



## **Royal College of Ophthalmologists Annual Congress 2018 Programme – Wednesday 23 May 2018**

### **08.00 – 09.00      Parallel sessions**

#### **OCTA – practical tips for real world use (Hall 3A)**

Chaired by Dr Pearse Keane, Moorfields Eye Hospital

Optical coherence tomography angiography (OCTA) is the latest advance in ophthalmic imaging and has the potential to transform the diagnosis and management of retinal disease. Commercially available OCTA systems are now becoming widely available in hospital eye services around the UK. Although OCTA has great potential, there is a considerable learning curve associated with the technology. In this session, we will provide a practical guide to the use of OCTA systems in routine clinical practice. We will begin by providing an overview of current OCTA systems and their associated challenges and limitations. We will then provide more focus in two main areas: the use of OCTA in age-related macular degeneration (AMD) and in diabetic retinopathy (DR).

#### **08.00 – 08.20      OCT angiography – an overview**

Dr Pearse Keane

#### **08.20 – 08.40      OCT angiography in diabetic retinopathy**

Dr Katrin Fasler, Honorary Fellow, Moorfields Eye Hospital

#### **08.40 – 09.00      OCT angiography in age-related macular degeneration**

Mr Konstantinos Balaskas, Consultant Ophthalmologist, Moorfields Eye Hospital

#### **Phacoemulsification surgery supervision: Understanding key teaching and feedback principles that influence surgical learning in theatre (Hall 11B)**

Chaired by Mr Rajen Gupta, The Newcastle Eye Centre

Supervising a Trainee performing phacoemulsification surgery can be daunting for a new Trainer embarking on this role or indeed even for a Trainer with cataract surgery teaching experience. This interactive lecture will review key surgical teaching strategies on how to influence and improve the surgical learning of phacoemulsification. The key factor that hinders Trainee learning in theatre is explained. Suggested terminology to be used during

supervised cases and the avoidance of “ghost” surgery is reviewed. The amazing power of feedback is highlighted. Video examples and top tips to re enforce the supervising principles will be shown throughout based on the “phaco teaching epiphanies” of the speaker. The session is targeted for all current and future phacoemulsification Trainers who desire to improve their phaco surgery supervision ability. Attendees will be able to fine-tune their surgical supervising strategy and optimize the way all steps of phacoemulsification are taught without a requirement for a major change in their own surgical technique.

**08.00 – 09.00**            **I’m your Trainee, so teach me phaco!**  
Mr Rajen Gupta

### **Sustainability (Hall 11A)**

Chaired by Mr Daniel Morris, Chair, Sustainability Work Group, Royal College of Ophthalmologists

A sustainable eye care service is one which “works within the available environmental and social resources protecting and improving eye health now and for future generations.” Eye care faces several challenges in the 21st century such as an aging population and limited health care resources. This session will focus on practical ways of making your services more sustainable, with a specific focus on cataract surgery pathways, novel concepts in home monitoring, keeping the work force healthy and how to work with industry.

**08.00 – 08.10**            **Sustainability in ophthalmology- what you need to know**  
Rachel Stancliffe, Centre for Sustainable Healthcare

**08.10 – 08.20**            **Sustainability developments in the Highlands: The Way Forward?**  
Andrew Cassels-Brown, Consultant Ophthalmologist (via videolink)

**08.20 – 08.30**            **How can industry help us become more sustainable?**  
Adele Brown, Surgical Marketing manager, Bausch and Lomb

**08.30 – 08.40**            **Are computer games the key to sustainable home monitoring of eye conditions?**  
Luke Anderson, Consultant Ophthalmologist, Royal Glamorgan Hospital

**08.40 – 08.50**            **Value based mapping- a new concept**  
Mary Bairstow, VisonUK

**08.50 – 09.00**            **Sustainable cataract surgery- what can you do?**  
Cassie Thiel, Assistant Professor, New York University

### **Keeping your ophthalmic service safe (Hall 11C)**

Chaired by Mrs Melanie Hingorani, Moorfields Eye Hospital, RCOphth Chair of Professional Standards

The public expectations and regulatory requirements for quality and safety in ophthalmology are increasing and this is more and more challenging in a system with severe

financial pressures. This is made more difficult as many hospital managers are uncertain about how to organise clinical governance processes which are directly relevant to ophthalmology and also there are potentially increased risks in services being delivered across multiple sites, in the community and by extended role non-medical clinicians. Many ophthalmologists feel out of their depth in understanding and delivering clinical governance for ophthalmology. This session explains in simple practical terms how generic clinical governance requirements work in ophthalmology and what clinicians, managers and service leads need to understand and to do. It outlines methods to measure the quality of your care, how to ensure your service is safe, and how to improve it.

