SECO DAILY
SATURDAY, MARCH 3, 2018

Topics covered in today's OD courses, **p.6**
Special five-page guide to the exhibits, **p.10**
SECO Announces '18 Award Winners, **p.18**

New Frontiers in Melanoma, Retinoblastoma

An ophthalmologist shared his experiences with the two most common primary eye cancers: ocular melanoma and retinoblastoma.

Attendees looking for a session that goes above and beyond their average day in the office were not disappointed by yesterday's special session, "Eye Cancers: From Melanoma to Retinoblastoma."

J. William Harbour, MD, professor and vice chairman at Bascom Palmer Eye Institute at the University of Miami, took the stage to give SECO 2018 attendees a close-up look at these rare cases—and what to do when you see one.

Dr. Harbour wowed attendees by showing a video of the new intra-arterial chemotherapy procedure for retinoblastoma. Here, the surgeon injects dye to make sure he is in the right location before injecting the chemotherapy agent.

Get to the Bottom of Uveal Melanoma

Dr. Harbour began with uveal melanoma, which accounts for 5% of all cancers and "is the second most common type of melanoma after skin melanoma," he said.

After reviewing the usual clinical presentations, diagnostic tools (such as A-scan and B-scan ultrasound) and the many differentials to look out for, Dr. Harbour focused on the treatment options available. "There have been some modifications over the years, but not really any innovations in treatment," noted Dr. Harbour. Plaque brachytherapy, for example, remains the preferred therapy and provides excellent local control. Unfortunately, roughly half of patients still develop metastatic disease within 15 years despite treatment.

This is where advanced gene expression profiling (GEP) comes into play. This new tool is giving researchers a chance for more accurate risk assessment in individual patients, Dr. Harbour explained. Next-generation gene sequencing is also making waves with significant clinical implications. "When I first started, we never needed to biopsy these lesions, because we knew what it was," Dr. Harbour said. "But today, GEP makes it possible for us to identify what mutations are causing the cancer," leading to more informed decisions.

The new information has also driven researchers to find a new drug, already available, that seems to drive class 2 tumors—the most advanced—back to class 1 status, according to Dr. Harbour. "Up until recently there was really effective treatment for metastatic uveal melanoma, but that is rapidly changing," said Dr. Harbour. One immunotherapy drug in particular, already

See MELANOMA, Page 22

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- Review the difference between **physiologic cupping and glaucoma** 3
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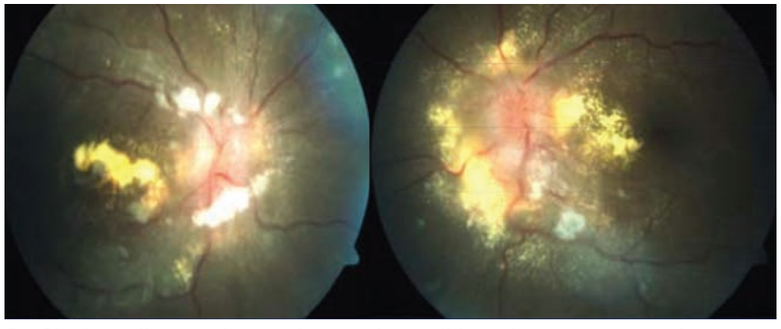
Have You Got The Nerve?

Optometry's ability to manage optic nerve edemas is more finely honed than ever.

Trenton Cleghern, OD, has a fascination with neuro-ophthalmic disease. "I love the connection from the eye to the brain and, really, the rest of the body as well," he told the morning crowd at his presentation "Management of Optic Nerve Edema." "When you talk about neuro-ophthalmic disease, you can't just think about the eyes and the brain, you've got to think about the whole body," he explained. That's because these conditions can impact other systems, such as the heart, or be part and parcel of a larger systemic syndrome, such as multiple sclerorsis (MS), diabetes or the result of an infection. Whatever the etiology, optic nerve edemas are often a surprise, both for the doctor and the patient. He has witnessed a number of these surprises himself and has developed the skills to treat these patients promptly without sacrificing bedside manner.



Dr. Cleghern discussed several systemic conditions that can cause optic nerve edema. In this case, it was hypertension.

During the session, Dr. Cleghern reviewed a number of these cases.

Watching the Signs

The first case he offered involved a 16-year-old girl who had been experiencing general sluggishness accompanied by blurry vision. A fundus image showed she had optic nerve swelling, and advanced OCT imaging was used to get an understanding of its extent. "I always like to tell

See EDEMA, Page 4

NEW TECHNOLOGIES & TREATMENTS IN EYE CARE 2018

REVIEW OF OPTOMETRY®
EDUCATIONAL MEETINGS OF CLINICAL EXCELLENCE

2018 MEETINGS

APRIL 6-8, 2018

NASHVILLE, TN
Nashville Marriott at Vanderbilt
Program Chair: Paul Karpecki, OD
www.reviewofoptometry.com/nashville2018

APRIL 26-29, 2018

SAN DIEGO, CA**
San Diego Marriott Del Mar
Progrom Chair: Paul Karpecki, OD
www.reviewofoptometry.com/sandiego2018

MAY 17-20, 2018

ORLANDO, FL
Disney's Yacht & Beach Club
Program Chair: Paul Karpecki, OD
www.reviewofoptometry.com/orlando2018

NOVEMBER 2-4, 2018

ARLINGTON, VA
The Westin Arlington Gateway
Program Chair: Paul Karpecki, OD
www.reviewofoptometry.com/arlington2018

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**15th Annual Education Symposium
Joint Meeting with NT&T in Eye Care

Review of Optometry® partners with Salus University for those ODs who are licensed in states that require university credit. See *Review* website for any meeting schedule changes or updates.

The Cupping Conundrum

By sharpening your familiarity with key optic nerve features, you can better determine the type of care cupping needs.

One question that continues to arise in optometric offices small and large, technologically top of the line or not, is how ODs can best differentiate the subtle difference between "normal" cupping of the optic nerve and glaucomatous cupping. "There are key features of the optic nerve that we can look for and strive to identify," said Michael Chaglasian, OD, from the Illinois Eye Institute. "So, regardless of the tools and instruments you have in your practice, you can make the best use of them for what is a quite confounding clinical situation."

Through a collection of challenging case studies, each demonstrating a different combination of patient testing data and imaging, Dr. Chaglasian explained how he looks for certain nuances in optic nerve features, such as those found in the neuroretinal rim (NRR), optic disc margin and the margin of the inner cup of the optic nerve.

"I always start on the outside and move in," Dr. Chaglasian said. "Force yourself to step back because you don't care about the big empty space in the middle yet; first worry about trying to identify the edge of the disc or the disc margin because that will be fundamental in the glaucomatous optic nerve."

One sure sign that you're dealing with glaucomatous cupping, he said, will present itself through focal damage within the optic nerve. He also noted the importance of tracking an increased cup-to-disc ratio, thinning of the NRR area, notch, saucerization or flame-shaped NRR, nerve fiber layer loss and peripapillary atrophy as key factors in diagnosing glaucomatous cupping.

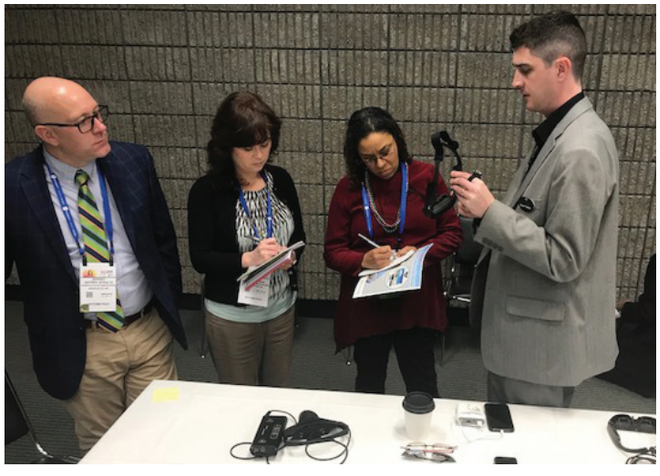
"It's always best to try and correlate the structure and function together in whatever way you can go about that in your practice," he said, especially if you have access to more advanced technology to run this testing. "Look at the photograph, look at the OCT, look at the visual field at hand. This combination will help you understand what's going on with the optic nerve and help you be more confident about that."

Since ODs are not doing OCT testing on every patient, however, and not every office has the technology, Dr. Chaglasian offered a question or two clinicians can ask themselves to keep their practice in check: "Am I doing the best job that I can, using depth cues and contour cues with my ophthalmoscope and fundus lenses to identify that change in the optic nerve?" And since photographs and scans will not always be perfect, ODs should be keeping their interpretation skills tightly tuned.

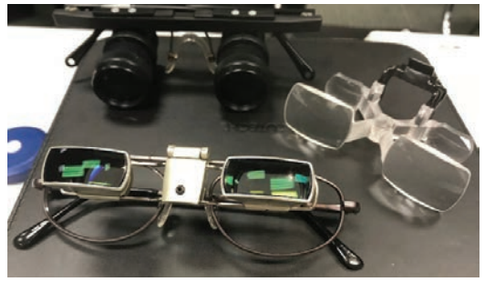
In closing, Dr. Chaglasian emphasized that the OD's skill set to examine these tricky cases should already be in place. With basic slit lamp ophthalmoscopy, ODs are ideally equipped to provide the standard of care and catch these changes to the optic nerve before field loss initiates, he said. Take baseline stereo photographs, document horizontal and vertical cup-to-disc ratios and never underestimate the importance of including detailed drawing with descriptions in the records of suspicious patients.

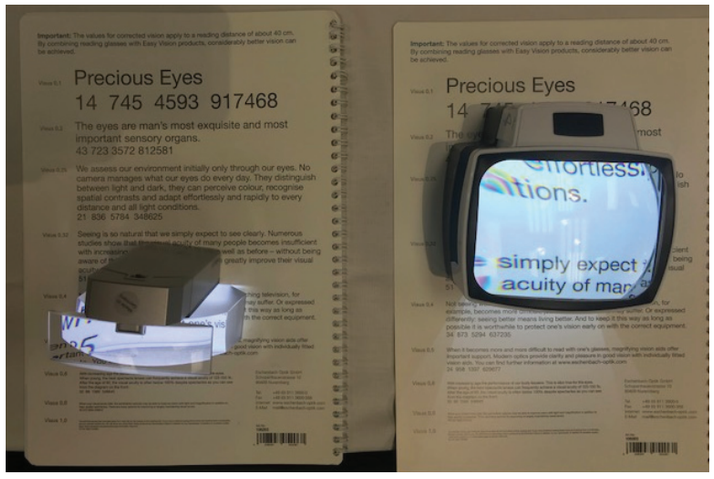
"This is the best way to force yourself to document what you are seeing," Dr. Chaglasian said, so that when you start seeing changes, you're ahead of the game. ●

Zooming in on the Low Vision Learning Lab



Yesterday's Low Vision Learning Lab participants practiced reading with NuEyes hands-free electronic smart glasses, above. At left, an attendee tests her orientation and mobility with the Peli lens.





