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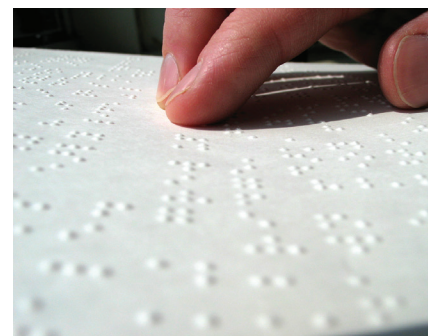
ERIK L. MERTENS

MD, FEBOPHTH

**2006***January* « **THE COSTS OF LOW VISION AND BLINDNESS**

BY JILL E. KEEFFE, PhD; M. LYNNE PEZZULLO, BEC; SARAH J. NESBITT, BA, BEC; AND HUGH R. TAYLOR, MD, AC

Description: World Health Organization data show that the number of visually impaired people in the world has decreased, likely as the result of increasing rates of cataract surgery in the developing world. Economic analyses show that preventing blindness is financially worthwhile to governments, in addition to improving quality of life for their citizens.

http://crstodayeurope.com/articles/2006-jan/0106_11-php/
**2007***January* « **KNOWING THE PHASES OF GROWTH**

BY DAVID MOLIAN

Description: As an organization grows, it must modify and adapt its systems, structures, and processes. Businesses, like people, go through phases of growth and maturity. Guidance and mentoring are useful to avoid crises in the course of this growth.

http://crstodayeurope.com/articles/2007-jan/0107_22-php/
**2008***May* « **TOP 10 PEARLS FOR A SUCCESSFUL IOL PRACTICE** 2016

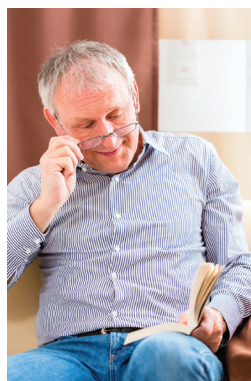
BY ERIC D. DONNENFELD, MD

Description: One of the most valuable skills that surgeons and their staffs can develop in the interest of building a successful refractive IOL practice is the ability to educate patients about the benefits of the surgery. Several tips in this list pertain to communicating to patients the value of refractive surgical correction. The surgeon's and staff's belief in that value is one of the keys to success.

http://crstodayeurope.com/articles/2008-may/0508_14-php/
June « **IS REFRACTIVE SURGERY BECOMING LENS BASED?**

BY CON MOSHEGOV, MD

Description: Premium refractive surgery centers attract older presbyopic patients, and LASIK may be less than optimal for providing spectacle independence to this demographic. Unlike LASIK, refractive lens exchange with a multifocal IOL provides good distance and near vision, results in less secondary dry eye, and provides permanent refractive stability. Lens-based refractive surgery may be the way of the future, this author says.

http://crstodayeurope.com/articles/2007-jun/0607_09-php/


2012

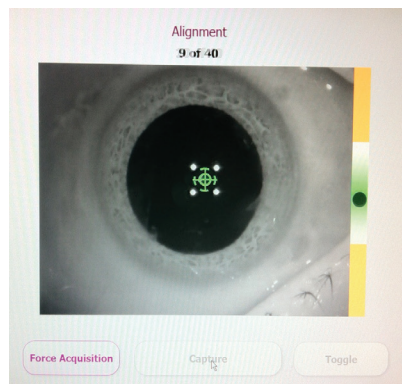
THE STANDOUTS

May « INTRAOPERATIVE ABERROMETRY FOR POSTREFRACTIVE SURGERY IOL CALCULATIONS

BY MIGUEL A. SANTIAGO GARCIA, MD

Description: Achieving excellent results with lens-based vision correction requires accurate calculation of IOL power. Intraoperative aberrometry can help surgeons to obtain optimal outcomes. The author outlines steps to ensure good readings, such as performing measurements as quickly and precisely as possible to avoid variances.

<http://crstodayeurope.com/articles/2012-may/intraoperative-aberrometry-for-postrefractive-surgery-iol-calculations>



June « ENHANCEMENT SURGERY: PATIENT TIPS

BY ARTHUR B. CUMMINGS, MB ChB, FCS(SA), MMed(OPHTH), FRCS(Edin)

Description: The decision to undergo a second surgery to improve refractive results can be difficult for patients. Tips to assure patients and help with their decision-making include discussing whether the enhancement is justified, whether to treat one or both eyes, how the enhancement will be done, and whether another procedure is likely to be needed in the future.