**08.00 – 08.20                      Clinical governance in ophthalmology**

Mrs Melanie Hingorani

**08.20 – 08.40                      How to run effective clinical governance meetings for ophthalmology**

Mr Declan Flanagan, Consultant Ophthalmologist and Medical Director, Moorfields Eye Hospital

**08.40 – 09.00                      How to manage safe teamwork in ophthalmic surgery**

Ms Laura Steeples, Consultant Ophthalmologist, Manchester Royal Eye Hospital

### **Assessment of the watering eye (Hall 3B)**

Chaired by Mr Hugo Henderson, Royal Free Hospital, London

Epiphora is a common problem in both adults and children, accounts for an eye watering financial burden on the NHS, with a significant percentage of referrals to community and primary care ophthalmology clinics. It has a wide range of causes which can be surprisingly difficult to diagnose and often results in frequent follow up visits. This session aims to present a clear pathway for the assessment of these patients that can be used equally in primary care/community clinics and specialist clinics and also used to create clinical pathway groups for high quality safe pathways. It aims to show how pathways can be developed for one stop clinics in which patients can be either treated and discharged or referred to specialist clinic.

We will look at the history and examination and investigation of the watering eye and present videos of useful tips and tricks to make the examination efficient and documentation clear. We will discuss the pros and cons of nurse syringing, when to order dacrocystograms or lacrimal scintillography.

### **Speakers**

Miss Rebecca Ford MA FRCOphth Consultant Ophthalmologist University Hospital Bristol

Mrs Anjana Haridas MA FRCOphth Consultant Ophthalmologist University Hospital of Wales and Princes of Wales Hospital

Mr Hugo Henderson MA FRCOphth Consultant Ophthalmologist The Royal Free London

#### **Further helpful statistics for ophthalmic researchers (Hall 4)**

Chaired by Dr Catey Bunce, Kings College London and Mr Richard Wormald, Moorfields Eye Hospital

Research excellence is underpinned by sound statistics and design. This session, chaired by Mr Richard Wormald and Dr Catey Bunce will be of interest to researchers who wish to conduct excellent ophthalmic research and would welcome some helpful tips relating to analysis and study design. The speakers are medical statisticians with experience in ophthalmic research and they will share some useful pointers to avoid statistical errors when conducting and writing up your research in vision and eyes. This year's session will deliver some of the sessions from 2017 but with updates and greater time for questions and answers. At the end of the session delegates will be aware of some of the common errors made in ophthalmic research and therefore how to avoid these and will have an outline understanding of how to analyse data that they may have captured as part of their research. Delegates will be provided with the opportunity to ask medical statisticians with experience in research in vision and eyes, questions that may have perplexed them in relation to statistical reviews they may have received or statistical issues they have encountered in their research.

**08.00 – 08.20**

#### **One eye or two**

Dr Catey Bunce

**08.20 – 08.40**

#### **Absence of evidence is not evidence of absence**

Miss Ana Quartilho, Senior Statistician, UCL Comprehensive Clinical Trials Unit

**08.40 – 09.00**

#### **Ophthalmic statistics – top tips**

Dr Gabriela Czanner, Lecturer in Ophthalmic Statistics, University of Liverpool

**09.05 – 10.05**

#### **Horizon scanning – the robots are coming! (Hall 1)**

Chaired by Professor Paul Foster, UCL Institute of Ophthalmology & Professor Paul Bishop, University of Manchester

Robot-assisted surgery is already being used in some surgical specialties and robotic devices are now being developed and tested in the field of ophthalmology. With a number of new companies entering into this space and advances in computing techniques, such as machine learning, robotic surgery is advancing rapidly. In this session you will hear from leaders in this field about current devices and prospects for future developments.