Above, attendees could try on any number of spectacle magnifiers and solar shields.

At left, stand and handheld magnifiers of varying diopters were on display so participants could test them for reading books, music and the newspaper.

Life-altering Lenses

New developments are helping a wide range of patients find pain relief.

When reviewing her contact lens cases, Louise A. Sclafani, OD, said Friday morning in "Snap Chat: Contact Lens Pains" that the best outcomes come from building a relationship with patients. Though ODs are effective at picking out optics and addressing anatomical issues, they don't always consider lifestyle, she said.

Asking the Right Questions

One of Dr. Sclafani's cases involved a 28-year-old female, referred by a neuro-ophthalmologist to be fit for contact lenses. She had light perception in her right eye, 20/60 vision in her left and was experiencing steady vision loss due to Devic's disease. The patient was hoping to be fit with contact lenses, but faced some obstacles. For instance, she was at risk of losing vision in her good eye with any complications, and the patient's physical paralysis from her disease might preclude her from properly handling the lens. Dr. Sclafani ultimately fit her in a gas permeable bitoric lens. "There's only so many things I can do to help this patient out," she said.

Referring the Patient

Another patient, a 64-year-old woman with a history of cataract surgery and keratoconus in her left eye, needed a penetrating keratoplasty in her right. In that eye, Dr. Sclafani fit her in a tandem-fit intralimbal corneal lens with a soft piggyback. Approximately five years later, the woman—who was taking Lotemax post-transplant—was experiencing epiphora due to punctual stenosis from protracted use of the steroid.

After numerous evaluations, it became clear the patient was in graft failure and needed a corneal retransplant. Dr. Sclafani also wanted to improve her other keratoconus eye in preparation. With eyelid concerns, she decided scleral lenses were the solution, although she hadn't fit them before. She said many ODs struggle with the decision to refer patients to knowledgeable colleagues. "We're afraid [the patient] isn't going to come back," Dr. Sclafani said. But, she stressed, ODs need to ask for help when they need it.

Going the Extra Mile

Dr. Sclafani encouraged optometrists to not shy away from acquiring skills such as fitting scleral lenses, noting that assistive tools are available to help. One example is anterior segment optical coherence tomography, which enables eye care practitioners to evaluate the tear layer thickness and linear landing zones for scleral lenses. Additionally, elevation-specific technologic impressions of the ocular surface are available to create customized lenses.

Finally, Dr. Sclafani challenged optometrists to take the necessary steps to help patients stay in their lenses. In one case when a female patient experienced chronic pain from surgical complications to address a sphenoid wing meningioma, Dr. Sclafani went to her house to hone her technique. She was struck by the fact that the woman had dedicated her guest bathroom to her contact lens regimen.

"What we do every day to change someone's life is more than you can even imagine," Dr. Sclafani said. ●

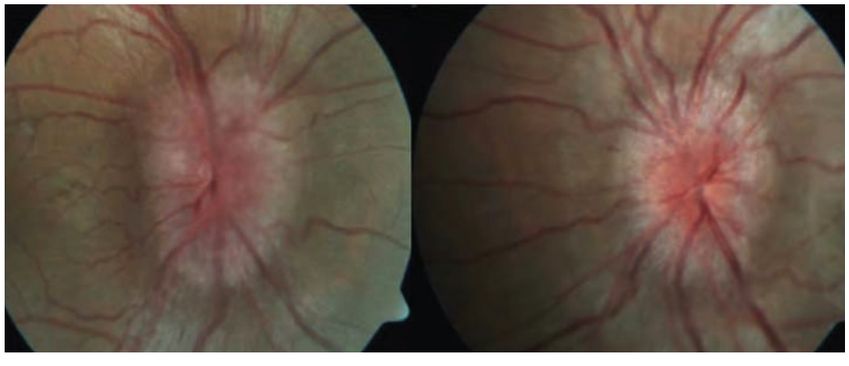
Managing Optic Nerve Edema Through Thick and Thin

Continued from Page 1

my students at UAB that, when you have true optic nerve edema, you'll see a psychedelic appearance" on the OCT, he said, pointing out the swirling blues and reds on the readout. In that patient's case, it turns out, she was battling something the cat dragged in—*Bartonella henselae*.

That's a common case, presented in a "textbook" way, but the most common optic nerve edema, Dr. Cleghorn says, is anterior ischemic optic neuropathy (AION), which can include loss of vision due to loss of blood flow to the eye. This can be devastating for patients, but it can be even worse if their doctor misses an important associated diagnosis—giant cell arteritis (GCA). "That's something you don't want to miss," Dr. Cleghern said. "You never want your patient to go blind in both eyes," which can be a real risk of this autoimmune condition also associated with scalp tenderness and some flu-like symptoms such as muscle aches, jaw claudication, fatigue and weight loss. Patients with GCA "will generally feel terrible," he explained. Also, although most GCA patients are women, older than 55 and Caucasian, "patients don't always like to read the textbook," Dr Cleghern joked. If you suspect it, it's time to obtain a temporal ESR—the gold standard for confirming this condition. "This is a true ocular emergency," he said.

Some cases presented are still leaving researchers scratching their heads. For instance, non-arteritic anterior ischemic optic neuropathy is a perfusion issue with no proven treatment options. "Unfortunately this is a really sad condition. I don't really like conditions I can't treat," he said. "All you can really do is cut down on risk factors." Dr. Cleghern advises that, for these patients, doctors should under-promise and over-deliver.



Diabetes is another systemic condition Dr. Cleghern noted is associated with papilledema, as seen here.

Bringing Down the System

Dr. Cleghern reviewed diagnostic and treatment approaches for several conditions and advocated strongly for optometric involvement. "We, as primary eye care providers, are on the front lines," he said. He also discussed the OD's role in systemic conditions that can affect the optic nerve, such as MS (which can lead to optic neuritis), diabetes (diabetic papillopathy), hypertension (idiopathic intracranial hypertension), sarcoidosis, lupus and Reiter's syndrome. If you suspect these, it's time to order lab tests and call the appropriate specialist—be it in rheumatology, neurology or another discipline.

"We can be the ones to diagnose the systemic conditions, which is huge," he said. You'll have to order an MRI and look for white lesions. Additionally, it may be wise to put your patient in touch with a neurologist as soon as possible. ●

SATURDAY: 5:30–7:30pm ROOM A312, LEVEL 3

Employ Narcotics with a Deft Hand

Prepare yourself for the responsibility that comes with prescribing these drugs.

Narcotics can be an important part of primary eye care, according to Ben Casella, OD, of Augusta, GA, who's presenting on the topic tonight. But they come with serious concerns to keep an eye out for. In his talk, "What's the Buzz with Narcotics?" Dr. Casella will cover how to safely prescribe these "potent and potentially addictive medications." The goal here is to provide attendees with a contemporary understanding of narcotic (and non-narcotic) analgesics, common narcotic scenarios seen in primary eye care, narcotic contraindications and interactions, today's regulation and addiction and overdose.

Dr. Casella will get things started by reviewing non-narcotic analgesics, including acetaminophen and nonsteroidal anti-inflammatory drugs, before segueing into a review of today's narcotics. While providing examples of narcotics and the categories they fit into, he will discuss their effects on various other factors such as respiratory depression, alcohol use and pregnancy. For example, Dr. Casella warns, "If a narcotic prescription is warranted, pregnant patients must consult with their OB-GYN prior."

From there, Dr. Casella will address today's opioid epidemic and the problem it presents to patients. To combat this, it is important to be familiar with the Centers for Disease Control and Prevention's guidelines for prescribing opioids for chronic pain, Dr. Casella says, as well as the accompanying recommendations for prescribing practitioners.

"ODs are on the frontlines of health care, in general," says Dr. Casella. "They may often be first to recognize a problem, so they have obligations to confront this and refer when appropriate."

To aid optometrists in this process, Dr. Casella will provide some tips for recognizing abuse in patients. For example, physical dependence is more readily recognized if therapy is stopped abruptly, he says.

In conclusion, Dr. Casella will remind attendees once again to look for the signs of narcotic abuse and take action. "Doctors are trained to treat and care, not to judge," says Dr. Casella. "Do not be afraid to prescribe, just be prudent when doing so." ●

Narcotics Fast Facts

Contraindications:
- Hypersensitivity
- Pregnant (nursing?)
- COPD
- Bronchial asthma
- Caution with renal/hepatic dysfunction, alcoholism
- Use of other CNS agents

Adverse effects:
- Nausea, vomiting
- Breathing difficulties
- Euphoria
- Constipation
- Pruritis

SATURDAY: 1:45–6:15pm AMPHITHEATER A3

Boost Your Business with MedPro 360

All your practice growth questions answered, and more!

Optometrists looking to strengthen their business acumen should mark their schedules for MedPro360. This afternoon's program features four presentations, each designed to address various aspects of business management.

First up, Donald Miller, CEO of Storybrand, will discuss how to clarify your practice's messaging, and the first goal is updating your website so it "starts working for you."

Next, HGTV Design Star judge and award-winning architectural and interior designer Vern Yip will present "Design and the Medical Office." Attendees will learn how to improve their bottom line and their patients' experience through design.

After a short break, the program will continue with "Protecting Your Cyber Data" by Marc Haskelson, president and CEO of Compliancy Group. In this lecture, Mr. Haskelson will help attendees achieve a practical understanding of cybersecurity. "Systems and data have never been more valuable or at risk of attack," he says. "What's more, the threats are changing daily, making the evaluation and purchase of IT security solutions a complicated and challenging endeavor."

The afternoon will finish off with a presentation from Jenn Lim, a consultant for Zappos and CEO of Delivering Happiness, a company she co-founded with Tony Hsieh, CEO of Zappos. "Delivering Happiness is a culture 'coachsulting' (a hybrid of coaching and consulting) company that helps organizations create a company culture meant to attract, engage and retain employees for a more productive, happier workforce," says Ms. Lim. In sharing the story of Zappos and Delivering Happiness, she hopes to provide attendees with pearls they can use to set their practices apart.

