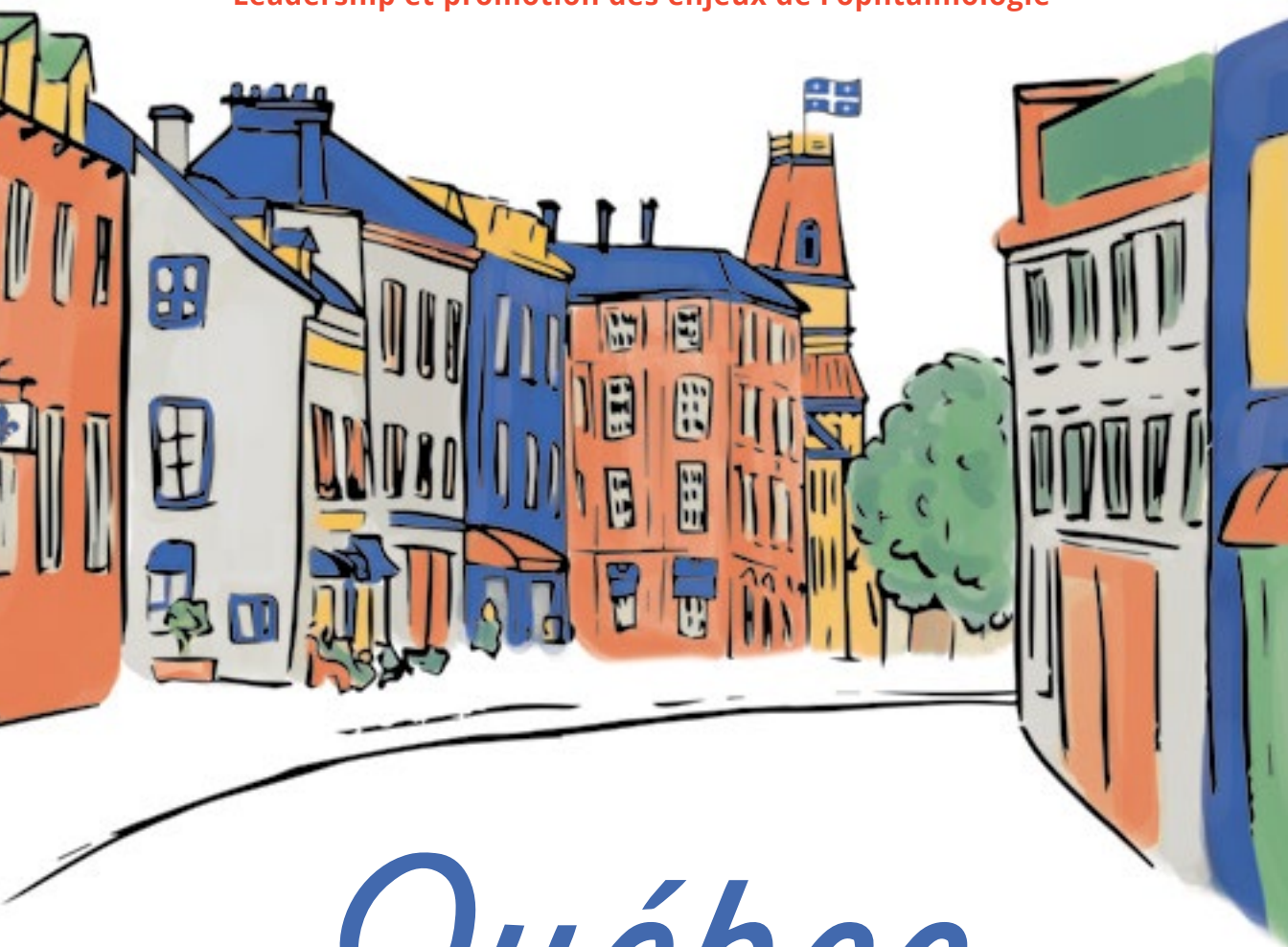


**Leadership and Advocacy in Ophthalmology**  
**Leadership et promotion des enjeux de l'ophtalmologie**



# Québec

**COS Annual Meeting & Exhibition**  
**Congrès annuel et exposition de la SCO**

June 13-16 juin, 2019  
Québec City Convention Centre  
Centre des congrès de Québec



Canadian Ophthalmological Society  
Société canadienne d'ophtalmologie

EYE PHYSICIANS AND SURGEONS OF CANADA | MÉDECINS ET CHIRURGIENS OPHTALMOLOGISTES DU CANADA

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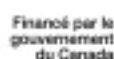
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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|---------------------|
| <b>8:00 AM – 4:30 PM</b><br>Une grande première ! A joint symposium of the Société Française d’Ophtalmologie and the Canadian Ophthalmological Society<br><i>Une grande première ! Symposium conjoint de la Société française d’ophtalmologie et la Société canadienne d’ophtalmologie (p. 36)</i> |                                                                                                                                                                                               | <b>1:00 – 5:00 PM</b><br>Engaging the Future of Ophthalmology – How can we prepare our in-training physicians for the future?<br><i>Prévoir l’avenir de la profession – Comment préparer nos médecins en formation pour l’ophtalmologie de demain? (p. 39)</i> |                               | <b>1:00 – 5:00 PM</b><br>TCOS Workshop<br><i>Atelier LSCO (p. 116)</i>                                                                                                                         |                     | 8:00 AM – 5:00 PM   |
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| We Talked About That! Why patients say they were not told and strategies to minimize this<br><i>Pourtant, nous en avons parlé ! Pourquoi les patients affirment qu’on ne leur a pas dit, et stratégie pour minimiser ce problème Room   Salle 205 A (p. 79)</i>                                    | Alignment Assignment: Strabismus and amblyopia<br><i>Devoir d’alignement : strabisme et amblyopie (p. 80)</i>                                                                                 |                                                                                                                                                                                                                                                                | CSORN   <i>SCIO (p. 118)</i>  | STC: On Top of Tomography and Above Aberrometry<br><i>CTC : Supérieurs à la tomographie et à l’aberrométrie Room   Salle 206 A (p. 109)</i>                                                    |                     | 3:45 – 5:15 PM      |
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## PRESIDENT'S MESSAGE

Dear Colleague,

It is with great pleasure that I welcome you to Québec City for the Canadian Ophthalmological Society's 82<sup>nd</sup> Annual Meeting and Exhibition. To mark our 82<sup>nd</sup> Anniversary, this year's theme is: *Leadership and Advocacy in Ophthalmology*.

The COS Annual Meeting and Exhibition is the largest gathering of eye physicians and surgeons and allied health professionals in Canada. This event brings together the individuals who work tirelessly across the spectrum of vision health - from research to patient care - and stimulates interaction within the ophthalmological community. It is a forum to showcase the best research and to promote learning through plenary sessions, co-developed symposia, poster presentations, surgical skills transfer courses and interactive workshops.

The Planning Committee, chaired by Dr. Mona Harissi-Dagher, has once again developed an excellent scientific program featuring twenty-two internationally renowned keynote speakers. I would also like to acknowledge the tremendous work done by all of the Session Chairs and the COS staff team, all of whom have worked tirelessly to help organize an outstanding scientific meeting.

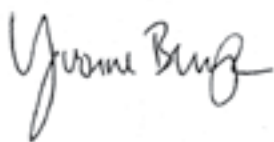
Some exciting things to look forward to include:

- The full-day joint symposium with the Société Française d'Ophtalmologie on Thursday, June 13<sup>th</sup>. This symposium features a full range of topic areas in ophthalmology.
- The Welcome Reception on Thursday, June 13<sup>th</sup> from 6:00 – 7:00 PM at the Hilton hotel (in the Villeray/De Tournay room) where you will have the opportunity to mingle with friends and colleagues.
- *The Lifetime Achievement Award* ceremony on Friday, June 14<sup>th</sup> during Current Concepts I. This year's recipient is Dr. Hélène Boisjoly whose contributions have had a significant and lasting impact on ophthalmology, both nationally and internationally.
- For COS members, please plan to attend the COS Annual General Meeting on Friday, June 14<sup>th</sup> from 12:15 – 1:30 PM. Lunch will be provided.

As usual, there will be an extensive display of state-of-the-art ophthalmic equipment by our industry partners. COS is very grateful for the generous contributions from our industry partners and for their continued commitment to the Canadian ophthalmological community.

We would also like to acknowledge the generous support from the Association des médecins ophtalmologistes du Québec (AMQ) towards this meeting. Your strong support is truly appreciated.

I would like to wish you a wonderful conference.



Yvonne M. Buys, MD, FRCSC  
President, COS and Chair, COS Board of Directors



# MESSAGE DE LA PRÉSIDENTE

Chères collègues, chers collègues,

C'est avec grand plaisir que je vous souhaite la bienvenue à Québec à l'occasion du 82<sup>e</sup> Congrès annuel et exposition de la Société canadienne d'ophtalmologie. Pour souligner notre 82<sup>e</sup> anniversaire, le congrès de cette année a pour thème « *Leadership et représentation en ophtalmologie* ».

Le Congrès annuel et exposition de la SCO est l'événement qui rassemble le plus grand nombre de médecins et chirurgiens et de professionnels paramédicaux œuvrant en ophtalmologie au Canada. Il réunit les personnes qui travaillent sans relâche dans le vaste domaine de la santé oculaire – tant en recherche qu'en soins des patients – et favorise les échanges au sein de la communauté de l'ophtalmologie. C'est une plate-forme idéale pour mettre en vedette les meilleurs projets de recherche et promouvoir la formation au moyen de séances plénières, de présentations d'affiches, de cours de transfert de compétences et d'ateliers interactifs.



Le Comité de planification, présidé par la D<sup>re</sup> Mona Harissi-Dagher, nous a une fois de plus préparé un programme scientifique prestigieux comptant vingt-deux conférenciers invités de renommée internationale. J'aimerais aussi souligner le travail remarquable de tous les présidents de séance et des membres du personnel de la SCO, qui ont tous et toutes travaillé très fort à l'organisation d'un programme scientifique et social exceptionnel.

Voici quelques-uns des grands moments à ne pas manquer :

- Le symposium conjoint d'une journée avec la Société française d'ophtalmologie, le jeudi 13 juin, où l'on abordera un éventail complet de sujets en ophtalmologie.
- La réception d'accueil, qui vous donnera l'occasion d'échanger avec vos amis et collègues, aura lieu le jeudi 13 juin, de 18 h à 19 h, au salon Villeray-De Tourny de l'hôtel Hilton.
- La cérémonie de remise du *Prix de reconnaissance pour l'ensemble d'une carrière* aura lieu dans le cadre de la séance Notions courantes I, le vendredi 14 juin. Les contributions de la lauréate de cette année, la D<sup>re</sup> Hélène Boisjoly, ont eu une influence importante et durable sur l'ophtalmologie, au Canada et dans le monde entier.
- Les membres de la SCO sont priés d'assister à l'Assemblée générale annuelle de la SCO, le vendredi 14 juin, de 12 h 15 à 13 h 30. Le déjeuner sera servi.

Comme toujours, nos partenaires de l'industrie présenteront un vaste éventail de matériel ophtalmologique à la fine pointe. La SCO est très reconnaissante à ses partenaires de l'industrie de leur généreuse contribution et de leur engagement continu envers la communauté ophtalmologique canadienne.

Nous tenons également à souligner le soutien très généreux de l'Association des médecins ophtalmologistes du Québec (AMOO) envers ce congrès. Nous vous remercions grandement de cet appui précieux.

Je vous souhaite à tous et à toutes un merveilleux congrès.

Yvonne M. Buys, MD, FRCSC

Présidente de la SCO et présidente du Conseil d'administration de la SCO

## MESSAGE FROM THE MEETING CHAIR

On behalf of the 2019 COS Annual Meeting Planning Committee, welcome to the 82<sup>nd</sup> Annual Meeting and Exhibition of the Canadian Ophthalmological Society. This year's meeting will present new perspectives in ophthalmology. Through the delivery of a high calibre program, I hope that the next few days showcase what we can achieve together.

I am so pleased that we are hosting the inaugural joint Symposium of the Canadian Ophthalmological Society and the Société Française d'Ophtalmologie, on Thursday, June 13, featuring four keynote speakers from France. Our Annual Meeting is a unique opportunity to come together and connect with colleagues from across the country, and is the premier venue for knowledge transfer in our field.

Our scientific program is rich with 22 international keynote speakers, a variety of lectures, case-based presentations, debates and workshops. We have a full roster of Surgical Skills Transfer Courses to provide hands-on surgical technique training. Be sure to visit our Exhibition Hall where our exhibitors will be displaying the latest in eye care technologies and innovations.

We are also proud to present:

- The COS – Dr. Harold Stein Innovator Lecture entitled, "Conquering intraocular pressure: New pharmacologic and surgical approaches" delivered by Dr. Douglas Rhee (p. 68)
- *The Canadian Journal of Ophthalmology* lecture entitled "The chicken vs. egg problem: Lessons from structure vs. function in glaucoma" delivered by Dr. Donald Hood (p. 68)

We know that the success of the conference depends ultimately on the many people who have worked with us in planning, organizing and also delivering it onsite. I want to convey my sincere gratitude to the Annual Meeting Planning Committee for organizing an exceptional scientific program! Thanks to all those who assisted with the timely review of all of abstracts, to our COS Awards of Excellence adjudicators and to all of our speakers, panelists, and moderators for making this exciting program possible. I also would like to thank the COS staff, who have worked tirelessly over the past year to develop this program and bring it to fruition. And of course, thank you to our sponsors. Your support of this program is truly appreciated.

I hope that you enjoy this year's meeting in historic Québec City. I am proud to work with the many people that brought this meeting to fruition, and I look forward to the next one.



A handwritten signature in black ink, which appears to read "M. Harissi-Dagher". The signature is fluid and cursive, written on a light-colored background.

Mona Harissi-Dagher, MD, FRCSC  
Chair, Annual Meeting Planning Committee

# MESSAGE DE LA PRÉSIDENTE DU CONGRÈS

Au nom du Comité de planification du Congrès 2019 de la SCO, je vous souhaite la bienvenue au 82<sup>e</sup> Congrès annuel et exposition de la Société canadienne d'ophtalmologie. La réunion de cette année présentera de nouvelles perspectives en ophtalmologie. J'espère que le programme de grande qualité qui vous sera présenté vous permettra de constater, au cours des prochains jours, tout ce que nous pouvons réaliser ensemble.

Je suis très heureuse de vous annoncer que nous accueillons le premier symposium conjoint de la Société canadienne d'ophtalmologie et de la Société française d'ophtalmologie, le jeudi 13 juin, avec quatre conférenciers de marque venus de la France. Notre Congrès annuel nous procure une occasion inégalée de nous réunir et d'échanger avec nos collègues de toutes les régions du pays et constitue le lieu par excellence de transfert des connaissances dans notre profession.

Notre programme scientifique présente 22 conférenciers de marque venus de l'étranger, des conférences sur une foule de sujets, des études de cas et des ateliers. Nous avons une liste complète de cours de transfert de compétences en chirurgie pour offrir une formation pratique aux techniques chirurgicales. Ne manquez pas de visiter le Hall d'exposition où nos exposants mettent en vedette les technologies et les innovations de l'heure.

Nous sommes également fiers de présenter :

- La conférence SCO–D<sup>r</sup> Harold Stein, intitulée, *Conquering intraocular pressure: New pharmacologic and surgical approaches* prononcée par le D<sup>r</sup> Douglas Rhee (p. 68)
- La conférence du *Journal canadien d'ophtalmologie*, intitulée, *The chicken vs. Egg problem : Lessons from structure vs. function in glaucoma* prononcée par le D<sup>r</sup> Donald Hood (p. 68)

Nous savons que le succès du congrès, au bout du compte, est attribuable au travail des nombreuses personnes qui ont contribué avec nous à le planifier, à l'organiser et, maintenant, à le présenter. Je tiens à exprimer ma sincère gratitude au Comité de planification pour avoir mis sur pied un programme scientifique exceptionnel ! Merci à tous ceux et celles qui ont contribué à l'examen en temps opportun de tous les résumés, à nos évaluateurs des Prix d'excellence de la SCO et à tous nos conférenciers, panélistes et modérateurs pour avoir rendu possible ce programme passionnant. Je tiens également à remercier le personnel de la SCO, qui a travaillé sans relâche au cours de la dernière année à l'élaboration et à la réalisation de ce programme. Et bien sûr, merci à nos commanditaires. Nous vous remercions grandement de cet appui précieux.

J'espère que vous apprécierez la rencontre de cette année dans la ville historique de Québec. Je suis fière de travailler avec les nombreuses personnes qui ont mené à bien cette rencontre, et j'ai déjà hâte à la prochaine.



Mona Harissi-Dagher, MD, FRCSC  
Présidente, Comité de planification du Congrès annuel



## GREETINGS FROM THE MAYOR SALUTATIONS DU MAIRE

C'est avec un grand plaisir que je vous souhaite la bienvenue à Québec à l'occasion du congrès de la Société canadienne d'ophtalmologie, le rendez-vous annuel des professionnels soucieux de rester à l'avant-garde en matière de recherche et de soins ophtalmiques.

Ville où le savoir et l'innovation sont à l'honneur, Québec accueille avec bonheur les personnes et les organisations qui se consacrent à l'avancement des connaissances et à l'amélioration des pratiques. Dans cet esprit, ce rassemblement éducatif, le plus important du genre au pays, porte la promesse d'échanges stimulants et enrichissants pour tous les participants.

Si des travaux considérables sont à l'ordre du jour, cette rencontre vous offre aussi la chance de découvrir ou de redécouvrir notre belle ville. Festive, gourmande et attrayante, Québec s'anime et respandit à l'aube de la saison estivale. Je vous invite à profiter pleinement de la chaleur de son accueil et des charmes distinctifs de son accent unique en Amérique.

Je vous souhaite un excellent congrès et un magnifique séjour.



Régis Labeaume  
Maire de Québec

It is a great pleasure for me to welcome you to Québec City for the Annual Meeting of the Canadian Ophthalmological Society, the annual gathering of professionals devoted to staying at the forefront of ophthalmological research and eye care.

A city where knowledge and innovation have pride of place, Québec City gladly welcomes people and organizations devoted to advancing knowledge and improving practices. In this spirit, this educational gathering, which is the largest of its kind in the country, promises to provide stimulating and enriching discussions for all participants.

While a busy agenda has been planned for this meeting, it will also give you the opportunity to discover or rediscover our lovely city. A festive, attractive city renowned for its fine dining, Québec City comes to life and blossoms in the early summer season. I invite you to fully enjoy its friendly hospitality and the distinctive charms of its accent that is unique in the Americas.

I wish you an excellent convention and a wonderful stay.

Régis Labeaume  
Mayor of Québec City





# LIFETIME ACHIEVEMENT AWARD

## PRIX DE RECONNAISSANCE POUR L'ENSEMBLE D'UNE CARRIÈRE

Presented during Current Concepts I (p. 48)

Présenté pendant Notions courantes I (p. 48)

### **Hélène Boisjoly, CM, MD, MPH, FRCSC, DABO**

After obtaining her degree in ophthalmology from Université de Sherbrooke in 1981, Dr. Hélène Boisjoly specialized in cornea research at the Massachusetts Eye and Ear Infirmary and the Schepens Eye Research Institute, affiliated with Harvard University (1981-1983). In 1992, she obtained a Master of Public Health from the Bloomberg School of Public Health at Johns Hopkins University. She was a researcher and fellow at the Fonds de recherche du Québec-Santé (FRQ-S) from 1986 to 2001, and she worked at Université Laval (1983-1993) before becoming head of the Department of Ophthalmology at Hôpital Maisonneuve-Rosemont, affiliated with the Université de Montréal (1993-1998). She was the first Scientific Director of the FRQ-S Provincial Vision Health Research Network (1996-2002). A full professor since 1998, she served as the Chair of the Department of Ophthalmology at Université de Montréal from 2000 to 2008.



Dr. Boisjoly's research interests include transplant immunology, viral diseases such as ocular herpes, and functional outcomes after corneal transplantation. She received funding without interruption until 2013, publishing more than 80 original scientific articles. She has trained 120 residents and 50 graduate students, including a number of fellows. Since 2011, she has served as Dean of the Faculty of Medicine at Université de Montréal; she has also been a member of several Boards of Directors and organizations for the advancement of science and medical education. In this capacity, she was President of the Association of Faculties of Medicine of Canada (2014-2016) and since 2012, has been a member of the prestigious M8 Alliance, an international network of universities dedicated to improving global health. In December 2018, Dr. Boisjoly became a member of the Order of Canada.

Médecin ophtalmologiste diplômée de l'Université de Sherbrooke (1981), D<sup>re</sup> Hélène Boisjoly se spécialise en cornée au Massachusetts Eye and Ear Infirmary ainsi qu'au Schepens Eye Research Institute affiliés à l'Université Harvard (1981-1983). En 1992, elle obtient un diplôme de maîtrise en santé publique de la Bloomberg School of Public Health de l'Université Johns Hopkins. Chercheuse-boursière du Fonds de recherche du Québec-Santé (FRQ-S) de 1986 à 2001, elle œuvre à l'Université Laval (1983-1993) avant d'être recrutée comme chef du Département d'ophtalmologie de l'Hôpital Maisonneuve-Rosemont affilié à l'Université de Montréal (1993-1998). Elle est la première directrice scientifique du Réseau provincial FRQ-S en santé de la vision (1996-2002). Professeure titulaire depuis 1998, elle occupe la fonction de directrice du Département universitaire d'ophtalmologie de l'Université de Montréal (2000-2008).

