VISIONARY



Cornea Research Foundation of America - Bringing Vision to Future Generations

December 2004

Looking At Life With New Vision

By Trischa Zorn, Board Member Cornea Research Foundation of America

Being able to live an active, productive, and independent life has become a reality for me within the last year. I was diagnosed at six months old with a rare eye condition called aniridia. This condition is caused by a dysfunction in a gene responsible for eye development, so the eye stops developing prematurely. For many years there were no answers or remedies to help regain my eyesight, and it was progressively getting worse over the years. That all changed one day last year when I was listening to the news and happened to see a segment with Dr. Price discussing a new FDA study involving a synthetic iris implant, which reduces the amount of light entering the eyes. The next day I took a risk and called Dr. Price to inquire about the possibility of being a candidate for the study. Within a few months of my initial consultation I had undergone the transformation from having no color in either eye to having a natural green iris implant placed in one eye. Three months later I had an artificial iris placed in the other eye.

Although the procedure effectively reduced the area of exposed pupil, the whole experience has been an õeye-openerö for me. Before the surgery, I could only see objects that were a few feet in front of me. Now, I am able to see things clear and crisp, and colors that I was not able to distinguish before are now very vibrant. The surgery main purpose

was to help cut down glare from light coming into my eyes, but most significantly, the synthetic irises give my eyes a natural appearance that I have never had before in my life.

Having the opportunity to be a part of such an amazing medical breakthrough that was sponsored by



Trischa Zorn, artificial iris recipient, with her 55th Paralympic Medal from Athens, Greece 2004

the Cornea Research Foundation of America has been a wonderful experience. Being provided with the gift of better sight, and having the benefits of sight that I did not have before has been worth the wait.

When I was asked to join the Board of Directors of the Cornea Research Foundation of America I was truly honored and did not have to think twice about my decision to join.

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Study Lens Approved For Treating Nearsightedness

High Myopes Have New Treatment Option

In September the Food and Drug Administration approved the first implantable lens for use in people with high myopia (extreme nearsightedness). An alternative to thick glasses or contact lenses, this implantable lens is clipped permanently inside the eye to improve the vision of people who cannot see objects from far away and whose corneas are too thin for laser refractive surgery (LASIK).

õThe Verisyse lens is an exciting option for this group of patients,ö says Dr. Francis Price, who has implanted the lens in approximately 100 people while conducting the clinical study at the Cornea Research Foundation over the past six years. õOur study patients were very happy to receive this lens because their vision is now clear, sharp, and bright. Some may still need glasses for night driving or

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Artificial Cornea

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LASIK Flap Study

Treatment to Strengthen the Cornea

Protective Intraocular Lens

Cornea Donor Tissue Study

Preventing Graft Rejection

Cornea Transplant Database

A Note of Thanks from a Study Participant

Dear Dr. Price and Associates:

Having just completed a trial study for a new eye drop to prevent transplant rejection, I wanted to let you know that I appreciate the care and skill that was displayed by you and your associates during my year in the study. I want to specifically thank Dr. Kelley for her professionalism and skilled expertise. It was her dialog with me that brought me to your clinic.

In November 2003 I emailed your clinic to learn more about your cornea transplant procedure. I had been in the care of another surgeon for four years. He had not given me a very positive outlook for the treatment of my Fuchsødystrophy corneal disease. He basically felt I should wait for improvement in the treatment method, or if I insisted, he could refer me to a specialist in California. Neither of these options was acceptable to me and that is when I started looking for another option. I began searching the Internet and came across your web site and sent an email requesting more information.

I can say that you were candid about the risks but also confident in the success of past cornea transplants you performed. I did not hesitate to make a decision and on December 21, 2003 I received the donor cornea.



Ed White

While I have not had any major problems with rejection, I did at times get impatient with the healing process. I now plan to have my other eye treated in 2005.

I would like to be considered for another study group should I be a satisfactory candidate for one. I would also be happy to provide a testimonial for others who may have Fuchsøbut are reluctant to begin the process.

Sincerely,

Ed White Fishers, Indiana



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Being part of an organization that helps change peoplesødaily lives is very exciting.

I have been swimming for over twenty years at the Elite level of competition and had some very exciting events in my life through my swimming career such as winning gold medals and setting world records. However, no gold medal or record could ever compare to the feelings I experience now on a daily basis since receiving my artificial iris implants. Thanks to Dr. Price and the Cornea Research Foundation, this breakthrough surgery has allowed me to become a more productive and independent person.



