

Ophthalmology *Update*

A professional courtesy of Lansing Ophthalmology

Benefits of Bilateral Cataract Surgery vs Unilateral Surgery

Many studies have shown that unilateral cataract surgery improves visual functioning, but now a new study (Ophthalmology 2013) reports that the largest gains are found in patients who undergo second-eye cataract surgery, even when the outcome of the first surgery was excellent. Lee et al from the Johns Hopkins School of Medicine's Wilmer Eye Institute examined the impact of cataracts and cataract surgery on clinical measurements of vision, reading speed, objective mobility performance and subjective visual functioning.

The Salisbury Eye Evaluation, a population-based study, evaluated 1739 patients without previous cataract surgery with bilateral baseline best-corrected visual acuity (BCVA) of 20/40 or better, or cataract surgery between rounds 1 and 2. During the study, 29 participants underwent cataract surgery on both eyes, 90 participants had unilateral surgery and 1620 participants had no surgery.

Study participants undertook multiple objective and subjective measures of vision and visual function, including a 2-hour in-home interview and an in-depth evaluation at the clinic. Visual performance, mobility-based tasks and the Activities of Daily Vision Scale (ADVS) were measured at baseline and at 2 years.

At the conclusion of their study, the authors found that compared with patients not having surgery, the BCVA of patients in the unilateral group improved by 0.04 logMAR, while BCVA in the bilateral group showed improvement of 0.13 logMAR after adjusting for confounding factors. In addition, compared with the no-surgery group, mobility scores decreased in the unilateral group, while showing a much

smaller decrease in the bilateral group. Likewise, patients in the bilateral group had a significant positive change in the ADVS score compared with patients who had no surgery, while unilateral patients actually experienced a 5-point relative decline. Both the unilateral and bilateral groups showed significant improvements in reading speed.

"Given the greater benefit observed in patients who underwent bilateral cataract surgery, providers should closely follow patients who may benefit from surgery," the authors wrote. "This includes carefully asking patients who have already undergone unilateral cataract surgery if they are experiencing continued difficulty with contrast sensitivity, reading, mobility, or other visual needs, even if their visual acuity seems to be satisfactory."

Older Americans Lack Key Nutrients to Support Eye Health

Although research has shown a link between specific nutrients and maintaining good vision and eye health, a recently published review by Rasmussen from Lesley University, Massachusetts, and Johnson from Tufts University, Massachusetts (Clin Interv Aging 2013), shows that many Americans older than 50 years of age do not consume enough of those key nutrients to support good vision. The review looked specifically at vitamins C and E, beta-carotene, lutein, zeaxanthin, zinc, and the



omega-3 fatty acids—eicosapentaenoic acid and docosahexaenoic acid.

National Health and Nutrition Examination Survey data showed that most Americans' intake of these nutrients falls well below recommended levels. In a survey conducted by the Ocular Nutrition Society, 70% of adults from 45 to 65 years of age ranked vision as the most important of the 5 senses, but less than 50% of the respondents understood the link between nutrients and ocular health and vision. Regarding specific nutrients, nearly 60% of respondents were unaware of the benefits of omega-3 fatty acids; 66% were unaware of the benefits of lutein; and 89% were unaware of the role of zeaxanthin in maintaining eye health.

While supplements can help bridge the nutritional gap for men and women whose diets do not include these key nutrients, the best way for patients to obtain easily absorbable amounts of these substances is by including foods rich in these nutrients in their diets: citrus fruits, berries, tomatoes and broccoli for vitamin C; vegetable oils, wheat germ, nuts and legumes for vitamin E; oysters, beef and other meats, nuts and legumes for zinc; kale, spinach, broccoli, peas, corn, colored bell peppers, goji berries and Brussels sprouts for lutein and zeaxanthin; fish oils from cold-water fish, such as salmon or tuna for omega-3s; and carrots, pumpkin, sweet potato and spinach for beta carotene. These are foods adults can easily add to make their diets more "eye friendly."

Vision Problems Linked to Poor Balance

Vision may play a larger role than previously thought in regulating the vestibular system and maintaining balance, which means that those individuals with poor vision are at greater risk for falls and other balance issues, according to the results of a study conducted by Willis et al from the University of California Davis Health System Eye Center (JAMA Ophthalmol 2013). The 2001–2004 National Health and Nutrition Examination Surveys (NHANES) were used to evaluate the balance of 4590 adults aged 40 years or older.

Balance issues were measured by testing the participants' ability to stand on both a firm surface

and a compliant, foam surface with eyes open and then closed. Foam surface testing with eyes open helped evaluate the relationship between the visual and vestibular systems in maintaining postural balance, while the eyes-closed test minimized the visual and proprioceptive inputs and focused solely on the vestibular system.

The authors assessed balance using grades of pass or fail, and also noted time-to-balance failure for each test. Failure was considered to have occurred when participants began to fall, moved their arms or feet to restabilize themselves, or needed help to maintain balance for 15 seconds on the solid surface or for 30 seconds on the foam surface. Participants' self-reported falling incidents were also recorded.