Ses champs d'intérêt en recherche incluent l'immunologie de la transplantation, les maladies virales dont l'herpès oculaire et les résultats fonctionnels après une greffe de la cornée. Financée sans interruption jusqu'en 2013, elle publie plus de 80 articles scientifiques originaux. Elle a formé 120 résidents et 50 étudiants aux cycles supérieurs dont plusieurs fellows. Doyenne de la Faculté de médecine de l'Université de Montréal depuis 2011, elle est membre de plusieurs conseils d'administration et organisations pour l'avancement des sciences et de l'éducation médicale. À ce titre, elle préside l'Association canadienne des facultés de médecine du Canada (2014-2016) et est membre depuis 2012 de la prestigieuse M8 Alliance, un réseau international d'universités dédié à l'amélioration de la santé mondiale. En décembre 2018, elle devient membre de l'Ordre du Canada.

# COS AWARDS OF EXCELLENCE

## PRIX D'EXCELLENCE DE LA SCO

The Canadian Ophthalmological Society congratulates the recipients of the 2019 COS Awards for Excellence in Ophthalmic Research. Presented annually since 1995, the COS Awards of Excellence are open to residents, fellows and medical students conducting original, innovative research at a Canadian university. Award winning abstracts combine three main criteria to deliver relevant and exceptional research that benefits Canadian ophthalmology. These criteria include: Quality, importance and educational value.

La Société canadienne d'ophtalmologie félicite les lauréats des prix d'excellence de la SCO pour la recherche en ophtalmologie 2019. Présentée chaque année depuis 1995, la catégorie du prix d'excellence existe à l'intention des résidents, des fellows et des étudiants en médecine qui font de la recherche originale et innovatrice dans une université canadienne. Les lauréats combinent trois critères principaux pour offrir une recherche pertinente et exceptionnelle au bénéfice de l'ophtalmologie canadienne. Ces critères incluent : qualité, importance et valeur éducative.

### PAPERS | ARTICLES



#### **First prize | Premier prix**

##### **Jacob Rullo, Queen's University**

Intraocular antibodies as a novel target for understanding and treating vascular diseases of the eye  
*Presented during The Art and Science of Medical Retina | Présenté pendant L'art et la science de la rétine médicale (p. 75)*



#### **Second prize | Deuxième prix**

##### **James J. Armstrong, University of Western Ontario**

Acetylation of COX-2: An immunoresolving therapy  
*Presented during Latest Updates in Uveitis | Présenté pendant Dernières mises à jour sur l'uvéite (p. 56)*



##### **Alexander L. Pearson, University of Ottawa**

A large international study of LHON epidemiology  
*Presented during Self-reflection: How things are now, are being done, and what should we change! | Présenté pendant Introspection : comment les choses se font actuellement et ce nous devrions changer ! (p. 95)*



#### **Third prize | Troisième prix**

##### **Jennifer L. Gao, Dalhousie University**

Comparison of the diagnostic sensitivity of macular ganglion cell layer thickness, peripapillary retinal nerve fibre layer thickness, and Bruch membrane opening-minimum rim width in detecting glaucoma  
*Presented during Glaucoma Frontiers | Présenté pendant Frontières du glaucome (p. 49)*

Join us during Current Concepts I (p. 48) to find out which poster presentations earned a COS Award of Excellence!

*Soyez des nôtres durant Notions courantes I (p. 48) pour savoir quelles présentations d'affiches ont remportés un prix d'excellence de la SCO !*

**Thank you, Elsevier, for a generous financial contribution in support of innovative ophthalmic research.**

**Merci, Elsevier, de votre généreuse contribution financière à l'appui de la recherche novatrice en ophtalmologie.**



# THE CJO WANTS YOU TO REVIEW

Quality peer reviews are essential to the success and reputation of journal. The CJO is a growing enterprise — the number of submissions has increased significantly over the last 3 years, as has the journal's impact factor. We need experts like you to safeguard the rigorous standards of the scientific process and to maintain the CJO's commitment to excellence.

## WHY REVIEW? BEING A REVIEWER:

- Demonstrates your expertise in the field and expands your knowledge.
- Improves your reputation and increases your exposure to key figures in the field.
- Keeps you up to date with the latest literature, and grants advanced access to research.
- Helps you develop critical thinking skills essential to research.
- Advances your career — peer review is an essential role for researchers.

Reviewers are recognized in the journal every year. In addition, all CJO reviewers receive free 30-day access to Scopus and Science Direct, and they can participate in Elsevier's reviewer recognition platform.

Follow these **3 STEPS** to become a peer reviewer for the CJO:

1. Register in EVISE (<https://www.evise.com/profile/#/CJO/login>).
2. Indicate your areas of specialization.
3. Email [cjo@cos-sco.ca](mailto:cjo@cos-sco.ca) to let us know you've registered.

To learn more about the CJO's peer review program email us at [cjo@cos-sco.ca](mailto:cjo@cos-sco.ca).

Canadian Journal of Ophthalmology  
**CJO • JCO**  
Journal canadien d'ophtalmologie

# PLANNING COMMITTEE

## COMITÉ DE PLANIFICATION

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### **Chair, Annual Meeting Planning Committee**

#### **Présidente, Comité de planification du congrès annuel**

*Mona Harissi-Dagher, MD*

Canadian Association of Paediatric Ophthalmology and Strabismus

Association canadienne des ophtalmologistes pédiatriques et du strabisme

*Michael O'Connor, MD*

Canadian Association for Public Health and Global Ophthalmology

Association canadienne de la santé publique et ophtalmologie mondiale

*Ralf R. Buhrmann, MD & Vivian Yin, MD*

Canadian Cornea, External Disease & Refractive Surgery Society

Société canadienne de la cornée, des maladies externes et de la chirurgie réfractive

*Kashif Baig, MD*

Canadian Glaucoma Society | Société canadienne du glaucome

*Toby Chan, MD & Steven Schendel, MD*

Canadian Neuro-ophthalmology Society | Société canadienne de la neuro-ophtalmologie

*Danah Albreiki, MD & Amadeo Rodriguez, MD*

Canadian Ocular Regenerative Medicine Society

Société canadienne de médecine oculaire régénérative

*Isabelle Brunette, MD & Allan Slomovic, MD*

Canadian Ophthalmic Pathology Society | Société canadienne de la pathologie oculaire

*James Farmer, MD*

Canadian Retina Society | Société canadienne de la rétine

*Varun Chaudhary, MD & Jason Noble, MD*

Canadian Society of Oculoplastic Surgeons | Société canadienne de chirurgie oculoplastique

*Navdeep Nijhawan, MD*

Canadian Uveitis Society | Société canadienne de l'uvéite

*Jean Deschênes, MD*

Canadian Vision Rehabilitation Society | Société canadienne de la réadaptation visuelle

*Micah Luong, MD*

Cataract Surgery | Chirurgie de la cataracte

*Jit Gohill, MD & Devesh Varma, MD*

Council of Canadian Ophthalmology Residents

Le Conseil des résidents en ophtalmologie au Canada

*Milad Modabber, MD*

Physician Wellness | Bien-être des médecins

*Colin Mann, MD*

Surgical Skills Transfer Courses | Cours de transfert de compétences

*Patrick Gooi, MD*

COS Awards of Excellence | Prix d'excellence de la SCO

*Cindy Hutnik, MD*

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## **Allied Health | Sociétés connexes de la santé**

Canadian Society of Ophthalmic Medical Personnel (CSOMP)  
La société canadienne du personnel médical en ophtalmologie (SCPMO)  
*Craig Simms, COMT, CDOS, ROUB, COP*

Canadian Society of Ophthalmic Registered Nurses (CSORN)  
Société canadienne des infirmières et infirmiers en ophtalmologie (SCIIO)  
*Kate Callaghan, RN, BsN*

The Canadian Orthoptic Society (TCOS) | Société canadienne d'orthoptique (LSCO)  
*Meggie Caldwell MSc, OC(C), Mallory Coughlin, MSc, OC(C), COMT & Stacy Liu, MSc, OC(C)*

## **Canadian Ophthalmological Society Staff Personnel de la Société canadienne d'ophtalmologie**

Executive Director & Chief Executive Officer | Chef de direction  
*Jennifer Brunet-Colvey*

Manager, Membership & Meeting Logistics  
Gestionnaire, Adhésions et organisation des réunions  
*Rita Afeltra*

Manager, Communications and Public Affairs  
Gestionnaire, Communications et affaires publiques  
*Joel Baglole*

Manager, Continuing Professional Development  
Gestionnaire, Développement professionnel continu  
*Cheryl Ripley*

Coordinator, Continuing Professional Development  
Coordonnatrice, Développement professionnel continu  
*Maxine Brown*

Coordinator, Meeting Logistics & Exhibits  
Coordonnatrice, Organisation des réunions & d'exposition  
*Christine Bruce*

Coordinator, Governance | Coordonnatrice à la gouvernance  
*Gail Faddies*

Bookkeeper/Accountant (part-time) | Comptable  
*Joyce Davis*

Managing Editor, Canadian Journal of Ophthalmology (part-time)  
Directrice de la rédaction, Journal canadien d'ophtalmologie  
*Suzanne Purkis*



## KEYNOTE SPEAKERS | CONFÉRENCIERS INVITÉS

### Cataract | Cataracte



**Ken Rosenthal,  
MD, FACS**  
Rosenthal Eye Surgery  
New York, New York

### Cataract | Cataracte



**Jonathan D.  
Solomon, MD**  
University of Maryland  
College Park,  
Maryland

### Cornea | Cornée



**Arthur B. Cummings,  
M. Med (Ophth),  
FCS(SA), FRCSEd, PCEO**  
Wellington Eye Clinic  
Dublin, Ireland

### Cornea | Cornée



**Donald T.H. Tan, MD**  
Singapore National  
Eye Centre  
Singapore

### Glaucoma | Glaucome



**Donald C. Hood, PhD**  
Columbia University  
New York, New York

### Glaucoma | Glaucome



**Douglas J. Rhee, MD**  
University Hospitals  
Cleveland, Ohio

### Neuro-ophthalmology Neuro-ophtalmologie



**Aki Kawasaki,  
MD, PhD**  
University of Lausanne  
Lausanne, Switzerland

### Neuro-ophthalmology Neuro-ophtalmologie



**Carlos Torres,  
MD, FRCPC**  
University of Ottawa  
Ottawa, Ontario

### Ocular Regenerative Medicine Médecine oculaire régénérative



**Paolo Rama, MD**  
San Raffaele  
Scientific Institute  
Milan, Italy

### Oculoplastics | Oculoplastie



**Tamara Fountain, MD**  
Rush University  
Medical Center  
Chicago, Illinois



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**Ophthalmic Pathology**  
Pathologie oculaire



**Alan Proia, MD, PhD**  
Duke University  
*Durham, North Carolina*

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**Paediatric Ophthalmology**  
Ophtalmologie pédiatrique



**Erick D. Bothun, MD**  
Mayo Clinic  
*Rochester, Minnesota*

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**Physician Wellness | Bien-être des médecins**



**Richard Mimeault, MD**  
Canadian Medical  
Protective Association  
*Ottawa, Ontario*

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**Public Health and Global Ophthalmology**  
Santé publique et ophtalmologie mondiale



**Suzanne S. Gilbert,  
PhD, MPH**  
Seva Foundation  
*Berkeley, California*

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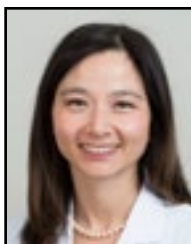
**Retina | Rétine**



**Sunir J. Garg, MD**  
Wills Eye Hospital  
*Philadelphia, Pennsylvania*

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**Retina | Rétine**



**Tara McCannel, MD, PhD**  
UCLA Stein Eye Institute  
*Los Angeles, California*

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**Uveitis | Uvéite**



**Manfred Zierhut, MD**  
University of Tuebingen  
*Tuebingen, Germany*

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**Vision Rehabilitation | Réadaptation visuelle**



**Walter Wittich, PhD,  
FAAO, CLVT**  
Université de Montréal  
*Montréal, Quebec*



GENERAL INFORMATION  
RENSEIGNEMENTS GÉNÉRAUX





[illegible]

## GENERAL INFORMATION

### Registration

Registration desk: Vidéotron Hall, Québec City Convention Centre

|                   |                   |
|-------------------|-------------------|
| Thursday, June 13 | 7:00 AM – 6:00 PM |
| Friday, June 14   | 6:30 AM – 5:30 PM |
| Saturday, June 15 | 6:30 AM – 5:30 PM |
| Sunday, June 16   | 6:30 AM – 3:00 PM |

### Speaker Information and AV Assistance

Speakers may preview their presentations, make any changes, or get assistance from the audiovisual staff on site.

- If necessary, edit and revise your presentation the day before your scheduled talk
- Ensure your presentation meets the accreditation requirements
- Ensure you have included your financial disclosure slide as the second slide of your presentation
- Upload and check your presentation in the speaker preview room
- Confirm it has been received and is scheduled correctly
- Arrive in the session room 15 minutes before the start of your session and check in with the session moderator

The speaker preview room is located in **Room 201 C** of the Québec City Convention Centre and will be open during the following hours:

|                    |                   |
|--------------------|-------------------|
| Wednesday, June 12 | 3:00 PM – 5:00 PM |
| Thursday, June 13  | 7:00 AM – 5:15 PM |
| Friday, June 14    | 6:30 AM – 5:15 PM |
| Saturday, June 15  | 6:30 AM – 5:15 PM |
| Sunday, June 16    | 7:00 AM – 3:45 PM |

### Exhibition Hall Hours

See the latest, most innovative products, services, technology and educational resources available from more than 40 ophthalmic companies. This is the largest exhibition of its kind in Canada. Join us in the exhibit hall for lunch and refreshment breaks.

**This educational meeting would not be possible without the generous support of our exhibitors and supporters.**

Please take the time to visit each exhibiting company.

|                   |                   |
|-------------------|-------------------|
| Friday, June 14   | 9:30 AM – 5:30 PM |
| Saturday, June 15 | 9:30 AM – 5:30 PM |
| Sunday, June 16   | 9:30 AM – 1:30 PM |



#### Wi-Fi Access

Network: COS2019

Password: COS2019

\*Password is case-sensitive

Proudly provided by Novartis





# RENSEIGNEMENTS GÉNÉRAUX

## Inscription

Bureau d'inscription : Hall Vidéotron, Centre des congrès de Québec

|                  |                  |
|------------------|------------------|
| Jeudi 13 juin    | 7 h 00 à 18 h 00 |
| Vendredi 14 juin | 6 h 30 à 17 h 30 |
| Samedi 15 juin   | 6 h 30 à 17 h 30 |
| Dimanche 16 juin | 6 h 30 à 15 h 00 |

## Information pour les conférenciers et assistance audiovisuel

Les conférenciers peuvent prévisualiser leurs présentations, apporter des modifications ou obtenir l'aide du personnel audiovisuel sur place.

- Réviser et corriger votre présentation, si nécessaire, le jour précédent votre présentation
- Assurez-vous que votre présentation est conforme aux normes d'accréditation
- Incluez une diapositive concernant la divulgation des intérêts financiers comme deuxième diapositive de votre présentation
- Téléchargez et vérifiez votre présentation directement dans la salle d'aperçu des conférenciers
- Veuillez confirmer que votre présentation a bien été reçue et qu'elle est bien mise à l'horaire
- Arrivez 15 minutes avant le début de votre séance et signalez votre présence avec l'animateur de la séance

La salle d'aperçu des conférenciers est située dans la **salle 201 C** au Centre des congrès de Québec et sera ouvert pendant les heures suivantes :

|                  |                   |
|------------------|-------------------|
| Mercredi 12 juin | 15 h 00 à 17 h 00 |
| Jeudi 13 juin    | 7 h 00 à 17 h 15  |
| Vendredi 14 juin | 6 h 30 à 17 h 15  |
| Samedi 15 juin   | 6 h 30 à 17 h 15  |
| Dimanche 16 juin | 7 h 00 à 15 h 45  |

## Heures d'exposition

Voyez les derniers développements en matière de services, de technologie et de sources de perfectionnement accessible chez plus de 40 compagnies ophtalmiques. C'est la plus grande exposition du genre au Canada. Rejoignez-nous dans la salle d'exposition chaque jour pour le dîner et les pauses-rafraîchissements.

## Ce congrès n'aurait pas été possible sans le soutien généreux de nos exposants.

S'il-vous-plaît prendre le temps de visiter le kiosque de chaque fournisseur.

|                  |                  |
|------------------|------------------|
| Vendredi 14 juin | 9 h 30 à 17 h 30 |
| Samedi 15 juin   | 9 h 30 à 17 h 30 |
| Dimanche 16 juin | 9 h 30 à 13 h 30 |



### Accès au wi-fi

Réseau : COS2019  
Mot de passe : COS2019  
\*Veuillez respecter les majuscules et les minuscules.  
Gracieusement offert par Novartis



# CONTINUING PROFESSIONAL DEVELOPMENT

## Target Audience

This educational activity is intended for comprehensive and sub-specialist ophthalmologists, basic scientists, residents and fellows in ophthalmology training programs, ophthalmic nurses, ophthalmic assistants, ophthalmic technicians and orthoptists.

## Learning Objectives

By participating in this year's meeting, attendees will:

- Integrate into their practice, knowledge and skills gained from the sharing of Canadian and international research and scientific studies
- Discuss recent advances in the diagnosis and treatment of eye diseases
- Compare and contrast core concepts, new advances and clinical experiences by networking with colleagues and internationally renowned guest speakers
- Enhance or develop new skills through hands-on learning experience in a Surgical Skills Transfer Course
- Appraise new and innovative technology and discuss developments in treatment and medical devices with industry representatives in the Exhibition Hall

## CPD Credits – Maintenance of Certification (MOC) Program

### Section 1 – Group Learning

The 2019 COS Annual Meeting is an accredited group learning activity under Section 1 of the MOC Program as defined by the Royal College of Physician and Surgeons of Canada (RCPSC) and has been approved by the Canadian Ophthalmological Society. Participants may claim up to **30.5 credit hours**.

Through an agreement between the American Medical Association (AMA) and the RCPSC, physicians may convert Royal College MOC credits to AMA PRA Category 1 Credits™.

Live educational activities recognized by the Royal College of Physicians and Surgeons of Canada as Accredited Group Learning Activities (Section 1) are deemed by the European Union of Medical Specialists (UEMS) eligible for ECMEC®.

### Section 2 – Self-Learning

Poster viewing: Learning from poster presentations may be claimed as a Scanning Activity under Section 2, as defined by the RCPSC. To claim credits, you must enter the title of each poster reviewed along with one learning outcome per poster. You may claim 0.5 credits per poster with a documented learning outcome in MAINPORT. See page 123 for ways to facilitate the documentation process.

### Section 3 – Self-Assessment Programs and Simulation

The COS Surgical Skills Transfer Courses are Accredited Simulation Activities (Section 3) as defined by the MOC Program of the Royal College of Physicians & Surgeons of Canada, and approved by the Canadian Ophthalmological Society. You can find further details about COS Surgical Skills Transfer Courses which address a variety of subspecialty areas and take place from June 14 – 16 on pages 104-111.

The COS will offer three Self-Assessment Programs (Section 3) as defined by the MOC Program of the Royal College of Physicians & Surgeons of Canada, and approved by the Canadian Ophthalmological Society:

*On Top of Tomography and Above Aberrometry*, will take place on Saturday, June 15 from 3:45 – 5:15 PM. This Skills Transfer Course requires pre-registration. Details on this session can be found on page 109.

*We Talked About That! Why patients say they were not told and strategies to minimize this*, will take place on Saturday, June 15 from 3:45 – 5:15 PM. This workshop requires pre-registration. Details on this session can be found on page 79.

20/20 OCT, will take place on Sunday, June 16 from 1:30 – 3:00 PM. In this workshop, participants will complete three components; a pre-test, participation in the session, and a post-test. They will work to expand their knowledge around the interpretation of retinal OCT testing in daily clinical practice, while also exploring diagnosis and differentiation of choroidal lesions, and between ARMD and masquerading conditions. More details on this session can be found on page 93.

For more information on Section 3 accredited activities at the 2019 COS Annual Meeting, contact [education@cos-sco.ca](mailto:education@cos-sco.ca).

**CPD Evaluation**

Evaluation is a required component of the RCPSC’s MOC program. You will be asked to complete an evaluation of each session you attended in order to claim your CPD credits. You can claim your CPD credits online. It’s simple and easy to use. Evaluation stations are available onsite at the Québec City Convention Centre or online at [www.cos2019.ca](http://www.cos2019.ca).

How?

- Step 1. Log in with the email address used during registration (if unknown, contact [education@cos-sco.ca](mailto:education@cos-sco.ca))
- Step 2. Evaluate and claim credits for the sessions attended
- Step 3. After evaluating all of the attended sessions, download, print or email a copy of your certificate of attendance
- Step 4. The evaluation site will close on July 26<sup>th</sup>. After this date, your credits will be transferred to your MAINPORT holding area. You will still have access to the site to download, print or email your certificate of attendance.

*Paper certificates of attendance are also available upon request at the registration desk.*

**Mobile App**

Download the free **“Grenadine Event Guide”** app from Google Play or the Apple Store and input the event code **“COS2019”** to access the 2019 program, speakers and more, right from your phone.

# DÉVELOPPEMENT PROFESSIONNEL CONTINU

## Auditoires cibles

Cette activité de formation s'adresse aux ophtalmologistes généralistes et spécialistes, aux spécialistes des sciences fondamentales, aux résidents et chercheurs en ophtalmologie, aux infirmières, aux assistants en ophtalmologie, aux techniciens en ophtalmologie et aux orthoptistes.

