Understanding vision may help save both sharks and humans!
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Collaborative Integrated Team Care

What is the future for care of patients with sight-threatening ophthalmic conditions in view of the current perceived constraints related to affordability and accessibility of care from appropriately trained and experienced eye care professionals?

This is a vexed question which we as a college are currently facing.

Independent parallel professional care is not the answer and certainly not the best solution in terms of recognised best patient safety practices and outcomes, yet there exists a real tension related to medical workforce and the increased burden of care associated with an ageing population.

These concepts have become forefront for RANZCO activities over the last year. In February 2013 the Optometry Board of Australia, under the auspices of the Australian Healthcare Practitioner Regulation Agency, published a change to the guidelines for the diagnosis and management of glaucoma and ocular hypertension. This comprehensive guideline was published in 2010 and represented the cumulative efforts of a group of health care practitioners including optometrists, orthoptists, pharmacists, nurses, general practitioners and ophthalmologists. It was funded by the Council, well researched and provided recommendations pertaining to local Australian situations.

What’s more significant is that the decision seems to be in total disregard of the National Health and Medical Research Council guidelines for the diagnosis and management of glaucoma and ocular hypertension. This comprehensive guideline was published in 2010 and represented the cumulative efforts of a group of health care practitioners including optometrists, orthoptists, pharmacists, nurses, general practitioners and ophthalmologists. It was funded by the Council, well researched and provided recommendations pertaining to local Australian situations.

There is a widespread belief that there are real issues related to accessibility and affordability of care in certain areas, determined by both geography and distribution of the eye healthcare practitioners who serve those populations. This situation is not unique to Australia, where there is a concentration of population adjacent to the coastlines in metropolitan centres and a paucity of population elsewhere. Canada has a similarly concentrated distribution of population along its southern border and the Canadian Glaucoma Society has addressed the issue for options of glaucoma management based on geographical considerations and availability of eye healthcare practitioners. Based on this information, and additional evidence-based information available, a perspective article authored by A/Prof Ivan Goldberg and Dr Andrew White has been published in Clinical Experimental Ophthalmology which outlines suggested guidelines for collaborative management of glaucoma utilising an integrated team approach. I believe this article sets a benchmark for sensible sustainable accessible and affordable care of glaucoma, while ensuring the greatest possible patient safety. Their guideline on collaborative care provides recommendations for all stages of ocular hypertension and glaucoma, but stresses that an integrated team approach requires that the critical decisions are made by the most qualified and experienced member of that team.
For glaucoma this is an ophthalmologist. It also recommends that all management decisions are undertaken with informed consent of the patient, carefully documented as well as informing the patient’s general practitioner.

Many other medical specialists are also involved with integrated collaborative care and below is the statement from the Combined Presidents of Medical Colleges, outlining the common principles that as ophthalmologists we should also adopt.

Collaborative integrated team care does not however simply mean passing on the responsibility of care to another healthcare practitioner and it certainly does not imply that such care should be paid for by the ophthalmologist, but rather that all financial transactions must be performed as determined by regulatory authorities.

Additionally the RANZCO Code of Conduct has recently been revised and outlines clear principles of collaborative care. This includes information related to financial considerations, stating that the eye healthcare practitioner delivering care should charge the patient directly without direct or indirect inducements associated with that care.

Dr Stephen Best
President
A busy start to the year

Since the last issue of RANZCO News, membership of the College has increased by 28, with the commencement of the 2014 cohort of trainees on the Vocational Training Program (VTP).

Induction of newly appointed RANZCO Trainees commenced in December 2013, with the New Zealand Trainees attending a session held at Greenlane Hospital before moving to the University of Auckland to spend time in the Wet Lab. Trainees were fortunate to be addressed by the RANZCO President, Dr Stephen Best who welcomed them to the VTP as well as the New Zealand Qualification and Education Committee (QEC) Chair Dr Ainsley Morris; Director of Training Dr Michael Merriman; Clinical Director at Greenlane Hospital Dr Sarah Welsh, Auckland Fellows Dr Jo Sims, Supervisor of Training and Dr Brent Gaskin; registrars Dr Jennifer Fan and Dr Shenton Chew; Orthoptists Dr Tammy Miller and Dr Jenny Clarke; Dr Wil Harrison, Maori Medical Practitioners Association; and College Education Manager Ms Chris McGuigan. Sessions included information on RANZCO and Professionalism, Ophthalmic Skills and Knowledge, Cultural Competency, Working as part of a Team and Everything you want to know about being a RANZCO Trainee (but were afraid to ask!).

Induction continued in January for all 2014 RANZCO Trainees who could attend a session held at the Sydney Eye Hospital. The Federal QEC was represented by Directors of Training Dr Michael Hennessy Prince of Wales Hospital, and Dr Weng Sehu, Sydney Eye Hospital. Presentations were given on the RANZCO mentor program by Dr Anne Lee, neuro-ophthalmic emergencies by Prof Peter McCluskey, ophthalmic emergencies by Dr Weng Sehu, Wet Lab by Dr Peter Martin and the Trainee Perspective by Dr Chameen Samarawickrama. In addition to the session in Auckland, College Education Managers also presented in Sydney and at the Victorian Training Network Induction session in February, as part of the Royal Victorian Eye and Ear Hospital (RVEEH) Orientation Week which covered all aspects of employment and training. Victorian QEC Chair Dr Mark Walland and Director of Training Dr Fiona Fullarton welcomed the Victorian Trainees during RVEEH orientation and I would like to add my personal welcome to all new Trainees, our future colleagues.

All newly appointed Trainees have now sat the Anatomy exams and Clinical Ophthalmic Pharmacology and Emergency Medicine (COPEM) Module 1, as this is now part of College requirements prior to commencing accredited training time on the VTP. Trainees must also now complete COPEM Module 2 and a Wet Lab assessment within the first three months, the latter must be completed before surgery on live patients is permitted. It is envisaged that the early performance of Trainees on the VTP will be enhanced through these formal requirements to demonstrate ophthalmic knowledge and surgical skills.

Preparations are on track for the Anatomy exams in March, which will be held at the Royal Australasian College of Surgeons in Melbourne. The College is privileged to have Prof Paul McMenamin from Monash University as an Anatomy Examiner, as he will bring exceptional expertise to this subject and also to the upcoming curriculum review.

At the time of writing RANZCO Advanced Clinical Examinations (RACE) written exams have been sat and preparations are under way for the RACE Clinicals to be

It was pleasing to see the response from Fellows to the recent call for Expressions of Interest to join the Boards of RACE, Ophthalmic Pathology and Ophthalmic Sciences Examiners.

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At the time of writing RANZCO Advanced Clinical Examinations (RACE) written exams have been sat and preparations are under way for the RACE Clinicals to be
held at RVEEH, with Dr Peter Meagher as Examiner in Charge. The rebuilding at RVEEH presents some interesting challenges to the planning of this exam, however I am assured the conduct of the exam will be unaffected. The Ophthalmic Pathology exam is being increasingly decentralised and the Semester 1 exam will be held for the first time in six venues.

While welcoming the 2014 Trainees it is also time to plan for the next round of Selection. Registration is available on the RANZCO website until 30 April. This has been advertised on the RANZCO website for some time and many enquiries have been received already. A number of enhancements have been discussed to improve the efficiencies of the selection process which will assist the applicants, the selection committees and potentially improve productivity. A Selection Workshop is planned to continue training for the QEC Chairs who represent RANZCO on the Network Selection Committees. Thank you to all the Fellows who generously give of their time and their expertise to be involved in the Selection process and to all Fellows who participate in the referee reporting process.

It was pleasing to see the response from Fellows to the recent call for Expressions of Interest to join the Boards of Ophthalmic Sciences and Ophthalmic Basic Competencies and Knowledge Examiners, the VTP and to the College Mission.

Two important VTP meetings, in the Curriculum and Course Development areas, were held in February. On Saturday, 1 February 2014, Curriculum Committee members and review group chairs collaborated to finalise the revision of the clinical performance curriculum standards. These revised draft standards have been posted on the RANZCO website at www.ranzco.edu, and your comments are invited. The contributions of the review groups and the Committee to this important task are most sincerely appreciated.

Members of the new Course Development Working Group, who met for the first time in February, have been given the task of investigating the educational needs of ancillary and allied health workers in ophthalmology. An interim report on options for the College to address those needs and how the needs of Fellows (outside the VTP) and other general or specialty medical practitioners might be met will be presented to the Board in May.

RANZCO continues to be involved in the East Asia Vision Project through contributions to capacity-building in the Ophthalmology Residents Training (ORT) Program in Cambodia. Utilising the expertise of the VTP, RANZCO has strengthened ORT systems in the areas of curriculum, accreditation and assessment. College Education Manager Ms Chris McGuigan attended the ORT exams in Phnom Penh in December as an observer. Dr Cathy Green, Chair of Ophthalmic Sciences and Ophthalmic Basic Competencies and Knowledge, will facilitate a workshop on Assessment in April in Phnom Penh and continue to provide high level advice to the ORT Technical Committee and the University of Health Sciences.

Accreditation of training posts continues on a three year cycle. The inspection of the metropolitan training posts in the Sydney Eye Hospital network will take place in mid-March.

To all RANZCO Trainees about to sit exams, I send my best wishes as you prepare to demonstrate your skills and knowledge as you progress along the journey to become our future colleagues.

Dr Mark Renehan
Censor-in-Chief
CEO’s Update

Improving Services

As we start 2014, RANZCO staff are busily working on activities towards achieving outcomes from the Strategic Plan developed in 2013.

Over the quieter period of December-January we implemented a new IT system which is already proving to be a powerful tool for our information management and sharing, especially with members. It is still at an early stage but I’m sure many will see the benefits over the year. In addition to the productivity gains, we have saved a considerable amount on our overall IT costs. The improvements will start to show in due course as our extensive Continuing Professional Development resources become easier to manage and more accessible to Fellows. This, and the development of audit tools, remain a focus for the year ahead as we recognise that these are key areas of benefit to Fellows.

Another key area for development in 2014 will be Professional Standards. This can mean many things and defining it clearly will be the first step. This is not to say that Fellows are not already working to or using Professional Standards, rather we believe that we can do a lot more to assist. With the increasing scrutiny on the medical profession we believe that this area deserves more attention. We will soon be seeking expressions of interest from Fellows to join a new Professional Standards committee, so keep this in mind if you are interested in this area.

We recently signed an agreement with Quality Innovation Performance to develop practice accreditation standards for all practices. This process will start with a pilot program in a few representative practices and, following any modifications, we plan to have it rolling out to all practices by the end of the year. I know some practices have been waiting a long time for this to occur, and we are also aware that it is likely to be made mandatory by the Australian Commission on Quality and Safety in Healthcare.

I hope that members use the next few years to ensure their practices meet the required standards.

Picking up on Dr Stephen Best’s theme of ethics in professional life, which he wrote about in the December issue of RANZCO News, we have spent some time over the last few months re-developing the RANZCO Professional Code of Conduct to make it a more approachable and easily understood document. This will be released shortly to all members. The aim is to remove any ambiguity and provide good guidance so the members continue to operate at the highest standards required by legislation, code of practice and patient expectation.

Overshadowing the year will be the continued legal battle with the Optometry Board of Australia. After a small victory just before Christmas, in which the Supreme Court of Queensland judge agreed that RANZCO and the Australian Society of Ophthalmologists do have appropriate standing to take the action we have, we now find a further delay until the actual trial date. The lawyers for the Optometry Board of Australia successfully managed to delay the date from May until early August. The main outcome from this is that patients will continue to be confused and potentially put into situations whereby their sight is in danger over the long term. RANZCO and the Australian Society of Ophthalmologists remain committed to the fight for patient safety.