<http://crstodayeurope.com/articles/2012-jun/enhancement-surgery-patient-tips/>

October « PERSONAL MARKETING STRATEGIES 2016

BY BOON SIONG LIM; R.J. MACKOOL, MD; RICHARD J. MACKOOL, MD; ERIK L. MERTENS, MD, FEBOPHTH; AND JULIAN D. STEVENS, MRCP, FRCP, FRCOPHTH

Description: There are many ways to promote the introduction of a new technology such as laser-assisted cataract surgery to your practice. These range from creating a brand name for your bladeless procedure, to developing brochures and web information to spread the news, to promoting word of mouth referrals from happy patients.

<http://crstodayeurope.com/articles/2012-oct/personal-marketing-strategies/>

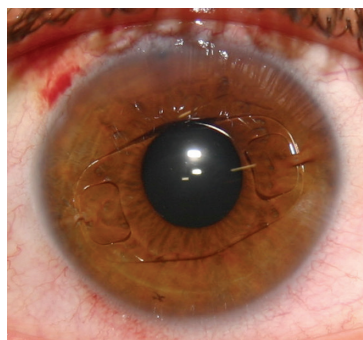


September « REVIEW OF TWO COURSES: CORRECTING REGULAR AND IRREGULAR ASTIGMATISM, PHAKIC IOLS 2016

BY SUNIL SHAH, FRCOPHTH, FRCS(Ed), FBCLA; COLM McALINDEN, BSc(Hons), MCOptom; ANTONIO LECCISOTTI, MD, PhD; JOHNNY E. MOORE, FRCOPHTH, PhD; DAMIEN McCONVILLE, MSc, MBCS, FHEA; AND TARA MOORE, PhD

Description: As part of a Master of Science degree in refractive and cataract surgery, faculty discussed ways to address astigmatism at cataract surgery, including astigmatic keratotomy, femtosecond laser arcuate keratotomy, LASIK, and intrastromal corneal ring segments. Another course addressed the use of phakic IOLs, including indications, contraindications, and management of complications.

http://crstodayeurope.com/articles/2008-sep/0908_17-php/

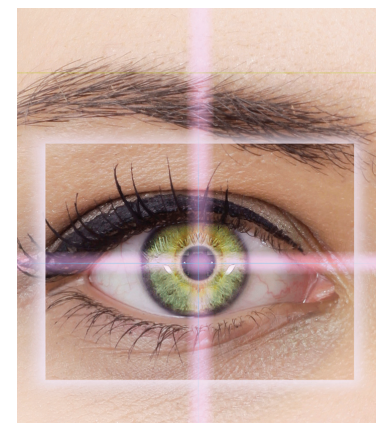


October « LASER CATARACT SURGERY COMBINED WITH PREMIUM IOL IMPLANTATION 2016

BY ALOYSIUS JOSEPH LOW, MBBS, FRCS

Description: With the AcrySof Restor multifocal IOL and the LenSx femtosecond laser (both by Alcon), 57% of eyes achieved 20/20 distance UCVA and 50% achieved J1 near UCVA, this author says. Tips for success include making sure the eye is well centered, marking the peripheral cornea at the site of intended corneal incisions, staining the anterior capsule before removal, and using only gentle hydrodissection.

<http://crstodayeurope.com/articles/2012-oct/laser-cataract-surgery-combined-with-premium-iol-implantation/>