## Objectifs d'apprentissage

Le congrès de cette année permettra aux participants de :

- Intégrer à leur pratique des connaissances et des compétences acquises par le partage de recherches et d'études scientifiques canadiennes et internationales
- Discuter des récentes percées dans le diagnostic et le traitement des maladies oculaires
- Comparer les concepts de base, les nouvelles avancées et les expériences cliniques en échangeant avec des collègues et des conférenciers de renommée internationale
- Améliorer leurs compétences ou en acquérir de nouvelles grâce à un cours de transfert de compétences offrant une formation chirurgicale pratique
- Découvrir des technologies nouvelles et innovantes, et discuter des nouveautés dans le traitement et les dispositifs médicaux avec des représentants de l'industrie au salon d'exposition

## Crédits de DPC du programme Maintien du certificat (MDC)

### Crédits de la Section 1 – Apprentissage collectif

Le congrès annuel 2019 de la SCO constitue une activité d'apprentissage collectif agréée conformément à la définition précisée dans le programme de Maintien du certificat (MDC) du Collège royal des médecins et chirurgiens du Canada (CRMCC) approuvé par la Société canadienne d'ophtalmologie. Les participants peuvent cumuler des crédits par heure de participation au congrès, jusqu'à concurrence de **30.5 crédits**.

Conformément à une entente entre l'Association médicale américaine (AMA) et le CRMCC, les médecins qui assisteront au congrès annuel de la SCO 2019 pourront accumuler des crédits PRA de catégorie 1 de l'AMA puisqu'il s'agit d'une activité éducative interactive.

La participation en direct à des activités éducatives reconnues par le Collège royal des médecins et chirurgiens du Canada rend les participants admissibles à des crédits européens de formation continue (ECMEC®) attribués par l'Union européenne des médecins spécialistes (UEMS).

### Crédits de la Section 2 – Autoapprentissage

Exposition des affiches : Le temps passé à l'étude d'affiches peut être inscrit à titre d'activité d'analyse de section 2, comme le stipule le CRMCC. Pour inscrire des crédits, vous devez inscrire le titre de chaque affiche étudiée ainsi qu'un résultat d'apprentissage. Les participants peuvent inscrire 0,5 crédit par affiche s'ils ont consigné le résultat d'apprentissage dans MAINPORT. Voir page 123 pour des moyens de simplifier le nouveau processus de documentation.

### Crédits de la Section 3 – Programmes d'autoévaluations et Simulation

Les Cours de transfert des compétences en chirurgie de la SCO sont des activités de simulation agréées (Section 3) conformes à la définition du programme de MDC du Collège royal des médecins et chirurgiens du Canada et approuvées par la Société canadienne d'ophtalmologie. Veuillez consulter les pages 104-111 pour plus de détails au sujet de ces cours qui portent sur une variété de surspécialités et qui auront lieu du 14 au 16 juin.

La SCO offrira trois programmes d'autoévaluation (Section 3) conformes à la définition du programme de MDC du Collège royal des médecins et chirurgiens du Canada et approuvés par la Société canadienne d'ophtalmologie :

*Supérieurs à la tomographie et l'aberrométrie*, le samedi 15 juin, de 15 h 45 à 17 h 15. Préinscription obligatoire. Consulter la page 109 pour tous les détails.

*Pourtant, nous en avons parlé ! Pourquoi les patients affirment qu'on ne leur a pas dit*, le samedi 15 juin, de 15 h 45 à 17 h 15. Préinscription obligatoire. Consulter la page 79 pour tous les détails.

TCO 20/20, le dimanche 16 juin, de 13 h 30 à 15 h. Cet atelier comportera trois volets : un pré-test, la participation à la séance et un post-test. Les participants travailleront à élargir leurs connaissances en interprétation des examens de TCO rétiniens dans la pratique clinique quotidienne, tout en explorant aussi le diagnostic et la différenciation des lésions choroïdiennes, et la différence entre la DMLA et les troubles de masque. Consulter la page 93 pour tous les détails.

Pour obtenir de plus amples renseignements sur les activités agréées de Section 3 au Congrès annuel 2019 de la SCO, veuillez communiquer avec [education@cos-sco.ca](mailto:education@cos-sco.ca).

### Évaluation des séances de DPC

L'évaluation est une composante obligatoire du programme de MDC du CRMCC. Pour obtenir vos crédits de DPC, vous devez évaluer chacune des séances auxquelles vous avez assisté. Vous pourrez inscrire vos crédits de DPC en ligne. Des postes d'évaluation sont situés sur place au Centre des congrès de Québec. Vous pouvez aussi accéder aux formulaires d'évaluation en ligne à [www.cos2019.ca](http://www.cos2019.ca).

Voici comment procéder :

- Étape 1. Connectez-vous avec l'adresse de courriel que vous avez utilisée pour vous inscrire (si vous ne la connaissez pas, écrire à [education@cos-sco.ca](mailto:education@cos-sco.ca))
- Étape 2. Évaluez les séances auxquelles vous avez assisté et inscrivez les crédits correspondants
- Étape 3. Une fois l'évaluation terminée pour toutes les séances, téléchargez, imprimez ou envoyez par courriel une copie de votre certificat de participation
- Étape 4. Le site d'évaluation fermera le 26 juillet. Après cette date, vos crédits seront transférés dans votre Zone d'attente MAINPORT. Toutefois, vous pourrez encore accéder au site pour télécharger, imprimer ou envoyer par courriel une copie de votre certificat de participation

*Si vous souhaitez obtenir un certificat de participation sur papier, prière d'en faire la demande au comptoir d'inscription.*

### Appli mobile

Téléchargez l'appli gratuite « **Grenadine Event Guide** » à partir du boutique Play Store de Google ou de l'Apple Store. Entrez le code d'événement « **COS2019** » pour accéder au programme, à la liste des conférenciers et bien plus, directement à partir de votre téléphone.

COS ANNUAL GENERAL MEETING  
ASSEMBLÉE GÉNÉRALE ANNUELLE DE LA SCO

Friday, June 14 | Vendredi 14 juin  
12:15 – 1:30 PM • Room | Salle 206 A

COS members: Please plan on attending the Annual General Meeting. We will be highlighting our accomplishments from the previous year and discussing future initiatives. We will also be approving audited financial statements, receiving nominations for the Board of Directors, and considering any other business.

Membres de la SCO : Prévoyez participer à l'Assemblée générale annuelle. Nous mettrons en lumière nos réalisations de l'année précédente et discuterons des initiatives futures. De plus, nous approuverons les états financiers vérifiés, approuverons les nominations au conseil d'administration et envisagerons tout autre sujet.

COMMITTEE, COUNCIL AND BOARD MEETINGS  
RÉUNIONS DES COMITÉS, DES CONSEILS ET DU  
CONSEIL D'ADMINISTRATION

| TIME<br>HEURE                         | MEETING NAME<br>RÉUNION                                      | VENUE<br>LIEU                                        | CONTACT               |
|---------------------------------------|--------------------------------------------------------------|------------------------------------------------------|-----------------------|
| Wednesday, June 12   Mercredi 12 juin |                                                              |                                                      |                       |
| 12:00 – 5:00 PM                       | COS Board of Directors                                       | Hilton Hotel<br>Salle Lauzon Room                    | Yvonne M. Buys        |
| 7:00 – 10:00 PM                       | Canadian Orthoptic Council Board Meeting                     | Hilton Hotel<br>Salle Lauzon Room                    | Ann Haver             |
| Thursday, June 13   Jeudi 13 juin     |                                                              |                                                      |                       |
| 6:30 – 8:00 AM                        | Council on Advocacy                                          | QCCC<br>Room   Salle 205 A                           | Philip Hooper         |
| 8:00 – 10:30 AM                       | Program Directors                                            | Hilton Hotel<br>Salle Sainte-Foy/Portneuf Room       | Mike Sturgeon         |
| 8:00 – 10:30 AM                       | ACUPO                                                        | Hilton Hotel<br>Salle Courville/<br>Montmorency Room | Mike Sturgeon         |
| 8:00 – 3:00 PM                        | Royal College Meeting                                        | Hilton Hotel<br>Salle St. Louis Room                 | Mike Sturgeon         |
| 1:30 – 2:00 PM                        | Council of Canadian Ophthalmology Residents Business Meeting | QCCC<br>Room   Salle 202                             | Milad Modabber        |
| 2:00 – 5:00 PM                        | Eye Bank Committee                                           | Hilton Hotel<br>Salle Beaumont Room                  | Patricia-Ann Laughrea |
| 4:00 – 5:00 PM                        | Maintenance of Certification                                 | Hilton Hotel<br>Salle Dufferin Room                  | Colin Mann            |

|                                           |                                                                                                |                                                |                                    |
|-------------------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------|------------------------------------|
| 4:30 – 5:00 PM                            | Canadian Ophthalmic Pathology Society Business Meeting                                         | QCCC Room   Salle 204 AB                       | James Farmer                       |
| 7:30 – 8:30 PM                            | National Fellowship Directors Meeting                                                          | Hilton Hotel Salle Lauzon Room                 | Gail Ziskos                        |
| 7:00 – 10:30 PM                           | Canadian Orthoptic Council AGM                                                                 | Hilton Hotel Salle Bélair Room                 | Ann Haver                          |
| <b>Friday, June 14   Vendredi 14 juin</b> |                                                                                                |                                                |                                    |
| 8:00 – 10:00 AM                           | CCOTP Meeting                                                                                  | Hilton Hotel Salle Beaumont Room               | Meggie Caldwell                    |
| 12:15 – 1:30 PM                           | COS Annual General Meeting                                                                     | QCCC Room   Salle 206 A                        | Yvonne M. Buys                     |
| 1:30 – 3:30 PM                            | Réunion de l'Association des Orthoptistes du Québec (AOQ)                                      | Hilton Hotel Salle Sainte-Foy/Portneuf Room    | Charlotte Riguidel                 |
| 5:20 – 5:50 PM                            | Canadian Society of Oculoplastic Surgeons Business Meeting                                     | QCCC Room   Salle 204 AB                       | Yvonne Molgat                      |
| 5:30 – 7:00 PM                            | TCOS Executive Meeting                                                                         | Hilton Hotel Salle Beaumont Room               | Meggie Caldwell                    |
| 5:30 – 8:30 PM                            | Canadian National Retinoblastoma Strategy                                                      | Hilton Hotel Salle Beauport Room               | Katherine Paton                    |
| <b>Saturday, June 15   Samedi 15 juin</b> |                                                                                                |                                                |                                    |
| 7:45 – 10:45 AM                           | TCOS Annual General Meeting                                                                    | Hilton Hotel Salle Sainte-Foy/Portneuf Room    | Meggie Caldwell                    |
| 12:15 – 1:30 PM                           | Canadian Glaucoma Society Annual General Meeting<br>(Paid-up CGS members only; Lunch provided) | QCCC Room   Salle 2000 C                       | Catherine Birt                     |
| 3:00 – 3:10 PM                            | Canadian Cornea, External Disease and Refractive Surgery Society Business Meeting              | QCCC Room   Salle 205 BC                       | Kashif Baig                        |
| 5:15 – 6:30 PM                            | Consortium of Universities for Global Health Canada                                            | Hilton Hotel Salle Beauport Room               | Vivian Yin                         |
| <b>Sunday, June 16   Dimanche 16 juin</b> |                                                                                                |                                                |                                    |
| 12:00 – 12:15 PM                          | Ocular Regenerative Medicine Business Meeting                                                  | QCCC Room   Salle 205 BC                       | Allan Slomovic & Isabelle Brunette |
| 12:15 – 1:30 PM                           | COS Annual Meeting Planning Committee Debrief                                                  | QCCC Room   Salle 205 A                        | Mona Harissi-Dagher                |
| 1:00 – 2:00 PM                            | Canadian Vision Rehabilitation Society                                                         | Hilton Hotel Salle Courville/ Montmorency Room | Mark Bona                          |

\*QCCC - Québec City Convention Centre

The COS is on Twitter! Join the conversation by using **#COS2019**.  
La SCO est sur Twitter! Joignez-vous à la conversation en utilisant le mot-clic **#SCO2019**.





## SOCIAL EVENTS | ACTIVITÉS SOCIALES

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### WELCOME RECEPTION | RÉCEPTION D'ACCUEIL

Thursday, June 13 | Jeudi 13 juin

6:00 – 7:00 PM • Salle Villeray/De Tourny Room,  
Hilton Hotel

Please join us for a glass of cheer and help us celebrate the 2019 COS Annual Meeting. This event is a great opportunity to network with our international speakers, special guests, sponsors, and exhibitors. Renew old acquaintances and make new friends with colleagues from across Canada.

Soyez des nôtres à la réception d'accueil pour célébrer le Congrès annuel de la SCO 2019. Cette activité est une occasion idéale pour tisser des liens avec nos conférenciers invités, notre corps professorals, nos commanditaires et nos exposants. Retrouvez des connaissances et nouez de nouvelles amitiés avec des collègues de partout au Canada.

### QUEEN'S UNIVERSITY ALUMNI RECEPTION RÉCEPTION DES DIPLOMÉS DE L'UNIVERSITÉ QUEEN'S



Friday, June 14 | Vendredi 14 juin

5:30 – 7:00 PM • Salle Courville/Montmorency  
Room, Hilton Hotel

We are delighted to invite the Queen's University Department of Ophthalmology alumni to this annual reception. We enjoy this unique opportunity to meet up with old friends and new to discuss how our department has grown, and to find out where our esteemed colleagues are now! Alumni are welcome to bring guests who are not graduates of the program.

Nous sommes ravis d'inviter les diplômés du Département d'ophtalmologie de l'Université Queen's à cette réception annuelle. C'est une occasion unique de retrouver d'anciens amis et de nouer de nouvelles amitiés pour discuter de l'évolution de notre département et apprendre où sont rendus nos estimés collègues ! N'hésitez pas à venir accompagnés de collègues et amis qui ne sont pas diplômés du programme.

# VISION LOSS REHAB/CNIB RECEPTION RÉADAPTATION EN DÉFICIENCE VISUELLE/ RÉCEPTION ORGANISÉE PAR INCA

**VISION LOSS  
REHABILITATION**  
CANADA

**RÉADAPTATION  
EN DÉFICIENCE VISUELLE**  
CANADA

Saturday, June 15 | Samedi 15 juin  
5:15 – 7:00 PM • Salle Courville/Montmorency  
Room, Hilton Hotel

Vision Loss Rehabilitation Canada and CNIB Foundation share an unwavering passion to change what it is to be blind today. As we build a brighter future for people in remote areas, we launched the latest model of the CNIB Eye Van for Northern Ontario in March and are developing a strategy to expand our Eye Van program across Canada. We are working together for change, and value and celebrate our partnership with ophthalmologists. All are welcome to join us to network and hear exciting updates!

Réadaptation en déficience visuelle Canada et la Fondation INCA sont motivées par la même passion : changer ce que cela veut dire que d'être aveugle dans la société d'aujourd'hui. Alors que nous bâtissons un meilleur avenir pour les habitants des régions éloignées, nous avons lancé la clinique mobile d'INCA de dernier modèle dans le Nord de l'Ontario en mars dernier, et nous élaborons une stratégie afin d'offrir notre programme de clinique mobile d'un bout à l'autre du Canada. Nous unissons nos efforts pour changer, valoriser et célébrer notre partenariat avec les ophtalmologistes. Vous êtes invités à vous joindre à nous pour faire du réseautage et obtenir toutes les importantes mises à jour !



SCIENTIFIC PROGRAM  
PROGRAMME SCIENTIFIQUE



THURSDAY | JEUDI





SCIENTIFIC PROGRAM | PROGRAMME SCIENTIFIQUE

THURSDAY SNAPSHOT | LE JEUDI EN COUP D'ŒIL

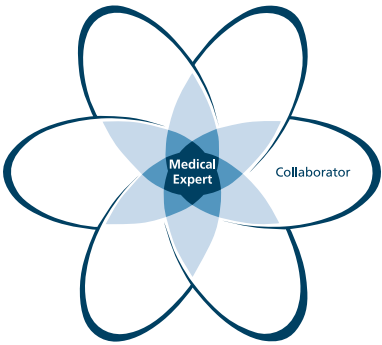
| Québec City Convention Centre                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                               |                                                                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| Room   Salle 204 AB                                                                                                                                              | Room   Salle 205 BC                                                                                                                                                                                                                                                                                                                                                     | Room   Salle 202                                                                                                                                                                                                                                                                                                              | Room   Salle 203                                                                                    |
| <p><b>8:00 AM – 4:30 PM</b></p> <p>Ophthalmic Pathology<br/>Not to Miss!</p> <p><i>Pathologie ophtalmique –<br/>à ne pas manquer !</i></p> <p><b>(p. 34)</b></p> | <p><b>8:00 AM – 4:30 PM</b></p> <p>Une grande première !<br/>A joint symposium of<br/>the Société Française<br/>d’Ophtalmologie and the<br/>Canadian Ophthalmological<br/>Society</p> <p><i>Une grande première !<br/>Symposium conjoint<br/>de la Société française<br/>d’ophtalmologie et la<br/>Société canadienne<br/>d’ophtalmologie</i></p> <p><b>(p. 36)</b></p> | <p><b>1:00 PM – 5:00 PM</b></p> <p>Engaging the Future of<br/>Ophthalmology – How can<br/>we prepare our in-training<br/>physicians for the future?</p> <p><i>Prévoir l’avenir de la<br/>profession – Comment<br/>préparer nos médecins en<br/>formation pour l’ophtal-<br/>mologie de demain ?</i></p> <p><b>(p. 39)</b></p> | <p><b>1:00 PM – 5:00 PM</b></p> <p>TCOS Workshop<br/><i>Atelier LSCO</i></p> <p><b>(p. 116)</b></p> |
| <p><b>6:00 – 7:00 PM</b></p> <p><b>Welcome Reception   Réception d’accueil</b><br/><b>Salle Villeray/De Tourny Room, Hilton Hotel (p. 28)</b></p>                |                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                               |                                                                                                     |

# Ophthalmic Pathology Not to Miss!

## Pathologie ophtalmique – à ne pas manquer !

8:00 AM – 4:30 PM • Room | Salle 204 AB

CANADIAN OPHTHALMIC PATHOLOGY SOCIETY  
SOCIÉTÉ CANADIENNE DE LA PATHOLOGIE OCULAIRE



ROYAL COLLEGE  
OF PHYSICIANS AND SURGEONS OF CANADA | CANMEDS

### LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Discuss important diseases from biopsy/excision specimens that are essential for the ophthalmologist to know
- Highlight current and upcoming techniques in ophthalmic pathology utilized by the pathologist for diagnosis
- Highlight the importance of communication between the clinician and pathologist to obtain the maximum benefit for patient care

### OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Discuter des maladies importantes que doit absolument connaître l'ophtalmologiste, à partir de spécimens issus de biopsie ou d'excision
- Mettre en évidence les techniques actuelles et à venir en pathologie ophtalmique utilisées par le pathologiste pour le diagnostic
- Souligner l'importance de la communication entre le clinicien et le pathologiste pour optimiser les soins aux patients

### KEYNOTE SPEAKER CONFÉRENCIER INVITÉ

Alan Proia MD, PhD

- 8:00** Welcome and introductory remarks  
• *Jim Farmer*

#### Intraocular Pathology/Eyelid Pathology

Moderator | Animateur : Jim Farmer

- 8:05** This is what?? Surprises in ophthalmic pathology • **Jim Farmer**, Michel Belliveau, Vlad Krakty, Steve Gilberg, David Jordan
- 8:20** Ocular and orbital pathology in a child with Blau syndrome • *Alan Proia*
- 8:50** More than meets the eye  
• **Janice Safneck**, Rodney Kellen

- 9:05** Acute subconjunctival pigmentation  
• **Hind M. Alkatan**, A. Al Mahmoud, A. Fathuddin

- 9:20** A curious case of a vitreous hemorrhage  
• **Gabriela Lahaie Luna**, Thomas Lee, Davis Jordan, Jim Farmer, Paula Blanco

- 9:35** The Kansas City shuffle • **Jacob Rullo**, John Rossiter, Martin ten Hove

- 9:50** Just another boring eyelid edema case?  
• **Paula Blanco**, Michel Belliveau, Jim Farmer

- 10:05** Break



**Eyelid/Orbital Pathology**

Moderator | Animatrice : Paula Blanco

**10:35** Progressive puffiness in pediatric eyelids  
• **David Plemel**, Nausherwan Mahmood, Travis Pollock

**10:50** A "Trichi" case of malignant hidradenoma  
• **Scott Anderson**, Kelsey Roelofs, Jaime Badilla

**11:05** Another chalazion? • **Femida Kherani**

**11:20** Sebaceous carcinoma of the eyelid  
• **Michael Mak**, Martin Hyrcza, Ezekiel Weis, Andrzej Kulaga

**11:35** A cute mix-up • **Sylvie Bowden**, Anita Godra, Yeni Yucel, Joe Gasser, Edsel Ing

**11:50 Lunch****Orbital Pathology**

Moderator | Animatrice : Janice Safneck

**1:00** Double trouble: Bilateral lacrimal gland enlargement • **Martin Hyrcza**

**1:15** Rare tumors of the lacrimal gland  
• **Derek Mai**, Ezekiel Weis, Allan Oryschak, Martin Hyrcza, Andrzej Kulaga, Karim Punja

**1:30** EOM mass: Tip of the iceberg  
• **Sara AlShaker**, Imran Jivraj, Eleanor Latta, Christine Elser, Navdeep Nijhawan

**1:45** Proptotic and breathless • **Imran Jivraj**, Lily Zhao, Eli Kisilevsky, Carlo Hojilla, John Harvey, Dan DeAngelis

**2:00** Recalcitrant inflammation in the orbit  
• **Jorge Agi**, Ezekiel Weis

**2:15** Amyloidosis: Series of three cases of conjunctival, orbital and eyelid amyloidosis • **Natalie Doughty**, Martin Hyrcza, Michael Ashenhurst, Allan Oryschak, Andrzej Kulaga

**2:30** Orbitocranial vascular malformation  
• **Ahmed Amayem**, Jorge Agi, Alim Mitha, M. Abbas, M.K. Tso, Ezekiel Weis

**2:45 Break****Anterior Segment Pathology**

Moderator | Animatrice : Ami Wang

**3:15** A case of rapidly progressive bilateral vision loss – A harbinger of the brain  
• **Benjamin G. Jastrzembski**, Cynthia Hawkins, Ajoy Vincent, Elise Héon

**3:30** Am I blue: New entity, or new approach?  
• **Katherine Paton**, T. Ng, R. Crawford, B. Horst

**3:45** Recalcitrant corneal edema • **Ami Wang**, Stephanie Baxter, James Farmer

**4:00** An inflammatory reaction to stored fascia lata 37 years post implantation at age 2 years • **Seymour Brownstein**

**4:15** Ophthalmia nodosa of the conjunctiva  
• **Solin Saleh**, Seymour Brownstein

**4:30** Canadian Ophthalmic Pathology Society business meeting

# Une grande première ! A joint symposium of the Société Française d’Ophtalmologie and the Canadian Ophthalmological Society

8:00 AM – 4:30 PM  
Room 205 BC



This joint symposium is a partnership between the Société Française d’Ophtalmologie and the Canadian Ophthalmological Society and will host lectures in a variety of subspecialty areas, showcasing current research and new advances in techniques, technology and treatment from Canadian and French keynote speakers. Please note that talks will be spoken in French and slide presentations will be shown in English.

## LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Develop knowledge of eye surface assessment and treatments
- Apply diagnostic techniques and new surgical treatments for glaucoma
- Learn the treatment of macular edema and eye inflammation
- Become familiar with dythyroid orbitopathy treatment
- Develop a diagnostic and therapeutic approach to the most relevant neuroophthalmological impairments

## KEYNOTE SPEAKERS

Jean-Marie Giraud MD  
Louis Hoffart MD, PhD, FEBO

Laurent Kodjikian MD, PhD, FEBO  
Jean-Marc Perone MD

**8:00** Introduction • *Mona Harissi-Dagher*

### Session 1: Cornea

Moderators: *Mona Harissi-Dagher*  
*Marie-Claude Robert*

**8:25** Simplified DMEK procedure: Description and clinical results • *Jean-Marc Perone*

**8:55** Treatment of ligneous conjunctivitis • *Isabelle Laliberté*

**9:10** Management of the ocular surface in refractive surgery patients • *Louis Hoffart*

**9:40** Optimization of optical quality of irregular corneas using TCAT laser treatment • *Louis Racine*

**10:00** Complications of blepharoplasty • *Quynh Tram Nguyen*

**10:20** Q & A

### 10:30 Break

### Session 2: Glaucoma

Moderators: *Béatrice Des Marchais*  
*Paul Harasymowycz*

**11:00** Pediatric glaucoma • *Patrick Hamel*

**11:15** Structural progression analysis in glaucoma • *Jean-Marie Giraud*

**11:45** Gel stent for glaucoma treatment: Implantation technique and intraoperative complications • *Younes Agoumi*

**12:00** Q & A

**12:10** Lunch

**Session 3: Retina**

Moderators: *Karim Hammamji*  
*Michel Giunta*

- 1:30** Management of diabetic macular edema in a real-world setting • *Laurent Kodjikian*
- 2:00** Intraocular foreign bodies: A new approach • *Ghassan Cordahi*
- 2:15** Intermediate uveitis • *Katarzyna Biernacki*
- 2:30** Retinal infections • *Simon Couture*
- 2:45** **Break**

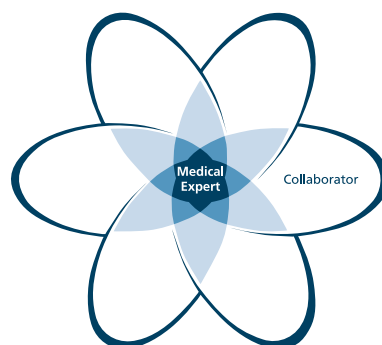
**Session 4: Neuro-ophthalmology and oculoplastics**

Moderators: *Mona Harissi-Dagher*  
*Yvonne Molgat*

- 3:10** Transient monocular vision loss • *Jacinthe Rouleau*
- 3:30** Ischemic optic neuropathy • *Katie Luneau*
- 3:50** Dysthyroidian orbitopathy: Future treatments • *Isabelle Hardy*
- 4:10** Q & A
- 4:25** Thanks
- 4:30** Adjourn

Une grande première !  
Symposium conjoint de  
la Société française  
d'ophtalmologie et la  
Société canadienne  
d'ophtalmologie

8 h 00 à 16 h 30  
Salle 205 BC



**ROYAL COLLEGE** | **CanMEDS**  
OF PHYSICIANS AND SURGEONS OF CANADA

Ce symposium conjoint est un partenariat entre la Société française d'ophtalmologie et la Société canadienne d'ophtalmologie. Il mettra en vedette des conférenciers canadiens et français qui aborderont divers domaines de surspécialité mettant en valeur les recherches en cours et les plus récents progrès dans les techniques, la technologie et les traitements. Veuillez noter que les exposés seront présentés en français et les diapositives, en anglais.

**OBJECTIFS D'APPRENTISSAGE**

À la fin de la session, les participants pourront :

- Parfaire ses connaissances dans l'évaluation de la surface oculaire et ses traitements
- Appliquer les techniques diagnostics et les nouveaux traitements chirurgicaux du glaucome
- Connaître le traitement de l'œdème maculaire et les inflammations oculaires
- Se familiariser avec le traitement de l'orbitopathie dysthyroïdienne
- Développer une approche diagnostique et thérapeutique des atteintes neuro-ophtalmologiques les plus pertinentes

**CONTINUED ON PAGE 38**

## CONFÉRENCIERS INVITÉS

Jean-Marie Giraud MD  
Louis Hoffart MD, PhD, FEBO

Laurent Kodjikian MD, PhD, FEBO  
Jean-Marc Perone MD

**8 h 00** Mot de bienvenue • *Mona Harissi-Dagher*

### Première session : Cornée

Animatrices : *Mona Harissi-Dagher*  
*Marie-Claude Robert*

**8 h 25** Procédure DMEK simplifiée : description et résultats cliniques • *Jean-Marc Perone*

**8 h 55** Le traitement de la conjonctivite ligneuse • *Isabelle Laliberté*

**9 h 10** Gestion de la surface oculaire chez les patients en chirurgie réfractive  
• *Louis Hoffart*

**9 h 40** Optimisation de la qualité optique des cornées irrégulières par l'utilisation de traitement de LASER TCAT • *Louis Racine*

**10 h 00** Les complications de la blepharoplastie  
• *Quynh Tram Nguyen*

**10 h 20** Période de questions

**10 h 30** Pause

### Deuxième session : Glaucome

Animateurs : *Béatrice Des Marchais*  
*Paul Harasymowycz*

**11h 00** Le glaucome pédiatrique • *Patrick Hamel*

**11 h 15** Analyse de la progression structurelle dans le glaucome • *Jean-Marie Giraud*

**11 h 45** Le gel stent dans le traitement du glaucome : technique d'implantation et complications intraoculaires  
• *Younes Agoumi*

**12 h 00** Période de questions

**12 h 10** Dîner

### Troisième session : Rétine

Animateurs : *Karim Hammamji*  
*Michel Giunta*

**13 h 30** Prise en charge thérapeutique de l'OMD en vraie-vie • *Laurent Kodjikian*

**14 h 00** Corps étrangers intra-oculaires : nouvelle approche • *Ghassan Cordahi*

**14 h 15** L'uvéite intermédiaire  
• *Katarzyna Biernacki*

**14 h 30** Les infections rétinienues  
• *Simon Couture*

**14 h 45** Pause

### Quatrième session : Neuro-ophtalmologie et oculoplastie

Animatrices : *Mona Harissi-Dagher*  
*Yvonne Molgat*

**15 h 10** La perte de vision transitoire monoculaire • *Jacinthe Rouleau*

**15 h 30** Les neuropathies optiques ischémiques  
• *Katie Luneau*

**15 h 50** L'orbitopathie dysthyroïdienne : les traitements de demain • *Isabelle Hardy*

**16 h 10** Période de questions

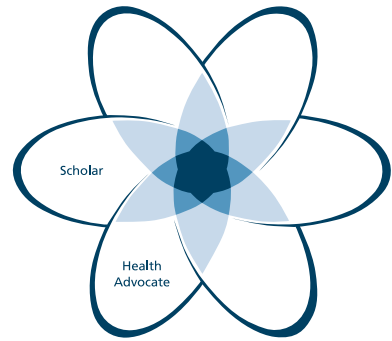
**16 h 25** Remerciements

**16 h 30** Ajourne

# Engaging the Future of Ophthalmology – How can we prepare our in-training physicians for the future? Prévoir l'avenir de la profession – Comment préparer nos médecins en formation pour l'ophtalmologie de demain ?

1:00 – 5:00 PM • Room | Salle 202

**COUNCIL OF CANADIAN OPHTHALMOLOGY RESIDENTS**  
**LE CONSEIL DES RÉSIDENTS EN OPHTALMOLOGIE AU CANADA**



## LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Recognize the complexity associated with global ophthalmology including the many program needs and visiting ophthalmology roles
- Identify the role of comprehensive ophthalmologists in managing patients with low vision
- Outline expected changes in ophthalmology service provision in Canada
- Describe the forthcoming transition to Competence by Design in the field of ophthalmology, as evaluated through a Canadian program's case experience

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Reconnaître la complexité associée à l'ophtalmologie mondiale, y compris les nombreux besoins de programmes et les rôles de consultation en ophtalmologie
- Déterminer le rôle des ophtalmologistes généralistes dans la prise en charge des patients ayant une faible vision
- Décrire les changements attendus dans la prestation des services d'ophtalmologie au Canada
- Décrire la transition à venir vers la compétence par conception dans le domaine de l'ophtalmologie, évaluée au moyen de l'expérience de cas d'un programme canadien

## MODERATORS | ANIMATEURS

Irfan N. Kherani AB, MD  
Milad Modabber MD, MSc

## KEYNOTE SPEAKER

### CONFÉRENCIÈRE INVITÉE

Suzanne S. Gilbert PhD, MPH

CONTINUED ON PAGE 40

**1:00 Lunch**

**1:30** Council of Canadian Ophthalmology Residents business meeting

***The Future of Comprehensive Ophthalmology Care***

**2:00** Global eye care needs: How can I help  
• *Suzanne S. Gilbert*

**2:20** Vision rehabilitation for the comprehensive ophthalmologist  
• *Mark Bona*

**2:40** Panel discussion

**3:00 Break**

***The Future of Ophthalmology Service Provision & Training***

**3:20 Dr. Alain P. Rousseau Award**  
Presented to *Andrei-Alexandru Szigiato*

**3:30** Future of ophthalmology service provision • *Lorne Bellan*

**3:50** Forthcoming changes at the Royal College: Competence by Design  
• *Lorne Bellan*

**4:10** CBME in ophthalmology: The Queen's experiences • *Stephanie Baxter*

**4:30** Panel discussion

**4:50** Closing

**5:00** Adjourn

The COS is on Twitter! Join the conversation by using **#COS2019**.

La SCO est sur Twitter ! Joignez-vous à la conversation en utilisant le mot-clic **#SCO2019**.



@CanEyeMDs

SCIENTIFIC PROGRAM  
PROGRAMME SCIENTIFIQUE



FRIDAY | VENDREDI









Canadian Société  
Ophthalmological canadienne  
Society d'ophtalmologie

EYE PHYSICIANS | MÉDECINS ET CHIRURGIENS  
AND SURGEONS | OPHTALMOLOGISTES  
OF CANADA | DU CANADA

## Support the COS in advocating for the profession

### THANK YOU TO OUR MEMBERS WHO HAVE ALREADY CONTRIBUTED!

It's not too late to make a minimum contribution of \$700.00, or more, to the Canadian Ophthalmological Society's (COS) Public Awareness Fund. By supporting this fund, you're supporting the COS' advocacy and public awareness work at a federal level and empowering the provinces, subspecialty societies and academic community with advocacy tools, training and resources that help raise the profile of the profession. When we stand united, we have a more powerful voice on the issues that affect us and the state of eye and vision health in Canada.

If you would like to contribute to the fund, please contact Rita Afeltra at [rafeltra@cos-sco.ca](mailto:rafeltra@cos-sco.ca) or 613.729.6779 ext. 300.

To learn more, please visit: [www.seethepossibilities.ca](http://www.seethepossibilities.ca)

## Soutenir la SCO dans son plaidoyer pour la profession

### NOUS REMERCIONS TOUS CEUX QUI ONT CONTRIBUÉ AU FONDS DE PROMOTION ET DE SENSIBILISATION PUBLIQUE DE LA SCO !

Il n'est pas trop tard pour faire une contribution minimale de 700 \$ au Fonds de sensibilisation publique de la Société canadienne d'ophtalmologie (SCO). En soutenant ce Fonds, vous soutenez la SCO dans la poursuite de son travail de promotion et de sensibilisation publique au niveau fédéral et d'habilitation des associations provinciales, des sociétés de surspécialité et de la communauté universitaire grâce à des outils, de la formation et des ressources de promotion pour rehausser le profil de la profession. En restant unis, notre voix est plus retentissante sur les questions qui touchent notre profession et l'état de la santé oculaire au Canada.

Si vous désirez contribuer au Fonds, veuillez communiquer avec Rita Afeltra à l'adresse [rafeltra@cos-sco.ca](mailto:rafeltra@cos-sco.ca) ou au numéro 613 729-6779, poste 300, pour obtenir de plus amples renseignements.

Pour en savoir plus, visitez : [www.voirlespossibilites.ca](http://www.voirlespossibilites.ca)

FRIDAY SNAPSHOT | LE VENDREDI EN COUP D'ŒIL

| Québec City Convention Centre |                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                 |                        |                     |                                                                                                                     |                        |
|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------|---------------------------------------------------------------------------------------------------------------------|------------------------|
| Time<br>Heure                 | Room   Salle<br>2000 C                                                                                                                                                                                                                               | Room   Salle<br>204 AB                                                                                                                                                                                          | Room   Salle<br>205 BC | Room   Salle<br>202 | Room   Salle<br>203                                                                                                 | Room   Salle<br>2000 B |
| 6:30 –<br>8:00 AM             |                                                                                                                                                                                                                                                      | <b>Xtreme Cataract Games</b><br>Co-developed<br>accredited<br>symposium<br><br><b>Jeux extrêmes :<br/>la cataracte</b><br>Symposium<br>agrée élaboré<br>conjointement<br><b>Room   Salle 2000 D<br/>(p. 46)</b> |                        |                     |                                                                                                                     |                        |
| 7:00 –<br>8:00 AM             | Continental Breakfast   <i>Petit déjeuner continental</i>                                                                                                                                                                                            |                                                                                                                                                                                                                 |                        |                     |                                                                                                                     |                        |
| 8:00 –<br>10:00 AM            | <b>Current Concepts I</b><br><i>Lifetime<br/>Achievement<br/>Award<br/>Presentation<br/>(9:40 am)</i><br><br><b>Notions courantes I</b><br><i>Présentation de<br/>Reconnaissance<br/>pour l'ensemble<br/>d'une carrière<br/>(9 h 40)<br/>(p. 48)</i> |                                                                                                                                                                                                                 |                        |                     | CSOMP<br>Annual<br>Education<br>Day<br><br><i>Journée<br/>annuelle<br/>d'éducation<br/>de la SCPMO<br/>(p. 117)</i> |                        |
| 10:00 –<br>10:45 AM           | Break in the Exhibit Hall   <i>Pause dans la salle d'exposition</i><br>Poster Presentations   <i>Présentations d'affiches</i>                                                                                                                        |                                                                                                                                                                                                                 |                        |                     |                                                                                                                     |                        |

| Québec City Convention Centre |                                                                                                                                                                                        |                                                                                                                                                                                                                            |                                                                                                                                                                         |                                                                                                                                                                                                                                                  |                                                                                                               |                                                                                                                                                                                 |
|-------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Time<br>Heure                 | Room   Salle<br>2000 C                                                                                                                                                                 | Room   Salle<br>204 AB                                                                                                                                                                                                     | Room   Salle<br>205 BC                                                                                                                                                  | Room   Salle<br>202                                                                                                                                                                                                                              | Room   Salle<br>203                                                                                           | Room   Salle<br>2000 B                                                                                                                                                          |
| 10:45 AM –<br>12:15 PM        | Glaucoma<br>Frontiers<br><br><i>Frontières du<br/>glaucome<br/>(p. 49)</i>                                                                                                             | Course 1:<br>Amuse-bouche<br>– Oculoplastics<br>tidbits to whet<br>your appetite!<br><br><i>Premier service :<br/>Amuse-bouche<br/>– Éléments<br/>d’oculoplastie<br/>pour vous<br/>mettre en<br/>appétit !<br/>(p. 50)</i> | Taming the<br>Rogue Cornea<br><br><i>Apprivoiser<br/>la cornée<br/>réticente<br/>(p. 51)</i>                                                                            | Posterior<br>Uveitis: ACE to<br>Zika<br><br><i>L’uvéïte<br/>postérieure : de<br/>l’ACE au Zika<br/>(p. 52)</i>                                                                                                                                   | CSOMP Annual<br>Education Day<br><br><i>Journée<br/>annuelle<br/>d’éducation de<br/>la SCPMO<br/>(p. 117)</i> | STC: Laser<br>Simulation<br>and Cost-<br>Effective Video<br>Recording<br><br><i>CTC :<br/>Simulation<br/>laser et<br/>enregistrement<br/>vidéo<br/>rentabilisé<br/>(p. 104)</i> |
| 12:15 –<br>1:30 PM            | COS Annual General Meeting (Room 206 A)   Assemblée générale annuelle de la SCO (Salle 206 A)<br>Lunch in the Exhibit Hall   Dîner dans la salle d’exposition                          |                                                                                                                                                                                                                            |                                                                                                                                                                         |                                                                                                                                                                                                                                                  |                                                                                                               |                                                                                                                                                                                 |
| 1:30 –<br>3:00 PM             | Is This OCT<br>Helpful?<br>Conundrums<br>in glaucoma<br>imaging<br><br><i>Cette TCO<br/>est-elle utile ?<br/>Questionne-<br/>ments dans<br/>l’imagerie<br/>du glaucome<br/>(p. 53)</i> | Course 2:<br>Entrée –<br>Getting to<br>the meat of<br>oculoplastics<br>issues!<br><br><i>Deuxième<br/>service : Entrée<br/>– Pièce de<br/>résistance en<br/>oculoplastie !<br/>(p. 54)</i>                                 | Tricky Transplant<br>Time!<br><br><i>Épineuses<br/>transplantations !<br/>(p. 55)</i>                                                                                   | Latest Updates<br>in Uveitis<br><br><i>Dernières<br/>mises à jour sur<br/>l’uvéïte<br/>(p. 56)</i>                                                                                                                                               | CSOMP Annual<br>Education Day<br><br><i>Journée<br/>annuelle<br/>d’éducation de<br/>la SCPMO<br/>(p. 117)</i> | STC: Suturing<br>an Intraocular<br>Lens and How<br>to Save Yourself<br><br><i>CTC : Suture<br/>d’une lentille<br/>intraoculaire et<br/>dépannage<br/>(p. 105)</i>               |
| 3:00 –<br>3:45 PM             | Break in the Exhibit Hall   Pause dans la salle d’exposition                                                                                                                           |                                                                                                                                                                                                                            |                                                                                                                                                                         |                                                                                                                                                                                                                                                  |                                                                                                               |                                                                                                                                                                                 |
| 3:45 –<br>5:15 PM             | Improving Care<br>in Glaucoma<br><br><i>Améliorer le soin<br/>du glaucome<br/>(p. 57)</i>                                                                                              | Course 3:<br>Dessert – Sweet<br>morceaux of<br>oculoplastics<br>knowledge!<br><br><i>Troisième<br/>service :<br/>Dessert – Bribes<br/>de délicieuses<br/>connaissances<br/>en oculoplastie !<br/>(p. 58)</i>               | Cutting Edge<br>Strategies for<br>Common Vision<br>Problems<br><br><i>Stratégies à<br/>la fine pointe<br/>pour les<br/>problèmes de<br/>vision courants<br/>(p. 59)</i> | Do IOU an<br>IOL? ...and<br>other issues<br>in paediatric<br>anterior<br>segment<br><br><i>Intersection ou<br/>réunion pour<br/>une LIO ? ... et<br/>autres questions<br/>touchant<br/>le segment<br/>antérieur en<br/>pédiatrie<br/>(p. 60)</i> | CSOMP Annual<br>Education Day<br><br><i>Journée<br/>annuelle<br/>d’éducation de<br/>la SCPMO<br/>(p. 117)</i> | STC: Anterior<br>Vitrectomy<br><br><i>CTC :<br/>Vitrectomie<br/>antérieure<br/>(p. 106)</i>                                                                                     |



# THE STAKES HAVE NEVER BEEN THIS HIGH!

FRIDAY | VENDREDI

6:30 - 8:00 AM

QUÉBEC CITY CONVENTION CENTRE  
ROOM | SALLE 2000 D

GUILLERMO ROCHA, MD



## SCIENTIFIC PLANNING COMMITTEE COMITÉ DE PLANIFICATION SCIENTIFIQUE



**Iqbal (Ike) Ahmed, MD**  
*Chair*



**Colin Mann, MD**  
*COS representative*

Watch 3 top-tier cataract surgeons go head-to-head at the inaugural Xtreme Cataract Games.