Overall, this program is a must for anyone looking to foster growth in their practice.

"Attending MedPro360 gives healthcare professionals the opportunity to learn the best industry practices needed to create a sustainable business," says Ms. Lim. "From things like team management to marketing, MedPro360 connects you to people who can give advice and guidance." ●

Course #400
MedPro360 – Storybrand
1:45–2:45pm (No Credit)
Donald Miller

Course #401
MedPro360 – Design and the Medical Office
2:45–3:45pm (No Credit)
Vern Yip

Course #402
MedPro360 – Protecting Your Cyber Data
4:15–5:15pm (No Credit)
Marc Haskelson

Course #403
MedPro360 – Delivering Happiness
5:15–6:15pm (No Credit)
Jenn Lim

SATURDAY, MARCH 3 OPTOMETRIC EDUCATION

Looking to sharpen your skills in a specific area? Here are today's OD courses by topic. For course descriptions, visit attendseco.com/education.

Time	Course	Presenter(s)	Location
ANTERIOR SEGMENT			
7:30–8:30am	Corneal Dystrophies and Degenerations	Sorkin	Room A314
8:30–10:30am	Special Session: Anterior Segment Solutions	Al-Mohtaseb	Amphitheater A3
(Sun. 3/4) 9–11am	Special Session: Cornea Update	Shovlin, Bartlett	Amphitheater A3
(Sun. 3/4) 12–2pm	How Do You Mend a Broken Cornea?	DenBeste	Room A411/412B
GLAUCOMA AND OPTIC NERVE			
6:30–8:30am	The Pressure is On: Managing Challenging Cases in Glaucoma	Chaglasian	Room A302
12:30–2:30pm	Get Going with Glaucoma	Schmidt	Room A302
3:30pm–5:30pm	Glaucoma Update: New Tools and Treatment Options	Chaglasian	Room A302
11am–1pm	3D Gonio Learning Lab	Tyler, Black	Room A303
2–4pm	3D Optic Nerve Head Learning Lab	Tyler, Black	Room A303
GENERAL OPTOMETRY			
3:30–5:30pm	From Outdated to Updated: A Review of Key Clinical Trials in Eyecare	DeWilde	Room A313
LUNCH SYMPOSIA (FREE/INDUSTRY SPONSORED)			
11:30am–12:30pm	A Vision of the Future: Changing Demographics Changing Models in Optometry, presented by *Women in Optometry*	Jasper, Gilbert-Spear, Hammonds	Amphitheater A3
11:30am–12:30pm	A Look into Xiidra (lifitegrast ophthalmic solution 5%), presented by Shire	Hauser	Amphitheater A3
PHARMACOLOGY			
12:30–2:30pm	New Drugs and Bugs 2018	Caldwell, Offerdahl	Room A312
3:30–5:30pm	Oral Antibiotics and Antivirals in Eye Care: A Discussion Between an Optometrist and a Pharmacist	Caldwell, Offerdahl	Room A305
5:30–7:30pm	What's the Buzz with Narcotics?	Casella	Room A312
(Sun. 3/4) 11am–12pm	Orals in Eyecare	Casella	Room A305
POSTERIOR SEGMENT			
1:30–2:30pm	SECO Snap Chat: Clinical Decisions In Retina	Dunbar	Room A316
(Sun. 3/4) 7–9am	Special Session: Retina 2018	Haynie, Zaidi	Amphitheater A3
PRACTICE MANAGEMENT			
6:30–7:30am	What's Brewing? Creative Techniques for Finding Your Next New Team Member	Burns	Room A315
1:45–2:45pm	MedPro360—Storybrand	Miller	Amphitheater A3
2:45–3:45pm	MedPro360—Design and the Medical Office	Yip	Amphitheater A3
3:30–5:30PM	Medical Errors	DenBeste	Room A314
3:30–5:30pm	MACRA/MIPS—A Hands On Workshop	Wroten, Michaels	A411/412B
4:15–5:15pm	MedPro360—Protecting Your Cyber Data	Haskelson	Amphitheater A3
5:15–6:15pm	MedPro360—Delivering Happiness	Lim	Amphitheater A3
SURGICAL PROCEDURES AND COMANAGEMENT			
6:30–8:30am	Secrets of an Orbital Surgeon	Wilkes	Room A305
12:30–2:30pm	Secrets of a Vascular Surgeon	Grimsley	Room A305
3:30–5:30pm	Anterior Segment Surgery Update	Lewis	Room A312
TEAM-CENTERED LEARNING (FOR ODs AND AOPs)			
6:30–7:30am	What's Brewing? Head Born Low Vision Devices	Gartner	Room A304
6:30–7:30am	What's Brewing? Get Comfortable with Amniotic Membranes in an Hour	Caldwell	Room A313
6:30–7:30am	What's Brewing? Vision Therapy: The Top Ten Tools in Action	Taub	Room A316
7–8am	More Productive Staff	Lawrence	Room A402
7–9am	How to Perform a Basic Exam in Spanish	Canizales	Room A410

Continued | **SATURDAY, MARCH 3 OPTOMETRIC EDUCATION**

7:30–8:30am	Understanding Alzheimer's	Messner	Room A313
7:30–8:30am	5 Steps to a Healthy Office Culture	Burns	Room A315
7:30–8:30am	From the Primary Chair to Secondary Care	Slotnick	Room A316
12:30–2:30pm	MIPS and More: A Medicare Survival Guide	Wroten, Michaels	Room A314
12:30–2:30pm	Lens Based Management of Complex BV Cases	Taub, Slotnick	Room A316
2–5pm	CPR Learning Lab	Brown, Brown	Room A412A
3:30–4:30pm	The Latest on Myopia Control	Slotnick	Room A316
4:30–6:30pm	Acquired Brain Injury — A Case Based Approach	Taub	Room A316
5:30–7:30pm	Digging into Dry Eye	Korb	Room A305
TECHNOLOGY			
12:30–2:30pm	Genetic Testing in Eye Care	Nowakowski	Room A313
3:30–5:30pm	Fundamentals of Ophthalmic Electrodiagnostics	Nowakowski	Room A315
5:30–6:30pm	A Primer on Electrodiagnostics	Nowakowski	Room A302
LOW VISION			
3:30–5:30pm	Low Vision Care for the Primary Care Practitioner	Gartner	Room A304
SYSTEMIC DISEASES			
12:30–2:30pm	Neuro-Ophthamology of MS	Messner	Room A311
3:30–5:30pm	Mind Bending Neuro-Ophthalmic Grand Rounds	Messner	Room A311

SATURDAY: 3:30–4:30pm ROOM A316, LEVEL 3

Learn the Latest on Myopia Control

Don't compensate—control.

More than 33% of the US population has developed myopia, according to Samantha Slotnick, OD—a staggering number that is only projected to increase. Her afternoon course, "The Latest on Myopia Control," provides a "tour of research-based highlights which directly impact our optometric management of myopia," says Dr. Slotnick. "Attendees will learn to: (1) identify the functional warning signs that precede myopia progression, (2) get tips on preventing onset or reversing early onset of myopia and (3) take home the latest evidence-based management options, including refractive, mechanical, pharmacological and functional interventions."

To start everyone off on the same foot, Dr. Slotnick will reconsider what it means to treat myopia, and the difference between compensation and correction. Often, clinicians treat the symptoms of myopia—compensation, not true correction. In fact, research has identified that patients wearing compensatory lenses (colloquially referred to as myopia "correction") tend to continue to increase in myopia. In one study of 13 myopic patients fully corrected with lenses, researchers found the rate of myopia increase was 0.2D to 1.0D each year. Rather than simply address the visual side effects of myopia, Dr. Slotnick says, clinicians must prevent onset and slow progression.

Addressing the heart of myopia management, Dr. Slotnick will home in on just how to properly control myopia, starting with patient education on risk factors such as family history and genetic makeup, accommodative deficit, esophoric tendency, amount of time spent in open space/outdoors and, of course, wearing myopic compensation.

Clinicians must also be familiar with the warning signs that precede myopia, and she will share the evidence that enables ODs to catch possible changes early and, hopefully, nip it in the bud.

Prevention is only half the battle, however, and Dr. Slotnick will spend the second half of her presentation discussing the many therapeutic options shown to slow myopia progression. For example, just as research has found full myopia compensation with lenses tends to lead to progression, undercorrection may help control the risk of progression. Prescribing, however, can be something of a Goldilocks and the Three Bears situation. Dr. Slotnick will help attendees choose a lens compensation that is "just right" for myopic patients.

She will then move on to the details of two tried-and-true therapies, orthokeratology and atropine. For example, Dr. Slotnick will discuss recent research that found 0.5% atropine was no better at controlling axial elongation than 0.1%. Even 0.01% has been effective in myopia control.

She'll conclude the session with a discussion of functional control options through vision therapy.

"This course reinforces the optometrist's most valuable contribution to patient care: to educate, protect and serve, all while bringing the patient's world into focus," Dr. Slotnick says. ●

Compensation vs. Control

Myopia compensation options include:
- Ophthalmic: spectacles, contact lenses
- Mechanical: refractive surgery
- Functional: reduce distance-viewing requirements
  - Sit close to board/ front of class
  - Avoid acuity-dependent viewing activities

Myopia control requires:
- Prevent onset
  - Patient education on risk factors
  - Outdoor time
  - Functional, "visual hygiene" 20-20-20 rule
- Slow progression
  - Refractive: undercorrection, bifocal/multifocal spectacles, peripheral hyperopic defocus (spectacles, soft bifocal contact lenses)
  - Mechanical and refractive: orthokeratology
  - Pharmacological: anti-muscarinics (off-label)
  - Address risk factors: Visual hygiene, functional tendencies associated with progression, vision therapy

SUNDAY: 9–11am AMPHITHEATER A3

A Corneal Refresher

Don't sleep on this extensive Sunday morning course.

Bring your corneal knowledge up to date by attending a comprehensive SECO Special Session on all things cornea tomorrow morning. Joseph Shovlin, OD, of Northeastern Eye Institute in Scranton, Pa., and Andrew Bartlett, MD, of Alabama Vision Center in Birmingham will walk practitioners through an array of timely cornea topics in their wide-ranging course, "Cornea Update."

The presenters will start things off by giving attendees a historical perspective on various corneal issues before turning their attention to the modern day. Here, attendees will get an extensive update on everything from corneal dystrophies to systemic diseases.