**09.05 – 09.20**

#### **Report of the first use of a remotely controlled robot to operate inside the human eye**

Professor Robert MacLaren, Professor of Ophthalmology, University of Oxford

**09.20 – 09.40**      **Robot design and development for retinal therapeutics delivery**  
Dr Christos Bergeles, Lecturer, Faculty of Engineering Science, UCL

**09.40 – 10.00**      **Robotic cataract surgery - the coming revolution**  
Julian Stevens, Consultant Ophthalmologist, Moorfields

**10.00 – 10.05**      **Questions and round up**

**09.05 – 12.05**      **Training the trainers (Hall 12)**  
Chaired by Miss Rajni Jain, Western Eye Hospital, London  
Please note that places for this course had to be pre booked

**10.05 – 10.20**      **Awards ceremony (Hall 1)**

**10.20 – 10.40**      **Tea and posters (Hall 2)**

**10.40 – 12.10**      **Parallel sessions**

**Building research into everyday practice (Hall 1B)**

Chaired by Professor Allen Foster, International Centre for Eye Health and Miss Parul Desai, Moorfields Eye Hospital

The basis of research is asking a relevant question and then applying good scientific methods to answer the question. Good clinical research is based on accurate observation, documentation and analysis. This session will combine talks on the main research methods with case studies of research in practice.

**10.40 – 10.45**      **Introduction**  
Professor Allen Foster

**10.45 – 11.10**      **Evidence-based practice vs Practice-based evidence**  
Mr Andrew Bastawrous, Peek Vision & London School of Hygiene & Tropical Medicine and Ms Priya Morjaria, London School of Hygiene and Tropical Medicine

**11.10 – 11.35**      **Qualitative methods in eye research**  
Dr Morgon Banks, London School of Hygiene and Tropical Medicine

**11.35 – 12.00**      **BEAVRS database in research**  
Mr David Yorston, Gartnavel General Hospital

**12.00 – 12.10**      **Summary**  
Miss Parul Desai and Professor Allen Foster

## **Glaucoma (Hall 3B)**

Chaired by Professor Paul Foster, UCL Institute of Ophthalmology

This session aims to give a clinically relevant but research driven update on glaucoma, and features four internationally recognized speakers talking on their areas of special interest. Glaucoma has always been a condition that the clinician knows it when they see it, but is less easy to explicitly define and categorize. This is fundamentally important for both the clinician in identifying disease that needs treatment and differentiating it from static, non-progressive abnormalities that do not require or benefit from treatment. Prof Harry Quigley has been a leading authority in this area for his practicing and research career, and is currently leading a major research project to try to better define glaucoma for clinicians and researchers alike.

Glaucoma has major genetic determinant, but currently, single gene disorders account for around 5% of all disease seen in clinics. Large cohort studies are now giving clearer insights into the genetic mechanisms responsible for “common, all garden variety” glaucoma. Mr Anthony Khawaja has led a major study in this area that gives important new mechanism that influence glaucoma risk, and may be amenable to therapeutic intervention.

Mr Keith Barton has been an “early adopter” of new glaucoma surgical devices under the umbrella of MIGS – minimally invasive glaucoma surgery, and can speak with authority on all aspects for glaucoma surgery. The growing number of glaucoma implants, and the pressure from manufacturers to increase their use means that all clinicians must be aware of the strengths and weaknesses of each device, and be able to explain potential complications and risks associated with their use.

Dr Axel Petzold is a neurologist with a clinical practice focused on the visual system, in parallel with a very active research in this area. He has been involved in multiple studies of the role of ocular imaging in systemic neurodegenerative diseases, and will discuss the parallels and differences between glaucoma and other common, age-related neurodegenerations, and how the clinician can recognize patterns in these conditions, as well as exploring similarities and overlap.