Witness three rounds of video cases, each with increasing complexity, where competitors will:

- Boast about their everyday pearls
- Navigate over a surgical hurdle
- Show off their most Xtreme case!

Games spectators will be able to vote on each round, ask their questions and help designate the Xtreme Cataract Surgeon winner!

## LEARNING OBJECTIVES

At the end of this symposium, participants will be able to:

- Incorporate new clinical pearls and concepts into daily surgical practice
- Identify appropriate strategies to correct procedural mishaps during surgery
- Determine optimal approaches to a complicated case

## AGENDA | HORAIRE

**0600** Breakfast is served

**0630** Welcome and introductions: Iqbal (Ike) Ahmed

**0635** Xtreme Cataract Games

**CanMEDS Role: Medical Expert**

This symposium was co-developed with the Canadian Ophthalmological Society and Alcon in order to achieve scientific integrity, objectivity and balance.



# LES ENJEUX N'ONT JAMAIS ÉTÉ AUSSI ÉLEVÉS !



**KEN ROSENTHAL, MD, FACS**



**DOMINIQUE B. MASSICOTTE, MD**

Regardez trois chirurgiens de la cataracte de premier plan se mesurer lors des premiers Jeux de la cataracte Xtrêmes.

Assistez à trois séries cas sur vidéo, chacune d'eux de plus en plus complexe, où les concurrents :

- se vantent de leurs perles quotidiennes
- surmontent des obstacles chirurgicaux
- montrent leurs cas les plus Xtrêmes !

Les spectateurs des Jeux pourront voter à chaque tour, poser leurs questions et aider à choisir le lauréat du prix Xtrême en chirurgie de la cataracte !

## **OBJECTIFS D'APPRENTISSAGE**

À la fin de la session, les participants pourront :

- Intégrer de nouvelles perles cliniques et de nouveaux concepts dans la pratique chirurgicale quotidienne
- Déterminer les stratégies appropriées pour corriger les incidents procéduraux pendant l'intervention chirurgicale
- Déterminer les façons optimales d'aborder un cas complexe

# Current Concepts I

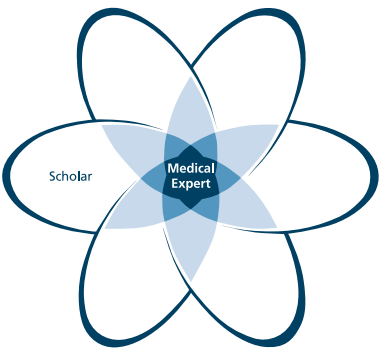
## Notions courantes I

8:00 – 10:00 AM

Room | Salle 2000 C

CANADIAN OPHTHALMOLOGICAL SOCIETY

SOCIÉTÉ CANADIENNE D'OPHTALMOLOGIE



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

### LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Provide an up-to-date and evidence-based review of the diagnosis and management of HLA-B27 anterior uveitis
- Describe the latest evidence for the management of myopia in children with atropine
- Describe an approach to cornea-based and lens-based solutions for the management of presbyopia
- Enhance the interchange of clinical information between the ophthalmologist and the pathologist to optimize patient care

### OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Revoir les données factuelles à jour sur le diagnostic et la prise en charge de l'uvéite antérieure liée à l'antigène HLA-B27
- Décrire les dernières données probantes pour la prise en charge de la myopie chez les enfants à l'aide de l'atropine
- Décrire une approche des solutions basées sur la cornée et basées sur les lentilles pour la gestion de la presbytie
- Améliorer l'échange de renseignements cliniques entre l'ophtalmologiste et le pathologiste afin d'optimiser les soins aux patients

### KEYNOTE SPEAKERS | CONFÉRENCIERS INVITÉS

Arthur B. Cummings MMed(Ophth), FCS(SA),  
FRCSEd, PCEO  
Tamara Fountain MD  
Alan Proia MD, PhD  
Donald T. H. Tan MBBS, FRCSG, FRCSE,  
FRCOphth, FAMS  
Manfred Zierhut MD

### MODERATORS | ANIMATEURS

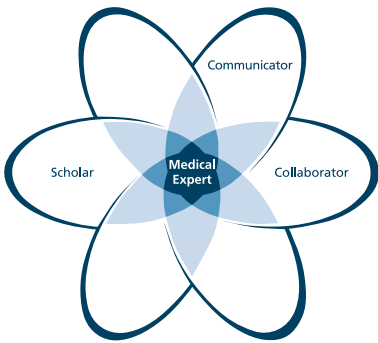
Kashif Baig MD, MBA  
Mona Harissi-Dagher MD

- 8:00** President's welcome • *Yvonne M. Buys*
- 8:03** Remarks from the Sous-ministre adjointe au ministère de la Santé et des Services sociaux • *Lucie Opartny*
- 8:06** Local welcome • *Isabelle Laliberté*
- 8:08** Chair's welcome and introductions • *Mona Harissi-Dagher*
- 8:10** How does a pathologist make a diagnosis? • *Alan Proia*
- 8:20** HLA-B27 "typical" anterior uveitis • *Manfred Zierhut*
- 8:30** Man's best friend (until it's not): Managing periocular dog bite injuries • *Tamara Fountain*

- 8:40** Discussion
- 8:50** Atropine for myopia: Latest outcomes • *Donald T. H. Tan*
- 9:00** My approach to correcting presbyopia • *Arthur B. Cummings*
- 9:10** Discussion
- 9:20** **COS Awards of Excellence:** Paper and poster winners • *Cindy M. L. Hutnik*
- 9:40** **Lifetime Achievement Award**  
Presented to *Hélène Boisjoly*
- 10:00** Adjourn

Glaucoma Frontiers  
Frontières du glaucome  
10:45 AM – 12:15 PM  
Room | Salle 2000 C

CANADIAN GLAUCOMA SOCIETY  
SOCIÉTÉ CANADIENNE DU GLAUCOME



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Describe methods which indicate structural and functional relationships in OCT
- Demonstrate mechanisms by which SLT has trabecular meshwork effects
- Compare reported glaucoma surgical trends to current paradigms

OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Décrire les méthodes qui indiquent les relations structurelles et fonctionnelles dans la TCO
- Démontrer les mécanismes par lesquels la TSL a des effets trabéculaires en réseau
- Comparer les tendances chirurgicales signalées en matière de glaucome aux paradigmes actuels

MODERATORS | ANIMATEURS

Kulbir Gill MD  
Lisa Gould MD

KEYNOTE SPEAKERS | CONFÉRENCIERS INVITÉS

Donald C. Hood PhD  
Douglas J. Rhee MD

- 10:45** Introduction
- 10:47** An objective method that demonstrates excellent structure-function agreement • *Donald C. Hood*
- 10:59**  Comparison of the diagnostic sensitivity of macular ganglion cell layer thickness, peripapillary retinal nerve fibre layer thickness, and Bruch membrane opening-minimum rim width in detecting glaucoma • *Jennifer L. Gao, Jack Quach, Marcelo T. Nicolela, Lesya M. Shuba, Balwantray C. Chauhan, Jayme R. Vianna*
- 11:06**  Intra- and inter-hemispheric processing during binocular rivalry in early glaucoma • *Saba Samet, Esther G. Gonzalez, Graham E. Trope, Luminita Tarita-Nistor*
- 11:13** Discussion
- 11:27** SLT induces trabecular meshwork cell division and migration • *Douglas J. Rhee*

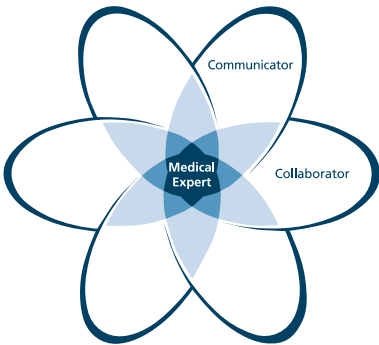
- 11:39** Adherence of glaucoma surgical trials to the World Glaucoma Association guidelines in the era of MIGS • *David J. Mathew, Bryon R. McKay, Alfred Basilio, Avner Belkin, Graham E. Trope, Yvonne M. Buys*
- 11:46** Canadian trends in glaucoma filtration procedures from 2003 to 2016: Potential impact of minimally invasive glaucoma surgery • *Vinay Kansal, James J. Armstrong, Cindy Hutnik*
- 11:53** Surgeon experience as a risk factor for failure for ab-interno gelatin microstent: A Canadian multicentre study • *Jeb A. Ong, Matthew B. Schlenker, Fady Sedarous, Andrei-Alexandru Szigiato, Husayn Gulamhusein, Paul Harasymowycz, Michael Dorey, Maryam Abtahi, Barend Zack, Delan Jinapriya, Iqbal (Ike) Ahmed*
- 12:00** Discussion
- 12:15** Adjourn

Course 1: Amuse-bouche –  
Oculoplastics tidbits to whet  
your appetite

Premier service : Amuse-  
bouche – éléments d’oculoplastie  
pour vous mettre en appétit !

10:45 AM – 12:15 PM  
Room | Salle 204 AB

CANADIAN SOCIETY OF OCULOPLASTIC SURGEONS  
SOCIÉTÉ CANADIENNE DE CHIRURGIE OCULOPLASTIQUE



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CANMEDS

LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Assess and manage patients with orbital foreign bodies
- Assess and manage patients with thyroid eye disease
- Assess and manage patients with orbital cellulitis
- Apply evolving concepts in blepharoplasty surgery
- Apply new knowledge relating to the management of patients with eye lid lesions

OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Évaluer et prendre en charge les patients ayant des corps étrangers intra-orbitaires
- Évaluer et prendre en charge les patients atteints d’ophtalmopathie thyroïdienne
- Évaluer et prendre en charge un patient atteint de cellulite orbitaire
- Appliquer des concepts évolutifs à la blépharoplastie chirurgicale
- Appliquer de nouvelles connaissances à la prise en charge des patients atteints de lésions de la paupière

MODERATORS | ANIMATEURS

Ryan Eidsness MD  
Yvonne Molgat MDCM

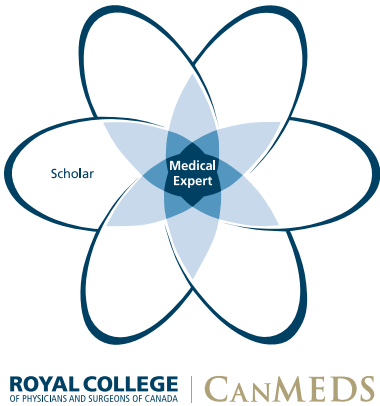
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|-------|--------------------------------------------------------------------------------------------|-------|------------------------------------------------------------------------------------------|
| 10:45 | Introduction                                                                               | 11:32 | Discussion                                                                               |
| 10:48 | Pediatric orbital infections – A primer<br>• <i>Marcele Falcao</i>                         | 11:42 | When is a chalazion not a chalazion?<br>– Identifying lid lesions • <i>Adnan Pirbhai</i> |
| 10:56 | Discussion                                                                                 | 11:50 | Discussion                                                                               |
| 11:06 | Blepharoplasty 101 • <i>Patrick T. Yang</i>                                                | 12:00 | Orbital foreign bodies: When should I<br>panic? • <i>Evan Kalin-Hajdu</i>                |
| 11:14 | Discussion                                                                                 | 12:08 | Discussion                                                                               |
| 11:24 | Thyroid eye disease: Update for the<br>comprehensive ophthalmologist<br>• <i>Edsel Ing</i> | 12:15 | Adjourn                                                                                  |



Taming the Rogue Cornea  
Apprivoiser la cornée réticente

10:45 AM – 12:15 PM  
Room | Salle 205 BC

CANADIAN CORNEA, EXTERNAL DISEASE  
AND REFRACTIVE SURGERY SOCIETY  
SOCIÉTÉ CANADIENNE DE LA CORNÉE, DES  
MALADIES EXTERNES ET DE LA CHIRURGIE RÉFRACTIVE



LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Describe trends in the management of infectious ocular surface disease
- Describe treatment options for corneal ectasia

OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Décrire les tendances dans la gestion des maladies infectieuses touchant la surface de l'œil
- Décrire les options de traitement de l'ectasie cornéenne

MODERATOR | ANIMATEUR

Mark Fava MD

PANELISTS | PANÉLISTES

Mahshad Darvish-Zargar MD  
Setareh Ziai MD

KEYNOTE SPEAKERS | CONFÉRENCIERS INVITÉS

Arthur B. Cummings MMed(Ophth), FCS(SA),  
FRCSEd, PCEO  
Donald T. H. Tan MBBS, FRCSG, FRCSE,  
FRCOphth, FAMS

**10:45** Opening

**10:46** The stage of keratoconus at initial presentation for ophthalmological assessment • **Sangsu Han**, Nirojini Sivachandran, Mark Fava

**10:51** Sjogren's disease associated dry eye: Patient experience and adherence to therapy • **Rookaya Mather**, **Evan Michaelov**, Manav Nayeni, Arpit Dang

**10:56** Subclinical endothelial dysfunction revealed with scleral contact lens wear in patients with past herpes simplex or herpes zoster keratitis • **Jaime C. Sklar**, Vishakha Thakrar, Clara C. Chan

**11:01** Discussion

**11:06** Candidakeratitis: Epidemiology, management, and clinical outcomes • **Grace L. Qiao**, Jennifer Ling, Titus Wong, Sonia N. Yeung, Alfonso Iovieno

**11:11** Antimicrobial and clinical efficacy of Cliradex as compared with I-Lid 'n Lash® hygiene in treating blepharitis: A randomized, outcomes-assessor masked, clinical trial • **Yufeng Chen**, Reginald Tan, Mohammed Taha,

*Pablo Morales, Kashif Baig, George Mintsoulis, Setareh Ziai*

**11:16** Trends in presentation and management of corneal ulcers at an emergency eye care center: A 10-yr review • **Nirojini Sivachandran**, Danyal Saeed, Ryan Cho, Cheryl Main, Forough Farrokhyar, Mark Fava

**11:21** Discussion

**11:26** The refractive correction of keratoconus • **Arthur B. Cummings**

**11:34** Update on corneal crosslinking for ectasia • **Arthur B. Cummings**

**11:42** Discussion

**11:47** Role of DALK in ocular surface disease • **Donald T. H. Tan**

**11:55** The mysterious case of the thinning eye • **Guillermo Rocha**

**12:03** Challenging case of epithelial downgrowth • **Marie-Eve Légaré**

**12:11** Discussion

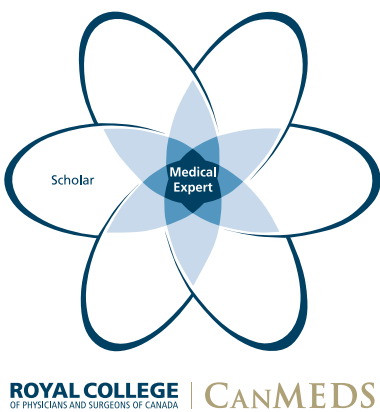
**12:15** Adjourn

# Posterior Uveitis: ACE to Zika

## L'uvéite postérieure : de l'ACE au Zika

10:45 AM – 12:15 PM  
Room | Salle 202

CANADIAN UVEITIS SOCIETY  
SOCIÉTÉ CANADIENNE DE L'UVÉITE



### LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Differentiate between different causes of posterior uveitis
- Apply results of diagnostic testing to differentiate between infectious and inflammatory uveitis
- Integrate basic principles to initiate treatment of common and vision-threatening causes of uveitis

### OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Différencier les causes de l'uvéite postérieure
- Appliquer les résultats des tests diagnostiques pour différencier l'uvéite infectieuse de l'uvéite inflammatoire
- Intégrer les principes de base afin de pouvoir amorcer le traitement des causes courantes de l'uvéite qui menacent la vue

### MODERATOR | ANIMATRICE

Zainab Khan BHSc (Hon), MD

### KEYNOTE SPEAKER | CONFÉRENCIER INVITÉ

Manfred Zierhut MD

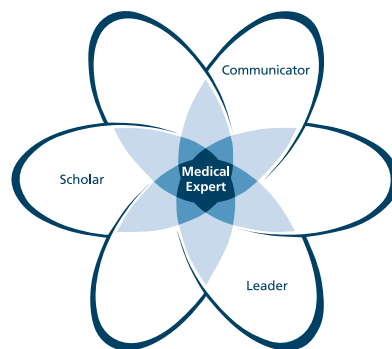
- 10:45** Introduction • *Zainab Khan*
- 10:50** Initial approach to patient with retinitis  
• *Karin Oliver*
- 11:00** TB-associated uveitis • *Marie-Josée Aubin*
- 11:10** Management of herpetic retinitis  
• *Zainab Khan*
- 11:20** A uveitis masquerade • *Chloe Gottlieb*

- 11:30** Review of sarcoidosis  
• *Jean Deschênes*
- 11:45** Always ask the right question  
• *Manfred Zierhut*
- 12:00** Panel discussion
- 12:15** Adjourn

# Is This OCT Helpful? Conundrums in glaucoma imaging

Cette TCO est-elle utile ?  
Questionnements dans  
l'imagerie du glaucome  
1:30 – 3:00 PM

Room | Salle 2000 C



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

**CANADIAN GLAUCOMA SOCIETY**  
**SOCIÉTÉ CANADIENNE DU GLAUCOME**

## LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Demonstrate when OCT is a useful tool for glaucoma management, and scenarios where it may not be helpful
- Assess OCT quality and date without relying on summary statistics

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Démontrer quand la TCO est un outil utile pour la gestion du glaucome et les scénarios dans lesquelles elle pourrait ne pas être utile
- Évaluer la qualité et la date de la TCO sans se fier aux statistiques sommaires

## MODERATORS | ANIMATEURS

Andrew Crichton MD  
Hady Saheb MD, MPH

## KEYNOTE SPEAKER | CONFÉRENCIER INVITÉ

Donald C. Hood PhD

- 1:30** The benefits of looking beyond OCT summary measures/statistics  
• *Donald C. Hood*

- 1:45** OCT panel with challenging cases • *Paul Harasymowycz, Hady Saheb, Andrew Crichton, Donald C. Hood, Marcelo Nicolela*

This workshop will highlight a series of ambiguous cases where the diagnosis and treatment of glaucoma is being considered. The audience will participate by voting for either the diagnosis or treatment of glaucoma, followed by a discussion among a panel of glaucoma experts. These cases will highlight the critical and complementary role of optic nerve head, retinal nerve fibre layer, ganglion cell analysis, visual fields, optic nerve exam and other clinically relevant information.

Cet atelier présentera une série de cas ambigus où l'on cherche à établir un diagnostic et à choisir un mode de traitement du glaucome. L'assistance participera en votant pour le diagnostic ou le traitement, après quoi un panel de spécialistes du glaucome discutera des enjeux. Ces cas mettront en évidence le rôle critique et complémentaire de la tête du nerf optique, de la couche fibreuse du nerf optique, de l'analyse des cellules ganglionnaires, des champs visuels, de l'examen du nerf optique et autres informations cliniquement pertinentes.

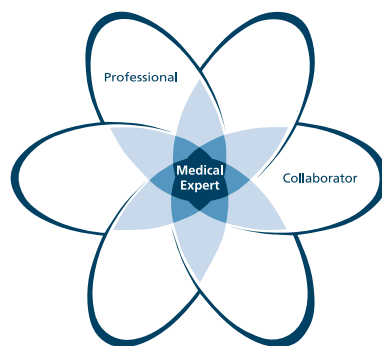
## Course 2: Entrée – Getting to the meat of oculoplastics issues!

Deuxième service : Entrée – pièce de résistance en oculoplastie !