At the conclusion of their study, the authors found that those participants with visual impairment or uncorrected refractive error had significantly higher rates of failing the eyes-closed foam-surface balance test compared with participants with normal vision. Those participants with visual impairment were also more likely to report falling incidents.

Although researchers know that vision plays a significant role in maintaining balance, the relative contributions of the vision, vestibular and proprioceptive systems have been difficult to determine. The authors noted that future research is needed to gain a deeper understanding of the relationship between vision and the vestibular system, as well as to identify vision-related prevention strategies that could be implemented to help prevent falls.

HR Q&A

by Patti Bielby, Director of Human Resources

Question: I am looking for a fresh perspective on helping my staff improve their skills and performance. Help!

Answer: I recommend using formal coaching techniques to work with your staff to improve overall performance. Coaching can help in all perspectives of an employee's job performance, including the need to correct performance not meeting expectations; improving skills; and developing new skills.

Coaching in a business environment is a training method whereby you (or another experienced, skilled employee in your practice) work with another employee to help develop their skills and performance. Coaching skills include listening, questioning, observing, building rapport, offering constructive analysis and feedback, empathy, providing supportive encouragement and holding others accountable. Effective coaches understand the value and importance of giving continual performance feedback to their people, both positive and corrective. Successful coaching removes barriers to working together and helps to encourage problem solving in a creative manner that emphasizes team achievement.

Looking for opportunities to develop and practice your coaching skills? Every day delegation of duties is the quickest and most frequent way to see your coaching style in action. You as the manager will also need to consider the culture in your practice. Do you take the time to get to know your employees' strengths? Do you have trust in the workplace? You want to make sure that all employees embrace the concept of coaching and understand it is not punitive but, rather, a philosophy that values learning and the continuous development of your employees.

Coaching does take time and effort, which can always be challenging during a busy work day. You might even be thinking, WIIFM (what's in it for me?). I can assure you that the time put into coaching will be well worth it. The strongest leaders

are excellent coaches. Having the right people with the right skill set performing at their peak helps you get more done and achieve stronger results for your practice. A "win/win" if you ask me!

Welcome Daniel Badgley

Lansing Ophthalmology is pleased to welcome Daniel Badgley as their new Executive Director. Mr. Badgley is replacing Charles Dobis, who retired at the end of 2013.

Mr. Badgley previously served as Administrator of the Department of Ophthalmology at the Henry Ford Health System in Detroit, MI. He holds a Master of Business Administration from Wayne State University and a BS in Administration from the University of Michigan-Dearborn.

Mr. Badgley oversees the operations of Lansing Ophthalmology and its affiliates, which includes 33 providers, ten locations and more than 240 employees.



Speaking Engagements for Patients

Lansing Ophthalmology doctors will be speaking to the public on vision related topics of interest.

Dr. Anthony Hsu – Introduction to Glaucoma

Thursday, January 30th

6pm Dawe Auditorium, McLaren Greater Lansing

Dr. Craig Lewis – Aging Eyelids

Tuesday, March 4th

6pm, Dawe Auditorium, McLaren Greater Lansing

CME Seminars

In 2013 Lansing Ophthalmology presented three CME seminars. We hope to provide four CME seminars in 2014 and need your input on possible future topics you'd like to know more about. Please email (kelliott@loeye.com) or call (517-337-1283) Kyrie Elliott, Referral Coordinator, with your suggestions.

Annual Survey

It is time again for the annual Lansing Ophthalmology Referring Physician survey. If you could please take a moment to fill out and return the brief survey, we'd greatly appreciate your feedback. Each year your feedback helps provide direction as we work to improve both customer and referring physician satisfaction. Look for your survey in the mail soon.

Contact Information Changed?

Help us keep our records up to date! Let us know if you change phone numbers or plan to move by emailing (kelliott@loeye.com) or calling (517-337-1283) Kyrie Elliott, Referral Coordinator.

Are you submitting referrals to Lansing Ophthalmology through www.loeye.com?
It is fast and easy.

The registration process is easy:

1. Go to loeye.com
2. Click on the button which says create an account.
3. Click on the referring doctor registration button at the bottom of the page.
4. Fill out the form
5. Indicate you have read the privacy practices.
6. Click register

To submit a referral:

1. Click the link that says Submit Referral
2. Start by selecting the specialist you would like to refer to and then complete the form.
3. Additional files can be uploaded by clicking the Upload Additional Files button. This could include photos, forms etc.
4. Indicate that you have read the privacy notice.
5. Click Send Patient Referral



Lansing Ophthalmology

Regional Eye Care Center

Referral Line: 517.337.2725

Referral Fax: 517.337.1380

Ophthalmology Services

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Amy B. Eston, M.D.
Anthony T. Hsu, D.O.
Shalini Johnson, M.D.
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Joseph L. Wilhelm, M.D., F.A.C.S.
Matthew M. Yeomans, M.D.
Michelle You, M.D.

Optometry Services

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www.loeye.com

Locations:

Coolidge Rd., East Lansing
Lake Lansing Rd., East Lansing
Charlotte
Fowlerville
Grand Ledge
Howell
Lakewood
Sparrow Professional Building, Lansing
Central Eye Consultants, Mt. Pleasant
Williamston

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