I will be attending the various Branch meetings over the next few months and will have the chance to talk to you about developments at the College or anything that is concerning you.

I will also have various opportunities to meet politicians where I will continue to lobby for changes to the Australian Health Practitioner Regulation Agency in particular, so that we do not see a repeat of the current situation with glaucoma management. Please feel free to contact me or catch me at a meeting if there is anything you wish to discuss.

Dr David Andrews
CEO
Branch Updates

Queensland Branch

“It is good that each generation should try with new ideas and technology to close the Indigenous health gap, making stepwise progress,” said Fellow Dr Mark Lazarus.

In March, 2014 Diamond Jubilee Partnerships with RANZCO (Qld) and 12 other partners are commencing an exciting 5 million dollar diabetes initiative for Indigenous people of regional Queensland. The mobile facility will utilise local providers, teamed with multidisciplinary partners to improve access to standard of care diabetes therapies in their familiar cultural surrounds, aiding compliance.

The “Ideas Van” (Indigenous Diabetes, Eyes and Screening) will visit nine regional Queensland hubs for two days every month, becoming an annex to the Aboriginal Medical Service primary care facility where the endocrinology team are situated. Twenty-seven of the 63 Aboriginal Medical Services will have automated fundus cameras for diabetic screening supported by a retinal reading centre. The Royal Flying Doctor Service will have another eight cameras to reach 32 more remote clinics.

These will all refer to the Ideas Van, which has the latest diagnostic instruments and provides standard of care therapies including refraction, dispensing, laser and intravitreal injections. Optical coherence biometry and ultrasound will facilitate regional cataract surgery.

Inala “Centre of Excellence in Indigenous Health” in the western suburbs of Brisbane is the clinical model for the initiative. At this clinic a small portion of tertiary referral non-indigenous patients are seen. This allows the Indigenous to show their generosity to needy non-indigenous by allowing access to the latest ophthalmic equipment. This eases community tension and also makes our day productive when “Sorry Business” ceremonies occur.

Our hope is that the initiative will be a catalyst to advance ophthalmology services in regional Queensland.”
Recognising that the private practice model, even with the best intentions, does not serve the whole community is a challenge we all face. In regional Queensland there is often no public ophthalmology service to attend to those who miss out on the benefits of our first world health system. It is by reaching the margins that we are all inclusive in our approach.

Our hope is that the initiative will be a catalyst to advance ophthalmology services in regional Queensland. The achievement of the initiative thus far has been the collaboration of multiple health partners and the business community in addressing the challenges of diabetes as a whole.

Dr Rowan Porter
Qld Branch Chair

New South Wales Branch

On 31 January 2014 I attended a meeting at the Aboriginal Medical Service, Western Sydney (AMSWS) Headquarters at Mt Druitt Village together with the Australian Medical Association’s (AMA) [NSW] CEO, Ms Fiona Davies and the AMSWS’s Medical Co-ordinator, Dr Penny Abbott. The aim was to discuss how both the AMA (NSW) and the NSW State Branch can collectively assist in reducing the AMSWS’s long delay in their patients being able to access ophthalmology services, both surgical and medical, including the greater utilisation of local ophthalmic specialist services.

The AMA (NSW) President, A/Prof Brian Owler’s (neurosurgeon) recent visits to the Australian Indigenous Doctors’ Association in Newcastle, Taree and the AMSWS highlight the AMA [NSW]’s commitment to improving Aboriginal health with the assistance of sub-speciality colleges commencing with RANZCO.

At the NSW Branch AGM held on 14 October 2013, Drs Andrew Chang and Kim Frumar took over the roles of Vice-Chair and Honorary Secretary respectively, joining myself as the new Chair. They, along with Drs Tim Haymet, Diana Semmonds, Sam Lertsutmikul and Con Moshegov have organised a truly ‘Cutting Edge’ NSW State Branch ASM. The meeting was held on 21 and 22 March 2014 at the Crowne Plaza, Hunter Valley, to which I thank all Fellows who attended. The ASM dinner was held at the Tempus Two winery with live entertainment comprising a string trio for entrée, a Latin jazz quartet and the ‘Three Waiters’... couldn’t be any better than that! I hope that those who attended had a wonderful evening.

Dr Tasha Micheli
NSW Branch Chair

Victorian Branch

2014 may have only just begun but planning is already well underway for the Victoria Branch Scientific Meeting that is moving from its traditional timeslot to the new date of 31 May.

The updated conference facilities at The Alfred Hospital will once again host our popular Branch meeting with its successful formula of a single-day meeting packed with practical updates for general ophthalmologists. The scientific program is rapidly taking shape with interactive sessions and Fellows are encouraged to submit abstracts or contact the scientific convenor: Dr Anton Van Heerden, antonvanh@gmail.com.

This year the invited guest speaker is Prof Gerard Sutton, who will be delivering presentations on improving outcomes for cataract patients with corneal issues and refractive surgery for the general ophthalmologist. He will also lead a forum discussing challenging refractive cases.

Gerard will be joined by local experts covering a variety of special interests that will include Drs Justin Friebel, Tom Hardy and Alan McNab speaking about ocular-plastics and a vitreoretinal session featuring Drs Willie Campbell, Ed Roufail and Johnny Yeoh in a day that promises to have something for everyone.

Online registration is now open and can be accessed via the RANZCO Events Calendar.

Dr Andrew Crawford
Vic Branch Chair

New Zealand Branch

An exciting new research and teaching centre to promote eye health in New Zealand was launched at the University of Auckland recently.

The Buchanan Ocular Therapeutics Unit will encompass ophthalmology, optometry and vision science research and education.

It was established with the single, largest, individual, philanthropic donation made to the Faculty of Medical and Health Sciences to date; $2.4 million from Buchanan Charitable Trust founders, Drs Trevor and Caroline Gray.

The Buchanan Ocular Therapeutic Unit will be based within the Department of Ophthalmology to develop and translate ocular therapeutic related scientific research into pharmaceutical cell based or technology based treatments. The Unit will also provide high quality educational opportunities for all eye health related professions in New Zealand.

Congratulations to Dr Shuan Dai, an ophthalmologist working in the public and private sector in Auckland, who received a community award from the New Zealand Health Foundation for Asian and Ethnic Communities. This was presented by the The Minister of Health, Hon. Mr Tony Ryall, who said that the award was an important recognition of Shaun’s dedication to making a difference in the health outcomes of Asian communities living in the Auckland region.

A reminder that the New Zealand Branch annual meeting will be held in Rotorua on Friday 16 and Saturday 17 May 2014. The theme is “Seeing the Future – Profit and Loss of Vision”.

Dr James Borthwick
NZ Branch Chair
Legal Action Commencing, 4 August, against the Optometry Board of Australia

On 19 December 2013, Justice Douglas of the Supreme Court of Queensland delivered his decision that the Australian Society of Ophthalmologists (ASO) and RANZCO had clear standing to proceed with legal action against the Optometry Board of Australia (OBA).

As Justice Douglas said: “The evidence establishes to my satisfaction that the applicants’ roles in setting and advocating standards of patient care for the treatment of glaucoma by ophthalmologists over many years gives them standing to challenge the validity of instruments which, although directed to the conduct of optometrists, have the effect of removing ophthalmologists from their previous role in the process.”

It’s important to note that within the body of the judgment, references were made to the ASO’s articles of association and objectives, the oath that Fellows must swear or affirm that patients are their first concern and multiple references to RANZCO’s Code of Conduct. The primacy of patient care is why we have a code of conduct. As medical doctors (and I deliberately use the word “medical” because almost anyone can call themselves a doctor now), we understand that near enough care is not good enough care. We understand the standards necessary to deliver care.

I received this early Christmas present while working in my Mildura practice in country Victoria. Some of you know that my practice shares a location within a large optometry practice, and I have practised collaborative care within an integrated eye team for 10 years. I know what works and what doesn’t. It is the collaborative care model which facilitates delivery of appropriate patient care – the model recognises the important contribution of both optometrists and ophthalmologists to patient care, and its rigours provide the protection necessary to ensure that medical conditions are treated by medical doctors.

Despite our litigation against the Optometry Board, I continue to have the support of many optometrists. The large majority recognise the advantages and need for shared care. It is only a small group that is driving the attempt to reduce the standard of patient care and protection to the Australian community. Our fight is with the OBA and Australian Health Practitioner Regulation Agency, not optometrists. We sincerely wish to continue to enjoy a supportive and productive relationship with our allied health practitioners, and hope that optometrists will continue to work within the confines of the shared care framework for the collective good of our patients.

I am also happy to report that we have been making substantial progress in our efforts to win Australian Competition and Consumer Commission approval for common fee-setting within ophthalmic practices. We were disappointed the Commission did not see fit to approve our initial application across the board but are now finalising supporting testimony that can be implemented by practices on a case-by-case basis. I expect the first solo application to be lodged in the near future and believe it should have a good chance for success. This initiative is a good demonstration of how ASO works to assist members in practice management and associated issues.

Dr Arthur Karagiannnis
ASO President
The University of Auckland has benefitted from a substantial philanthropic contribution by Drs Trevor and Caroline Gray for the establishment of the Buchanan Ocular Therapeutics Unit.

At a function celebrating one of the largest, single, individual philanthropic donations, $2.4 million, that the School of Medicine has ever received, the Dean of Medical and Health Sciences at The University of Auckland, Prof John Fraser, acknowledged those among the guests who have been supporters of the University and supporters of the ophthalmic and vision science program in particular.

“We also have to acknowledge that Charles and his team have done a fantastic job of building what is now clearly an international centre of research, teaching and clinical excellence. They have done it through extraordinary hard work. However they could not have done it without the many philanthropists who have seen this program as something worthy of investing in. If you look at the productivity of this group they have repaid this investment many times over. You have all enabled this Faculty, Charles’ program and the University to do things that simply could not have otherwise been done and we are profoundly grateful for that support," John told guests.

Prof Charles McGhee also acknowledged the intellectual support and philanthropic input that many individuals had made to the School of Medicine.

A special mention was made of Dr Harold Coop, Dr Hylton Le Grice, Sir William and Lady Stevenson, Dr Calvin Ring, Mr Maurice Paykel, Dr Peter Ring, Prof Bruce Hadden and Dr Wendy Hadden all of whom have supported the establishment and burgeoning Department of Ophthalmology that is enabling the development of future ophthalmologists.
Awards

Prof Ivan Goldberg named recipient of The Glaucoma Foundation’s 2013 Robert Ritch Award

The Glaucoma Foundation presented its 2013 Robert Ritch Award for Excellence and Innovation in Glaucoma to RANZCO Fellow Prof Ivan Goldberg, a noted international figure in the glaucoma community. The announcement and presentation was made at the Foundation’s December Annual Benefit Ball in New York City.

The award recognises the contributions of individuals who have played a significant and unique role in promoting the medicine and science of glaucoma. It is named in honour of Dr Robert Ritch, founder of The Glaucoma Foundation and its Medical Director, who received the inaugural award in 2008.

Ivan is Director of Eye Associates in Sydney, head of the Glaucoma Unit and Visiting Ophthalmologist at the Sydney Eye Hospital, as well as a Clinical Associate Professor at the University of Sydney. He is the President of Glaucoma Australia and of the Australian and New Zealand Glaucoma Interest Group. In 2009 he was the recipient of an Order of Australia Award “for services to glaucoma and the community nationally and internationally”.