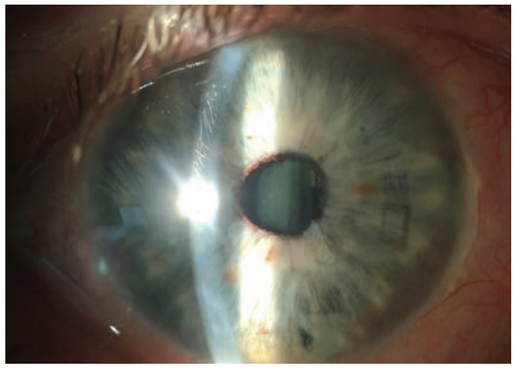


Photo: Andrew Bartlett, MD

One topic of discussion will be Descemet's membrane endothelial keratoplasty, seen here one month after surgery.

An Eye To The Future

Attendees looking to boost their corneal surgery knowledge won't be disappointed, as Drs. Shovlin and Bartlett will also discuss today's surgical techniques and what kinds of results practitioners can expect from them. In particular, the duo will address corneal transplants such as penetrating keratoplasty and lamellar keratoplasty.

"I'm hopeful attendees will take away the significant advancements that modern corneal transplantation techniques can offer," says Dr. Bartlett.

Beyond that, the lecture will preview some of tomorrow's promising surgical techniques. "We'll talk to the audience about what is currently on the horizon and showing promise in pre-clinical trials," says Dr. Bartlett.

Early Birds

And while the course comes on Sunday morning at the tail end of the SECO education load, the presenters plan to keep things spirited and make the early session enjoyable for attendees. "We have lots of pictures and videos to keep the pre-lunch time crowd from ducking out early," says Dr. Bartlett. "I also promise to do my best to keep people from falling asleep and to be as entertaining as the SECO ethics committee allows." ●

SATURDAY: 12:30–2:30pm ROOM A312, LEVEL 3

Want a New Drug?

A look at the latest therapeutics to enter the market.

New pharmaceuticals hit the shelves frequently, and it's on physicians to not only keep pace with medications they may personally prescribe, but also how medications prescribed by other doctors may interact with their treatment plan. Keeping up with every move the FDA makes can be a chore. Thankfully, this SECO course, "New Drugs and Bugs 2018," is cutting the fat and getting right to what matters most for ODs.

With a host of recently approved pharmaceutical options now available to eye care patients, it's every optometrist's duty to know how and when to use them. That's the premise of today's course, presented by Gregory Caldwell, OD, and Tracy Offerdahl-McGowan, PharmD.

New In Your Office

In just the last few years, physicians have seen the launch of Rhopressa (netarsudil ophthalmic solution, Aerie), Xiidra (lifitegrast, Shire), Vyzulta (latanoprostene bunod, Bausch + Lomb), Zerviate (cetirizine, Nicox), Luxturna (voretigene neparvovec, Spark Therapeutics) and Humira (adalimumab, Abbvie), as well as several common non-ophthalmic drugs that may impact ocular health and therapies.

Systemic Update

"We deal with patients who are diabetic, and there are now all these new categories and different combinations of drugs out there. We're looking at new hypertension drugs, weight loss drugs and new rosacea and other dermatological drugs. Any place where there's crossover with systemic medications and where there are side effects, we need to know about that," Dr. Caldwell explains.

Anticonvulsants can lead to the development of amiodarone optic neuropathy, as seen here. Dr. Caldwell will review this contraindication and others in today's lecture.

Although optometrists aren't prescribing non-ocular systemic medications, it's absolutely necessary that ODs understand what drugs their patients take, why they were put on that particular med and any interactions that might impact their overall health. For instance, Dr. Caldwell says, "All diabetes patients need a yearly dilated exam. If they come in on new drugs, the optometrist needs to know why they were switched."

Systemic drugs covered will include Hetlioz (tasimelton, Vanda Pharmaceuticals), Ribociclib (kisqali, Novartis), Zinbryta (daclizumab, Abbvie), Plaquenil (hydroxychloroquine, Pfizer), Symproic (naldemedine, Purdue) and more.

After a comprehensive update on how these new drugs impact the eye and overall health, the presenters will look at a host of case studies of patients, lupus, hypertension, multiple sclerosis and even rare conditions such as benign intracranial hypertension.

The course will also provide a review of how to monitor patients using topography, optical coherence tomography (OCT), OCT angiography and visual fields testing. ●

Earn up to 29 CE Credits*

New Technologies & Treatments in Eye Care 2018

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David Friess, OD, FAAO
President, OCCRS

San Diego Marriott Del Mar

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San Diego, California 92130
Phone: 858-523-1700

A limited number of rooms have been reserved at **$165 per night**. Please make reservations with the hotel directly at 858-523-1700. For group rate, mention "New Technologies and Treatments in Eye Care".

Three Ways to Register

Online: www.reviewofoptometry.com/sandiego2018
Call: 866-658-1772 • E-mail: reviewmeetings@jobson.com

Convenient opportunities to register for one or both meetings.**

REGISTER ONLINE: WWW.REVIEWOFOPTOMETRY.COM/SANDIEGO2018

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**Additional CE fees if attending both meetings. Agenda subject to change. See website for details: www.reviewofoptometry.com/SanDiego2018

Review of Optometry® partners with Salus University for those ODs who are licensed in states that require university credit

OPTOMETRY'S™ MARKETPLACE

EXHIBIT HALL EVENTS FOR SATURDAY, MARCH 3

OPENS: 10:45am
CLOSES: 5pm

FREE CE IN THE PRESENTATION THEATERS

Industry support allows ODs and AOPs to earn credit for free! Space is limited and participation is on a first-come, first-served basis. Today's schedule:

10:45–11:45am:

- How to Use Your Practice as a Personal Wealth Generator (VSP)
- The Art of Retailing (Luxottica)

12:15–1:15pm:

- Perception of Value (Essilor)

12:15–2:15pm:

- Cracking The Code: Clinical Case Management & Medical Record Compliance Part 2

1:15–2:30pm:

- Starting Cold Versus Buying a Practice (VSP)

2:30–3:30pm:

- Onboarding New Staff Members (VSP)
- Innovations in Diabetic Retinopathy (Genentech)

4–5pm:

- Student Debt: The Numbers Actually Work in Your Favor (VSP)

FREE FOOD TASTING TOUR: "TASTE OF NEW ORLEANS"

Join SECO as we honor our new home for 2019: New Orleans. Today from 2:30–3:30pm, browse the exhibits as you enjoy a sampling of treats and beverages synonymous with the Big Easy.

SHOW SPECIALS

Many exhibitors are offering special deals. Check out the list in the mobile app or on page 14.

EXHIBIT HALL IN-BOOTH EVENTS

Be sure to visit these companies for special events today:

AcuityPro Software: Showing off a totally redesigned booth, the company will also be randomly handing out International Space Station hats while supplies last.

EyeMed Vision Care: Free charging pad for the first 100 attendees to take a survey.

MacuLogix: Offering free copies of the most recent AMD diagnostic and treatment guidelines, along with patient management recommendations. Stop by and ask for the ***AMD Knowledge Base***, a collection of reading essentials for the diagnosis and treatment of AMD.

TLC Laser Eye Centers: TLC will be hosting a LASIK Wet Lab each day. Today's takes place 1–4pm. Attendees can create a LASIK flap on a pig's eye using the Alcon laser suite, have Pentacam scans performed on their eyes and learn how to interpret the results. Lecturers will review pre- and post-op care protocols for LASIK and PRK. Upon completion, participants can sign up for a chance to win a Fitbit.

NEW! STUDENT ESCAPE ROOM

1pm, 2:45pm, 4:30pm

Students, test your optometry knowledge as you work together searching the room to find clues, solve riddles and crack codes to accomplish the goal of escaping within the hour. Three rooms will be running simultaneously with groups of 10 students each.

LEARNING LOUNGE, POSTERS & GOOGLE TALKS

In this informal educational environment, you can hear from industry leaders on the latest in exciting trends. Plus, experience the new Google Talks! Liz Austin from Google shares cutting-edge strategies for finding new patients and growing your business with Google. You can also find the return of our multimedia Poster Presentations.

THE VIEW

See some of the world's most exclusive frames in THE VIEW, SECO's Luxury Eyewear Pavilion.

Exhibitor Listing for SECO 2018 *(as of February 26, 2018)*

Attendees can visit Optometry's Marketplace at SECO™ for free just by mentioning an exhibiting company they intend to visit during SECO 2018.