1:30 – 3:00 PM • Room | Salle 204 AB

CANADIAN SOCIETY OF OCULOPLASTIC SURGEONS

SOCIÉTÉ CANADIENNE DE CHIRURGIE OCULOPLASTIQUE



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

### LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Integrate and apply new knowledge and techniques to the management of their oculoplastics patients
- Apply new concepts in the management of oncology patients

### OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Intégrer et appliquer de nouvelles connaissances et techniques à la gestion de leurs patients en oculoplastie
- Appliquer de nouveaux concepts à la prise en charge des patients en oncologie

### MODERATORS | ANIMATEURS

Steven Gilberg MD

Yvonne Molgat MDCM

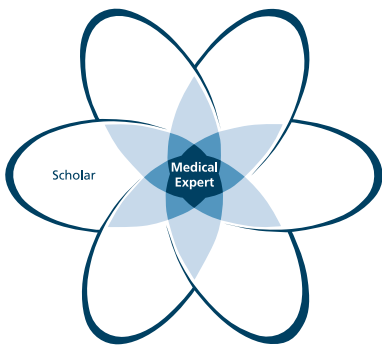
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|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>1:30</b> A case series of orofacial granulomatosis treated with intralesional peribulbar triamcinolone complemented by surgical debulking<br/>• <b>Derek Mai</b>, Julie Morin, Allan Oryschak, Andrew Kulaga, Karim Punja</p> <p><b>1:36</b> Neural network and logistic regression prediction models for giant cell arteritis<br/>• <b>Edsel Ing</b>, Neil Miller, Angela Nguyen, Wanhua Su, Lulu Bursztyn, Meredith Poole, Vinay Kansal, Andrew Toren, Dana Albreiki, Jack Mouhanna, Alla Muladzanov, Mark Gans, Mikael Bernier, Dongho Lee, Colten Wendel, Claire Sheldon, Marc D. Shields, Lorne Bellan, Matthew Lee-Wing, Yasaman Mohadjer, Navdeep Nijhawan, Felix Tyndel, Arun Sundaram, John Chen, Amadeo Rodriguez, Angela Hu, Nader Khalidi, Royce Ing, Samuel W. K. Wong, Martin ten Hove, Nurhan Torun</p> <p><b>1:42</b> Ocular myiasis secondary to dermatobia hominis<br/>• Amit Mishra, <b>Harald Gjerde</b>, Tim Mailman, Curtis Archibald</p> <p><b>1:48</b> A case of fulminant periorbital necrotizing fasciitis and its outcome • <b>Karim Punja</b>, Derek Mai, Alexander Ragan, Brett Byers, Alejandra Ugarte Torres, Michael Ashenhurst</p> <p><b>1:54</b> Discussion</p> <p><b>2:02</b> Incidence and outcomes of retrobulbar hematoma diagnosed by CT in cases of orbital fracture • <b>Georges B. Nassrallah</b>, Matthew Kondoff, Michael Ross, Jean Deschênes</p> | <p><b>2:08</b> Standardized orbital technique in the management of spheno-orbital meningiomas<br/>• <b>Jorge Agi</b>, Ezekiel Weis, Jaime Badilla, Alim P. Mitha, David Steinke</p> <p><b>2:14</b> Radiographically occult breast cancer orbital metastases • <b>Gabriela Lahaie Luna</b>, Imran Jivraj, Navdeep Nijhawan</p> <p><b>2:20</b> Evolving concepts in the management of orbital metastasis • <b>Christian El-Hadad</b>, Maryam Alam, Joshua Dereck M. Ursua, Karina Richani, Bitá Esmaeli</p> <p><b>2:26</b> Discussion</p> <p><b>2:34</b> Clinical experience with proton beam radiotherapy as adjunct therapy for adenoid cystic carcinoma of the lacrimal gland following tumor debulking • <b>Larry Allen</b></p> <p><b>2:40</b> Risk factors for local recurrence, exenteration, metastasis and death from disease for conjunctival squamous cell carcinoma<br/>• <b>Christian El-Hadad</b>, Joshua R. Ford, Shiqiong Xu, Bitá Esmaeli</p> <p><b>2:46</b> Efficacy of hedgehog pathway inhibition for locally advanced basal cell carcinoma (BCC) prior to surgical resection • <b>Vivian T. Yin</b>, Lara Dunn</p> <p><b>2:52</b> Discussion</p> <p><b>3:00</b> Adjourn</p> |
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# Tricky Transplant Time! Épineuses transplantations !

1:30 – 3:00 PM

Room | Salle 205 BC

CANADIAN CORNEA, EXTERNAL DISEASE AND  
REFRACTIVE SURGERY SOCIETY  
SOCIÉTÉ CANADIENNE DE LA CORNÉE, DES MALADIES  
EXTERNES ET DE LA CHIRURGIE RÉFRACTIVE



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

## LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Describe outcomes and complications associated with keratoprotheses
- Describe advances in lamellar keratoplasty

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Décrire les résultats et les complications associés aux kératoprothèses
- Décrire les progrès en kératoplastie lamellaire

## MODERATOR | ANIMATRICE

Mona Harissi-Dagher MD

## KEYNOTE SPEAKER | CONFÉRENCIER INVITÉ

Donald T. H. Tan MBBS, FRCSG, FRCSE,  
FRCOphth, FAMS

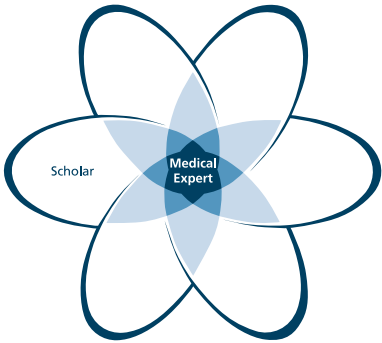
## PANELISTS | PANÉLISTES

Rookaya Mather MD  
Allan Slomovic MD

|      |                                                                                                                                                                                                       |      |                                                                                                  |
|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|--------------------------------------------------------------------------------------------------|
| 1:30 | Opening                                                                                                                                                                                               | 1:55 | <b>Bruce Jackson Lecture:</b> Is corneal transplantation really that good?<br>• Donald T. H. Tan |
| 1:31 | Long-term outcomes following primary Boston keratoprosthesis type 1 implantation • <b>Taylor Nayman</b> , Cristina Bostan, Andrei-Alexandru Szigiato, Mona Harissi-Dagher                             | 2:10 | Discussion                                                                                       |
| 1:36 | Endophthalmitis in patients with Boston keratoprosthesis type I at a Canadian eye care center • <b>Cristina Bostan</b> , Taylor Nayman, Andrei-Alexandru Szigiato, Mona Harissi-Dagher                | 2:14 | Extreme DALK: East side • Asim Ali                                                               |
| 1:41 | Long-term outcomes with bilateral Boston keratoprosthesis type I • <b>Cristina Bostan</b> , Andrei Alexandru Szigiato, Taylor Nayman, Mona Harissi-Dagher                                             | 2:22 | Extreme DALK: West side<br>• Alfonso Iovieno                                                     |
| 1:46 | Use of intraoperative anterior segment optical coherence tomography for Bowman layer transplantation • <b>C. Maya Tong</b> , Rénuka S. Birbal, Philip W. Dockery, Jack S. Parker, Gerrit R. J. Melles | 2:30 | Combining transplants and complex anterior segment cases<br>• Joshua C. Teichman                 |
| 1:51 | Discussion                                                                                                                                                                                            | 2:38 | Discussion                                                                                       |
|      |                                                                                                                                                                                                       | 2:42 | Match-n-patch: Tectonic lamellar keratoplasty • Donald T. H. Tan                                 |
|      |                                                                                                                                                                                                       | 2:50 | The osteo-odonto keratoprosthesis: When all else fails • Donald T. H. Tan                        |
|      |                                                                                                                                                                                                       | 2:58 | Discussion                                                                                       |
|      |                                                                                                                                                                                                       | 3:00 | Adjourn                                                                                          |

Latest Updates in Uveitis  
Dernières mises à jour sur l'uvéïte  
1:30 – 3:00 PM • Room | Salle 202

CANADIAN UVEITIS SOCIETY  
SOCIÉTÉ CANADIENNE DE L'UVÉÏTE



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Integrate new research into clinical practice
- Apply results of diagnostic testing into clinical decision making
- Describe optimal immunosuppressive agents for ocular inflammation
- Recognize rare causes of uveitis

OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Intégrer la nouvelle recherche dans la pratique clinique
- Appliquer les résultats des tests diagnostiques à la prise de décisions cliniques
- Décrire les agents de suppression immunitaire optimaux pour l'inflammation oculaire
- Reconnaître les causes rares de l'uvéïte

MODERATOR | ANIMATEUR

Jean Deschênes MD

KEYNOTE SPEAKER | CONFÉRENCIER INVITÉ

Manfred Zierhut MD

- 1:30** Introduction • *Jean Deschênes*
- 1:35** CAPS syndromes as a prototype of auto-inflammation • *Manfred Zierhut*
- 1:55** The relationship between relapse and remission rates and treatment and disease etiology in patients with non-infectious ocular inflammation • **Saanwalshah S. Saincher**, *Chloe Gottlieb*
- 2:03** Linear chorioretinal lesions as a diagnostic sign of West Nile virus infection • **Marie-Josée Aubin**, *Cristina Bostan, Mariam T. Ibrahim, Mark Bamberger, Karin M. Oliver*
- 2:11** Pediatric intermediate uveitis associated with progressive central nervous system demyelinating lesions • **Maryam I.T. Al-Najjar**, *Eric Fortin*
- 2:19** Acetylation of COX-2: An immunoresolving therapy • **James J. Armstrong**, *Liu Hong, Cindy M. L. Hutnik*



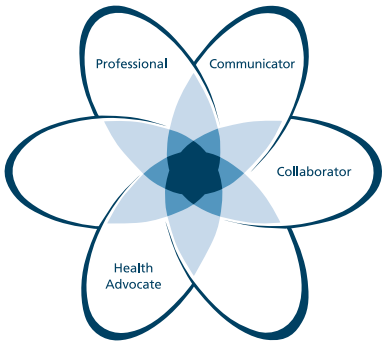
- 2:27** Unilateral reactivation of West Nile virus chorioretinitis with occlusive vasculitis • **Maryam I.T. Al-Najjar**, *Marie-Josée Aubin, Cristina Bostan*
- 2:35** Atypical presentations of ocular toxoplasmosis at a tertiary centre uveitis clinic • **Fargol Mostofian**, *Solin Saleh, Irfan Kherani, Chloe Gottlieb*
- 2:43** OCT as a tool to detect early sympathetic ophthalmia in an asymptomatic patient • **Zainab Khan**, *Sabrina Bergeron, Miguel Burnier, Marie-Josée Aubin*
- 2:50** Panel discussion
- 3:00** Adjourn

# Improving Care in Glaucoma Améliorer le soin du glaucome

3:45 – 5:15 PM

Room | Salle 2000 C

CANADIAN GLAUCOMA SOCIETY  
SOCIÉTÉ CANADIENNE DU GLAUCOME



ROYAL COLLEGE  
OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

## LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Describe patient experiences related to glaucomatous visual loss
- Assess new glaucoma diagnostic testing modalities for reliability
- Describe obligations of physicians in surgical product recalls
- Apply various learning strategies when teaching glaucoma trainees

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Décrire les expériences des patients liées à la perte de vision causée par le glaucome
- Évaluer la fiabilité des nouvelles modalités de diagnostic du glaucome
- Décrire les obligations des médecins dans les rappels de produits chirurgicaux
- Appliquer diverses stratégies d'apprentissage pour enseigner les notions de glaucome aux stagiaires

## MODERATORS | ANIMATEURS

Paul Rafuse MD, PhD  
Graham E. Trope MB, BCh., PhD, FRCOphth

## KEYNOTE SPEAKERS | CONFÉRENCIERS INVITÉS

Donald C. Hood PhD  
Richard Mimeault MD  
Douglas J. Rhee MD

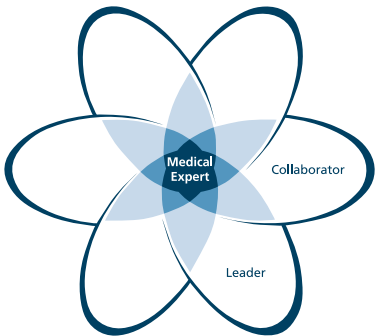
- 3:45** Understanding what patient sees with vision loss from glaucoma  
• *Douglas J. Rhee*
- 3:55** Teaching glaucoma in a Canadian university centre • *Delan Jinapriya*
- 4:02** Competency-based education evaluation tools for resident performance in selective laser trabeculoplasty and Nd:YAG laser peripheral iridotomy • **Danielle D. Wentzell**, *Christopher Hanson, Helen Chung, Patrick Gooi*
- 4:09** Discussion
- 4:18** Summary of CADTH MIGS review  
• *Jamie Taylor*

- 4:25** Physicians obligations in surgical product recalls • *Richard Mimeault*
- 4:32** Marijuana and glaucoma • *Catherine Birt*
- 4:39** Discussion
- 4:48** Four questions key to improving detection and understanding of glaucomatous damage • *Donald C. Hood*
- 4:58** SITA faster and new visual field protocols  
• *Brennan Eadie*
- 5:05** Discussion
- 5:15** Adjourn

# Course 3: Dessert – Sweet morceaux of oculoplastics knowledge

Troisième service : Dessert –  
bribes de délicieuses  
connaissances en oculoplastie !

3:45 – 5:15 PM • Room | Salle 204 AB



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CANMEDS

CANADIAN SOCIETY OF OCULOPLASTIC SURGEONS  
SOCIÉTÉ CANADIENNE DE CHIRURGIE OCULOPLASTIQUE

## LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Integrate and apply new knowledge and techniques to the management of their oculoplastics patients
- Integrate risk management concepts into their practice
- Review outcomes in nasolacrimal duct surgery

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Intégrer et appliquer de nouvelles connaissances et techniques à la gestion de leurs patients en oculoplastie
- Intégrer les concepts de gestion du risque dans leur pratique
- Examiner les résultats de la chirurgie du canal nasolacrimal

## MODERATORS | ANIMATEURS

Isabelle Hardy MD,  
Navdeep Nijhawan MD, DABO

## KEYNOTE SPEAKER | CONFÉRENCIÈRE INVITÉE

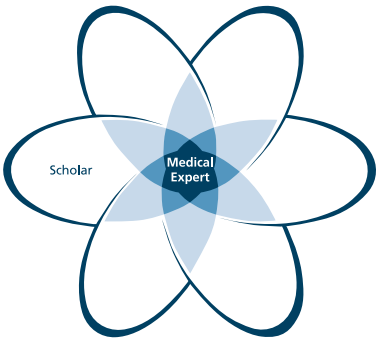
Tamara Fountain MD

- 3:45** Management of a large congenital hemangioma obstructing visual axis  
• **Sara AlShaker**, Imran Jivraj, Haiying Chen, Prakash Muthusami, John Phillips, Dan DeAngelis
- 3:51** Defining the dimensions of the pediatric conjunctival fornix • **Imran Jivraj**, Ahsen Hussain, Yaping Jin, Dan DeAngelis, Asim Ali
- 3:57** DCR in children under the age of four years: Outcomes and complications  
• **Kailun Jiang**, Valerie Juniât, Geoff Rose, Hannah Timlin, Jimmy Uddin, Yassir Abourayyah, Swan Kang, Vijay Wagh, David Verity
- 4:03** Discussion
- 4:11** Success rates of 95 consecutive endoscopic endonasal dacrocystorhinostomy with and without preservation of nasal mucosal flaps  
• **Vinay Kansal**, Ali Jamal, Rick Jaggi

- 4:17** The association of gastro esophageal reflux GERD and primary acquired nasolacrimal duct obstruction PANDO  
• **John Harvey**, Sonul Mehta, Ahsen Hussain, Niro Sivachandran
- 4:23** Oculoplastic considerations in keratoconjunctivitis sicca • **Mišo Gostimir**, Ahsen Hussain
- 4:29** Discussion
- 4:37** Keynote speaker introduction: Dr. Tamara Fountain
- 4:39** Pilots and physicians, passengers and patients: Making high stakes decisions under pressure • **Tamara Fountain**
- 5:04** Discussion
- 5:15** **CSOPS Lifetime Achievement Award**  
Presented to James H. Oestreicher
- 5:20** Canadian Society of Oculoplastic Surgeons business meeting



Cutting Edge Strategies  
for Common Vision Problems  
Stratégies à la fine pointe pour  
les problèmes de vision courants  
3:45 – 5:15 PM  
Room | Salle 205 BC



CANADIAN CORNEA, EXTERNAL DISEASE AND  
REFRACTIVE SURGERY SOCIETY  
SOCIÉTÉ CANADIENNE DE LA CORNÉE,  
DES MALADIES EXTERNES ET DE LA CHIRURGIE RÉFRACTIVE

ROYAL COLLEGE  
OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Describe advances in the surgical management of paediatric and adult corneal disease
- Describe innovations in presbyopia management

OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Décrire les progrès réalisés dans la prise en charge chirurgicale des maladies cornéennes chez l'enfant et l'adulte
- Décrire les innovations en matière de gestion de la presbytie

MODERATOR | ANIMATEUR

Stephen Brodovsky MD

PANELISTS | PANÉLISTES

Anuj Bhargava MD

Sonia Yeung MD

KEYNOTE SPEAKER | CONFÉRENCIER INVITÉ

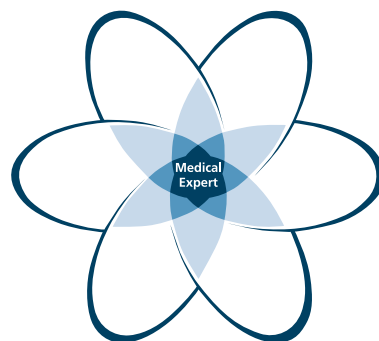
Arthur B. Cummings MMed(Ophth), FCS(SA),  
FRCSEd, PCEO

|             |                                                                                                                                                                                                                                                             |             |                                                                                             |
|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------------------------------------|
| <b>3:45</b> | Opening                                                                                                                                                                                                                                                     | <b>4:06</b> | What's new in keratoconus management<br>• <i>Louis Racine</i>                               |
| <b>3:46</b> | Change in transplant rates for keratoconus treatment since the introduction of corneal collagen crosslinking in Ontario and British Columbia • <b>Colten Wendel</b> , Jaime C. Sklar, Angela Zhang, Nir Sorkin, Clara C. Chan, Sonia Yeung, Alfonso Iovieno | <b>4:14</b> | What's new in ocular surface management<br>• <i>Jamie Bhamra</i>                            |
| <b>3:51</b> | Outcomes of cyanoacrylate adhesive application for corneal perforations: A retrospective case series • <b>Sonia Anchouche</b> , Mona Harissi-Dagher, Laura Segal, Louis Racine, Marie-Claude Robert                                                         | <b>4:22</b> | Latest strategies in paediatric crosslinking<br>• <i>Kamiar Mireskandari</i>                |
| <b>3:56</b> | Amniotic membrane transplantation for Stevens-Johnson syndrome/toxic epidermal necrolysis: Review of adult and paediatric cases in Toronto • <b>Yelin Yang</b> , Hall Chew, Kamiar Mireskandari, Simon Fung, Asim Ali                                       | <b>4:30</b> | Discussion                                                                                  |
| <b>4:01</b> | Discussion                                                                                                                                                                                                                                                  | <b>4:35</b> | Allotex for presbyopia<br>• <i>Arthur B. Cummings</i>                                       |
|             |                                                                                                                                                                                                                                                             | <b>4:43</b> | Basing presbyopia-correcting IOL selection on objective data<br>• <i>Arthur B. Cummings</i> |
|             |                                                                                                                                                                                                                                                             | <b>4:51</b> | Discussion                                                                                  |
|             |                                                                                                                                                                                                                                                             | <b>4:56</b> | OCT-guided corneal transplants<br>• <i>Julia Talajic</i>                                    |
|             |                                                                                                                                                                                                                                                             | <b>5:04</b> | Video-based pot pourri of paediatric surgical cornea cases • <i>René Dinh</i>               |
|             |                                                                                                                                                                                                                                                             | <b>5:12</b> | Discussion                                                                                  |
|             |                                                                                                                                                                                                                                                             | <b>5:15</b> | Adjourn                                                                                     |

# Do IOU an IOL? ...and other issues in paediatric anterior segment

Intersection ou réunion pour une LIO ? ... et autres questions touchant le segment antérieur en pédiatrie

3:45 – 5:15 PM • Room | Salle 202



ROYAL COLLEGE  
OF PHYSICIANS AND SURGEONS OF CANADA | CANMEDS

CANADIAN ASSOCIATION OF PAEDIATRIC  
OPHTHALMOLOGY AND STRABISMUS  
ASSOCIATION CANADIENNE DES OPHTALMOLOGISTES  
PÉDIATRIQUES ET DU STRABISME

## LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Realistically appraise the success and safety of paediatric glaucoma and cataracts surgery
- Contrast the presentation and treatment of HSV in paediatric patients compared to adults
- Explain the rationale for IOL exchange in a paediatric patient
- Plan effectively for a safe and efficient paediatric IOL exchange surgery

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Évaluer de façon réaliste le succès et la sécurité de la chirurgie pédiatrique du glaucome et de la cataracte
- Comparer la présentation et le traitement du VHS chez les patients pédiatriques par rapport aux adultes
- Expliquer la raison d'être d'un échange de LIO chez un patient pédiatrique
- Planifier efficacement une intervention chirurgicale d'échange de LIO pédiatrique sécuritaire et efficace

## MODERATORS | ANIMATEURS

Michael O'Connor MD  
Sapna Sharan MD

## KEYNOTE SPEAKER | CONFÉRENCIER INVITÉ

Erick D. Bothun MD

**3:45** Introduction

**3:46** Goniotomy for the childhood glaucomas: A 19-year outcome study • **Sharon Armarnik**, Stephen Farrell, Christopher J Lyons

**3:55** The surgical outcomes of penetrating keratoplasty and Ahmed glaucoma valve implantation in complex anterior segment eye diseases in paediatric patients • **Mansoureh Bagheri**, Kamiar Mireskandari, Nasrin Najm Tehrani, Asim Ali

**4:04** Outcomes and complications of simultaneous bilateral cataract surgery (SBCS) in children – A 10-year review • **Vishaal Bhambhwani**, Sina Khalili, Nasrin Tehrani, Asim Ali, Kamiar Mireskandari

**4:13** Discussion

**4:23** HSV in the pediatric patient: Special considerations • **Marie-Claude Robert**

**4:41** The IOL that didn't last: Reasons and tips for IOL exchange in paediatric patients • **Erick D. Bothun**

**5:03** Discussion

**5:15** Adjourn

SCIENTIFIC PROGRAM  
PROGRAMME SCIENTIFIQUE



SATURDAY | SAMEDI





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patient treatments and technological advancements.