Ophthalmologist recognised for work with Asian community

Dr Shuan Dai from Eye Doctors was presented with a community award by the New Zealand Health Foundation for Asian and Ethnic Communities.

The organisation focuses on health and medical issues and related services for Asian communities as well as promoting exchanges between Asian countries and New Zealand in health and related areas, and bridging Asian communities with mainstream government and non-government organisations.

Minister of Health, Hon. Mr Tony Ryall said the awards were an important recognition of each recipient’s dedication to making a difference to the health outcomes of Asian communities living in the Auckland region. He said a report assessing the health needs of Asian people living in the region point to there being a number of health challenges. Asian people are now the second largest ethnic group in the Auckland and Waitemata district health board regions, and the third largest group in the Counties Manukau district health board. To help address one of the fastest growing long-term conditions, diabetes, the Government has invested $12.4 million to expand local diabetes care programs and $7.2 million for the green prescription initiative which supports people to eat healthier, get active and improve their health.

Awards

Prof Ivan Goldberg

Trevor and Caroline have a long history of philanthropy in education, having implemented an ongoing program funding underprivileged children to attend private schools in New Zealand.

“It is typical of Trevor and Caroline Gray that they are modest philanthropists, not in terms of the sums provided but rather in the sense that they freely give in the modest sense. Such is their modesty that they did not wish to name this Unit after their family, nor even have a celebratory event,” said Charles.

“This generosity of spirit will enable the Department of Ophthalmology to pursue research over the next decade that will lead therapeutics from our laboratories to the patient’s bedside.”

Ms Maryanne Dransfield
NZ Optics
Mr Ryall said a common international issue for migrant groups is that language is a barrier for accessing health and disability services. He said a number of initiatives have been undertaken to address some of these challenges. “We are making good progress to improve the health of all New Zealanders, however there is still more to be done. In helping to meet these challenges, it is heartening to have committed individuals like our award recipients who give their time freely to educate our communities about what they can do to protect their health and wellbeing. I thank you for all the hard work, skills and dedication you have demonstrated in the interests of improving the health outcomes of Asian communities,” said Mr Ryall.

Ms Maryanne Dransfield
NZ Optics

Australia Day Honours
Award

Medal of the Order of Australia (OAM)

Dr Darryl John Gregor – For service to ophthalmology and to education.

A leading Gold Coast ophthalmic surgeon, Dr Darryl Gregor is a well-recognised pioneer in both cataract surgery and laser vision correction. He is particularly passionate about cataract surgery and refractive lens exchanges, and has performed over 20,000 such procedures to date. Darryl was one of the first in Australia to perform laser eye surgery (1991). He began his practice in Southport in 1980, becoming one of the first Australian ophthalmologists to implant intraocular lenses. He was also a pioneer of day surgery, building Southport’s Brockway House in 1985 – a specialist medical centre and day surgery and the first licensed day theatre in Queensland. Throughout his career, he has become a well-known advocate of reform in education and business.
RANZCO Fellows in the News

Medicare Rebate Review
22 February, 2014
ABC News

During ABC’s 7.30 Report on 19 February, Health Minister Mr Peter Dutton spoke about the possible overhaul of Medicare, suggesting Australians who can afford it should pay more for their healthcare.

The Australian Healthcare and Hospitals Association commented that Medicare payments could be reviewed; using the example that cataract surgery is still one of the major elective surgeries funded under the Medical Benefits Schedule and it’s consuming a large amount of the health dollar.

RANZCO Vice President Dr Brad Horsburgh replied to this on ABC News on 22 February stating that patients still receive less of a rebate in real terms than they used to. “The patients are receiving from the government a rebate for cataract surgery which is about 40% of what it was when this procedure was introduced.”

Health groups say the federal government has identified more than 20 Medicare rebate items that are not sustainable.

Eye Health Videos
Launched February, 2014
RANZCO Board member Dr Diana Semmonds was involved in the creation of seven public health videos for Channel 7 initiative Healthy Me TV.

RANZCO will be able to use these videos (featuring macular degeneration, dry eye, flashers and floaters, cataracts, blepharitis and glaucoma) on its website and in social media to help improve public awareness around these conditions.


Vision screening for kids should be made national: ophthalmologists
24 February 2014

A free universal vision screening program for four year old children, which picks up abnormalities at the ideal age for successful treatment, should be made national, according to leading paediatric ophthalmologists.

RANZCO Past President, Prof Frank Martin, clinical professor of paediatrics and child health and ophthalmology at The Children’s Hospital at Westmead, said it was crucial to test children’s eyesight before the age of four years. “At that age the visual system is still plastic enough to be manipulated to develop normal vision,” Frank said. “If problems are not found until later, there may be improvements but the child will never end up with normal vision.”

International Development

Update on capacity building activities in East Asia

RANZCO’s activities under the East Asia Vision Program are continuing. The main focus remains strengthening the Cambodian ophthalmology Resident Training Program and establishing a Continuing Professional Development (CPD) system for Cambodian ophthalmologists.

In December 2013, Dr Peter Cooper and A/Prof Alex Hunyor presented at the Continuing Medical Education sessions of the Cambodian Ophthalmological Society on specialty areas of paediatric ophthalmology and retina in Phnom Penh. Alex also presented on his experiences with CPD through RANZCO as part of the capacity building program. Also in December 2013, RANZCO project team members Ms Tanya Parsons and Ms Neridah Baker conducted surveys on CPD and Curriculum respectively, and Ms Chris McGuigan observed the examination process in Cambodia. Their reports on these activities and engagement with local stakeholders will inform further activities planned for 2014.

Fellowship selection in Vietnam has begun. Over the next two years, with the first intake in July 2014, six Vietnamese ophthalmologists will...
complete fellowships at the LV Prasad Eye Institute in Hyderabad, India.

The East Asia Vision Program is funded by the Australian Department of Foreign Affairs and Trade.

**RANZCO strengthens contribution to peak body seeking to eliminate causes of avoidable blindness and visual impairment**

The RANZCO Board has recently approved the upgrading of the College’s membership of the International Agency for the Prevention of Blindness (IAPB). The IAPB leads an alliance of civil society organisations, corporate and professional bodies in promoting eye health through advocacy, knowledge and partnerships.

In February 2014, Dr Neil Murray was appointed as RANZCO representative to the IAPB for a three-year term. This role is part of RANZCO’s growing international engagement through developing eye care education and professional standards in the Asia-Pacific region. Neil said “I envisage that through this role, in addition to the programming already undertaken by RANZCO’s operational unit and the efforts by the International Development Committee, we will be able to position RANZCO as a key player for eye health and prevention of blindness. In alignment with our strategy, I would like to see a continued focus on the Asia-Pacific region, building of external relationships to enhance the College’s contribution to eye health, and supporting appropriate programs and policies.”

On his appointment Neil says: “I look forward to representing RANZCO at this forum. The IAPB seeks to mobilise resources to deliver the WHO [World Health Organisation] endorsed Global Action Plan 2014–2019, which follows on the platform of VISION2020, advocating for universal eye health. The quality and quantity of eye care personnel to ensure this is a key indicator for the Plan. RANZCO’s unique offering in eye care education and professional standards can contribute significantly. Furthermore RANZCO’s focus on the Asia Pacific region, where the bulk of the global burden of the visually impaired and blind live, and its proven track record with collaborative activities, mean that RANZCO’s presence will add real value to IAPB activities.”

**Call for Expressions of Interest**

**Chair, International Development Committee**

An opportunity exists for a Fellow to lead the operationalisation of RANZCO’s international development strategy as Chair of the International Development Committee.

Drawing upon a sound understanding of development principles and international development experience, the Chair will grow the vision for RANZCO to be the leader in eye care education and professional standards in the Asia-Pacific region. For more information on this opportunity see the RANZCO website (International Development Section) or contact Kate Morrison kmorrison@ranzco.edu +61 2 9690 1001.

Applications close: 31 March 2014.

**Ophthalmology in China – Study Tour**

Running from 23 June to 8 July 2014, this tour includes a range of ophthalmic visits, lectures and meetings with Chinese ophthalmologists. Stops include Shanghai, Suzhou, Beijing, Xian, Guilin, Yangshou, Guangzhou and Hong Kong. At the end of the tour there is the option to extend to Tibet.

The tour will be led by Prof Christopher Liu. For more information visit: http://www.jonbainestours.co.uk or contact Jon Baines Tours at info@jonbainestours.com.au or call +61 3 9343 6367
Annual Scientific Congress  

The Diversity of Modern Brisbane

The Local Brisbane Organising Committee met on 26 February to discuss the organisational and social aspects of this year’s Annual Scientific Congress. A/Prof Anthony Kwan (Chair), Dr Brendan Cronin, Dr Jim McAlister, Dr Luke Maccheron, Ms Avril Cronk (RANZCO) and Ms Denise Broeren (PCO) are on the Committee this year.

Anthony commented on the theme of the Congress “Brisbane has changed dramatically over the last few years, with many new modern buildings, parks, restaurants and infrastructure. If you haven’t been to Brisbane for a few years, I think you’ll find it much changed. Our theme ‘The Diversity of Modern Brisbane’ will carry through to all aspects of the Congress, we have many exciting modern concepts planned, some which shall remain anonymous and some which you’ll find out about over the course of the year.”

Accommodation

Both the Rydges Hotel and the Mantra apartments are located within an easy walk to the Brisbane Convention Centre. Within a 10-15 minute walk (on the other side
of the river), RANZCO has rooms at the Pullman Brisbane, Royal on the Park, Hilton Brisbane, Hotel Ibis, Mercure Hotel and the brand new Four Points by Sheraton.

There is a train station located next to the convention centre which will be useful for anyone staying in the centre of town, particularly at the Sofitel (graduation ceremony venue) which is located directly above Central train station.

Congress Artwork–This could be yours!

Do you like the artwork we are using for all our Brisbane collateral? It is by local Brisbane artist Mr John Garnsworthy.

You can bid for it at the RANZCO booth, all funds will go towards sponsoring doctors from the Asia-Pacific to attend next year’s Congress in Wellington.

The Scientific Program

The Scientific Program Committee are also well into the throes of organising the Brisbane Congress. Chair of the Committee Prof Helen Danesh Meyer remarks on the invited speakers. “We are excited to have such a great array of speakers both nationally and internationally. You’ll notice the Committee have allocated both a corneal/cataract and a refractive cataract speaker this year–this makes nine invited speakers in total rather than the traditional eight. This was in response to feedback we had received to the Scientific Committee.

You can now submit your ideas for Courses and Symposia online, the quality of these submissions have a large impact on the success of the Congress and we eagerly anticipate to once again receive a wide array from the Fellowship.”


INVITED SPEAKERS

NAMED LECTURES

COUNCIL
A/Prof Mark D Daniell

SIR NORMAN GREGG
Prof Hugh R Taylor, AC

IDA MANN
Prof Minas T Coroneo

HOLLOWS
Dr Garry Brian

UPDATE LECTURES

PAEDIATRIC
Ken K Nischal, MD

RETINA
William F Mieler, MD

CORNEAL AND CATARACT
Prof Terrence P O’Brien, MD

GLAUCOMA
Dr Richard Wormald

REFRACTIVE AND CATARACT
A/Prof José L Güell

For more information on the program and presenters please visit the Congress website www.ranzco2014.com.au
Porcelain eye baths are very fragile and rare. The bowl is the size of a human eye and would be placed upside down over the eye. It shows the popular pleasure boat design and dates from c1780-1785.