EXHIBITOR	Booth
4ECPs, a Preferred Premier Google Partner	1300
A&A Optical	1200
ABS Smart Mirror	1111
ABB Optical Group	332
Acuity Pro/VisionScience Software	1113
Akorn	800
Alcon	429
Allergan	1220
Allied Powers	404
Allure Eyewear	714
American Academy of Optometry	1725
American Academy of Orthokeratology and Myopia Control	1726
American Board of Opticianry – National Contact Lens Examiners	1718
American Board of Optometry	1724
Applied Medical Systems	301
Art Optical Contact Lens	603
Article One	1337
Aspex Eyewear Group	1201
Association of Schools and Colleges of Optometry	127
Avalon Eyewear	437
Avesis	1532
Baumvision	1137
Bausch + Lomb	818
Beaver Visitec International	737
Binocleuses	1330
Bio-Tissue	310
BlephEx	1500
Bruder Healthcare Company	327
Bushnell Outdoor Products	1431
CareCredit	1600
CatarActive3	235
Centervue	1619
Chadwick Optical	209
Clearlens	1536
ClearVision Optical/BluTech	1005
Coburn Technologies	321
Color My World by EyeChroma	504
Community Low Vision Center	131
Compulink Business Systems	1313
Contact Lens Spectrum (Pentavision)	512
CooperVision	513
Costa Sunglasses	627
Crystal Practice Management	330
Demandforce	1629
Design Eyewear Group	1422
DGH Technology	320
Digital Healthcare Professionals	313
Digital Heat Corporation	241
Diopsys	633
DM Med Group	1614
Ear Technology Corporation	1625
Eastern Ophthalmic Supply & Repair	701
EdgePro by GPN Technologies	715
Edison Optics	1436
E-Dr. Network/New Era	408
Energeyes, the Association of Corporate-Affiliated Optometrists	1604
Eschenbach Optik	1115
eSee Acuity	1528
Essilor Instruments	420
Essilor of America	419
Eye Designs	921
Eyecare Business (Pentavision)	514
EyeCor by Nteon/Nteon Practice Consultants	506
Eyefficient	300
EyeMed Vision Care	538
EyePromise/ZeaVision	605
Eyes of Faith Optical	1412
Faniel Eyewear	1328
Fashion Optical Displays	507
Gazal Eyewear	1241
Good-Lite	401
Hai Laboratories	711
Harvest Acuity	311
Healthpod	704
Heidelberg Engineering	1505
Heine USA	611
Hoya Vision Care	1013
Icare USA	432
i-dealoptics	1427
Identity Optical Lab	412
IDOC	405
iMatrix	1307, 1533
ImprimisRx	1428
Innexus by Innereactive	308
Integra Life Sciences	1401
Interstate Optical	802
Invision Magazine	1723
J & M Distribution	1615
Jeunesse Innovations	1511
Johnson & Johnson Vision	1019
Kasperek USA Optical	1405
Katena	533
Keeler Instruments	1101
Kentucky College of Optometry	121
Kingdom Eyewear	1228
Kio Yamato Optics	1340
Konan Medical	1207
LA Eyeworks	1141
Lacrivera	609
Lafont	812
LasikPlus	1522
Life Without Color	211
Lombart Instrument	738
Luneau Technology USA (AIT, Briot, WECO, LPO, Visionix)	424, 426
Luxottica Group	621
M&S Technologies	414
MacuLogix	1515
Mad Vision	1139
Marco Ophthalmic	1029
Marcolin USA Eyewear	913
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National Board of Examiners in Optometry	1513
National Vision Retail	1507
National Vision	1304
Natural Ophthalmics	315
NCI Vision Systems	536
Nerdwax	245
New York Eye	713
Nidek	1215
Nouveau	931
Nova Southeastern University College of Optometry	123
NovaBay Pharmaceuticals	438
Novartis Pharmaceuticals	137
Oasis Medical	1214
Oculus	836
Ocusoft	1109
Optical Academy Alliances	440
Opticwash	339
Optikam Tech	328
Opto Multimedia	400
Optometric Architects	607
Optometric Management (Pentavision)	510
Optometric Protector Plan	410
Optometry Times (UBM)	1729
Optos	1301
Optovue	1521
Orgreen + Goldsmith	1240
Orion Vision Group	1610
Ottica Veneta	1229
OWP USA	1430
Passion to Heal, Me to We	128
Patch	645
Pharmanex	1310
Practice Director EHR	1621
Presenta Nova	338
Professional Eye Care Associates of America	304
Proof Eyewear	322
Quantel Medical	1433
Quidel Corporation	641
Q-Vision Optics	407
Reichert	1419
Remote Area Medical	1737
Review of Optometry	1411
RevolutionEHR	411
RightEye	220
Santinelli International	1204
ScienceBased Health	1414
Shire	501
Shwood Eyewear	1426
Signet Armorlite	314
SingleCare	305
Solutionreach	323
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Studio Optyx	1437
Sun Ophthalmics	201
Suppleyes	309
TearScience	433
TelScreen	318
The Gideons International	739
The Lens Butler	205
The McGee Group	827
TLC Laser Eye Centers	537
Topcon Medical Systems	727
US Optical	1501
UAB School of Optometry	120
Ultra Palm Optical (Cazal, Caviar, Goliath)	1329
United States Air Force	129
Uppercut Consulting	303
Villa Eyewear	1338
Vital Tears	838
Vmax Vision	601
Volk Optical	1103
VOSH International	1727
VSI, a division of Enhanced Medical Services	1525
VSP Global/VSP Optics Group/Eyefinity/ Marchon/Altair	805
Walman Instruments	927
Walman Optical	1026
Wal-Mart Health and Wellness	1212
Weave	639
Williams Group	706
Wolters Kluwer	543
X-Cel Specialty Contacts	1032
Zeiss	700

EXHIBIT HALL MAP A

Today's Free CE in Theater 1

10:45–11:45am: The Art of Retailing (Luxottica)

12:15–2:15pm: Cracking The Code: Clinical Case Management & Medical Record Compliance Part 2

2:30–3:30pm: Innovations in Diabetic Retinopathy (Genentech)

SECO 2019

Find out about our move to New Orleans for next year's conference. Register today! Prizes will be given out, too—ask for details at the booth!

Industry's Perspective

Stop by the Learning Lounge to hear industry executives discuss trends in eye care.

Today's Free CE in Theater 2

12:15–1:15pm: Perception of Value (Essilor)

Today's Free CE in Theater 3

10:45–11:45am: How to Use Your Practice as a Personal Wealth Generator (VSP)

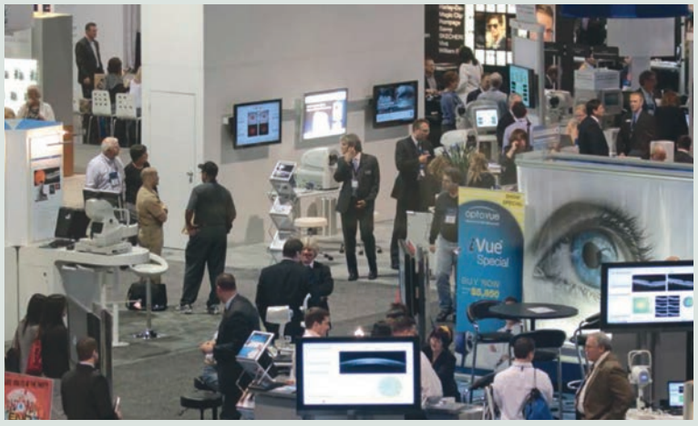
1:15–2:30pm: Starting Cold Versus Buying a Practice (VSP)

2:30–3:30pm: Onboarding New Staff Members (VSP)

4–5pm: Student Debt: The Numbers Actually Work in Your Favor (VSP)

Exhibit Hall Show Specials

Acuity Pro Software *Booth 1113*	Offering several specials on software, including $100 off Acuity Pro Version 9 license key ($995) or $50 off Version 9 upgrade licenses. Included is a USB Acuity Pro license key and installation, remote control/receiver, mouse pad, HOTV/hot key card and pair of red/blue glasses. You can also place orders directly from the website and take advantage of the show specials by using coupon codes UPGRADE2018 or LICENSE2018.
eSee Acuity *Booth 1528*	Stop by booth 1528 to enter a raffle for a free all-in-one digital acuity chart. Just drop on by with no purchase or gimmicks!
Eschenbach Optik *Booth 1115*	Buy three, get one free—a $1,595 value! Our new Visolux Digital XL FHD is an advanced portable video magnifier that features a 12-inch touch screen display. With magnification from 2x to 22x, dynamic line scrolling, FHD camera and HDMI and USB ports, it's ideal for patients who need extra magnification.
EyeMed Vision Care *Booth 538*	Stop by booth 538 to see for yourself how being part of our network leads to profit potential and loyalty from EyeMed members. On Thursday from 1–4pm, speak one-on-one with EyeMed's president Lukas Ruecker.
Eyes of Faith Optical *Booth 1412*	Receive a 30% discount on your 30-piece order and keep your boards refreshed. Fifteen ready-for-spring styles ship in March, 15 sizzling styles for summer ship in May.
Kasperek USA Optical *Booth 1405*	Leave the booth with your premium in hand! Mix and match from the following collections: Glen Lane, Pure-T, Pure-T Max, Camelot, Pure Color, Cc: Two is One or Pure Comfort. Five frames earns you a $100 Visa gift card. For 17 frames, receive an iPad or Apple Watch. And pick any 28 frames to receive an iPad Pro.
Lacrivera *Booth 609*	• FlexFit punctal plugs: sterile preloaded $49/pair & nonsterile bulk $265/10 pair box. • VeraPlug punctal plugs: sterile preloaded $40/pair & nonsterile bulk $250/10 pair box. • Vera90 Extended Wear (60 to 180 days): $100/10 pair box. • VeraC7 collagen plugs: $45/60 plugs.
Lombart Instrument *Booth 738*	• Haag-Streit BI 900 slit lamp $11,599 (was $13,691) and free BC/BD tonometer! • Haag-Streit Octopus perimeter: up to $15,000 trade-in. • Topcon 3D OCT-1 Maestro: Up to $15,000 trade-in, free Lombart table and large table top, free remote installation of review software, free ongoing remote training. Limited offer: five-year leasing special $1,099/mo for 60 months, includes five-year service coverage. • Topcon Aladdin HW 3.0 biometer: up to $12,500 trade-in, $2,000 mail-in rebate, free CAS training ($1,500 value), free Lombart table and small top, free IOL configuration setup. • Reichert Ocular Response Analyzer G3: 0% financing for 24 months; monthly payment $677. • Lane promotions (incl. 2nd-year warranty): premium lane package $28,990 ($3,277 savings), digital refraction package $29,485 ($4,595 savings), value lane package $13,995 ($2,585 savings).
Natural Ophthalmics *Booth 315*	Ongoing education plus 15% show discount promo on all orders. Natural products for dry eye and allergy will increase revenue, bring referrals to your office and meet patients' needs.
MaximEyes, by First Insight *Booth 1331*	Attend a 10-minute MaximEyes EHR demo in Booth 1331 and get a $10 Starbucks gift card. Must be a practicing doctor or practice decision-maker.
Modern Optical International *Booth 500*	Buy 20 frames, get 20 free! Modern Optical is family owned and has been a proud supporter of independent eye care since 1974. Restrictions apply on free frames.
Professional Eye Care Associates of America *Booth 304*	Promotion for new members: join by March 15, 2018 and your next three months of PECAA membership are free!