2016 See *As of Now*, starting on page 62 for an update to these articles

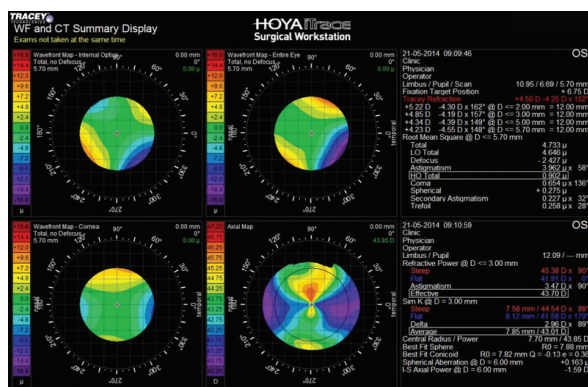
2014

September « ADVANCING CATARACT SURGERY WITH DIAGNOSTIC TECHNOLOGIES

BY DAVID F. CHANG, MD; ARTHUR B. CUMMINGS, MB ChB, FCS(SA), MMed(OPHTH), FRCS(Edin); ALOIS K. DEXL, MD, MSc; ERIC D. DONNENFELD, MD; OLIVER FINDL, MD, MBA, FEBO; DETLEF HOLLAND, MD; ERIK L. MERTENS, MD, FEBOPHTH; AND BOJAN PAJIC, MD, PhD, FEBO

Description: The invited surgeons identify a range of tests that they find to provide vital information for refractive cataract surgery. Technologies include immersion A-scan, optical biometry, corneal topography, aberrometry, keratometry, OCT, pupillometry, and a range of dry eye testing modalities.

<http://crstodayeurope.com/articles/2014-sep/advancing-cataract-surgery-with-diagnostic-technologies/>



2015

February « OUTCOMES ANALYSIS IN A CLINICAL SETTING

BY NOEL ALPINS, FRANZCO, FRCOPHTH, FACS; AND GEORGE STAMATELATOS, BSc OPTOM

Description: Also selected by Dr. Daya, this article explores helpful tips in outcomes analysis and nomogram adjustments using a golf analogy.

<http://crstodayeurope.com/articles/2015-feb/outcomes-analysis-in-a-clinical-setting/>

March « CATARACT SURGERY IN VITRECTOMIZED EYES

BY RICHARD PACKARD, MD, DO, FRCS, FRCOPHTH

Description: The defining issue in cataract surgery in a previously vitrectomized eye is the potential for lens-iris–diaphragm retropulsion syndrome (LIDRS). With attention paid to biometry, IOL selection, anesthesia, incisions, capsulotomy, and maneuvers to avoid LIDRS, cataract surgery in postvitrectomy eyes can lead to satisfactory outcomes.

<http://crstodayeurope.com/articles/2015-mar/cataract-surgery-in-vitrectomized-eyes/>



June « A PINT OF OPHTHALMOLOGY

BY ARTHUR B. CUMMINGS, MB ChB, FCS(SA), MMed(OPHTH), FRCS(Edin)

Description: A *Pint of Science* is a science festival that is held in pubs across the globe. Attending this event sparked a fire in the author to keep a closer eye on research and development in ophthalmology and other fields of science. The field of ophthalmology depends heavily on science, with lasers and eye trackers, to name a few, facilitating complex cataract and refractive surgeries. More conversations with colleagues over a pint might help to spread the good news about the highly advanced state of the art, this author says.

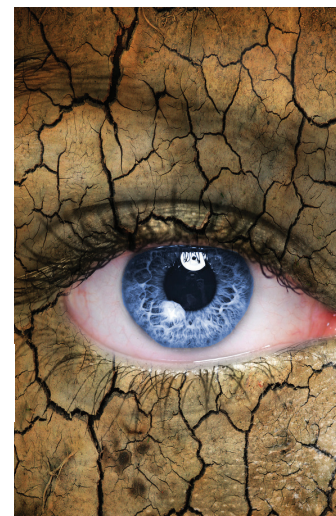
<http://crstodayeurope.com/articles/2015-jun/a-pint-of-ophthalmology/>

June « A NEW ALGORITHM FOR DIAGNOSING THE SEVERITY OF DRY EYE

BY GERD GEERLING, MD, PhD, FEBO; AND CHRISTOPHE BAUDOUIN, MD, PhD, FARVO, ON BEHALF OF THE ODYSSEY EUROPEAN CONSENSUS GROUP

Description: An expert panel devised a two-step scoring system for diagnosing dry eye disease (DED), designed to address the discordance often seen between symptoms and signs. Once this algorithm is validated, it may be used for assessment of disease progression and to improve clinical decision-making in everyday ophthalmology practice.