We Salute Our Volunteers Many Thanks to All of You

Most people know that the partnership between any organization and their volunteer staff can make all the difference in the success of the organization. Therefore, as we enter 2005, the Cornea Research Foundation of America would like to acknowledge the growing number of wonderful people who have volunteered to help us, sometimes on short notice, whenever we need them.

This volunteer commitment has contributed to the success of many of our events this year. For example, patients from all corners of Indiana, as well as Illinois and Ohio have graciously come in and allowed their eyes to be viewed by numerous doctors, donors and other patients, to help others have a better understanding of the

new surgical procedures and research
studies being pioneered at the Cornea
Research Foundation of America. Help
from our volunteers has enabled the
Foundation to fulfill its mission to educate
the local community and the medical
community world wide.
So to allofour wonderful
volunteers Thank you! With your help
we are able to say that every event we
presented this year: the Advanced
Cornea Courses for corneal surgeons,
the Open Houses, the Focus on Educa-
tion Seminar for optom etrists, and the
Cornea Golf Classic were the best ever
in the history of the Foundation! You are
all exceptional!



Just a few of our wonderful volunteers (from left to right) Virgil Biby, Carla Adams, Allan Rivers, Margaret Koehler, Karen Caruthers, William East and Margie Reas

2004 OD Seminar Marks 13 Years of Education

As part of our educational mission, every year the Cornea Research Foundation of America sponsors an all-day seminar to update optometrists from Indiana and surrounding states on advances in eyecare. This year 160 doctors learned the newest information on common conditions that can affect the eye such as diabetes, dry eye and glaucoma.

Dr. Price presented the latest surgical techniques including a new transplant technique for Fuchsødystrophy, iris

reconstruction for aniridia and injury, the Verisyse implant for high myopes, and the Alphacor artificial cornea. In addition, Dr. Price conducted a joint lecture presenting the benefits of the all-laser custom LASIK procedure using wavefront-guided technology.

Next year & seminar is scheduled for October 29, 2005. The Cornea Research Foundation of America conducts these seminars to help doctors provide the best possible care to patients throughout Indiana.

Please Join Us For An Open House

April 10, 2005 1:00pm- 3:00pm

Cornea Research Foundation of America and Price Vision Group

invite you to view and learn more about new strengthening treatments of the cornea for patients with *Keratoconus* and other destabilizing corneal disabilities

We look forward to seeing you RSVP 317-814-2993 or susansimon@cornea.org

Lens from page 1

other lowólight situations, but the ease of being able to function most of the time without glasses more than outweighs the occasional inconvenience.ö

In the surgical procedure, the surgeon slips the tiny lens through a small incision and clips it on to the iris, or colored part of the eye. Like glasses and contact lenses, the implantable lens comes in different powers, depending on one vision needs. As with any surgical procedure to the eye, there a risk of cataracts or infection; however, we did not see that at our site. The FDA asked the study sites to continue to follow their study patients for three years to determine if there are any long-term side effects.

The Cornea Research Foundation of America is proud to participate in this type of study, which can provide a new way of helping patients with visual problems.

CORNEA RESEARCH FOUNDATION OF AMERICA



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"ask THE doctor"

Q. Recently I was exposed to fiberglass while working on my air conditioner and a fiber must have gotten in my eye. I flushed both eyes immediately with cold water and luckily have not noticed any problems with my vision. What concerns me, however, is a red dot about 1.0mm long on the white part of my eye. Should I see a doctor or will this eventually go away?

A. What you have is called a subconjunctival hemorrhage, which means a little blood vessel burst in the white part of the eye. This usually clears in 7-10 days. If it doesnot, you need to see a doctor to make sure the fiberglass is not embedded in the area.

Q. I have a condition referred to as ICE Syndrome. I have had two corneal transplants and two glaucoma surgeries. The last corneal transplant is now decompensating and I have been told that another transplant will be needed. Is there anything new in the way of research that might help me?

A. This is a relatively rare condition. An artificial cornea might be a partial solution, but that will not help with the anterior chamber scarring or glaucoma. The artificial cornea can provide a clear window to see through, and it will not decompensate or be rejected. Although the artificial cornea is a major breakthrough for people who have had multiple transplant rejections (4-5), there are still some problems with the material itself. If you qualify for this surgery, you would need to discuss the procedure with your doctor and decide if it it gift for you.

Q. My daughter has been diagnosed with pellucid marginal degeneration. Is this the same as keratoconus?

A. Pellucid marginal degeneration is a thinning of the peripheral cornea (that is thinning of the outer edges of the clear window of the eye). This can be a progressive disease. It is similar to keratoconus, which is the thinning of the lower part of the cornea. Eye rubbing can make this condition worse. Some patients will eventually need contact lenses for best vision and some may need a corneal transplant.