New Product Launches

Ear Technology Corporation *Booth 1625*	New-to-the-industry hearing products designed for the optical channel include TuneAmp, which is affordable, easy to use and easy to sell. TuneAmp is already sold by many opticians in Europe, but SECO is the first showcase for our products in the US. Great opportunity to add revenue and profit to the practice. Stop by and let us show you how it easy it can be!
Eyes of Faith Optical *Booth 1412*	New styles: Integrity and Trust (both available in ophthalmic and sun). New colors: hickory smoke (for the Honor line), scarlet (for the Beauty line), choc-full-of-color (for the Alive line).
Villa Eyewear *Booth 1388*	The Blackfin Spring/Summer 2018 collection includes the new Bonita Bay, Ocean Ridge, Elliott Key and Marrowstone frames.
CooperVision *Booth 513*	CooperVision Introduces MyDay toric daily disposable contact lenses that incorporate the Biofinity toric design and material, offering the healthy advantages of silicone hydrogel, uncompromised comfort and handling, and excellent lens stability and visual acuity.
EyeChroma *Booth 504*	EyeChroma is a brand new company. SECO is our first trade show. We are bringing the first professional kit of color-enhancing glasses to help colorblind patients see a much more vibrant world The kit includes our five most successful lens coatings proven to be successful for the vast majority of colorblind patients.
ImprimisRx *Booth 1428*	Preservative-free cyclosporine 0.1%/chondroitin sulfate compounded ophthalmic emulsion is now available for only $99.99 for your patient's first three bottles. No prior authorizations, no coupons and no pharmacy callbacks to deal with.
Lacrivera *Booth 609*	The new FlexFit punctal occluder by Lacrivera offers a fresh approach in bringing greater value to your dry eye practice. The FlexFit nose technology, designed to collapse when inserted, allows for simple sizing, easy insertion, superior retention and excellent patient comfort. Available in four sizes and in sterile preloaded or non-sterile bulk packages.
Marco *Booth 1029*	Visit Marco to see our newest products: TS-310 refractive tabletop workstation, LM-7 Series lensmeters and the new Ultra M Series slit lamps.
Kingdom Eyewear *Booth 1228*	We are pleased to debut the Casanova Occhiali, Taxi and Dolce Vita collections of hand-enameled and cloisonné eyewear designs for the first time at SECO, only in the VIEW.

Earn up to 19 CE Credits*

New Technologies & Treatments in Eye Care 2018

REVIEW OF OPTOMETRY®
EDUCATIONAL MEETINGS OF CLINICAL EXCELLENCE

Nashville

PROGRAM CHAIR

Paul Karpecki, OD, FAAO

Doug Devries, OD

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ABOUT

APRIL 6-8, 2018

Join Review of Optometry's New Technologies & Treatments in Eye Care April 6-8, 2018, at the Nashville Marriott at Vanderbilt University.

This meeting provides up to 19* COPE CE credits including interactive workshops!

LOCATION

Nashville Marriott at Vanderbilt University

2555 West End Ave
Nashville, TN 37203
Reservations: 615-321-1300
DISCOUNTED RATE: $249.00/night

Identify yourself as a participant of "*Review of Optometry*" for discounted rate. Rooms limited.

REGISTRATION

Registration Cost: $495

Three Ways to Register

ONLINE:
www.reviewofoptometry.com/nashville2018

PHONE: 1-866-658-1772

E-MAIL: reviewmeetings@jobson.com

REGISTER ONLINE: WWW.REVIEWOFOPTOMETRY.COM/NASHVILLE2018

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SALUS UNIVERSITY
Pennsylvania College of Optometry

***Review of Optometry*® partners with Salus University for those ODs who are licensed in states that require university credit.**
See event website for agenda and up-to-date information.

SATURDAY: 12:30–2:30pm ROOM A305, LEVEL 3

Vascular Surgery Pearls

Become well-versed on the impact of extracranial cerebrovascular occlusive disease on our patients.

There is a lot optometrists can learn from vascular surgeons. And now, you can hear from one firsthand during a Saturday afternoon course. In "Secrets of a Vascular Surgeon," Brad R. Grimsley, MD, of Dallas, will dive into his own experience to give attendees an extensive look at extracranial cerebrovascular occlusive disease (specifically in terms of its effects on vision).

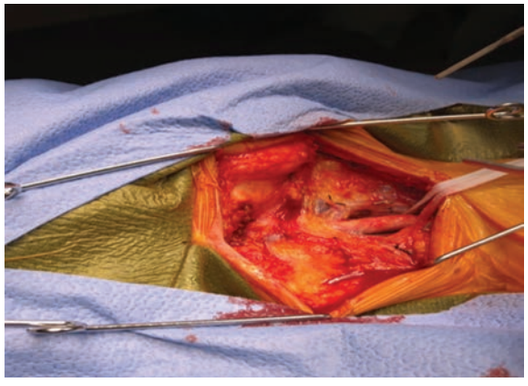
Objectives for the afternoon include gaining familiarity with disease anatomical and physiological factors, diagnostic modalities and therapeutic options for these cases. Throughout the lecture, Dr. Grimsley will place emphasis on common clinical manifestations practitioners may encounter.

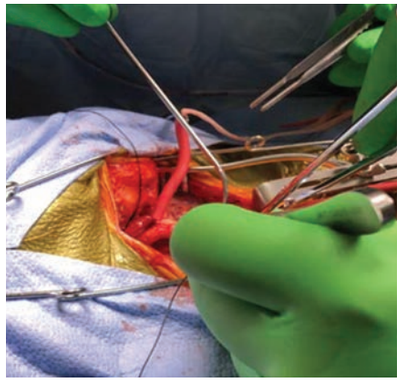
The course will start off with a look at anatomical and physiological factors. Here, Dr. Grimsley will review of atherosclerotic risk factors such as hypertension and smoking, risk factor modification and to how identify the "vasculopath" (a patient with vascular disease). He will also go over some other, more unusual disease processes.

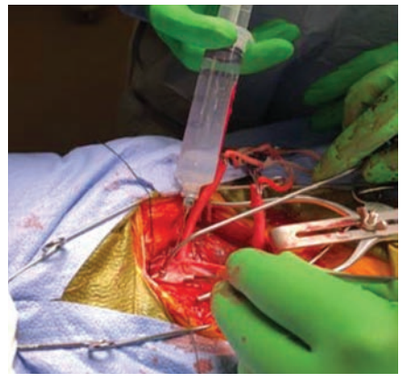
Discussion will then shift to the pathogenesis of atherosclerotic plaque. More specifically, Dr. Grimsley will focus on plaque in the carotid and vertebral arterial systems.

Next up, Dr. Grimsley will walk attendees thorugh the diagnostic evaluation of patients with cerebrovascular occlusive disease. In stroke imaging, for example, the key element is differentiation of ischemic from hemorrhagic stroke, Dr. Grimsley says. For carotid disease, meanwhile, color duplex ultrasound has replaced arteriography as the preferred screening test. This portion of the course will also cover angiography (the "gold standard" for carotid disease) as well as MRA and CT angiography, which are frequently used to confirm ultrasound findings.

At this point in the lecture, Dr. Grimsley will give attendees a crash course on clinical syndromes relating to the posterior and anterior cerebrovascular system, and to finish things off, he will delve into traditional therapeutic modalities for these cases. For example, some prophylaxis strategies he will go over involve controlling hypertension and cholesterol, getting patients to stop smoking and anti-platelet therapy. Dr. Grimsley will also preview newer and more complex procedural remedies for these patients. ●







This course may not be for those with a weak stomach, as Dr. Grimsley will augment the clinical information with visuals of vascular surgery, such as this carotid endarterectomy, which can reduce the risk of stroke.

Continuing Education with Examination (CEE/TQ) Courses at SECO 2018

Date	Start	End	Course #	Title	COPE
Saturday	6:30am	8:30am	154	The Pressure is On: Managing Challenging Cases in Glaucoma	20-638342
Saturday	6:30am	8:30am	156	"What's Brewing?" All About Dry Eye & MGD	20-609705
Saturday	12:30pm	2:30pm	159	Get Going with Glaucoma	20-638344
Saturday	12:30pm	2:30pm	161	Neuro-Ophthamology of MS	20-609699
Saturday	12:30pm	2:30pm	162	New Drugs and Bugs 2018	20-609697
Saturday	3:30pm	5:30pm	164	Glaucoma Update: New Tools and Treatment Options	20-609709
Saturday	3:30pm	5:30pm	166	Anterior Segment Surgery Update	20-638460
Saturday	3:30pm	5:30pm	169	From Outdated to Updated: A Review of Key Clinical Trials in Eyecare	20-609713
Saturday	5:30pm	7:30pm	529	Digging Into Dry Eye	20-609723
Sunday	12pm	2pm	530	Lunch Course: How Do You Mend a Broken Cornea?	20-609725

SECO CHAMPION SPOTLIGHT

Published in partnership with Johnson & Johnson Vision.

Honoring Our Eyes: Meet the New Johnson & Johnson Vision

Since SECO 2017, the makers of ACUVUE® Brand Contact Lenses have expanded to become Johnson & Johnson Vision, adding consumer eye health solutions, cataract and refractive surgical technologies and devices for the identification and treatment of meibomian gland dysfunction. For the first time at SECO 2018, the company brings together a comprehensive portfolio under one banner and invites SECO attendees to meet the new Johnson & Johnson Vision.

"With three acquisitions in one year, we have made a declaration about our commitment to eye health," said Peter Menziuso, President, North America, for Johnson & Johnson Vision Care, Inc. "Now we are excited to come to SECO 2018 with a broader portfolio, a bigger team and a commitment to strengthen our support for eye doctors and their patients."

Serving a full life cycle of patient care

"We recognize that optometrists have been at the forefront of addressing the evolution of eye health needs for many years," Menziuso said. "With our expansion beyond vision correction, we are proud to join alongside you in addressing a full life cycle of patient care."

Through the company's acquisition of TearScience in 2017, Johnson & Johnson Vision added LipiView, LipiScan and LipiFlow to its portfolio, serving a growing practice area in imaging the Meibomian glands and treating Meibomian gland dysfunction, the leading cause of dry eye disease. Each of these technologies is on display and available for demonstration in the Johnson & Johnson Vision booth during SECO 2018.

The addition of the Blink® Family of Products in 2017 broadened the Johnson & Johnson Vision offering in consumer eye health products, including Blink RevitaLens® Multi-Purpose Disinfecting Solution and Blink® Tears Lubricating Eye Drops. Samples are available in the Johnson & Johnson Vision booth for SECO 2018 attendees.

While the company has expanded, its focus and commitment to optometry and contact lenses remains. "Our commitment to optometrists, paraoptometric staff and patients is steadfast," Menziuso said. "Backed by the enterprise capabilities of Johnson & Johnson, we intend to maintain and strengthen our relationships with you while looking for new and better ways to do the most good for patients throughout their lifetime."

Insights, Science, Technology, People

Johnson & Johnson Vision brings together cutting-edge insights, science, technology and people to encourage professionals and patients to proactively preserve and enhance sight for life. What does this mean for the eye health community?

