

DEDICATED TO UNDERSTANDING AND TREATING GLAUCOMA

# INSiGHT

DR. ROBERT MANDELKORN



## REFLECTIONS ON EYESIGHT

by Dr. Robert M. Mandelkorn

There are few gifts as wonderful as perfect eyesight. We tend to take our eyes for granted, but when they start to deteriorate, we suddenly realize how absolutely vital and irreplaceable our eyesight is.

My name is Dr. Robert Mandelkorn, and I have devoted my entire professional life to eye care, with a special focus on glaucoma.

As an eye surgeon who is also an eye physician, I've written numerous articles for the top medical journals in the nation, and contributed to several books on glaucoma, including "Secondary Glaucomas," "Contemporary Issues in Ophthalmology," and "Clinical Pathways in Glaucoma."

I'm a member of the American Glaucoma Society and the American College of Surgeons, and I have been honored with a Lifetime Achievement Award from the American Academy of Ophthalmology.

After moving to beautiful southwest Florida from Pittsburgh, Pennsylvania in 2001, I created and administered an eye clinic for the Veterans Administration. I am now retiring from the VA, and entering private practice

I recently opened an office in Fort Myers, and I am currently accepting new patients. If you're looking for comprehensive eye care from a highly-skilled, experienced specialist, please contact or refer me at your earliest convenience.

I look forward to *seeing* you!

A handwritten signature in black ink that reads "Robert M. Mandelkorn MD".

# CHALLENGING ANTIQUATED SCIENCE

IN A RECENT ISSUE of *Atlantic* magazine, David Freedman discussed the work of Dr. John Ioannidis, who spent his career reviewing articles which have been considered pillars of medicine for decades.

Ioannidis' findings, published in the *Journal of the American Medical Association*, indicate that far too many widely-accepted articles published in leading medical journals have not passed the test of time, and their conclusions are no longer valid.

For example, the time honored tradition of measuring the cup/disc ratio of the optic nerve as a gauge of measuring damage from glaucoma to the eye. In the mid-1950s, Dr. Monsour Armaly began to study families with glaucoma at the University of Iowa. Through observing the optic nerve with a direct ophthalmoscope, Armaly came up with the cup/disc ratio, which has been widely used and accepted for several decades.

But during my fellowship in glaucoma studies, I began to notice that patients with similar-appearing cup/disc ratios seemed to have very different outcomes, with some patients going blind while others appeared to be completely normal, with no signs of damage from glaucoma.

This puzzle was solved by the careful observations and work of Dr. Jost Jonas in Germany. After studying thousands of photos of optic nerves, Jonas decided to examine the neuro-retinal rim, which is the actual tissue between the cup and disc of the optic nerve. The neuro-retinal rim is actually composed of one- to two-million nerve fibers which pass from the brain into the eye, and allow us to see.

What Jonas discovered was that in a healthy eye, the neuro-retinal rim measures one to two square millimeters, and is the same irrespective of the size of the optic nerve, whether that size is normal, smaller or larger.

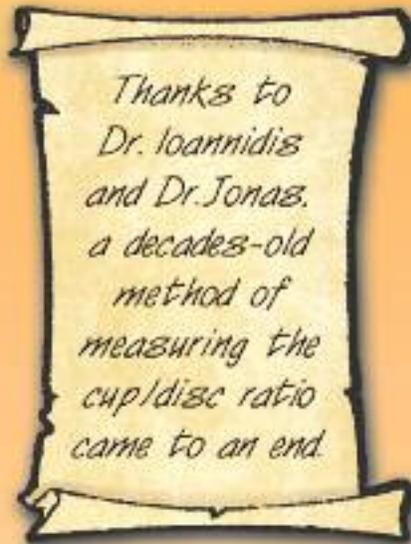
Dr. Jonas also discovered that in a smaller eye, the same retinal nerve fibers were compressed into a smaller area, giving the appearance of a smaller cup. In a larger eye, and the retinal nerve fibers were allowed to fill a larger area, giving the appearance of a larger cup. However, in each case, the neuro-retinal rim area was the same!

In essence, in these normal eyes, the cup/disc ratio was completely dependent upon the size of the optic nerve, resulting in a wide variety of cup/disc ratios in completely normal eyes. This finding completely invalidated the concept of the cup/disc ratio as originally defined by Professor Armaly in the 1950s.

Thanks to the good work of doctors Ioannidis and Jonas, a decades-old practice of measuring the cup/disc ratio came to a well-deserved end.

This led to the creation of amazing hi-tech devices such as the Heidelberg Retinal Tomogram (HRT) and the Ocular Coherence Tomograph (OCT), which can measure the neuro-retinal rim area and determine the health of the optic nerve with an unprecedented accuracy.

—Dr. Robert Mandelkorn



Naples pier at sunrise



## EYE DROP REFORM

The care of patients with glaucoma is heavily dependent upon prescription eye drops. Unfortunately, patients never seem to quite have enough eye drops to last for a month. So they routinely end up calling their eye doctor or local pharmacist and begging them for an advance refill.

In regard to this matter, the Centers for Medicare and Medicaid Services (CMS) recently issued new guidelines for dispensing eye drops which permit refills at 70% of the predicted days of use. For example, a prescribed medication with an expected duration of 30 days of use can now be refilled as early as day 21. How wonderful! And there's more.

The new guidelines also insure that refill allowances will be the same, whether purchased by retail or through mail-order. The guidelines also permit physicians to authorize even earlier refills for patients who continue to have difficulty with accidental waste.

If you are a glaucoma patient experiencing problems refilling your eye drop prescription, you call 1-800-Medicare (1-800-633-4227).

- You will need your medicare number, your date of birth and the exact name of your medication.
- Calls are answered by an automated response system. You will be asked to say or dial your Medicare number, then you will be asked what type of problem you are calling about. Say "drug problem."
- You will be asked for your date of birth. After this is confirmed, your prescription drug coverage or supplemental insurance will be confirmed.

- You will given a phone number to call about your drug coverage or supplemental insurance. But don't call that number – yet. Instead, stay on the line and say "agent."

- When an agent picks up, they will ask you what your issue is. Tell them your eye drop medication is insufficient, and that you have run out of it before the next refill is allowed.

- Explain that your doctor has already tried dealing with the issue, but you are still being denied the medication. This should help you get refills of your glaucoma medication early.

- If you still find yourself running out of eye drops, the enclosed form can be completed by your eye care doctor, and submitted to the appropriate prescription drug plan. It must be accepted, with no exceptions.

–Dr. Robert Mandelkorn

## OPTICAL ILLUSION

**EVEN HEALTHY EYES CAN BE FOOLED!**

MOVE THE DESIGN BELOW AWAY FROM YOUR EYES, THEN TOWARDS THEM. THE GLOW WILL SEEM TO EXPAND AND CONTRACT!

