

TUMULT, COLLABORATION, AND COOPERATION

common thread through the topics in our cover focus this month is the feeling of optimism. The past 2.5 years have been unusual (to say the least), and I am impressed by the spirit of resilience and determination we have all demonstrated.

The major threats associated with COVID-19 have abated, but recent reports of a possible Monkey Pox outbreak have emerged in several countries. The disease is not as contagious as COVID-19, but it is potentially deadly for some. Hopefully, the sensible mechanisms we learned during the COVID-19 pandemic can be applied to avoid further spread of the disease as well as major lockdowns. From vaccinations to novel treatment options for infected individuals, the pandemic is now effectively controlled. We are in a much better place in the pandemic. I hope the positive progress continues.

The economic consequences of the COVID-19 pandemic are compounded by those of the war in Ukraine. This has made it more challenging to get back on our collective feet. I, like so many others, watched with a sense of incredulity as the situation in Ukraine evolved. More than 6 million Ukrainian residents are displaced, and the diversion of resources internationally to support the country will trigger consequences worldwide. The impact of the war is already evident in energy prices, and food shortages in some regions are likely. I tip my hat to our brave colleagues who have remained in Ukraine and neighboring Poland who are working tirelessly to care for patients and treat those with traumatic ocular injuries.

Meanwhile, the number of patients requiring health care has further increased over the course of the pandemic. Many countries are experiencing a large backlog of patients. Innovative approaches to treating patients expeditiously and effectively are discussed in this issue, from the use of technology for telemedicine, data management, and AI to pragmatic procedural approaches such as immediately sequential bilateral intraocular surgery.

Information technology (IT) and the ability to integrate and leverage big data are areas in which medicine lags behind other industries such as finance. More development is needed to facilitate the accumulation and exchange of data in medicine ethically and compliantly. There is an abundance of valuable data that could be exported

from the multitude of devices used in ophthalmology. An integrated approach that allows ophthalmologists to access and leverage data from different devices is needed. The first step in this quest is for eye care providers to voice their desire for data integration. We can attempt to influence industry to collaborate with competitors to openly integrate data across devices and platforms. The integration of machine learning and AI could then follow.

This type of exercise may seem gargantuan at first, but it could be accomplished in a stepwise fashion. The willingness for companies to collaborate is all that is needed to deliver real impact in eye care. Developing methods for sharing data across device platforms would benefit doctors, patients, public health systems, and, of course, the companies that embrace the concept.

It would be better for industry to take control of the initiative than to be mandated by a government authority. I strongly suspect that when the benefits of data collection and analysis in medicine become more evident, regulatory authorities will require device manufacturers to enable the exportation of raw data from their devices and impose rules and regulations with which companies may find it difficult to comply. Technology is a great leveler, and a change toward this direction seems inevitable. Device manufacturers should embrace data collection and sharing in ophthalmology and do their part to facilitate it.

I hope that the pandemics and wars recede so that we can get on with our lives and, for us ophthalmologists, work toward providing people with a better quality of life by preserving, restoring, and rejuvenating vision.

Let's raise our glasses to better times ahead. ■

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