomy and Astigmatism

Gilbert WS Simanjuntak

Background : To report result of sutureless transconjunctival vitrectomy and induced astigmatism during learning curve.

Methods : The study design was descriptive study. A 20G MVR blade was introduced beveled, slowly, parallel with the limbus, creating conjunctivo-scleral tunnel incision as long as possible. Unnecessary exchange of the instrument through the tunnels was avoided. At the end of the operation intraocular pressure was normalized. Automated-keratometry was done pre-operatively (K1) and day 7 postoperatively (K2). Intraocular pressure was measured preoperatively; day 1, day 3 postoperatively. Healed inflammation was evaluated at 3 weeks. All patients grouping in 3 groups consisted of 10, 10 and 12 patients.

Results : Of 32 consecutive patients underwent vitrectomy with the technique, the surgeon observed no difficulties for maneuverings while doing vitrectomy as with conventional 20G vitrectomy. Comparing induced astigmatism, there was no significant difference between early learning curve (group 1 consist of 10 patient) with other groups. It was shown that clinically, the true learning curve were the first three patient as seen in group 1, and the rest cases need almost similar Total Time.

Conclusion : Transconjunctival sutureless 20G needs induced non significant astigmatism during learning curve.

The 8th International Symposium of Ophthalmology - Hong Kong (ISO-HK)

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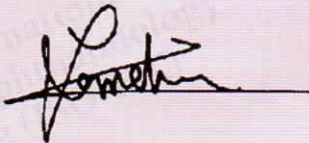
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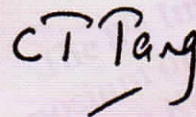
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the Asia-Pacific Society of Ocular Oncology and Pathology (APSOOP),
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as well as
the 24th Annual Scientific Meeting Hong Kong Ophthalmological Symposium,
which is jointly organized by
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Sincerely yours,



Prof. Dennis Lam
Congress President



Prof. Calvin Pang
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The 8th International Symposium of Ophthalmology - Hong Kong 2012
December 14 - 16, 2012

Certificate of Appreciation

Presented to

Gilbert W S Simanjuntak

In recognition for his participation as a presenter of the poster 'Management of traumatic hyphema with anterior chamber maintainer'

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