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VoirLesPossibilites.ca

Proposée par La Société canadienne d'ophtalmologie

# SATURDAY SNAPSHOT

## LE SAMEDI EN COUP D'ŒIL

| Québec City Convention Centre |                                                                                                                                                      |                                                                                                                                                                                                                                                        |                                                                                                                                               |                                                                                                                                                                |                                                                                                                                                 |                                                                                                                              |
|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|
| Time<br>Heure                 | Room   Salle<br>2000 C                                                                                                                               | Room   Salle<br>204 AB                                                                                                                                                                                                                                 | Room   Salle<br>205 BC                                                                                                                        | Room   Salle<br>202                                                                                                                                            | Room   Salle<br>203                                                                                                                             | Room   Salle<br>2000 B                                                                                                       |
| 6:30 –<br>8:00 AM             |                                                                                                                                                      | <b>Survivor:<br/>Cataract Island</b><br>Co-developed<br>accredited<br>symposium<br><br><b>Les<br/>aventuries : l'île<br/>de la cataracte</b><br>Symposium<br>agrée élaboré<br>conjointement<br><b>Room   Salle<br/>2000 D<br/>(p. 66)</b>              |                                                                                                                                               |                                                                                                                                                                |                                                                                                                                                 |                                                                                                                              |
| 7:00 –<br>8:00 AM             | Continental Breakfast   <i>Petit déjeuner continental</i>                                                                                            |                                                                                                                                                                                                                                                        |                                                                                                                                               |                                                                                                                                                                |                                                                                                                                                 |                                                                                                                              |
| 8:00 –<br>10:00 AM            | Current<br>Concepts II<br><br><i>Notions<br/>courantes II</i><br><b>(p. 68)</b>                                                                      |                                                                                                                                                                                                                                                        |                                                                                                                                               |                                                                                                                                                                | CSORN: Patient<br>Advocacy &<br>Leadership<br><br><i>SCIIO : Défense<br/>des intérêts<br/>des patients et<br/>leadership</i><br><b>(p. 118)</b> |                                                                                                                              |
| 10:00 –<br>10:45 AM           | Break in the Exhibit Hall   <i>Pause dans la salle d'exposition</i><br>Poster Presentations   <i>Présentations d'affiches</i>                        |                                                                                                                                                                                                                                                        |                                                                                                                                               |                                                                                                                                                                |                                                                                                                                                 |                                                                                                                              |
| 10:45 AM –<br>12:15 PM        | New Releases!<br>The Future of<br>Glaucoma<br>Management<br><br><i>Du nouveau !<br/>L'avenir de<br/>la gestion du<br/>glaucome</i><br><b>(p. 69)</b> | Reducing Risk<br>and Revamping<br>Best Practice in<br>Retinal Disease<br>Management<br><br><i>Réduire les<br/>risques et revoir<br/>les pratiques<br/>exemplaires<br/>en matière<br/>de gestion<br/>des maladies<br/>rétiniennes</i><br><b>(p. 70)</b> | What's Trending<br>in Refractive<br>Surgery?<br><br><i>Quelles sont<br/>les tendances<br/>en chirurgie<br/>réfractive ?</i><br><b>(p. 72)</b> | Is That a Child<br>in my Clinic?!<br>Useful things to<br>know<br><br><i>Un enfant dans<br/>ma clinique ??<br/>Choses utiles à<br/>savoir</i><br><b>(p. 73)</b> | CSORN: Patient<br>Advocacy &<br>Leadership<br><br><i>SCIIO : Défense<br/>des intérêts<br/>des patients et<br/>leadership</i><br><b>(p. 118)</b> | STC : Anterior<br>Vitrectomy<br>(repeat)<br><br><i>CTC :<br/>Vitrectomie<br/>antérieure<br/>(reprise)</i><br><b>(p. 106)</b> |

| Québec City Convention Centre |                                                                                                                                                                      |                                                                                                       |                                                                                                                                                                                                                                                                      |                                                                                                                                                                  |                                                                                                                     |                                                                                                                                                                                                    |
|-------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Time<br>Heure                 | Room   Salle<br>2000 C                                                                                                                                               | Room   Salle<br>204 AB                                                                                | Room   Salle<br>205 BC                                                                                                                                                                                                                                               | Room   Salle<br>202                                                                                                                                              | Room   Salle<br>203                                                                                                 | Room   Salle<br>2000 B                                                                                                                                                                             |
| 12:15 –<br>1:30 PM            | President’s Luncheon (Invite Only)   <i>Dîner de la Présidente (sur invitation seulement)</i><br>Lunch in the Exhibit Hall   <i>Dîner dans la salle d’exposition</i> |                                                                                                       |                                                                                                                                                                                                                                                                      |                                                                                                                                                                  |                                                                                                                     |                                                                                                                                                                                                    |
| 1:30 –<br>3:00 PM             | Toolbox for Tough Cases<br><br><i>Boîte à outils pour les cas difficiles (p. 74)</i>                                                                                 | The Art and Science of Medical Retina<br><br><i>L’art et la science de la rétine médicale (p. 75)</i> | DMEK and Tech: Improving outcomes with techniques and technology<br><br><i>La DMEK et la technologie : améliorer les résultats grâce aux techniques et à la technologie (p. 76)</i>                                                                                  | Looking Through the Pupils of Pupils: Paediatric retina, neuro and surgery<br><br><i>La pupille des petits : rétine, neuro et chirurgie pédiatriques (p. 77)</i> | CSORN: Patient Advocacy & Leadership<br><br><i>SCIIO : Défense des intérêts des patients et leadership (p. 118)</i> | STC: Microinvasive Glaucoma Surgery and Adjuncts to Cataract Surgery<br><br><i>CTC : Chirurgie micro-invasive du glaucome et procédures connexes pendant la chirurgie de la cataracte (p. 107)</i> |
| 3:00 –<br>3:45 PM             | Break in the Exhibit Hall   <i>Pause dans la salle d’exposition</i>                                                                                                  |                                                                                                       |                                                                                                                                                                                                                                                                      |                                                                                                                                                                  |                                                                                                                     |                                                                                                                                                                                                    |
| 3:45 –<br>5:15 PM             | Pseudoex Summit<br><br><i>Sommet pseudoex (p. 78)</i>                                                                                                                |                                                                                                       | We Talked About That! Why patients say they were not told and strategies to minimize this<br><br><i>Pourtant, nous en avons parlé ! Pourquoi les patients affirment qu’on ne leur a pas dit, et stratégies pour minimiser ce problème Room   Salle 205 A (p. 79)</i> | Alignment Assignment: Strabismus and amblyopia<br><br><i>Devoir d’alignement : strabisme et amblyopie (p. 80)</i>                                                | CSORN: Patient Advocacy & Leadership<br><br><i>SCIIO : Défense des intérêts des patients et leadership (p. 118)</i> | STC: On Top of Tomography and Above Aberrometry<br><br><i>CTC : Supérieurs à la tomographie et à l’aberrométrie Room   Salle 206 A (p. 109)</i>                                                    |
| Evening<br>Soirée             | Subspecialty Dinners   <i>Soupers des sociétés affiliées</i>                                                                                                         |                                                                                                       |                                                                                                                                                                                                                                                                      |                                                                                                                                                                  |                                                                                                                     |                                                                                                                                                                                                    |



# **SURVIVOR**

## **CATARACT ISLAND**

---

### **LES AVENTURIES**

#### **L'ÎLE DE LA**

#### **CATARACTE**

**2 TRIBES**  
**6 SURGEONS**  
**3 CHALLENGES**

**2 TRIBUS**  
**6 CHIRURGIENS**  
**3 DÉFIS**

**On a remote and hostile island**  
filled with unexpected vitreous, dislocated lenses, weak zonules  
and wild untamed iris, six castaway surgeons must battle for survival.

**Sur une île lointaine et hostile**  
peuplée de vitrés inattendus, de lentilles disloquées, de zonules faibles  
et d'iris sauvages, six chirurgiens naufragés doivent se battre pour survivre.

**WHO WILL PREVAIL?**  
**QUI VA L'EMPORTER?**



**Saturday | Samedi**  
**6:30 – 8:00 AM**  
**Room | Salle 2000 D**



Breakfast will  
be served  
at 6:00 AM.

**CANMEDS ROLES: Medical Expert, Leader**



**Host | Hôte**

Devesh Varma, MD  
Mississauga, ON  
Chair

**TRIBAL COUNCIL  
CONSEIL TRIBAL**



Colin Mann, MD  
Bridgewater, NS  
COS Representative



Priya Gupta, MD  
Surrey, BC

## THE CHALLENGES | LES DÉFIS

- Your Femto Machine is Free!  
How Would You Use it in Your Practice?  
*Dr. Matt B. Schlenker vs. Dr. David B. Yan*
- 25 Years of Multifocal Lenses  
– Is ~5% Uptake Appropriate?  
*Dr. Marino Discepolo vs. Dr. Jonathan Solomon*
- Your Best Phaco Pearl for Everyday Practice  
*Dr. Georges Durr vs. Dr. Sébastien Gagné*

## LEARNING OBJECTIVES

At the end of this symposium, participants will be able to:

- Critically appraise the advantages and limitations of using femtosecond laser in cataract surgery
- Evaluate the opportunities and challenges in using multifocal intraocular lenses in cataract surgery
- Integrate experts' surgical pearls for cataract surgery in their own practice

This session was co-developed by the Canadian Ophthalmological Society and Johnson & Johnson Vision and was planned to achieve scientific integrity, objectivity and balance.

## THE TRIBES | LES TRIBUS

### IGUAZU



Sébastien Gagné, MD  
Montréal, QC



Matt B. Schlenker, MD  
Toronto, ON



Marino Discepolo, MD  
Montréal, QC

### TUGELA



Georges Durr, MD  
Toronto, ON



David B. Yan, MD  
Toronto, ON



Jonathan Solomon, MD  
Washington, DC

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Faire l'évaluation critique des avantages et des limites de l'utilisation du laser femtoseconde en chirurgie de la cataracte
- Évaluer les possibilités et les défis liés à l'utilisation de lentilles intraoculaires multifocales en chirurgie de la cataracte
- Intégrer les perles chirurgicales des experts pour la chirurgie de la cataracte dans leur propre pratique

Le présent symposium a été élaboré conjointement avec la Société canadienne d'ophtalmologie et Johnson & Johnson Vision de manière à respecter les principes d'intégrité, d'objectivité et d'équilibre scientifiques.

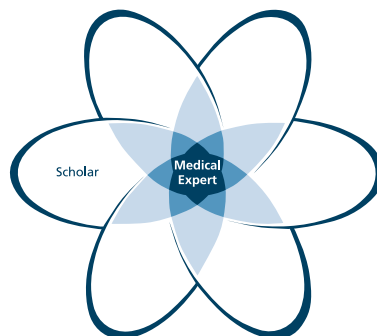
# Current Concepts II

## Notions courantes II

8:00 – 10:00 AM

Room | Salle 2000 C

CANADIAN OPHTHALMOLOGICAL SOCIETY  
SOCIÉTÉ CANADIENNE D'OPHTALMOLOGIE



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

### LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Provide an up-to-date and evidence-based review of the diagnosis and management of diabetic macular edema
- Describe the legal basis for informed consent
- Recognize the central importance of trust in the informed consent process
- Weigh the best evidence regarding the risks and benefits of IOL implantation in early life

### OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Revoir les données factuelles à jour sur le diagnostic et la prise en charge de l'œdème maculaire diabétique
- Décrire le fondement juridique du consentement éclairé
- Reconnaître l'importance centrale de la confiance dans le processus du consentement éclairé
- Déterminer les meilleures données probantes concernant les risques et les avantages de l'implantation d'une LIO chez un enfant en bas âge

### MODERATORS | ANIMATEURS

Mona Harissi-Dagher MD  
Steven Schendel MD

### KEYNOTE SPEAKERS | CONFÉRENCIERS INVITÉS

Erick D. Bothun MD  
Donald C. Hood PhD  
Richard Mimeault MD  
Douglas J. Rhee MD  
Ken Rosenthal MD, FACS

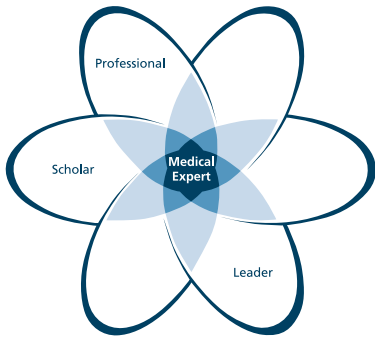
**8:00** Introduction • *Mona Harissi-Dagher*  
**8:02** COS Advocacy Update • *Phil Hooper*  
**8:12** Discussion  
**8:15** Informed consent: Not just a signature  
• *Richard Mimeault*  
**8:29** IOL glistenings: Old news or still a  
concern? • *Ken Rosenthal*  
**8:41** Discussion  
**8:51** Oh baby: How young is too young for an  
IOL? • *Erick D. Bothun*

**9:01** **Canadian Journal of Ophthalmology**  
**Lecture** - The chicken vs. egg problem:  
Lessons from structure vs. function in  
glaucoma • *Donald C. Hood*  
**9:24** Discussion  
**9:31** **COS – Dr. Harold Stein Innovator**  
**Lecture** - Conquering intraocular  
pressure: New pharmacologic and  
surgical approaches • *Douglas J. Rhee*  
**9:51** Discussion  
**10:00** Adjourn

New Releases! The future  
of glaucoma management  
Du nouveau ! L'avenir de  
la gestion du glaucome

10:45 AM – 12:15 PM  
Room | Salle 2000 C

CANADIAN GLAUCOMA SOCIETY  
SOCIÉTÉ CANADIENNE DU GLAUCOME



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Describe mode of action of novel glaucoma therapeutics
- Differentiate between new minimally invasive glaucoma surgical devices
- Apply surgical implantation techniques demonstrated in session to attendee's own practice

OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Décrire le mode d'action des nouveaux traitements contre le glaucome
- Comparer les nouveaux dispositifs pour la chirurgie du glaucome à effraction minimale
- Appliquer à la pratique du participant les techniques d'implantation chirurgicale démontrées au cours de la séance

MODERATORS | ANIMATEURS

Oscar Kasner MD  
Nir Shoham-Hazon MD

**10:45** Intracameral bimatoprost sustained-release implant: Extended duration of IOP control • *Iqbal (Ike) Ahmed*

**10:52** Preservative-free medications available in Canada • *Dima Kalache*

**10:59** Rho-kinase inhibitors • *Cindy M. L. Hutnik*

**11:06** Nitric oxide donating molecules • *Jonathan Wong*

**11:13** Discussion

**11:22** Trabecular bypass MIGS • *Andrew Toren*

**11:29** Suprachroidal MIGS • *Darana Yuen*

**11:36** Less traumatic cyclodestructive techniques • *Toby Chan*

**11:43** Discussion

**11:52** Bleb-forming MIGS • *Jing Wang*

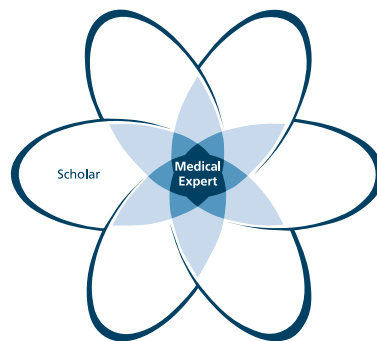
**11:59** SLX: Slit lamp ab externo (closed conjunctival) implantation of a gel microstent, an office based MIGS • **Sébastien Gagné**, *Darana Yuen, Shawn Cohen*

**12:06** Discussion

**12:15** Adjourn

# Reducing Risk and Revamping Best Practices in Retinal Disease Management | Réduire les risques et revoir les pratiques exemplaires en matière de gestion des maladies rétinienne

10:45 AM – 12:15 PM  
Room | Salle 204 AB



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CANMEDS

CANADIAN RETINA SOCIETY | SOCIÉTÉ CANADIENNE DE LA RÉTINE

## LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Describe the clinical management of infectious endophthalmitis and integrate evidence-based best practices for risk mitigation
- Compare the structural and functional differences in outcomes after different types of retinal detachment repair
- Describe the appropriate management of various cataract surgery complications and integrate prophylactic strategies for at-risk patients

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Décrire la prise en charge clinique de l'endophthalmitis infectieuse et intégrer des pratiques exemplaires factuelles pour l'atténuation des risques
- Comparer les différences structurelles et fonctionnelles dans les résultats après différents types de réparation du détachement de la rétine
- Décrire la prise en charge appropriée des diverses complications de la chirurgie de la cataracte et intégrer des stratégies prophylactiques pour les patients à risque

## MODERATORS | ANIMATEURS

Amin Kherani MD  
Arif Samad MD

## KEYNOTE SPEAKERS | CONFÉRENCIERS INVITÉS

Sunir J. Garg MD, FACS  
Tara McCannel MD, PhD

**10:45** There's more to know about post-injection endophthalmitis • *Sunir J. Garg*

**10:55** Q & A

**11:00** Endophthalmitis rates following alcohol-based chlorhexidine and povidone-iodine antiseptics for intravitreal injections • **C. Maya Tong**, *Marvi K. Cheema, Uriel Rubin, Bo Bao, Samir Nazarali, Steven R. J. Lapere, Rizwan Somani, Matthew T. S. Tennant*

**11:07** Q & A

**11:10** 27 gauge vitrectomy: Is it any better for the Canadian environment? • **Amin Kherani**, *Julia Farah, Robert Gizicki, Geoff Williams*

**11:17** Q & A

**11:20** Determining the risk factors for the development of epiretinal membranes in patients presenting with and following repair of rhegmatogenous retinal detachments • **Harrish Nithianandan**, Avner Hostovsky, Rajeev Muni, Bernard Hurley, Peter J. Kertes

**11:27** Q & A

**11:30** Association of baseline OCT features with visual outcomes following retinal detachment repair: Post-hoc analysis of the PIVOT trial • **Carolina L. M. Francisconi**, Verena Juncal, Roxane J. Hillier, Tina Felfeli, Louis R. Giavedoni, David T. Wong, Alan R. Berger, Filiberto Altomare, Peter J. Kertes, Rahda P. Kohly, Rajeev H. Muni

**11:37** Q & A

**11:40** Optimizing outcomes: Cataract surgery in a patient with uveitis • *Phil Hooper*

**11:47** Q & A

**11:50** Optimizing outcomes: Cataract surgery complications • *David Wong*

**11:57** Q & A

**12:00** Multimodal imaging in the diagnosis of ocular melanoma • *Tara McCannel*

**12:10** Q & A

**12:15** Adjourn

### App Tips – to help you get the most out of your mobile event app!

Want to be notified when an event in your schedule is about to start? You can set reminders under Options.

### Les Astuces – Optimiser votre expérience avec l'appli mobile !

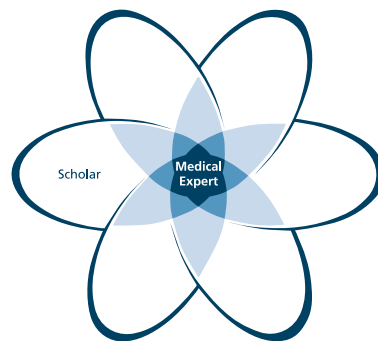
Vous voulez recevoir un rappel avant le début d'une des séances de votre horaire? Il suffit de programmer les rappels dans les Options (sous l'onglet Plus).

# What's Trending in Refractive Surgery?

Quelles sont les tendances en chirurgie réfractive ?