"Johnson & Johnson Vision relies on years of data and insights gleaned from clinical and market research to develop the next generation of products; through its expansion, these insights are no longer exclusive to contact lenses," Menziuso said. "Instead, dry eye researchers can share data with others creating the next generation of contact lenses or surgical devices. And experts in cataract surgery can now share information about optimal pre- and post-op ocular health with dry eye researchers. These newly created connections within Johnson & Johnson Vision are helping to drive the future of eye health innovation."

In the last year, two new ACUVUE® products were introduced—ACUVUE® 1-Day OASYS Brand Contact Lenses 1-DAY with HydraLuxe™ Technology for ASTIGMATISM and ACUVUE® VITA® Brand Contact Lenses for ASTIGMATISM—and the company expanded parameter offerings—adding 48% more parameters – for 1-DAY ACUVUE® MOIST Brand Contact Lenses for ASTIGMATISM. Upcoming contact lens innovation from ACUVUE® aims to address eye heath needs beyond vision correction, and the company will announce more soon.

In addition to the unique technologies coming in product innovation, Johnson & Johnson Vision is also invested in technology that enables patients to have more convenient access to eye health products and services, while keeping the doctor at the center of eye health care. Sightbox, acquired in 2017, keeps the doctor at the center of vision care by ensuring its members—your patients—get an annual exam and by making it simple for them to comply fully in their contact lens usage.

And finally, as the industry shifts to keep pace with science and technology, Johnson & Johnson Vision is working to move along with it, in partnership with the eye health community.

Power to the People

Ultimately, the insights, science, technology are meaningless without the power of people.

"You—the primary eye health provider—are key to addressing patients' eye health needs while balancing a shift in the eye health landscape," Menziuso said. "As your partners, we know it's not products, websites or new business models that we must focus on. It's the hearts and minds of people that will address the greatest challenges and create the biggest opportunities ahead of all of us." ●

ACUVUE® Brand Contact Lenses are indicated for vision correction. As with any contact lens, eye problems, including corneal ulcers, can develop. Some wearers may experience mild irritation, itching or discomfort. Lenses should not be prescribed if patients have any eye infection, or experience eye discomfort, excessive tearing, vision changes, redness or other eye problems. Consult the package insert for complete information. Complete information is also available from Johnson & Johnson Vision Care, Inc., by calling 1-800-843-2020, or by visiting www.acuvueprofessional.com. ACUVUE®, ACUVUE OASYS® and ACUVUE® VITA® are trademarks of Johnson & Johnson Vision Care, Inc.©

SECO Announces Its 2018

These top experts are recognized for their commitment to the profession and their exceptional skills.

SECO proudly announces the recipients of its 2018 awards to recognize significant contributions to optometry. Jerry Gerdes, OD, is this year's Optometrist of the South award winner, SECO's highest honor. Rachel Wruble, OD, is receiving SECO's Young Optometrist of the South award. Margaret Chester, CPOC, CPOA, is the 2018 Paraoptometric of the South. The Distinguished Service Award is going to Vaughn Sanders, OD. And Paul C. Ajamian, OD, is receiving this year's President's Award in recognition of his 30 years of service of advancing continuing education in optometry across the globe.

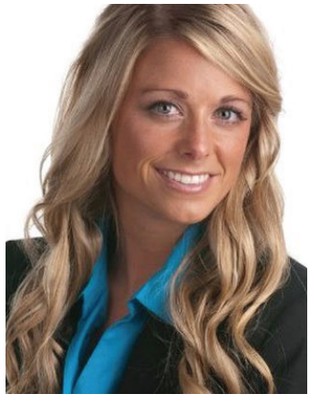
Optometrist of the South

The 2018 Optometrist of the South award will be presented to Jerry Gerdes, OD, a graduate of Louisiana State University and the Southern College of Optometry. Since 2002, he has been in private family practice at The Vision Clinic in Oakdale, La., and more recently at Family Eye Clinic in Lafayette, La.

Dr. Gerdes served on the Optometry Association of Louisiana board and as president of the Central Louisiana Society from 2005 until 2011, when he joined the executive board of the state association. During his time on the board and on the Optometric Association of Louisiana (OAL) Legislative Committee, he helped to spearhead legislative victories for optometry including a therapeutic contact lens prescriptions law in 2008, patient access and insurance equity laws of 2012, laser surgery and advanced procedures laws in 2015 and a Schedule II prescription law in 2015. Most notably, Dr. Gerdes served as President of the OAL from 2013 to 2014 and was instrumental in the passing of a bill to enhance optometry's scope of practice to include laser use, minor surgical procedures and new meds and devices in Louisiana.

In addition to political advocacy, Dr. Gerdes served as OAL InfantSee Chairman, promoting its inception and expansion among the members of the OAL. Under his leadership, the American Optometric Association (AOA) recognized OAL as a model of the program and partnered with the association to host the VSP/InfantSee Mobile Clinic, where more than 300 infants across Louisiana received eye exams. He also served on optometry mission clinics in Nicaragua, and volunteers for several nonprofit organizations, including St. Bernadette's Clinic for the Homeless, the Faith House domestic violence crisis center and The Extra Mile, where he provides free care and eyewear to those in need.

Young Optometrist of the South



Rachel Wruble, OD, of Belmont, North Carolina, is a graduate of Ferris State University and Michigan College of Optometry. She became co-owner of Northlake Eye in Charlotte, NC in 2016.

Dr. Wruble began her service to optometry with the Piedmont Optometric Society while still a resident, eventually serving as president. She currently serves as secretary and treasurer of the North Carolina Optometric Society (NCOS) and is on track to become the third—and youngest—woman to serve as president. She served as a trustee of the NCOS and as the third-party chair from 2014 to 2016. She chairs the NCOS Investment Committee and serves on the NCOS Fundraising, Third-Party, Grassroots and Steering committees.

She is currently speaking to legislators weekly to educate them about North Carolina House Bill 36, which looks to extend the scope of practice to include surgical procedures.

In 2012, Dr. Wruble was named *Vision Monday*'s Most Influential Women Rising Star; in 2017, she was named the NCOS Young Optometrist of the Year.

Dr. Wruble participates in the Diabetic Eye Care Collaborative Program and in InfantSEE. She also volunteers at the Gaston Family Health Services providing free eye exams and glasses for patients identified through Prevent Blindness, as well as to individuals identified by veteran and homeless outreach programs.

When she is not volunteering and seeing patients, Dr. Wruble and her husband Brad, who is also an optometrist, enjoy spending time with their two daughters, Lucy and Lily.

Paraoptometric of the South

Margaret Chester, CPOC, CPOA, of Greenwood, MS, is the 2018 Paraoptometric of the South. She was the Mississippi Optometric Association's Beverly Roberts Paraoptometric of the Year in 2017 and currently is the only paraoptometric professional in Mississippi to hold the CPOC certification.

Over the course of her career at The Eye Station in Greenwood, MS, Ms. Chester has served many roles, including receptionist, insurance clerk, screening technician and optician. She is now the practice business coordinator.

Though her responsibilities have changed over the years, her commitment to providing quality patient care and service has remained constant.

She has a monumental impact on the day-to-day function of The Eye Station, and developed a comprehensive monitoring and auditing system for the practice that allows her to provide extensive oversight of business processes.

Her dedication to optometry extends beyond the walls of the practice she serves. She is also devoted to expanding her education, earning CPO, CPOC and CPOA certifications within a nine-month period.

Ms. Chester's commitment to healthy vision for children to seniors extends beyond the walls

Award Winners

of the office through her involvement with several organizations. These programs include the Lions Club, New Eyes for the Needy and Sight for Students. She is involved with the Junior Auxiliary's vision and screening program and has participated extensively in vision screenings at a variety of locales, including Boys and Girls Clubs, hospitals, schools, nursing homes and prisons.

Colleague Todd Hall, OD, says, "She has mentored and trained countless optometric staffers through the years, with her influence reaching beyond the borders of Leflore County and the state of Mississippi. She has truly touched and affected the profession of optometry. I cannot imagine having practiced without her by my side."

Distinguished Service Award

Vaughn G. Sanders, OD, will be honored with SECO's Distinguished Service Award in sincere and heartfelt appreciation for his perseverance in supporting optometry. His commitment to our mission and ideals will be long remembered.

Dr. Sanders is a graduate of Indiana University and the Indiana University School of Optometry. He also received his Therapeutic Pharmaceutical Certification from the Pennsylvania College of Optometry and Oral Pharmaceutical Certification from the University of Alabama-Birmingham, College of Optometry.

He served as a captain in the United States Air Force before starting private practice in Kentucky, with offices in Owensboro, KY and Hardinsburg, KY. He served as a trustee and officer of the Kentucky Optometric Association and president in 1995 and 1996.

Dr. Sanders has been in a number of leadership positions within SECO and the Southern Council of Optometrists (including a stint as president in 2002 and 2003), international ambassador and, most recently, as chair of the Industry and Professional Relations Committee.

In addition to his professional contributions, Dr. Sanders is active in community service. He has served as an officer in the Jaycees and the Lions Club. He has served on the Green River Sub Area Health Council, Owensboro Chamber Health Council and as chairman of the Professional Division of United Way.

President's Award

This year, the Southern Council of Optometrists will honor Paul C. Ajamian, OD, with the President's Award in recognition of his outstanding service to the advancement of continuing education in optometry worldwide during his more than 30 years of service as a dedicated leader with SECO International. His dedication to the growth of optometry serves as an example optometrists will emulate for years to come.

Dr. Ajamian is the co-founder and center director of Omni Eye Services of Atlanta, the nation's first optometric co-management center. He is past president of the Georgia Optometric Association, as well as past legislative and PAC chair. He has served as the general chairman of SECO International since 2002, and has served on the SECO CE Committee since 1983. Dr. Ajamian is a founding board member and past chairman of the American Board of Optometry (ABO) and is himself ABO board certified. He's authored two textbooks, as well as a popular column in *Review of Optometry* since 1999. In June 2014, Dr. Ajamian received the AOA's Distinguished Service Award. In 2015, he was inducted into the National Optometry Hall of Fame. He was honored in 2017 by *Review of Optometry* with its annual Career Achievement Award. ●

SECO Moves to New Orleans for 2019

Learn more, book your hotel and win prizes at booth #1633.

SECO is happy to bring 2019's conference to New Orleans February 20-24 for the first SECO congress held outside of Atlanta in 60 years! Don't miss out on this exciting new chapter. Visit booth #1633 to learn about everything there is to do in New Orleans. You can find out about all of the great hotel options the city has to offer, and book your room today.