Thank you to Ms Pamela Royle for allowing me to photograph and exhibit her beautiful collection of antique eye baths.

Dr Bruce Hamilton was a Tasmanian ophthalmologist who made a significant contribution to ophthalmic genetics, including a textbook of surgery.

From the Museum collection, the Phoropter, C1940 is part of an extensive collection from the late Dr Nick Kerkenazov bequeathed to RANZCO.

The fine display of slit lamps, perimeters and the phoropter are sited at the RANZCO office in Sydney.

These new additions are included under the 'Exhibitions' section of the Museum website, www.ranzco.edu/museum.

Dr David Kaufman
curator@ranzco.edu
Western Australian researcher Prof Shaun Collin from the School of Animal Biology and the Oceans Institute at University of Western Australia gave an extremely topical presentation at the recent Australian and New Zealand Glaucoma Interest Group (ANZGIG) meeting on the vision and sensory systems in sharks.

Shaun and his neuroecology team at the University of Western Australia discovered that the visual system of sharks and how they use visual cues in their environment are both vitally important to understanding their behaviour with respect to communication, reproduction and feeding.

“I believe that an understanding of the basic neurobiology of the sensory capabilities of sharks is essential to translating this knowledge into ways to help the public reduce the risk of shark attacks” Shaun said during his presentation.
Although the visual system of sharks is similar to that in humans in many ways, it differs in a number of important aspects. The shark eye is relatively large and adapted for low light vision, it also appears to lack the retinal machinery to process colour. After examining a number of species that are found in a range of light environments, it was determined that sharks possess only a single photoreceptor type (cone) operating in bright light and therefore are considered cone monochromats or colour blind. It was this published discovery that led to the idea of developing visual deterrents.

“The shark eye is relatively large and adapted for low light vision, it also appears to lack the retinal machinery to process colour.”

Once you understand how an animal senses its environment, you can use this knowledge to manipulate its behaviour. Shaun explained, “Just like humans, animals are deterred by unpleasant stimuli, whether they are visual, auditory, mechanical, chemical or electrical. One such shark repellent are wetsuits designed to confuse sharks or render surfers invisible to these predators.”

The suits use a specific combination of patterns to deter the sharks. One design - known as the ‘cryptic’ wetsuit - allows the wearer to effectively blend with the background, making it difficult for a shark to detect or focus on the wearer. The other design - the ‘warning’ wetsuit - makes the user appear highly visible by using disruptive and high contrast banding patterns to make them appear totally unlike any normal prey, or even as an unpalatable or dangerous option. The designs also come in the form of stickers for the undersides of surfboards.

Shaun and his close colleague Prof Nathan Hart are regarded as world authorities in the field of shark sensory systems. They collaborated with the biotechnology company Shark Attack of Mitigation Systems (SAMS) to translate complex research data on the vision, neurology and behaviour of predatory sharks into this effective product.

Shaun concluded that both basic and applied research will provide improved methods of management and conservation of the shark species.

“The ‘warning’ and ‘cryptic’ wetsuit

Presentation by Prof David Mackey to Prof Shaun Collin after his presentation at the ANZGIG Scientific Meeting in Fremantle.

The ‘warning’ and ‘cryptic’ wetsuit
Happy new year. All of us at The RANZCO Eye Foundation hope that 2014 is shaping up to be a great year for you all.

This year our focus will once again be on working alongside our supporters to take The Foundation to the next level. As always, this will involve working closely with RANZCO and its members, attending regular meetings with you, updating you on our progress and seeking regular feedback, input and support.

Our focus will also be on:

- increasing tax deductible donations and therefore increasing grants to medical research, education and training and our sustainable patient delivery projects across Australia and our region;
- further increasing the funding we provide each year to the Ophthalmic Research Institute of Australia;
- attracting more business partnerships across more business sectors; and
- continuing to raise the profile of ophthalmology and eye health through our JulEYE and social media campaigns.

To take our Foundation forward we are dependent on the generous support of Fellows, business partners, donors and the community, but this support doesn’t always have to be financial.

There is a range of ways you can show your support. You can:

- become involved in our JulEYE campaign;
- be an advocate;
- volunteer to be involved in one of our programs;
- attend our events;
- like us on Facebook or read and share our blog; and
- send us your ideas/contributions/feedback.

It is up to you how you get involved. The important thing to remember is it is all about eye health and giving every person every opportunity to see.

The RANZCO Eye Foundation is moving from strength to strength. We invite you to become a part of this journey to help grow our Foundation significantly.
Join us in raising awareness

Each year The RANZCO Eye Foundation runs a month-long community engagement campaign, ‘JulEYE’, which is designed to:

• raise community awareness of eye health issues and the need to have your eyes checked regularly, no matter your age; and
• raise funds for research into the cause and cures of vision impairment and blindness and sustainable development programs both here and overseas.

There are plenty of opportunities to be involved. If you choose to be involved, not only will you be helping us raise funds and awareness, the campaign is a great way to raise the profile of ophthalmology and ophthalmologists right across Australia.

Many hands make light work. Many partners make sight work

Partners In Sight is our annual giving program, where we ask our Fellows to make an annual tax deductible contribution of $1000 to The RANZCO Eye Foundation.

In this issue of RANZCO News is a personalised letter from the College and Foundation to our Fellows inviting you to either join or renew your annual Partners in Sight contribution.

We would be grateful if you could please complete and return this form. Your regular contribution helps us to continue to fund our programs in a much greater way.

We would like to thank the growing number of Fellows who support this program each year.

Vision Eye Institute Cookbook

As part of their fundraising efforts for Vision for Myanmar - part of The RANZCO Eye Foundation’s Myanmar Eye Care Program – the Vision Eye Institute has produced a great cookbook full of tried-and-tested recipes. An ideal present, the cookbook can be purchased online for $20 at www.visionformyanmar.com.au. All profits will go to empowering the people of Myanmar to alleviate avoidable blindness by establishing a self-sustaining, high quality and efficient eye care health system.

Lorin Nicholson – Strings of Thunder

Over the past decade, blind guitarist Mr Lorin Nicholson has experienced huge national and international success as a virtuoso guitarist, performing from outback towns to prestigious national stages. Lorin is thrilled to announce the much anticipated release of his latest album titled “Strings Of Thunder”, including the amazing talents of his young family on drums-percussion, bass, keyboards, rhythm guitar, cello, violin and bagpipes. Lorin’s aim wasn’t simply to release another CD, but to create a musical masterpiece that would inspire every listener. This feast of the senses is an incredible journey from intimate guitar solos, to inspiring super ballads and the excitement of a full Celtic-rock band that will definitely leave you wanting more!

“Strings of Thunder” is $19.95 and is available online through The Country Music Store, www.countrymusic.com.au. $10 from every CD sold will be generously donated to The RANZCO Eye Foundation.

Ms Jacinta Spurrett
CEO, The RANZCO Eye Foundation

You and your team can be involved in our 2014 campaign by:

• becoming a regional spokesperson;
• letting us know of interesting case studies we might be able to share as part of our campaign or maybe you know someone who might make a great Ambassador?
• buying JulEYE shirts for your team and wearing them throughout the month of JulEYE;
• displaying our ‘Black Spot’ poster in your practice;
• selling our JulEYE merchandise to staff, patients and friends;
• talking to your patients, friends and family about The RANZCO Eye Foundation;
• attending any fundraising events we may have from time to time.

More information will be provided in the lead up to JulEYE, but if you’d like to know more right now send us an email -jspurrett@eyefoundation.org.au or call us on (02) 8394 5220.
People Profile

NSW Fellow
Dr Thomas (Thuan Quoc) Pham

From Vietnamese refugee to vitreoretinal surgeon – a life rich with possibility for NSW Fellow Dr Thomas (Thuan Quoc) Pham.

Main picture: Rice Paddy, Vietnam
Pictured right: Thomas Pham with his family Felicity Pham, Khanh-Linh Luu and Vincent Pham.
Under the cover of darkness, Thomas Pham’s father and mother and seven children slipped away from the house they’d been hiding in and boarded a small boat. They were leaving their Saigon home for an uncertain future as refugees. From the small boat they transferred to a slightly larger fishing vessel for a five-day open-sea journey to Malaysia.

“It was towards the end of the Vietnam war”, says Thomas. “At that time, things were tough, and my father was associated with the former South Vietnamese Government so life was even harder for him. It was a repressive communist regime. My father knew life was always going to be a struggle for my family so he decided that in order to try and give us a better future, he had to leave Vietnam.”

Thomas was only seven years old at the time. His youngest sibling was one year old and the eldest was 12. “Dad was involved in planning the whole process of fleeing Vietnam. It must have been a nightmare organising all that for a family of nine people and keeping it a secret! I vaguely remember some things about the trip – hiding in someone’s house before the boat trip and the overcrowding in the boat. I’d never been on a boat before and consequently got very very seasick out on the open water.”

Eventually they reached Malaysia. “Looking back, we were lucky to have a relatively smooth journey, compared with other journeys you hear about, with Thai pirates or boats sinking in really rough seas. We were very fortunate from that point of view.”

Once in Malaysia, the family spent nine months in a large refugee camp called Bidong. The camp was situated on an island and life was difficult with acute rationing of food and water – which had to be shipped across from the mainland. “There was also a lot of sickness. To this day, I don’t know how my parents managed to keep all of us alive in this makeshift camp with scarce supplies.”

Initially the family made a bid for refugee status in America but their application was rejected. “It was probably quite fortunate in a way, because then my parents applied for Australia and we were accepted straight away. I am extremely grateful that we ended up in Australia.”

In March 1982 the Pham family arrived in Sydney with little more than the clothes they were wearing. “They settled us in a place called East Hills Hostel, near Liverpool, where we lived for a short time before moving into government housing in Liverpool.”

“None of us from the family understood English when we arrived in Australia…”

“We went to Sadleir Public School, took classes to learn English, and our parents worked a number of jobs to support the family. They went into the textiles business and also worked in the restaurant trade owned by some of our relatives. The seven children helped out as much as we could, being kitchen hands or waiters.”

Setting the tone for life

Observing his parents and how hard they worked, doing the best they could for the family, inspired Thomas a strong desire to succeed. “First of all to leave their home country at the risk of being jailed or being killed, to move to Australia to give us an education and to become the best that we could. They worked morning and night shifts, to help get us somewhere in life; for us to be able to have a better life.”

Thomas recalls that for many years his father drove from Canterbury to Crows Nest every morning to work in his brother’s restaurant and then after the lunch rush, he would drive back to pick the kids up from school. After dropping them at home, he would again drive to the restaurant to do another shift. “He did this for many years, and he admitted he nearly had a few accidents, because he was so tired! So it’s no wonder after seeing my father and mother’s dedication and hard work, I was determined to make them proud in whatever I did.”

Not a natural carpenter

In addition to working in the restaurant trade, Thomas’ father was a good carpenter and would renovate houses. “My two older brothers were quite good at this kind of work, so one day I offered to go along and help. My father handed me a hammer and nail to secure a plank of wood. After a few gallant attempts at it, my father said ‘it’s ok son, why don’t you just go back to your studies’. That stuck in my head and I thought to myself it looks like I’m not cut out for the carpentry line of work, so I’d better make use of my talents and do the best I can academically.”