<http://crstodayeurope.com/articles/2015-jun/a-new-algorithm-for-diagnosing-the-severity-of-dry-eye/>



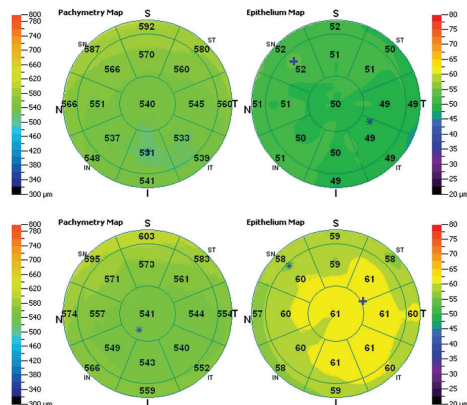
June « A NOVEL METHOD OF OBJECTIVE TESTING IN DED

BY A. JOHN KANELLOPOULOS, MD; AND GEORGE ASIMELLIS, PhD

Description: Epithelial thickening may be an indication of corneal abnormality: specifically, overall epithelial thickness may reflect conditions

such as moderate or subclinical DED. Anterior segment OCT may provide a repeatable, quantitative, accurate, and easy-to-document procedure for DED screening. Although average epithelial thickness on OCT can be an indicator of DED, there is potential for false-positive and missed diagnosis rates as high as 15%.

<http://crstodayeurope.com/articles/2015-jun/a-novel-method-of-objective-testing-in-ded/>

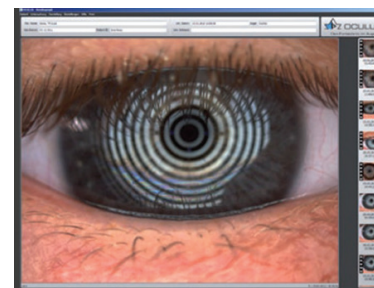


June « OBJECTIVE TESTING DEVICES

BY LAURA STRAUB, EDITOR-IN-CHIEF

Description: The number of objective testing devices for assessing DED and ocular surface disease is proliferating. Current technologies include meibography devices that provide visualization of the meibomian glands, keratographers and ocular surface interferometers to assess the tear film, and point-of-care tests to evaluate DED markers such as matrix metalloproteinase 9, IgE, and tear osmolarity.

<http://crstodayeurope.com/articles/2015-jun/objective-testing-devices/>



2016

January « WHAT IS THE BEST APPROACH TO NEGATIVE DYSPHOTOPSIA?

BY ROBERT L. KOST, MS; AND RAJESH K. RAJPAL, MD

Description: Patients who have negative dysphotopsia complain of a temporal dark crescent. Most of the time, symptoms will fade or the patient will adapt to the shadows. It may be best to avoid mentioning this potential complication

preoperatively, so that the worry is not planted in the patient's mind.

<http://crstodayeurope.com/articles/2016-jan/what-is-the-best-approach-to-negative-dysphotopsia>



January « TORIC IOL OR LRI?

BY EDOARDO LIGABUE, MD; CRISTINA GIORDANO, OD; AND VINOD GANGWANI, MD, FRCS, MRCOPHTH

Description: Toric IOLs are a safe alternative to peripheral corneal relaxing incisions for the correction of corneal astigmatism during cataract surgery.

Rotational problems with earlier toric IOL models have been overcome with modern designs, and outcomes with IOLs are more predictable than those with incisions.

<http://crstodayeurope.com/articles/2016-jan/toric-iol-or-lri/>

May « WHAT IS YOUR SCALE OF VALUES?

BY WOLFGANG RIHA, MD; AND HARRY M. JANSEN KRAEMER JR

Description: Good leadership is target-oriented, flexible, and, most important, authentic. A values-based leader puts ego aside and keeps a global view of the feelings of the people who work in the company. Understanding and following your own values helps ensure that your staff will respect your leadership.

<http://crstodayeurope.com/articles/2016-may/what-is-your-scale-of-values/>



September « THE PSYCHOLOGY OF DRY EYE DISEASE

BY LUIGI MARINO, MD, PhD

Description: DED is an unpleasant sensory and emotional experience for many patients. Understanding and responding to the psychological aspects of the disease can help make management of DED more effective. Always respect the symptoms, pain, and discomfort felt by these patients.

<http://crstodayeurope.com/articles/2016-sep/the-psychology-of-dry-eye-disease/>