We'll be giving away New Orleans-themed prizes throughout the show, including a Grand Prize Giveaway for those who book their 2019 hotel reservations that includes:

- Two-night hotel stay from Starwood
- $400 Delta airline voucher
- $150 gift card to Arnaud's Restaurant
- All-inclusive package registration for SECO 2019.

The grand prize winner will be announced on Saturday at 4pm with free Bloody Marys. You must be present to win, so be sure to join us at booth #1633.

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INCOMING SECO PRESIDENT: EMILIO BALIUS, OD

Education for the Clinic and the Business

It is such an honor to be taking on the role of president of the Southern Council of Optometrists during SECO's House of Delegates today. When I was a student, I had always heard SECO was the premiere educational meeting. As I begin my service to the association, I vow to continue that tradition by working collaboratively with the talented board members to reinforce our position as the industry leader and will do so proudly.

SECO believes in building strong relationships with regional schools and state organizations. We believe it is a shared responsibility to improve the state of our profession and educate doctors so they can provide the best care to patients. I am pleased to say that we offer a diverse curriculum designed to cover all the topics needed to survive clinically and operationally. SECO's education gives attendees the tools they need to rapidly respond to the changes impacting our profession, industry and health care as a whole. Our symposia continue to attract high caliber speakers who are leaders in eye care, and address important topics such as the growing aging population, which will put added demands on our industry.

As a profession, we need to not just keep up with, but stay ahead of, changes and trends. I am committed to delivering content to keep our doctors up-to-date in all aspects of optometry, from treatments and technologies to best business practices in marketing and office management. I recognize the hurdles we face in our practices—not only are we seeing and treating patients, but we must run efficient businesses to be successful. Understanding new payment models and all the new acronyms (HMOs, ACOs, TPAs and Next Gen ACOs) is a challenge SECO aims to address.

Running a thriving practice is no easy task. The SECO team and I want to empower our attendees with the knowledge they need to meet these varying challenges. MedPro 360 is just one such program in our portfolio. This high-level business management program was developed to include topics that cater not only to optometrists, but to any healthcare practitioner. As I am deeply involved in the management of our own practice, I find the SECO content very pertinent. Our topics cover high-level analytics to help assess the financial health of any practice, provide tools for benchmarking and guide legal and human resources-related issues.

Another project we continue to develop and strengthen is SECO University. With this and our educational web portal, members can engage with SECO International year-round. As with all technology, the delivery of information to our attendees will continue to change and evolve, but we believe this portal will give them immediate access to the tools they need to address their business needs and challenges. SECO posts all course recordings, its videoconferences the symposiums and has developed partnership programs with some affiliate states to promote to their members.

I personally can attest to the value of hearing this important information through my iPod as I make my long daily commute to work.

As I begin this exciting adventure, I look forward to continuing to build this great conduit to learning. SECO has a team of smart and dedicated individuals that I'm excited to join and work with to ensure SECO continues to lead the industry in providing the most impactful, innovative, emerging education our community needs to be a success. ●

OUTGOING SECO PRESIDENT: LYNN HAMMONDS, OD

A Bright Future for Women in Optometry

My family was instrumental in modeling and encouraging me to live a life of service. My parents always demonstrated the importance of giving your time and talents and they believed that actions always spoke louder than words.

My involvement with SECO International began after I served as President of the Alabama Optometric Association. That experience sparked my passion in serving optometry in a wider capacity and I naturally gravitated to SECO International as the next step and a home to grow my career. Many of the optometric colleagues I respected and aspired to emulate were involved with SECO, so I searched for an opportunity to get involved myself.

As luck would have it, through the efforts of Doug Clark, OD, Bob Crosby, OD, Gerald Thomas, OD, and Dick Phillips, OD, I was appointed to the SECO Awards Committee. Once I got involved, I discovered that SECO was all about bringing good people together in constructive ways to make better decisions for the organization and for the profession. SECO is like being in a family where everyone has the same goal—to see SECO remain the leader in delivering optometric education around the world and serving the industry.

SECO leadership approached me about serving on its Executive Committee, with an eye towards serving as president one day. As a woman in optometry, this was a rare and exciting opportunity to lend my leadership experience. After considering the level of commitment necessary to such an intimidating task, I said "Yes," and the rest is history.

Serving as president has been a challenge and privilege. I have seen firsthand how priceless a knowledgeable, hardworking and committed team of staff and volunteers dedicated to SECO's success can be. SECO strives to be the best—we make it our mission to find unknown speakers and uncover the latest advancements. As a non-profit association, we're laser-focused on the value we give to participants and advancing the industry as a whole.

I hope that my serving as SECO's president will open the door for other women in optometry who have the desire to serve their profession. I'm the second woman to serve as president in SECO's history; the first was Dr. Esther Ingram from Florida all the way back in 1933. She was a pioneer and I'm sure she would agree when I say that I would not trade anything for my years of service with SECO, the opportunity afforded to me to serve as its president and the many friends I have made along the way.

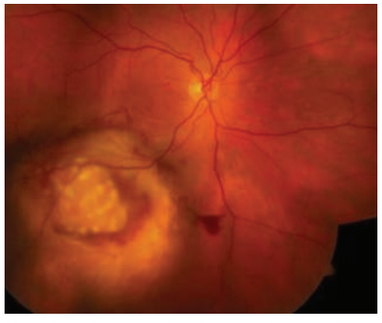
Just remember this quote from Alex Haley, "Anytime you see a turtle up on top of a fence post, you know *she* didn't get there without some help." This is so true for me! ●

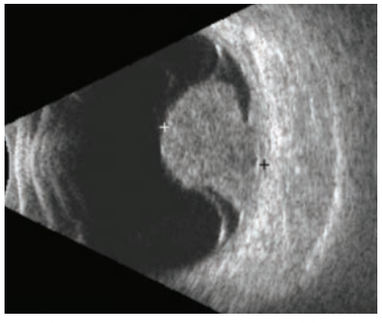
Melanoma and Retinoblastoma Advances

Continued from Page 1

through Phase I trials and heading into Phase II trials, "has shown the most effectiveness of any drug so far in uveal melanoma to the point that there is a decent chance it's going to get FDA-approved, which has never happened for any drug for uveal melanoma."

To wrap up the uveal melanoma discussion, Dr. Harbour addressed the direction of future research and the drive to find tools to help clinicians diagnose and treat tumors much earlier. "Finding some biomarker in the aqueous or some other method of distinguishing the suspicious nevi from a true melanoma when they are small, this is the new frontier," he said. "So if we promptly treat it, we can cure the patient."



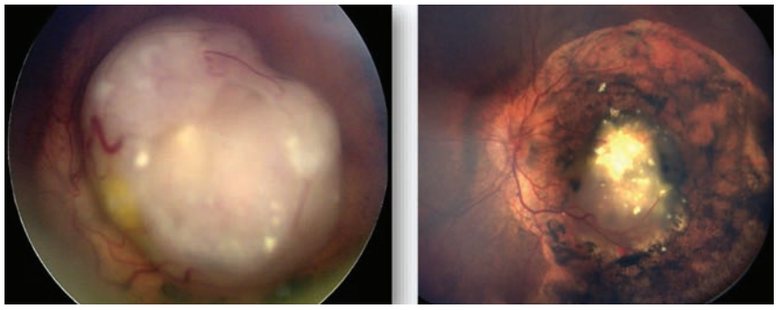


Uveal melanoma is almost always dome-shaped or mushroom-shaped and is often easy to see on B-scan ultrasound, Dr. Harbour said. Don't forget to keep an eye out for retinal detachment (RD), which can happen with these lesion, he said. You can see the RD on either side of the melanoma in the B-scan.

A Blast of Hope

The next patient population, those diagnosed with retinoblastoma, is usually capped at five years of age and younger. While rare, it is the most common primary eye cancer in children, Dr. Harbour said. There are only about 300 cases in the United States each year, and the survival rate is better than 95% in developed countries.

Dr. Harbour discussed various presentations, including the most common at-home diagnostic tools: Uncle Bob and mom with her phone. Leukocoria is the presenting sign in roughly 80% of cases, he said, and "classically this is detected by a family member at home. The lights are down, everyone is watching a movie, the kid's pupils are a little dilated, and Uncle Bob looks over and says, 'What's wrong with the pupil?' Or mom takes a picture of the child and instead of the red reflex, it's white."



Initially, this retinoblastoma completely obscured the optic nerve, as seen on the left. "In the past this would have been enucleated, for sure," Dr. Harbour said. After only two treatments with intra-arterial chemotherapy, the optic nerve isn't even involved, at right.

After going over the clinical presentation, diagnostics and the new international classification system using groups A through E (based on clinical prognosis with chemotherapy, not radiation), he homed in on the many treatment options for each group. Attendees were treated to surgical videos detailing two new therapies that have revolutionized care and helped Dr. Harbour go from enucleating roughly 50% of affected eyes 10 years ago to just around 5% these days:

Intra-arterial chemotherapy. This has mostly replaced systemic chemotherapy and has shown excellent results for patients through group D and even some patients in group E, according to Dr. Harbour.

Intravitreal chemotherapy. Although clinicians of the past thought putting a needle in an eye with retinoblastoma was strictly forbidden for fear of spreading cells out of the eye, intravitreal chemotherapy is the wave of the future. "It's proven quite safe," Dr. Harbour said, with new techniques such as using a tiny gauge needle, incorporating cryotherapy during the procedure and bathing the eye with sterile water to destroy any retinoblastoma cells that may have escaped.

Despite these advances, Dr. Harbour concluded the session with a sober warning: "this doesn't mean we never enucleate the eye. With optic nerve invasion, anterior segment extension, other things like this, we have to put the child's life first." ●

CAREER ACHIEVEMENT AWARD

Recognizing Tom Lewis, a Towering Figure in Optometry

In a Thursday evening ceremony, *Review of Optometry* honored Thomas L. Lewis, OD, PhD, with its Career Achievement Award. Given each year during SECO, the award recognizes the contributions to optometry made by an individual over a decades-long career of service. Dr. Lewis received his OD degree in 1970 from Pennsylvania College of Optometry and eventually joined the faculty there, rising to the position of president by the time of his retirement. During his career, he had also held presidential roles with the Association of Schools and Colleges in Optometry, the National Board of Examiners in Optometry and the American Academy of Optometry. A longtime advocate for greater optometric involvement in glaucoma care, Dr. Lewis was one of the cofounders of the Optometric Glaucoma Society.

Old friends and colleagues celebrated with Dr. Lewis at the Review of Optometry Career Achievement Award dinner on Thursday night.

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