Thomas worked hard at school and attained high enough marks to get into medicine. However, at the time, he wasn’t even aiming for medicine. “I was thinking more along the lines of finance. I thought I’d follow one of my brothers into the banking world, and I did some economics subjects during my HSC. When I got the marks that showed I could get into medicine, with a bit of a nudge from my parents in that direction, I chose medicine. I knew that it was something that would make them proud and would be of use to society. I have never regretted that decision since.”
Why ophthalmology?
Towards the end of his medical training, Thomas did a rural term in Orange (western NSW) and met Dr Henry Liu who would become a great mentor. “Henry showed such enthusiasm in his teaching of ophthalmology that I’d not seen in any other doctor I’d come across. He showed me the possibilities of ophthalmology and inspired me into that career. His zeal for ophthalmology impressed me.” About the same time Thomas went to Nepal with an eye team to observe some cataract surgery and saw first-hand the impact it has on people’s lives and their quality of life. “That trip also helped crystallise my decision to pursue ophthalmology,” he says. Thomas completed four years of ophthalmology training in Christchurch, New Zealand, and then 1.5 years of a vitreoretinal fellowship in Brisbane before going to Toronto, Canada, to do another years vitreoretinal fellowship. He returned to Australia in 2013.

“Health professionals can be a bit isolated in country areas. I enjoy teaching and helping to increase the knowledge base about eye health.”

“During my training I had a number of fellows who inspired me. One of them was Dr Andrew Chang. I had the privilege of observing him in some of his cases and I was fascinated that he could do surgical work of such complexity but make it look so easy. I thought I’d love to be able to do something similar and that’s what I’ve been working to achieve.”

Thomas currently lives in Sydney with his wife and children and his work takes him as far as Mudgee, Orange and Dubbo. “Henry Liu and I alternate travelling to these areas. At the moment I’m mainly doing private clinics and surgical work. However a number of us are trying to establish a public vitreoretinal service in these country areas. This is something that I’d love to have a hand in trying to build up.”

“She also does some teaching in rural/ regional areas, providing education sessions for GPs and optometrists and future ophthalmologists. “Health professionals can be a bit isolated in country areas. I enjoy teaching and helping to increase the knowledge base about eye health.”

Family and leisure
Thomas is married and has two young children with a third child due in March. “Family is very important. It is the most satisfying thing in my life. We’ve moved around a lot in the past few years. Now that we’re living in Sydney, it has given a bit of stability to my family and we are blessed to have...”

Being able to use any talent to improve my patient’s quality of life is one of the most satisfying aspects of my career.”

Thomas Pham’s photograph, Sunrise in Bali

Thomas Pham’s photograph, Beach Cricket
Recommend Tears Again® as first line treatment for dry eye. Research shows that dry eye is predominantly caused by excessive tear evaporation not insufficient tear production1,2.

Almost 80% of sufferers have a disturbance of the eye’s lipid layer – in contrast only around 10% have exclusive aqueous deficiencies3,4.

Tears Again® Liposomal Eye Spray stabilises the eye’s lipid layer, reducing excessive tear evaporation while hydrating and lubricating dry eyes.


When I look back, I see that my family overcame a lot of obstacles and this has instilled in me a strong desire to make the most of my talents.

“It is a privilege to get to use my skills for the benefit of the community. My parents passed on the desire to serve our fellow human beings, to live as selfless a life as you can, and do the best that you can in any particular circumstance. Those things are now the basis of my own personal philosophy.”

Denise Murray
Freelance Writer
ANZGIG 2014 Scientific Meeting, Fremantle

The 27th Annual Scientific Meeting of the Australian and New Zealand Glaucoma Interest Group (ANZGIG) took place in Fremantle, Western Australia, on 7 and 8 February 2014 combined with the Singapore Glaucoma Society. This meeting was seen as a valuable opportunity for developing closer links with our colleagues in Singapore, given the comparative proximity of Singapore to Perth.

The meeting began with a welcoming reception at Little Creatures. There were 71 registrants and 20 industry representatives.

One of the highlights of the meeting was the Lowe Lecture, “New Ideas About Normal tension Glaucoma”, delivered by Prof Hanspeter Killer of Aarau, Switzerland.

Another highlight was the Gillies Lecture on “Fun in the Space around Glaucoma”, given by Prof Bill Morgan of Perth, who also received the Gillies Medal.
Days started with clinical cases with management issues or diagnostic dilemmas. These provided ample opportunity for questions and discussion of current issues.

The ANZGIG Award of Excellence for the best paper by a trainee was awarded to Dr Min Hye Kang of Perth, who spoke on alterations to vascular endothelium in the optic nerve head in patients with risk factors for retinal vascular occlusion.

Free papers covered medical and surgical topics in glaucoma.

The principal international visitor was Hanspeter Killer, The Lowe Lecturer and medallist, and the senior visitor from Singapore was A/Prof Paul Chew who participated with five of his Singaporean colleagues.

Prof Shaun Collin of the University of Western Australia presented a most interesting paper on “Vision and Sensory Systems in Sharks”.

It was a thoroughly enjoyable meeting that reinforced the reputation of ANZGIG for informal, informative meetings with lots of interaction between participants and a lively social program. This included a Conference Dinner at The Maritime Museum in Fremantle, home of the America’s Cup winning 12 metre yacht Australia II.

Our thanks to the Organising Committee of Prof David Mackey (Chair) and Bill Morgan.

All RANZCO Fellows are welcome to attend ANZGIG’s annual meetings. The next meeting will be held in Brisbane, from 6 to 7 February 2015.

The new Chair of ANZGIG is Prof Jonathan Crowston (Melbourne) and the Vice Chair is Dr Guy d’Mellow (Brisbane). We thank the retiring Chair, A/Prof Ivan Goldberg AM, for his outstanding work on behalf of the Group as Chair for nine years.

Dr Anne MV Brooks
Secretary, ANZGIG

Journals
RANZCO is pleased to announce a substantial upgrade to the journal database is accessible via the RANZCO website.

All Fellows, Trainee and Orthoptic Members now have access to Medline Complete; the world’s premier medical database providing more than 2400 medical journals covering a wide range of subjects within the biomedical and health fields. The RANZCO journal package also includes CINAHL Complete, with a focus on nursing and allied health, and Australia/NZ Reference Centre, which provides access to all of the leading Australasian magazines, newspapers, newswires and reference books. Users can set up daily or weekly new alerts for topics of interest.

The following journals are available in full text with no embargo period.

- BMC Ophthalmology
- European Journal of Ophthalmology
- Indian Journal of Ophthalmology
- Nepalese Journal of Ophthalmology
- Transactions of the American Ophthalmological Society
- Journal of Ophthalmic & Vision Research
- Ophthalmology & Eye Diseases
- Johns Hopkins Advanced Studies in Ophthalmology
- Ophthalmology Times

For a listing of all ophthalmology-related journals with either limited full text or embargo periods, please visit the RANZCO website.

To access the journal database, simply log into the RANZCO website and click on the ‘Journal’ button. This will take you to a basic search page, either enter your search term here or select the advanced search option to refine your search. The ‘Publications’ menu at the top of the page lists the journal titles available in the included databases.

If you’re having difficulty accessing the search page, please first try clearing your browser’s cookies and cache. If you’re still experiencing difficulty or can’t remember your log in details, contact RANZCO at ranzco@ranzco.edu.

Do you know someone worth interviewing for RANZCO News or have some news to share? Send details to ranzco@ranzco.edu
Younger Fellows’ Advisory Group

The Younger Fellows’ Advisory Group has recently been formed to represent the views and interests of fellows within the first 10 years of obtaining RANZCO fellowship. The group is made of representatives from Australia and New Zealand and comprises:

- Dr Christine Younan (NSW) Chair
- Dr Heathcote Wright (Vic)
- Dr Nisha Sachdev (NSW)
- Dr Xavier Fagan (Vic)
- Dr Nathan Sachdev (NSW)
- Dr Brendan Cronin (Qld)
- Dr Vivek Chowdhury (NSW)
- Dr Nathan Walker (Qld)
- Dr John O’Shea (NSW)
- Dr Shane Durkin (SA)
- Dr Brent Gaskin (NZ)
- Dr Fred Chen (WA)

A number of events specifically targeted for younger Fellows have been planned for 2014. Firstly, we have sent out a survey to our segment of the Fellowship to gain a better understanding of the issues that are most important. We will use the results of this survey to plan future events and sessions, and it will also guide the work that the Younger Fellows’ Advisory Group undertakes.

Another initiative is the instigation of a ‘Welcome Pack’ for newly admitted Fellows. We hope it will be a useful resource for new Fellows as they commence their consultant career. It is still in a pilot phase as we continue to develop content depending on feedback received. We also intend to place much of the content of this pack on the ‘Members’ section of the RANZCO website in due course.

Planning is already underway for this year’s Annual Scientific Congress in Brisbane. We plan to develop an interesting and interactive program filled with information and speakers addressing subjects that are particularly relevant to younger Fellows. In addition to this, we are also planning various social events for younger Fellows. Further details will be provided closer to the time.

Please keep up to date with our program developments by reading the RANZCO News and e-news or by visiting the 2014 Congress website www.ranzco2014.com.au.

Your input is very important to us. If you missed the opportunity to complete the recent survey or you have ideas, or concerns to raise, feel free to contact Ms Sarah Stedman (Manager, Memberships) at the College at sstedman@ranzco.edu who liaises with the group.

On behalf of the Younger Fellows’ Advisory Group, we look forward to representing you throughout the year.

Dr Christine Younan
Chair, Younger Fellows’ Advisory Group

Sydney Eye Hospital Alumni Association
10th Biennial Meeting
Saturday 26 July 2014

OPHTHALMOLOGISTS, TRAINEES, ORTHOPTISTS AND OPHTHALMIC NURSES ARE INVITED TO ATTEND

VENUE: Softel – Wentworth Hotel 61 Phillip Street, SYDNEY
DATE: Saturday, 26 July 2014
TIME: Scientific Program 8.30am to 5.00pm
Cocktail Reception 5.00pm to 7.30pm

PROGRAM HIGHLIGHTS
The eighth Eddie Donaldson Memorial Lecture will be presented by Professor Tim Sullivan on Oculoplastics

Panel Discussions
A case-based approach to controversial topics in ophthalmology discussed amongst expert panelists
- Controversies in cataract surgery
- What does the future hold for glaucoma
- Macular degeneration - when to inject, where and by who
- Oculoplastics
- Ethics and professionalism

THE BEST OF SYDNEY EYE GRAND ROUNDS
Highlights of the most challenging cases presented at the Sydney Eye Hospital Grand Rounds

GLAUCOMA UPDATE
Presented by returning Normal Rose Scholarship recipient, Andrew White

FREE PAPERS
Original clinical and scientific research will be presented. Papers are welcome - Deadline for submission is Monday 30 June via email info@mdevents.com.au

ENQUIRIES & ABSTRACT SUBMISSION
Conference Secretariat: MD Events
Email: info@mdevents.com.au
Phone: 0414 474 042 or +61 2 8006 1775

REGISTRATION NOW OPEN
www.sehalumni.org

RANZCO NEWS AUTUMN 2014 - 33
Clinical and Experimental Ophthalmology publishes Genomics Special Issue

The RANZCO scientific journal, Clinical and Experimental Ophthalmology, publishes an annual Special Issue which consists of invited review articles from world experts based around a central theme. This year we focus on the field of genomics in ophthalmology.

The issue, launched in February, contains eight invited review articles discussing the impact of genomics on varying ophthalmic diseases and disorders such as corneal dystrophies, primary open-angle glaucoma, retinoblastoma and inherited ocular disease. Ophthalmology is currently one of the specialties at the forefront of genetics, so this issue will be essential reading for researchers working in this exciting field.