### **Dynamic Glaucoma Diagnostics: Physiology not Anatomy is the answer**

Professor Harry Quigley, Johns Hopkins Hospital, Baltimore

### **Determinants of IOP - novel genetic and environmental factors and measurement error**

Mr Anthony Khawaja, Moorfields Eye Hospital, London

### **MIGS – Good, Bad and Ugly**

Mr Keith Barton, Moorfields Eye Hospital

### **Lessons for glaucoma from study of neurodegenerative diseases**

Axel Petzold, VU University Medical Center, Amsterdam, The Netherlands

## **The paediatric posterior pole (Hall 4)**

Chaired by Mr Adam Bates, Maidstone & Tunbridge Wells NHS Trust and organised by Miss Stephanie West, Southampton General Hospital

This symposium is aimed at updating general and paediatric ophthalmologists on the latest available treatments and techniques for managing posterior pole conditions in children. Mr Robert Henderson, will provide an overview of the current use of genetic screening and trials relevant to paediatric retinal conditions and Mr CK Patel, will bring us up to date with the latest surgical management of retinal conditions in children. Treatment of retinopathy of prematurity with Anti VegF including different dosing regimen will be discussed by Mr Ayad Shafiq and Mr James Acheson will highlight the latest use of imaging to identify pathology in the paediatric optic nerve.

**10.40 – 11.00**

### **Update on genetics and current trials**

Mr Rob Henderson, Consultant Ophthalmologist, Great Ormond Street Hospital and Moorfields Eye Hospital, London

**11.00 – 11.20**

### **Update on Paediatric VR surgery**

Mr CK Patel, Consultant Ophthalmologist Radcliffe Infirmary, Oxford, and Great Ormond Street Hospital, London

**11.20 – 11.40**

### **Anti VegF for the treatment of Retinopathy of Prematurity**

Mr Ayad Shafiq, Consultant Ophthalmologist, Royal Victoria Infirmary, Newcastle-upon-Tyne.

**11.40 – 12.00**

### **Imaging the paediatric optic disc**

Mr James Acheson, Consultant ophthalmologist, Moorfields Eye Hospital and National Hospital for Neurology and Neurosurgery, London

**12.00 – 12.10**

### **Questions and Discussion**

## **Current management of central retinal vein occlusion (Hall 11)**

Chaired by Mr Phillip Hykin, Moorfields Eye Hospital

This session will cover key management topics in patients with central retinal vein occlusion including indications for panretinal laser photocoagulation, the management of iris neovascularisation and neovascular glaucoma, the role of anti-VEGF therapy and steroid treatment in macular oedema secondary to CRVO and updates on the SCORE2 and LEAVO studies.

**10.40 – 10.45**

### **Introduction**

Philip Hykin

- 10.45 – 11.00**      **Ischaemic CRVO: when to laser**  
Mr James Talks, Royal Victoria Infirmary, Newcastle
- 11.00 – 11.15**      **Management of NVI/NVG in CRVO**  
Mr Keith Barton, Moorfields Eye Hospital
- 11.15 – 11.30**      **Anti-VEGFtherapy for MO in CRVO**  
Professor Yit Yang, Wolverhampton & Midland Counties Eye Infirmary
- 11.30 – 11.45**      **Steroids for MO in CRVO**  
Mr Fahd Quhill, Royal Hallamshire Hospital
- 11.45 – 11.50**      **Update on the LEAVO study**  
Mr Philip Hykin
- 11.50 – 12.10**      **Update on the SCORE2 study**  
Professor Barbara Blodi, University of Wisconsin

### **Clinical Leadership (Hall 3A)**

Chaired by Mr Richard Harrad, Bristol Eye Hospital and Miss Catherine Marsh, Royal Bournemouth Hospital

The NHS expects that all consultants are leaders, without providing much in the way of formal training or help. The RCOphth Clinical Leads Forum attempts to remedy this, by providing support, information and a google forum for consultants in leadership and management roles. This session aims to inform Leads and aspiring Leads on these current topics: Louisa Wickham will speak on how to get training to be a manager, Alison Davis will be sharing the common themes and issues identified from the recent GIRFT visits. David Haider will be talking on how to get IT to work for, not against you and there will be a presentation on how to keep your finance director happy.