The issue has been offered as free content to enable all readers, even non-subscribers, to read up on the latest ophthalmic genomic research. To access this issue, or any other Clinical and Experimental Ophthalmology article from issue 1 in 1973 to the current issue, simply login to the ‘Members’ section of the RANZCO website, and click the ‘Journals’ link.

Ms Victoria Cartwright
Managing Editor, CEO Journal

Senior and Retired Fellows

After another successful program at the 2013 Congress in Hobart, the Senior and Retired Fellows’ Group will very shortly commence planning for this year’s Congress in Brisbane. Building on enthusiasm and positive feedback from last year, we hope to provide an exciting and innovative selection of events in Brisbane.

There will be a focus on balancing informative lunchtime sessions in the designated Senior and Retired Fellows’ lounge space and plenty of opportunity to socialise with friends and colleagues at a special dinner. We also look forward to welcoming you to the Graduation and Awards Ceremony, with reserved seating to take in all of the presentations.

We thank local Fellow Dr Peter O’Connor for his assistance this year in Brisbane.

We warmly encourage you to send through ideas and initiatives for the group to focus on. Feel free to contact Ms Sarah Stedman (Manager, Memberships) at RANZCO sstedman@ranzco.edu to provide your suggestions.

Please keep up to date with our program developments by reading the RANZCO News and e-news or by visiting the 2014 Congress website www.ranzco2014.com.au

Drs Frank Cheok and Bill Barnett
Senior and Retired Fellows’ Group

THE OPHTHALMIC RESEARCH INSTITUTE OF AUSTRALIA (ORIA)

RESEARCH GRANTS 2015

The Ophthalmic Research Institute of Australia invites applications for one year research grants in ophthalmology and related fields in 2015.

Guidelines for applying will be available on the website: oria.org.au from March 4 2014 when applications open.

Applications close 5 00 pm, Sydney time Tuesday April 29 2014.

For enquiries: asnape@ranzco.edu
Practice Managers’ Group

The RANZCO Practice Managers’ Group is looking forward to the November conference at the Brisbane Convention and Exhibition Centre from 23-26 November 2014.

This year the committee is working towards greater professionalisation of Practice Managers in ophthalmology and will be really focusing on education at the upcoming conference. We have commenced work on the program based on feedback from last year’s meeting.

The following were ranked as the most effective presentations and speakers by attendees:

• Information on human resources issues such as performance management and industrial relations;
• Macular degeneration;
• Leadership lessons;
• Updates on medical records and technology; and
• Hands on skills in marketing

The Group is looking forward to the Practice Managers conference in Brisbane from 23-26 November this year. For the first time we are asking our membership to submit papers to be presented at the meeting.

Sharing ideas and experiences in an open forum is an invaluable source of information and inspiration! The paper could be about a simple issue, for example, how you handled a serious complaint, the positive outcomes and the learning lessons, or it could be something more complex such as setting up a new service. It is an excellent opportunity to exchange ideas and share experiences with a larger group. Instructions for submitting a paper are available on the RANZCO website, in the Practice Manager’s section, on the congress page.

Have you checked our website lately? Visit www.ranzco.edu and log in to view the exclusive members only resources and information.

We are passionate about making this a dynamic and progressive resource for our members. If you have suggestions about content for the Practice Manager section of the website, please email me at moiram@aucklandeye.co.nz

Ms Moira McInerney
Chair, Practice Managers’ Group

RANZCO Represented Rowing Crew

On Friday 20 December 2013 a group of doctors formed a crew to row in the annual University of Melbourne Christmas ‘bumps’ regatta on the Yarra River.

The crew of eight comprised five ophthalmologists from various departments within the Royal Victorian Eye and Ear Hospital: Vitreo-Retinal Surgeon Dr Mark McCombe, Ocular-Oncologist Dr John McKenzie, Uveitis Specialist Dr Tony Hall, Glaucoma Fellow Dr Tom Edwards and Paediatric-Ophthalmology Registrar Dr Jeremy Curtin. They combined with Colo-Rectal Surgeon Dr Campbell Penfold, General Practitioner Dr Charles Bush and ex-Monash University Vice-Chancellor Prof Richard Larkins being ably coxed by Ms Olivia McCombe.

‘Bumps’ style racing originated at the University of Oxford and has been occurring since 1815 between the colleges of the university. The boats race each other in single file, with each crew attempting to catch and ‘bump’ the boat in front without being caught by the boat behind. It is particularly suitable where the stretch of water available is long but narrow, precluding side-by-side racing. Six ‘eights’ took part on the morning with the ‘Oculeight’ finishing a creditable second overall, behind the winning crew stroked by Olympic gold medalist Mr Peter Antonie.

The Victorian crew is looking forward to the opportunity to paddle with fellow rowers at the RANZCO Congress in Brisbane 2014.

Back: Drs John McKenzie, Charles Bush, Mark McCombe, Campbell Penfold, Tom Edwards, Tony Hall, and Prof Richard Larkins. Front: Dr Jeremy Curtin and Ms Olivia McCombe
ARE YOU SEEING THE FULL PICTURE?

Background graphic:
Full Ultra-Widefield 200° optomap® image showing Neovascularisation with Peripheral Non-Perfusion
Foreground graphic frame: ETDRS

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Building The Retina Company
RANZCO is calling for expressions of interest from Fellows for membership of several newly established, amended and existing College Committees. The revised Committees structure will improve consultation processes and coverage of issues relevant to ophthalmology and the RANZCO Strategic Plan 2013-2016.

Applications are now open for the following RANZCO Policy and Advocacy Committees:

• Workforce Committee (new)
• Public Health Committee (new)
• Clinical Standards Committee (new and also encompassing the work of the previous Visual Standards Committee)
• Indigenous Committee (previously Indigenous and Rural Health Committee - rural health moves within the remit of the new Workforce Committee)
• Medicare Advisory Committee (unchanged)
• Therapeutics Committee (unchanged)

Each of the above Committees provides valuable clinical and policy advice to RANZCO and external stakeholders on the various issues that impact members and the community.

The work of the Committees may be conducted via email and teleconference, with at least one face-to-face meeting held at the RANZCO Annual Scientific Meeting each year.

If you are interested in serving on any of the above Committees, please send your current CV and a brief statement of interest (up to 200 words) to RANZCO Policy Officer, Ms Ritu Mohan, at rmohan@ranzco.edu by Wednesday 9 April 2014. Current Committee members will be contacted separately regarding re-nomination.

EBAANZ joins the new Global Alliance of Eye Bank Associations

The Eye Bank Association of Australia and New Zealand (EBAANZ) and five other world leading Eye Bank Associations have joined together to launch a new Global Alliance of Eye Bank Associations (The Global Alliance) in order to support and develop eye banking services around the world.

Global Alliance representative and EBAANZ Chair, Dr Graeme Pollock, says “the key aims of the Global Alliance are to develop global collaboration on best practice, sharing of information on scientific meetings, development of conferences and education events, establishment of a worldwide register of eye banks, development and promotion of global coding and traceability efforts, and bio-vigilance systems for ocular tissue.”

Advocacy and education also play a central role in the organisation’s development. “We are looking forward to working with colleagues around the world to support the needs of their eye bank staff and ultimately the donor, donor family and the recipient”, said Graeme.

While still in the foundation phase, the Global Alliance key stakeholders have launched the new initiative and a new website, www.gaeba.org, ready to provide the platform for future dialogue and communication around the world.

Exciting opportunities to sit on RANZCO Policy and Advocacy Committees

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Dr Paul Beaumont retires from Macular Disease Foundation Board

The retirement of Dr Paul Beaumont as a director from the Macular Disease Foundation Australia Board was announced at the Foundation’s Annual General Meeting in Sydney on 10 December 2013.

Paul is the founding director of the Macular Disease Foundation Australia and has given 12 years of service to the Foundation. Over the period of his tenure Paul’s roles have included Chairman of the Foundation’s Board and Medical Committee, NSW State Chairman and Member of the Research Committee.

Ms Elizabeth Carr, Chairman, Macular Disease Foundation Australia says, “Thank you Dr Beaumont for your foresight and courage to establish a Foundation with the aim to reduce the incidence and impact of macular degeneration in Australia. Your commitment to those living with macular degeneration, their families and carers, will have a long lasting and far reaching effect.”

Macular Diseases Foundation Australia Patron Ms Ita Buttrose with Dr Paul Beaumont

The Royal College of Ophthalmologists Annual Congress

19 – 22 May 2014
International Convention Centre, Birmingham, UK

RANZCO Members are invited to join us for our Annual Congress 2014

ATTEND THE LARGEST OPHTHALMIC CONFERENCE AND EXHIBITION IN THE UK

The Royal College of Ophthalmologists, UK is delighted to invite RANZCO members to join us for our Annual Congress 2014.

World-renowned experts will be contributing to the meeting on all eye conditions. Whether it is to hear the latest translational research, late breaking news, updates on your speciality, learning new skills, networking with fellow ophthalmologists or viewing the latest products and equipment, you will find it all at Congress 2014

The perfect opportunity to visit the UK!

Not only is Birmingham one of Europe’s leading city centres – offering award winning restaurants, hotels, fashion and art venues – but it is only an hour from London making it the perfect base to explore the UK!

EPONYMOUS LECTURES 2014

The Barrie Jones Lectures 2014
Dr. Gullapalli Rao, India

The Bowman Lecture 2014
Professor John Marshall, UK

The Duke Elder Oration 2014
Professor Richard Abbott, USA

The Optic UK Lecture 2014
Dr. Neil Miller, USA

Registration opens 14th February 2014!

All information at: www.rcophth.ac.uk/annualcongress
With the employment of Mr Jeff Palmer as RANZCO archivist in May 2013, work has begun on instituting a professional archives program at RANZCO.

Significant work had been undertaken on the archives in the past but this is the first time in recent history that a professional archivist has been employed to manage the collection. The aims of the archives program are three-fold:

1. **Create and maintain essential archives and records management policies and procedures.**
   
   Written policies and procedures will enable basic archives and records management protocols to be applied to the collection. Amongst other matters, these policies and procedures will include a collection policy that details what will be considered for acceptance into the collection, from whom and under what circumstances, and an appraisal policy that provides a framework for establishing what records offered to the collection should be considered for permanent retention.

2. **Appraise, conserve, arrange and describe the collection.**
   
   When the basic archives policies and procedures are in place, Jeff will examine the collection on a box-by-box and record-by-record basis. Each group of records will be evaluated against the appraisal and collection policy and a judgement made on whether it is suitable for long-term retention in the archives collection. Records that do not appear to meet the defined criteria will be put to one side – a list will be made of these records and the stakeholders will be consulted before a final decision is made. Records deemed worthy of retention as archives will be conserved in purpose-designed acid free archives boxes and basic conservation techniques applied.

3. **Prepare the collection for eventual public exposure.**
   
   The ultimate aim of the archives program is to provide ready access to the documentary history of the College for members, staff and other researchers and to ensure records deemed worthy of long-term preservation are maintained in a sustainable manner. Once the steps above have been completed, the collection will be prepared for public access. This will constitute phase two of the archives program. The precise nature of this access has yet to be determined but it will likely involve web-based access to the Archives Manager database and hopefully the digitisation of certain content [such as historic photographs and significant documents].

To date about 240 boxes of material have been professionally archived and good progress is being made on the rest of the RANZCO collection. If you have any questions about the archives program or have material that you think may be of interest to the College, please contact the Archivist Jeff Palmer via email: j.palmer@ranzco.edu
TASMANIA BRANCH SCIENTIFIC MEETING
Cradle Mountain, 9-11 May 2014

WHAT TO SEE WHERE TO STAY

• Take a leisurely train trip to Kalgoorlie in the heart of the Goldfields as you hear presentations from the WA trainees
• Mining town Ophthalmology
  • Telemedicine and remote ophthalmology
  • STDs and the eye
  • Industrial eye protection
• Latest research from international centres
  • Iowa
  • Stanford
  • Guangzhou
• Historic accommodation, including Langtrees Guest Hotel (originally a brothel)
• An opportunity to play two-up (not for real money) after the meeting dinner

50 years after Hoover’s death and 80 years after his US Presidency, the Western Australian Branch of RANZCO brings ophthalmologists from Iowa (his birthplace), Stanford (his alma mater) and China (where he worked as a mine manager) to where Hoover’s career began as a mining engineer in the Western Australian Goldfields.

Further details and registration at www.ranzco.edu in Calendar of Events
Please book your accommodation directly with Alarna Grey, Executive Assistant for Events, at Cradle Mountain Chateau on alarna.grey@cradlemountainchateau.com.au
I arrived in January 2013, in the middle of “UK’s worst blizzard for 10 years” with my wife and toddler to find Cambridge covered in snow, cold and picturesque. Despite the climate challenges, we settled in easily; we found a great apartment and part-time day care for our son.

Cambridge was a fantastic place for a fellowship. Academic, cultured, beautiful and steeped in tradition, it was a lovely, quiet place to spend a year of learning and reflection. I rode around the city on bicycle (I was told it is “the Cambridge way”) and enjoyed brushing shoulders with world-class academics and raucous students alike. Specifically, Cambridge is an excellent place to undertake a glaucoma fellowship. The trabeculectomy was invented in Cambridge. The fellowship is a wonderful mix of clinical experience, surgery and research opportunities as well as opportunities for international collaboration and travel.

I couldn’t have asked for a better mentor and supervisor. Prof Keith Martin – a brilliant glaucoma and
Surgicaly I matured during the year. I attended two or three theatre lists each week. For the first two months I spent time assisting and studying the surgical techniques of Keith and my other surgical tutors, but for the majority of the year I was undertaking all forms of glaucoma surgery independently. I also performed a large volume of cataract operations, many of which were challenging cases. To maximise learning opportunities I organised some clinical observations in theatre with world-renowned surgeons. I spent a week in Lausanne, Switzerland, observing non-penetrating glaucoma surgery (deep sclerectomy) from Prof Andre Mermoud. In addition, I spent some sessions in theatre with Prof Sir Peng Khaw in Moorfields, London; where I learnt the finer points of trabeculectomy and drainage tube surgery, as well as furthering exposure to the management of paediatric glaucoma.

I enjoyed working with, teaching and supervising the Cambridge-based cataract surgeon, world-renowned neuroscientist on the cutting-edge of stem-cell research for optic nerve neuroprotection and regeneration, Professor of Ophthalmology at Cambridge University – accepted me warmly with friendship and kindness into his unit.

My aim for the year was to achieve more experience principally in glaucoma surgery and to undertake further clinical research in glaucoma.

One of my first tasks was to establish my research plans for the year. Having already developed an interest in quality of life research in glaucoma, I was keen to pursue this avenue further. Keith was highly supportive of this and I commenced a PhD in this field in collaboration with Australian mentors Profs Peter McCluskey, Ivan Goldberg and Jonathan Crowston.

In addition, Keith and I enlisted Addenbrooke’s Glaucoma unit in two international, multicentre, randomised clinical trials in clinical glaucoma research. I was involved in setting up these trials in the UK and enrolling the patients for the studies. This was a great experience in learning the structure and organisation of clinical trials, the ethics and research/ development process, and the strict scientific principals maintained in administering these studies.

“Cambridge was a fantastic place for a fellowship. Academic, cultured, beautiful and steeped in tradition, it was a lovely, quiet place to spend a year of learning and reflection.”

I enjoyed the clinical glaucoma sessions. Meeting and treating patients who lived in Cambridge and the surrounding villages was a fantastic experience; not only a broadening clinical experience, it was a great way to learn more about English culture, people and traditions.

In particular, the academic life of Cambridge is highly traditional, with powerful colleges and other rigorous learning institutions. It was a great pleasure to meet academics from a wide range of backgrounds with many fascinating tales to tell. As Keith receives the most challenging glaucoma referrals from all over East England, I gained exposure to many complex forms of glaucoma including uveitic glaucoma, developmental and paediatric glaucoma, neovascular and traumatic glaucoma.

“My aim for the year was to achieve more experience principally in glaucoma surgery and to undertake further clinical research in glaucoma.”

As the year progressed I was fortunate to attend several glaucoma workshops and ophthalmology conferences in the UK and Europe. Through this I was able to travel to amazing places.

I appreciated the changing of seasons in Cambridge; each one beautiful in its own way. I was glad to live in such a peaceful place, very green and gentle; ideal for a young family. I would have been happy to stay longer but further work opportunities beckoned my family home.

It was an amazing year of personal and professional growth, forging lifelong friendships and professional ties, quality family time and achieving personal growth as a clinician, surgeon and scientist. I can only hope to continue such a positive and productive trajectory for a whole career.

Many thanks to RANZCO and Alcon for the generous scholarship in order that I might undertake this opportunity. I hope to bring back the skills, knowledge and research experience to my clinical role in Australia for the benefit of our community.

Dr Simon Skalicky
Final Year Ophthalmology Trainee
Clinical Senior Lecturer
University of Sydney
NEW ZEALAND BRANCH SCIENTIFIC MEETING

Rotorua Convention Centre, 16-17 May 2014

Including NZ Ophthalmic Nurses’ Group Meeting, NZ Orthoptists’ Group Meeting and Technicians’ Meeting

KEYNOTE SPEAKERS INCLUDE:
Mr Larry Benjamin, UK
Prof Mark Gillies, Sydney
Prof Ravi Thomas, Brisbane
Dr Brendon Vote, Tasmania

CONFERENCE ORGANISERS:
Paula Armstrong
ForumPoint2
PO Box 1008, WMC, Hamilton 3240
Tel: +64 7 838 1098 Email: paula@fp2.co.nz

VICTORIA BRANCH SCIENTIFIC MEETING

AMREP Building, Alfred Hospital Melbourne, 31 May 2014

The updated conference facilities at The Alfred Hospital will once again host our popular Branch meeting with its successful formula of a single-day meeting packed with practical updates for general ophthalmologists.

The scientific program is rapidly taking shape with interactive sessions and Fellows are encouraged to submit abstracts or contact the scientific convenor.

This year the invited guest speaker is Prof Gerard Sutton who is being joined by local experts to update and educate in a day that promises to have something for everyone.

Online registration is now open and can be accessed via the College Events Calendar.
Dr Lindo Ferguson CBE, K.St John, LLD, FRCS, FRACS, FRANZCO, JP.
27 February 1923 to 19 January 2014

Dr Lindo Ferguson died peacefully on 19 January 2014 at the age of 90 years.

Lindo was born in an historic home on his parents’ dairy farm at Waimate North. He was educated by a governess until the family moved to Dunedin during the 1929 depression when he was aged seven. He attended John McGlashan School in Dunedin, Christ’s College in Christchurch and the Otago Medical School. He graduated MBChB in 1947 and won the Ardagh Memorial Prize for Clinical Medicine.

Lindo’s ophthalmology training was at the famed Moorfields Eye Hospital in London. He returned to New Zealand in 1952, set up a private practice in Auckland and was subsequently appointed as a part-time visiting ophthalmologist to Auckland Hospital.

In ophthalmology, Lindo was the initiator and organiser of the first part one examination course for the Fellow of the Royal Australasian College of Surgeons in ophthalmology in Auckland and was convenor for the ophthalmology training scheme for New Zealand. He was President of the Ophthalmological Society of New Zealand in 1980, Chair of the Auckland committee of the Royal Australasian College of Surgeons from 1978 to 1980 and was a member of the Board of Examiners of the Royal Australasian College of Surgeons from 1972 to 1982. Lindo, with Prof John Parr of Dunedin, led negotiations with the Royal Australian College of Ophthalmologists in the 1980s to allow trainees in New Zealand to take the examinations of the Australian College after the Royal Australasian College of Surgeons had ceased examining in ophthalmology. This was a milestone towards full specialist training in ophthalmology in New Zealand and Lindo and John were both awarded honorary fellowship of the Royal Australian College of Ophthalmologists in 1982. Their efforts led ultimately to a full merging of the Ophthalmological Society of New Zealand with the Royal Australian College of Ophthalmologists to form the Royal Australian and New Zealand College of Ophthalmologists.

Of interest is that Lindo’s grandfather, Sir Lindo Ferguson, was New Zealand’s first fully trained ophthalmologist, who arrived in Dunedin in 1883. In 1909 he was appointed Professor of Ophthalmology, more because of his personal attributes than the importance of ophthalmology at that time. Subsequently he was appointed Dean of the Otago Medical School and to this day is New Zealand’s longest serving medical Dean, 23 years, from 1914 to 1937.

Lindo’s involvement in public affairs started in 1952 when his love of heritage was elevated to activism by the recent demolition of Partington’s Mill, in Symonds Street, Auckland, which had been a very prominent city landmark since 1850. Its demolition, Lindo said, was merely to provide two car parks for Seabrook Fowlds Motors. Lindo put pamphlets into...
letterboxes and was elected to the Auckland City Council on a platform of heritage protection. This launched his massive involvement in civic affairs.

In local government Lindo was on the Auckland City Council from 1968 to 1977 and Deputy Mayor of Auckland from 1971 to 1977. He was Deputy Chair of the Auckland Regional Authority from 1980 to 1983 and 1985 to 1986, and Deputy Chair of the Auckland Regional Council from 1988 to 1992. In these posts he took the initiative in the acquisition and restoration of Ewelme Cottage, Kinder House and Highwic, and in the rescue of the old Customs House.

Lindo was a natural, thoughtful leader, who became chair of most organisations to which he belonged. He was a generous, able and unassuming man, who made wide-ranging contributions to our nation.

In community affairs Lindo was President of the Auckland Institute and Museum Council and was made an honorary life member and Companion of the Auckland Institute and Museum Council in 2002. He was Chair of the Auckland Regional Committee for the Order of St John and was made Knight of St John in 1994. He was Chair of the Youthlink Family Trust, Deputy Chair of the New Zealand Retirement Life Care Residencies Trust, member of the MacKelvie Trust Board, member of the Auckland Heritage Trust, member of the New Zealand Police Centennial Trust, member of the Board of Management of the Auckland Art Gallery and was made an honorary member of the Rotary Club (Auckland). He was co-Chair of the Orakei Marae Development Council, which was responsible for the development of the marae. He was President of the Northern Club and also a Trustee of the Club, and was a Director of R & W Hellaby Limited and of Ports of Auckland. One of his greatest loves was his long standing membership of the Cornwall Park Trust Board and his Chairmanship of the Logan Campbell Residuary Estate for 16 years. The Lindo Ferguson Education Centre in Cornwall Park perpetuates his contributions.

Lindo became a member of the University of Auckland Council in 1977 and was Chancellor of the University of Auckland from 1981 to 1987. He was a promoter of tertiary education for Maoris.