### **12.15 – 13.00      The Great Debate: All suitable cataract patients should be offered multifocal lenses (Hall 1)**

Chaired by: Larry Benjamin, Stoke Mandeville Hospital

For the motion: Mr Mayank Nanavaty, Sussex Eye Hospital

Against the motion: Mr Mike Adams, Stoke Mandeville Hospital

### **13.00 – 14.00      Lunch (Hall 2)**

### **13.00 – 14.00      SAS Forum (Hall 4)**

Chaired by Mrs Bronwen Attrup, Lincoln County Hospital. Lunch is provided at this session and Dr Lesley Kaye, Southport and Ormskirk NHS Trust will give a talk entitled *Autonomous Working*.



**14.00 – 15.00      Optic UK Lecture – 21<sup>st</sup> century glaucoma treatment  
(Hall 1)**

Dr Harry Quigley, Johns Hopkins University, USA

**15.00 – 15.30      Tea and posters (Hall 2)**

**15.30 – 17.00      Parallel sessions**

**Grand rounds: FFA/ Medical Retina (Hall 3A)**

Chaired by Mr Adnan Tufail, Moorfields Eye Hospital & Professor Alan Bird, Moorfields Eye Hospital

Panel: Mr Adnan Tufail, Professor Alan Bird, Mr Pearse Keane, Moorfields Eye Hospital and Professor Adrian Koh, Singapore National Eye Centre

**15.30 – 15.42      A straightforward case of Branch retinal vein occlusion with macula oedema or is it?**

Miss Christiana Dinah, Central Middlesex Hospital

**15.42 – 15.54      A mountain with a secret**

Dr Marko Lukic, Moorfields Eye Hospital

**15.54 – 16.06      Light Bulbs in a Young Boy**

Miss Beverly Cheung, Western Sussex Hospitals NHS Foundation Trust

**16.06 – 16.18      Is it a tumour?**

Dr Umaima Mulla, Gartnavel General Hospital, Glasgow

**16.18 – 16.30      Dystrophic holes**

Mr Assad Khan, Western Sussex Hospitals NHS Foundation Trust

**16.30 – 16.42      Hope for the Best**

C. Mukherjee, New Cross Hospital, Royal Wolverhampton NHS Trust

**16.42 – 16.54      Its the pits**

Mrs Patel Gordon-Bennett, Western Sussex Hospitals NHS Foundation Trust

**Neuro-ophthalmology for the general ophthalmologist – when to worry (Hall 1B)**

Chaired by Miss Margaret Dayan, Royal Victoria Infirmary, Newcastle upon Tyne

All ophthalmologists will be faced with patients who present with transient or unusual visual disturbances and it can often be difficult to decide whether there is a serious underlying disorder or not. This can be particularly problematic if the symptoms are intermittent or the examination appears to be normal. It is then a challenge to decide whether and how far to investigate. This session looks at three aspects of this – the patient with transient visual symptoms, the child with visual disturbances and the patient with visual loss but a normal eye examination. The session aims to show how to work through these cases to decide

when there may be a serious underlying cause and how to proceed. There will also be time for interactive discussion with our expert panel of very experienced neuro-ophthalmologists.

**15.30 – 15.55**                    **Transient visual symptoms – is this just migraine?**  
Professor Andrew Lee, Chair, Blanton Eye Institute, Houston  
Methodist Hospital, USA

**15.55 – 16.20**                    **The child with visual disturbances**  
Mr Manoj Parulekar, Consultant Ophthalmologist, Birmingham  
Children's Hospital and Oxford University Hospital

**16.20 – 16.45**                    **Loss of vision with a normal eye examination**  
Dr Steve Madill, Consultant Ophthalmologist, Princess Alexandra Eye  
Pavilion, Edinburgh

**16.45 – 17.00**                    **Ask the panel**

### **Grand Rounds: anterior segment (Hall 3B)**

Chaired by Mr Jeremy Prydal, Leicester Royal Infirmary

The theme for the Anterior Segment Grand Round is atypical infections, with a panel of renowned UK consultants presenting a range of challenging and thought provoking cases. The speakers presenting cases are:

1. Sajjad Ahmad, Consultant Corneal Surgeon, London
2. Erika Damato, Consultant Medical Ophthalmologist, Cambridge
3. Rumana Hussain, Consultant in Ocular Oncology, Liverpool
4. Damian Lake, Consultant Corneal Surgeon, East Grinstead
5. David O'Brart, Consultant Corneal Surgeon, London
6. Andrew Tatham, Consultant Glaucoma Surgeon, Edinburgh
7. Matthew Wakefield, Consultant Corneal Surgeon, Salisbury

### **Dislocated intraocular lenses- Failing well and relocation, relocation, relocation! (Hall 4)**

Chaired by Mr Stephen Lash, University Hospital Southampton

This session will cover the management of dislocated IOLs starting with 'Failing well' which will look at managing PC rupture with good anterior vitrectomy technique and lens choice in cases of zonular weakness. Placing a three-piece lens in these situations will be encouraged and this introductory segment will lead onto the management of late dislocation of IOLs including lens and bag dislocation from optic capture through to suturing lenses including the Hoffman Pouch technique, Haptic Iris suture and Z suture fixation in '100 and 1 things to do with a three piece lens'. The final session 'Support without support' will look at techniques to use when there is no support for a lens including retrieval from the vitreous cavity and the focus of the session will be exploring Needle haptic fixation adapted from the original techniques described by Scharioth/Yamane and Trochar assisted fixation. It is hoped that this session will help surgeons to 'fail well' facilitating less traumatic second surgery and

good outcomes for patients in spite of the complications and give surgeons an overview of the techniques available to rescue a situation or what is available on referral. Each session will be followed by a time for discussion.

**15.00 – 15.05 Introduction with management scenarios to consider**

Mr Stephen Lash

**15.05 – 15.20 Failing well- an approach to anterior vitrectomy**

Mr Stephen Lash

**15.20 – 16.00 101 things to do with a 3 Piece Lens**

**In the bag Dislocations**

Mr Steven Harsum , St Helier Hospital

**Out the bag dislocations**

Miss Louisa Wickham, Moorfields Eye Hospital

**16.00 – 16.40 Support without Support**

**Trochar assisted Fixation**

Miss Louisa Wickham

**Needle Haptic fixation**

Mr Stephen Lash

**16.40 – 17.00 Round up and cases revisited**

Mr Steven Harsum

**NIHR Symposium: World class research in the UK (Hall 12)**

Chaired by Professor Faruque Ghanchi, Bradford Teaching Hospitals & Professor Rupert Bourne, Vision & Eye Research Unit, Anglia Ruskin University, Cambridge

UK has been a global leader in ophthalmology research from preclinical to clinical studies. This symposium provides a snap shot of some of our leading researchers' work and our international collaboration.

The symposium will provide insight in to the exciting world of clinical research and some of the ground-breaking research by leading researchers in the world of ophthalmology today that is shaping our clinical practice. With a faculty of renowned research academics, it is hoped that delegates will gain information on research quest to find better solutions for our patients. The exciting prospect of novel interventions including Gene therapy will be discussed at the symposium

“Enhancing outcomes to benefit patients is a journey through the world of discovery from molecule to man”. Professor Andrew Dick.

Join us in this journey!

**15.30 – 15.33 Introduction**

Professor Faruque Ghanchi

- 15.33 – 15.45**      **NIHR CRN Ophthalmology**  
Professor Rupert Bourne
- 15.45 – 15.57**      **How the NIHR helps me to be a clinician scientist**  
Professor Andrew Lotery, University of Southampton
- 15.57 – 16.12**      **Clinical Trials in Uveitis: the MUST Research Group**  
Professor Douglas Jabs, New York Eye and Ear Infirmary
- 16.12 – 16.24**      **Shaping future of Vision through partnership**  
Professor Andrew Dick, University College London
- 16.24 – 16.36**      **Progress in retinal gene therapy clinical trials towards approved treatments**  
Professor Robert MacLaren, Oxford
- 16.36 – 16.48**      **Researcher of the year presentations**  
Professor Sobha Sivaprasad Moorfields Eye Hospital, London  
Professor Richard Gale – York
- 16.48 – 16.58**      **Research is our business**  
Dr Sarah Cooper, NIHR Clinical Research Network
- 16.58 – 17.00**      **Conclusions and close**