In 1970 Lindo and Laetitia purchased a 28 hectare property on the shores of Mangonui Harbour in Northland. The property included an historic house built by a whaler, Captain Butler, in 1847. Lindo and Laetitia thoroughly restored the house and furnished it in its period, and it was joint winner in the domestic building section of the Historic Places Trust/Placemakers-sponsored building restoration competition in 1985. Also on the property are a historic cemetery and a Maori Pa, which the Fergusons maintain in conjunction with Northland Maori. Lindo built up an extensive museum of whaling. Their beautiful property with its Pa, cemetery, historic house, whaling museum and extensive gardens, has been much visited, especially by Northland school groups on educational trips.

Laetitia, his widow, has also done significant community work, which has included the Orakei Marae, the St Stephens and Queen Victoria Schools Trust Board, the Prisoners Aid home visiting team and Vice-President of New Zealand Riding for the Disabled.

Lindo was a natural, thoughtful leader, who became chair of most organisations to which he belonged. He was a generous, able and unassuming man, who made wide-ranging contributions to our nation. Lindo was awarded the Queen’s Silver Jubilee Medal in 1975, an honorary Doctor of Laws from The University of Auckland in 1986 and the CBE in 1987. That Lindo was never knighted remains beyond belief to all those who knew him. He and his grandfather Sir Lindo Ferguson were two great New Zealanders.

Lindo is survived by his wife Laetitia, son William and daughter Jan, and grandchildren Daniel, Miles, Anna and Harrye.

A/Prof Bruce Hadden
A/Prof Hector Maclean was born in a nursing home in Edinburgh in 1937, the first born child of Hector and Mary Maclean, and eventually the eldest of four children; Neil, Derek and Maire. As the eldest male he was named in line with the Clan motto “another for Hector”. Hector never married, such was his devotion to his job.

From there the family moved to Troon in the west coast of Scotland for a few years and then on to Johnstonebridge, a small village in Dumfriesshire where he spent his formative years.

He developed a love of electronics early on, building valve radios and also adapting an ex-Navy cathode ray tube to create an early television – he continued this interest until the very end of his life (it played a major part in his career path) having built his own hi-fi equipment to listen to his extensive collection of classical music along the way, Baroque being his favourite. Despite building TVs, he never watched them, stating that it wasn’t his “preferred medium”. Hector had a very keen sense of humour and a laconic wit.

His House Officer posts were completed at Dundee Royal Infirmary where he went to work in pathology before taking up ophthalmology.

An interest in electron microscopes led him to do a research fellowship in Melbourne between 1973 and 1975 at the invitation of Prof Gerard Crock, after which he returned to Dundee. Disappointingly, Hector discovered that the university’s scanning electron microscope was a very unreliable piece of equipment, and most of his research time was spent on electronic diagnosis and repair of the machine. Fortunately, its electronics used largely domestic television set techniques, which Hector was familiar with.

In 1976, he returned to Melbourne as Associate Professor (clinical) in ophthalmology. In 1986, he took on the role of Head of the Department of Ophthalmology, University of Melbourne (MUDO) after Gerard’s retirement and he continued to lead the department until 1989 when Prof Hugh Taylor was appointed. He continued on as Associate Professor until his retirement in 2002.

Hector was one of Australia’s pioneers in low vision research and services for children. His methods for measuring vision in these very difficult cases had to be correspondingly creative. He used smarties and hundreds and thousands as vision measurement tools, and found many children who were previously labeled blind could accurately pick up these treats placed various distances from them on his desk. With calibration he was able to give a Snellen approximation for his “lolly acuity”. In the late 1980s, Hector was appointed by the Department of Health to examine children reported as blind or visually impaired, in order to confirm their condition. He found that nearly half of them were not blind and recommended extra teaching exposure as treatment. Working with visually impaired children became a lifelong passion for Hector. He monitored their growth and development, testing their vision and rewarding them with chocolate frogs. Hundreds of parents credit Hector with enabling their children to lead independent lives, thanks to his dedication and determination.

As a clinician and surgeon, he had uncompromising standards, values that he instilled into the registrars that he taught. He held many senior posts in various institutions around Melbourne. These included:

- Ophthalmologist, Royal Childrens Hospital 1980 – 1989
- Ophthalmologist, Peter MacCallum Hospital 1976 - 1979
- Head of Clinic 2, Royal Victorian Eye and Ear Hospital
- Head of Ocular Diagnostic Clinic, Royal Victorian Eye and Ear Hospital
- Consultant, Education Visual Assessment Clinic
- Consultant, Paediatric Low Vision Clinic
- Consultant, Advisory Council for Children with Impaired Hearing
- Consultant, The Queens Memorial Hospital for Infections Diseases, Fairfield

Hector was a gifted teacher who trained a generation of ophthalmologists and educated a generation of GPs. For GPs, he taught basic practical techniques needed to manage common ocular conditions. The quality of lectures and clinical
workshops were of such a high standard that they were always over subscribed.

He was a problem solver who improved clinical practice wherever he saw a need.

Infection control was another passion, and Hector ran this program for the Royal Victorian Eye and Ear Hospital for years. The postoperative infection rates for eye surgery were consistently 10 times lower than most other hospitals in Melbourne and also around the world. His attention to detail and the development of sound protocols and procedures saved many from unnecessary loss of vision.

Hector was the first ophthalmologist to work in the low vision clinic jointly established by the departments of optometry and ophthalmology at Kooyong, and he worked there for decades. He also started a low vision clinic at the Eye and Ear Hospital, which he ran in addition to being head of a general clinic and the ocular diagnostic clinic.

He was very much involved with organising and administering parts of the Royal Victorian Eye and Ear Hospital. This is in part reflected by the list of committees he was involved in:

- Chairman - Infection control committee
- Chairman – Clinical review committee
- Chairman – Pharmaceutical Advisory Committee
- Deputy Director – Medical Education

On a more global scale, he was involved with government committees for delivery of eye care and drug evaluator for the Therapeutic Goods Administration.

During his time at MUDO, he had collected quite a following of loyal patients who wanted his continued care after his retirement. He spent two half days a week looking after these patients at the Kew Eye Clinic until 2010, when illness forced him to fully retire from clinical practice. He remained an honorary member of staff at the university and was one of the most generous supporters of the work of Centre for Eye Research Australia, the department’s affiliated research institute.

His devotion to MUDO was unwavering, as is illustrated by the fact that in 1982 he was offered the Chair of Ophthalmology at Aberdeen University, but failed to return to Scotland to take it up as he had much to continue at MUDO.

Hector’s great love outside of ophthalmology was singing. A regular member of the Scots’ Church Choir, he also sang with the Melbourne Chorale and other groups. The annual end of year Messiah was a high point in his singing year.

He was often to be found at the Edinburgh Festival and would travel to Scotland regularly. Walking was something he took great pleasure in and he had once been up Ayres Rock in leather-soled shoes by accident.

Photography (including developing his own film), commercial airliners, amateur two-way radio, ‘who-dunnit’ novels, genealogy and the family tree, chocolate and ice cream, patronising classical concerts and being a consummate host were some of the many hobbies he had – “more hobbies than I had time for”, he once reported.

He was a gourmet chef but also appreciated the pleasures of a simple bacon buttie.

His passports were often replaced due to being full, as he had travelled the world nearly 20 times over by the time he was diagnosed with metastatic colon cancer in May 2010. His enthusiasm and energy for life were not affected by the 84 cycles of chemotherapy he underwent, nor was his love of eating good food.

Hector was an eternal optimist, inquisitor and an inspiration to many during his valuable time within MUDO.

Hector died peacefully at home on the afternoon of 21 August 2013 after only two weeks of infirmity, following a general decline in his health. He was surrounded by many friends and colleagues, whom he loved dearly, during that time and was also well attended by his nephew and partner.

Hector leaves behind a legacy that continues to grow. He has added considerably to ophthalmologic literature. Many currently practicing ophthalmologists are in debt to him for the knowledge and experience he has imparted to them. His patients have willingly offered themselves as ‘guinea pigs’ in Hector’s teaching clinics to help him pass on his knowledge in a fashion that only he could. Some patients have purchased pieces of equipment for MUDO that Hector deemed necessary for the proper management of their conditions.

His lifelong contribution to teaching was commemorated by the establishment of the Hector Maclean Scholarship Fund in 2003. This scholarship fund was established through a generous bequest left to the University by Mrs Joan Dickson in 2002, in appreciation of the high level of medical care Hector had provided to Mrs Dickson’s husband Noel. Hector Maclean Scholars undertake a short-term research project under supervision of an experienced researcher during their summer vacation. It gives both under- and postgraduate students the chance to taste medical research in the field of ophthalmology.

He had a special interest in ophthalmology education. When he passed away in 2013 he left a bequest in his will to add to the scholarship fund named in his honour. He instructed that these funds be used to train registrars at the Royal Victorian Eye and Ear Hospital.

Dr Finlay Maclean (nephew) and Dr Kevin Foo
# Calendar of Events

## 2014

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<td>31-3 Apr</td>
<td>The 11th International Conference on Low Vision</td>
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<td>2-6</td>
<td>World Ophthalmology Congress, Tokyo</td>
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<td>Lions Eye Institute - Retain Case Conference</td>
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<td>9-10</td>
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<tr>
<td>20-22</td>
<td>The Royal College of Ophthalmologists, UK Annual Congress 2014</td>
<td>Website: <a href="http://www.rcophth.ac.uk/annualcongress">www.rcophth.ac.uk/annualcongress</a> Email: <a href="mailto:events@rcophth.ac.uk">events@rcophth.ac.uk</a></td>
</tr>
<tr>
<td>25-31</td>
<td>Macular Degeneration Awareness Week</td>
<td>Website: <a href="http://www.mdfoundation.com.au">http://www.mdfoundation.com.au</a></td>
</tr>
<tr>
<td>31</td>
<td>Victoria Branch Meeting</td>
<td>Events Calendar [<a href="http://www.ranzco.edu">www.ranzco.edu</a>]</td>
</tr>
<tr>
<td><strong>JUNE</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>11th European Glaucoma Society Congress</td>
<td>Website: <a href="http://www.oic.it/~egsnice2014">www.oic.it/~egsnice2014</a></td>
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<td></td>
<td></td>
<td>Email: <a href="mailto:egss2014@oic.it">egss2014@oic.it</a></td>
</tr>
<tr>
<td>14-15</td>
<td>Australian and New Zealand Society of Retinal Specialists mid year meeting</td>
<td>Events Calendar [<a href="http://www.ranzco.edu">www.ranzco.edu</a>]</td>
</tr>
<tr>
<td>19-22</td>
<td>The 11th International Symposium on Ocular Pharmacology and Therapeutics</td>
<td>Website: <a href="http://isopt.net">http://isopt.net</a></td>
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<tr>
<td>24-27</td>
<td>Manchester Royal Eye Hospital Bicentenary Conference</td>
<td>Website: <a href="http://www.mreh200.org.uk">www.mreh200.org.uk</a></td>
</tr>
<tr>
<td>29-8 July</td>
<td>Ophthalmology in China - A Study Tour</td>
<td>Email: <a href="mailto:info@jonbainestours.com.au">info@jonbainestours.com.au</a></td>
</tr>
</tbody>
</table>

For all events visit the RANZCO website events calendar www.ranzco.edu
Locum Position

Looking to start up your career, we are looking for a locum every Thursday and Friday to work in a large regional area in a modern practice with the latest equipment available at your disposal.

Their is the opportunity for two public list per month and also the opportunity for one private list every month with the view to increasing.

This opportunity would suit a newly qualified ophthalmologist, very good terms available accommodation provided.

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Website: www.metwesteyecentre.com.au