10:45 AM – 12:15 PM

Room | Salle 205 BC



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

**CANADIAN CORNEA, EXTERNAL DISEASE & REFRACTIVE SURGERY SOCIETY**  
**SOCIÉTÉ CANADIENNE DE LA CORNÉE, DES MALADIES EXTERNES ET DE LA CHIRURGIE RÉFRACTIVE**

## LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Describe refractive surgery management options in the irregular cornea
- Describe advances in corneal-based refractive surgery

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Décrire les options de gestion de la chirurgie réfractive dans la cornée irrégulière
- Décrire les progrès de la chirurgie cornéenne réfractive

## MODERATOR | ANIMATEUR

W. Bruce Jackson MD

## PANELISTS | PANÉLISTES

Marie-Claude Robert MD

Neera Singal MD

## KEYNOTE SPEAKERS | CONFÉRENCIERS INVITÉS

Arthur B. Cummings MMed(Ophth), FCS(SA), FRCSEd, PCEO

**10:45** Opening

**10:46** Topography-guided photorefractive keratectomy for irregular astigmatism after radial keratotomy using a high speed laser • **Simon P. Holland**, David T.C. Lin, Albert Covello, Samuel Arba Mosquera

**10:51** Two year outcome of topography-guided photorefractive keratectomy with collagen cross-linking for keratoconus • **David T.C. Lin**, Simon P. Holland, Albert Covello, Samuel Arba Mosquera

**10:56** Overview of corneal inlays and rings • **Arthur B. Cummings**

**11:04** Genetic testing before laser vision correction • **Clara C. Chan**

**11:12** Discussion

**11:17** Artificial intelligence in refractive surgery • **Chris Jackman**

**11:25** Topography-guided laser treatments in virgin eyes • **Avi Wallerstein**

**11:33** Topography-guided laser treatments for previously treated and/or aberrated corneas • **Arthur B. Cummings**

**11:41** Discussion

**11:46** Ray-tracing LASIK • **Arthur B. Cummings**

**11:54** ReLEX SMILE: Lessons learned • **Michel Podtetenov**

**12:02** Growing the refractive surgery market • **Arthur B. Cummings**

**12:10** Discussion

**12:15** Adjourn

Is That a Child in my Clinic?!  
Useful things to know  
Un enfant dans ma clinique ??  
Choses utiles à savoir

10:45 AM – 12:15 PM  
Room | Salle 202



CANADIAN ASSOCIATION OF PAEDIATRIC  
OPHTHALMOLOGY AND STRABISMUS  
ASSOCIATION CANADIENNE DES  
OPHTALMOLOGISTES PÉDIATRIQUES ET DU STRABISME

LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Develop a strategy to examine and efficiently diagnose a child with photophobia
- Streamline your approach to congenital nasolacrimal duct obstruction
- Transfer the basic science and clinical trial evidence for myopia treatment into your clinical practice
- Avoid complications in the diagnosis and management of paediatric orbital cellulitis

OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Élaborer une stratégie pour examiner et diagnostiquer efficacement un enfant atteint de photophobie
- Rationaliser votre approche de la gestion de l'obstruction des conduits nasolacrimes congénitaux
- Intégrer dans votre pratique clinique les données scientifiques de base et les données probantes d'essais cliniques sur le traitement de la myopie
- Éviter les complications dans le diagnostic et la prise en charge de la cellulite orbitale pédiatrique

MODERATORS | ANIMATEURS

Vasudha Erraguntla MD  
Kamiar Mireskandari MBChB, FRCSEd,  
FRCOphth, PhD

KEYNOTE SPEAKER | CONFÉRENCIER INVITÉ

Erick D. Bothun MD

- 10:45** Introduction
- 10:46** Vampire diaries: Approach to the child with photophobia • *Erick D. Bothun*
- 11:08** Probing questions: The need to know for NLDO • *Nouf Al-Farsi*
- 11:26** The long view: Myopia and its treatment • *Stephanie Dotchin*

- 11:44** Orbital cellulitis: Differentials, decisions, and dangers • *Michel Belliveau*
- 12:02** Discussion
- 12:15** Adjourn

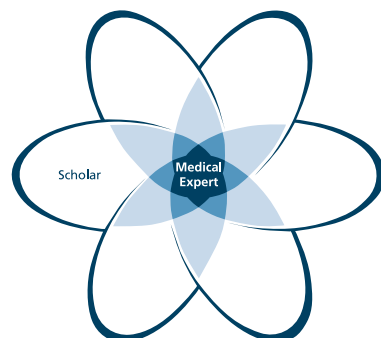
# Toolbox for Tough Cases

## Boîte à outils pour les cas difficiles

1:30 – 3:00 PM

Room | Salle 2000 C

**CATARACT SURGERY | CHIRURGIE DE LA CATARACTE**



**ROYAL COLLEGE** | **CANMEDS**  
OF PHYSICIANS AND SURGEONS OF CANADA

### LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Integrate tools and techniques to work in small pupil and crowded space
- Compare and differentiate techniques for astigmatism correction
- Use microinstruments to repair and replace iris abnormalities

### OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Intégrer des outils et des techniques pour travailler sur de petites pupilles ou dans des espaces restreints
- Comparer et différencier les techniques de correction de l'astigmatisme
- Utiliser des micro-instruments pour réparer et remplacer les anomalies de l'iris

### MODERATOR | ANIMATEUR

Iqbal (Ike) Ahmed MD

### KEYNOTE SPEAKERS | CONFÉRENCIERS INVITÉS

Douglas J. Rhee MD  
Ken Rosenthal MD, FACS  
Jonathan D. Solomon MD

**1:30** Introduction • *Iqbal (Ike) Ahmed*  
**1:35** Protecting the endothelium  
• *Clara C. Chan*  
**1:40** Making space for crowded eyes  
• *Douglas J. Rhee*  
**1:50** Discussion  
**1:55** Astigmatism correction with surgical  
guidance systems  
• *Jonathan D. Solomon*  
**2:05** Explanting IOLs for the millennial  
• *Devesh Varma*  
**2:10** Discussion  
**2:15** No dilation, no problem • *Georges Durr*

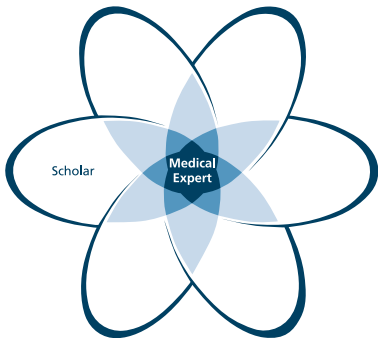
**2:20** Covering up: Iris prosthesis can help  
• *Iqbal (Ike) Ahmed*  
**2:25** Myopes and deep acs • *Dima Kalache*  
**2:30** Discussion  
**2:35** Vitrectomy for when you rarely need it  
• *Michael Butler*  
**2:40** Microinstruments – What do I need and  
how do I use them? • *Sébastien Gagné*  
**2:45** Sutures, haptic fixation or ACIOL: How  
to decide • *Ken Rosenthal*  
**2:55** Discussion  
**3:00** Adjourn



The Art and Science of Medical Retina  
L'art et la science de  
la rétine médicale

1:30 – 3:00 PM  
Room | Salle 204 AB

CANADIAN RETINA SOCIETY  
SOCIÉTÉ CANADIENNE DE LA RÉTINE



ROYAL COLLEGE  
OF PHYSICIANS AND SURGEONS OF CANADA | CANMEDS

LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Integrate evidence-based treatment strategies into the clinical management of age-related macular degeneration
- Apply best-practice guidelines in the management of patients with proliferative diabetic retinopathy
- Describe the role of VEGF and other mediators in the pathophysiology of different retinal diseases
- Assess the possible local and systemic effects of current available therapies

OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Intégrer des stratégies de traitement factuelles dans la gestion clinique de la dégénérescence maculaire liée à l'âge
- Appliquer des lignes directrices sur les pratiques exemplaires dans la prise en charge des patients atteints de rétinopathie diabétique proliférante
- Décrire le rôle du facteur de croissance endothélial vasculaire (VEGF) et d'autres médiateurs dans la pathophysiologie de différentes maladies rétinienne
- Évaluer les effets locaux et systémiques possibles des thérapies actuelles

MODERATORS | ANIMATEURS

Jason Noble MD  
Cynthia Qian MD

KEYNOTE SPEAKERS | CONFÉRENCIERS INVITÉS

Sunir J. Garg MD, FACS  
Tara McCannel MD, PhD

- 1:30** Does stress cause ocular melanoma?  
• Tara McCannel
- 1:40** Q & A
- 1:45** Panretinal laser photocoagulation versus intravitreal anti-VEGF treatment for proliferative diabetic retinopathy: Is one better? • Sunir J. Garg
- 1:55** Q & A
- 2:00** Canadian treat and extend trial with ranibizumab in patients with nAMD: CANTREAT study 24-month results  
• Peter J. Kertes, Tom Sheidow, Geoff Williams, Mark Greve, Ivan Galic, Emmanouil Rampakakis, Marcel Lahaie
- 2:07** Q & A
- 2:10** Intraocular antibodies as a novel target for understanding and treating vascular diseases of the eye • Jacob Rullo, Steven Bae, Wilma Hopkins, Isabella Irrcher, Manpartap Bal, Tom Gonder, Sanjay Sharma
- 2:17** Q & A

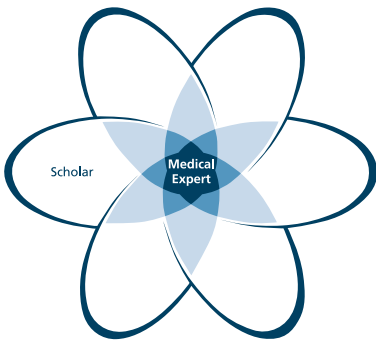
- 2:20** Ranibizumab and aflibercept levels and its impact on vascular endothelial growth factor in human breast milk following intravitreal injection • Verena Juncal, Quratulain Paracha, Motaz Bamakrid, Carolina Francisconi, Julia Farah, Amin Kherani, Rajeev Muni
- 2:27** Q & A
- 2:30** Changes in aqueous and vitreous inflammatory cytokine levels in retinal vein occlusion • Samuel A. Minaker, Ryan Mason, Motaz Bamakrid, Yung Lee, Rajeev Muni
- 2:37** Q & A
- 2:40** Impact of obstructive sleep apnea on the expression of inflammatory mediators in diabetic macular edema • Yelin Yang, Sohel Somani
- 2:47** Q & A
- 2:50** Clinical update: Neovascular AMD  
• Serge Bourgault
- 2:57** Q & A
- 3:00** Adjourn

# DMEK and Tech: Improving outcomes with techniques and technology

La DMEK et la technologie : améliorer les résultats grâce aux techniques et à la technologie

1:30 – 3:00 PM • Room | Salle 205 BC

CANADIAN CORNEA, EXTERNAL DISEASE AND REFRACTIVE SURGERY SOCIETY  
SOCIÉTÉ CANADIENNE DE LA CORNÉE, DES MALADIES EXTERNES ET DE LA CHIRURGIE RÉFRACTIVE



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CANMEDS

## LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Describe the latest techniques in endothelial keratoplasty
- Describe the latest eye bank advances used in the preparation of corneal donor tissue

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Décrire les techniques les plus récentes en kératoplastie endothéliale
- Décrire les dernières avancées des banques d'yeux utilisées dans la préparation des tissus de donneurs de cornée

| MODERATOR   ANIMATRICE | PANELISTS   PANÉLISTES           | KEYNOTE SPEAKERS   CONFÉRENCIERS INVITÉS                                   |
|------------------------|----------------------------------|----------------------------------------------------------------------------|
| Stephanie Baxter MD    | Hall Chew MD<br>Michèle Mabon MD | Jean-Marc Perone MD<br>Donald T. H. Tan MBBS, FRCSG, FRCSE, FRCOphth, FAMS |

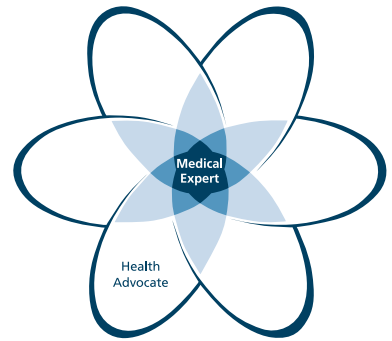
|      |                                                                                                                                                                                                                                                                               |      |                                                                                                                                                                                                                                 |
|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1:30 | Opening                                                                                                                                                                                                                                                                       | 1:56 | Postoperative visual acuity after DSAEK and UT-DSAEK: Does size matter? • <i>Jean-Marc Perone</i>                                                                                                                               |
| 1:31 | Assessment of endothelial cell densities in eye banks: Comparison of alizarin red versus specular microscopy • <b>Etienne Vachon-Joannette</b> , <i>Patricia Ann Laughrea, Marie Eve Légaré, Patrick Carrier, Jeanne d'Arc Uwamaliya, Mathieu Thériault, Stéphanie Proulx</i> | 2:04 | <b>Ron Jans Award:</b> The effect of cornea preservation time on DMEK outcomes • <b>Maria Elena Montpetit Gonzalez</b> , <i>Johanna Choremis, Michèle Mabon, Tanguy Boutin, Leila Mejdoub, Isabelle Brunette, Julia Talajic</i> |
| 1:36 | Outcomes of Descemet membrane endothelial keratoplasty (DMEK) at a Canadian university hospital center • <b>Michael Marchand</b> , <i>Mona Harissi-Dagher, Marie-Claude Robert</i>                                                                                            | 2:09 | Discussion                                                                                                                                                                                                                      |
| 1:41 | Long-term outcome comparison between femtosecond laser-assisted and manual Descemet membrane endothelial keratoplasty • <b>Nir Sorkin</b> , <i>Zale Mednick, Adi Einan-Lifshitz, Tanya Trinh, Gisella Santaella, Alexandre Telli, Clara C. Chan, David S. Rootman</i>         | 2:13 | An alternative approach to DMEK donor preparation – Don't peel! • <i>Donald T. H. Tan</i>                                                                                                                                       |
| 1:46 | Two-year outcomes of hemi-Descemet membrane endothelial keratoplasty (hemi-DMEK) • <i>Yelin Yang, Fargol Mostofian, Javiera Compan, Kashif Baig</i>                                                                                                                           | 2:21 | E-DMEK – A new DMEK inserter and pull-through DMEK technique • <i>Donald T. H. Tan</i>                                                                                                                                          |
| 1:51 | Discussion                                                                                                                                                                                                                                                                    | 2:29 | CMV infection after DSAEK and DMEK – A new scourge • <i>Donald T. H. Tan</i>                                                                                                                                                    |
|      |                                                                                                                                                                                                                                                                               | 2:37 | Discussion                                                                                                                                                                                                                      |
|      |                                                                                                                                                                                                                                                                               | 2:41 | What am I doing differently with DMEK • <i>David Rootman</i>                                                                                                                                                                    |
|      |                                                                                                                                                                                                                                                                               | 2:49 | Update on DWEK • <i>Kashif Baig</i>                                                                                                                                                                                             |
|      |                                                                                                                                                                                                                                                                               | 2:57 | Discussion                                                                                                                                                                                                                      |
|      |                                                                                                                                                                                                                                                                               | 3:00 | Adjourn                                                                                                                                                                                                                         |

# Looking Through the Pupils of Pupils: Paediatric retina, neuro and surgery

## La pupille des petits : rétine, neuro et chirurgie pédiatriques

3:45 – 5:15 PM

Room | Salle 202


**ROYAL COLLEGE** | **CANMEDS**  
OF PHYSICIANS AND SURGEONS OF CANADA

**CANADIAN ASSOCIATION OF PAEDIATRIC OPHTHALMOLOGY AND STRABISMUS**  
**ASSOCIATION CANADIENNE DES OPHTALMOLOGISTES PÉDIATRIQUES ET DU STRABISME**

### LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Summarize current concepts in paediatric retinal disease, including FEVR and ROP detection and treatment
- Reflect on key differences that the intraocular surgeon should consider when approaching the paediatric eye
- Recognize and efficiently work up an atypical paediatric optic disc

### OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Résumer les concepts actuels en matière de maladies rétinienne pédiatriques, y compris la détection et le traitement de la vitréorétinopathie exsudative familiale et de la rétinopathie du prématuré
- Réfléchir aux principales différences dont le chirurgien intraoculaire devrait tenir compte lorsqu'il s'approche de l'œil pédiatrique
- Reconnaître un disque optique pédiatrique atypique et en faire une évaluation efficace

### MODERATORS | ANIMATRICES

Fariba Nazemi MD

Bonnie Skov MD

**1:30** Introduction

**1:31** Saturday night FEVR: What's new in paediatric retinal disease  
 • *Johane Robitaille*

**1:51** Epidemiology of retinoblastoma in Canada during 1992-2010  
 • **Rami Darwich**, *Feras Ghazawi, Elham Rahme, Nebras Alghazawi, Denis Sasseville, Miguel N. Burnier, Ivan V. Litvinov*

**2:00** Assessment of WINROP algorithm as a screening tool for detection of retinopathy of prematurity: The Montreal experience • **Fatma Zaguia**, *Philippe Lamer, Jiaru Liu, Martine Claveau, Therese Perreault, Robert Koenekoop, Daniela Toffoli, Ayesha Khan*

**2:09** Discussion

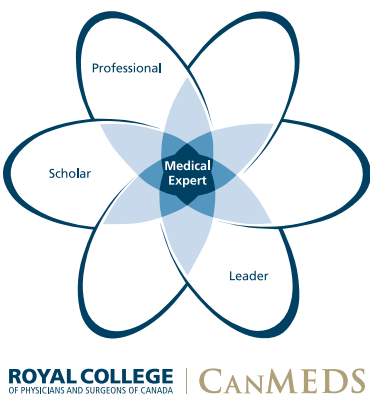
**2:14** Surgical approach to the paediatric eye  
 • *Cynthia Qian*

**2:33** Workup for the "suspicious" paediatric optic disc • *Arun Reginald*

**2:52** Discussion

**3:00** Adjourn

Pseudoex Summit  
 Sommet pseudoex  
 3:45 – 5:15 PM  
 Room | Salle 2000 C  
**CANADIAN GLAUCOMA SOCIETY**  
**SOCIÉTÉ CANADIENNE DU GLAUCOME**  
**CATARACT SURGERY**  
**CHIRURGIE DE LA CATARACTE**



LEARNING OBJECTIVES

- At the end of this session, participants will be able to:
- Describe the pathogenesis of pseudoexfoliation (PXF)
  - Assess patients for PXF prior to cataract surgery
  - Apply demonstrated intra-operative techniques in PXF patients

OBJECTIFS D'APPRENTISSAGE

- À la fin de la session, les participants pourront :
- Décrire la pathogénèse de la pseudo-exfoliation (PXF)
  - Évaluer les patients atteints de PXF avant la chirurgie de la cataracte
  - Appliquer les techniques peropératoires démontrées chez les patients atteints de PXF

MODERATORS | ANIMATEURS

Steven Schendel MD  
 Devesh Varma MD, BEng

KEYNOTE SPEAKERS | CONFÉRENCIERS INVITÉS

Douglas J. Rhee MD  
 Ken Rosenthal MD, FACS

- 3:45** Introduction
- 3:47** Pseudoexfoliation: What is it and why do we care? • *Karim Damji*
- 3:57** Preop evaluation: Anticipating trouble • *Jeb A. Ong*
- 4:07** Discussion
- 4:12** Management of small pupils • *Douglas J. Rhee*
- 4:27** Discussion

- 4:31** Capsular tension ring insertion – Pro tips • *Paul Harasymowycz*
- 4:41** Combined glaucoma and cataract surgery in PXF • *David Yan*
- 4:51** Discussion
- 4:56** Sutured intraocular lenses • *Ken Rosenthal*
- 5:11** Discussion
- 5:15** Adjourn

We Talked About That! Why patients say they were not told and strategies to minimize this

Pourtant, nous en avons parlé ! Pourquoi les patients affirment qu'on ne leur a pas dit, et stratégies pour minimiser ce problème



3:45 – 5:15 PM • Room | Salle 205 A

**CANADIAN OPHTHALMOLOGICAL SOCIETY**  
**SOCIÉTÉ CANADIENNE D'OPHTALMOLOGIE**

### LEARNING OBJECTIVES

At the end of this workshop, participants will be able to:

- Describe the medico-legal impact of informed consent with particular reference to ophthalmology
- List the three basic elements of informed consent
- Explain the importance of patient centred communication used when obtaining informed consent
- Describe three strategies to improve communication style

### OBJECTIFS D'APPRENTISSAGE

À la fin de l'atelier, les participants pourront :

- Décrire l'incidence médico-légale du consentement éclairé particulièrement en ce qui concerne l'ophtalmologie (nous partagerons certaines des données observées en ophtalmologie)
- Énumérer les trois éléments de base du consentement éclairé
- Expliquer l'importance de la communication centrée sur le patient lorsqu'on obtient un consentement éclairé
- Décrire trois stratégies pour améliorer le style de communication

### MODERATOR | ANIMATEUR

Colin Mann MD

### KEYNOTE SPEAKER | CONFÉRENCIER INVITÉ

Richard Mimeault MD

In this 90-minute workshop, participants will look at the importance of the information shared with the patient, the style of communication, as well as capacity and liberty. Dr. Richard Mimeault of the CMPA will define Informed Consent and review some cases specific to the ophthalmologist's practice. Participants will be led through a series of vignettes around Informed Consent with a focus on communication styles.

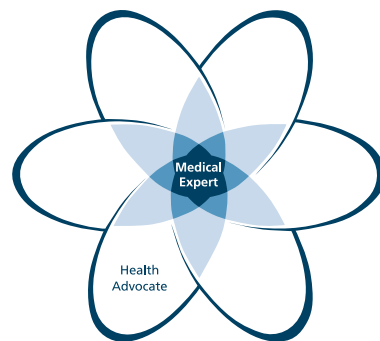
Au cours de cet atelier de 90 minutes, les participants examineront l'importance du partage de l'information avec le patient, le style de communication, ainsi que les questions de capacité et de liberté. Le Dr Richard Mimeault de l'ACPM définira le consentement éclairé et examinera certains cas propres à la pratique de l'ophtalmologiste. Les participants parcourront une série de vignettes sur le consentement éclairé, qui mettra l'accent sur les styles de communication.

# Alignment Assignment: Strabismus and amblyopia Devoir d'alignement : strabisme et amblyopie

3:45 – 5:15 PM

Room | Salle 202

**CANADIAN ASSOCIATION OF PAEDIATRIC  
OPHTHALMOLOGY AND STRABISMUS**  
**ASSOCIATION CANADIENNE DES OPHTALMOLOGISTES  
PÉDIATRIQUES ET DU STRABISME**



**ROYAL COLLEGE** | **CANMEDS**  
OF PHYSICIANS AND SURGEONS OF CANADA

## LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Examine strategies to minimize the financial burden associated with vision screening and individual eye care
- Safely and effectively minimize the number of general anaesthetics a child undergoes
- Contrast the published cost of paediatric vision screening in different health systems
- Discuss the options in the management of challenging strabismus case

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Examiner des stratégies pour réduire au minimum le fardeau financier associé au dépistage des troubles oculovisuels et aux soins oculovisuels individuels
- Réduire de façon sécuritaire et efficace le nombre d'anesthésies générales que subit un enfant
- Comparer le coût publié du dépistage des troubles oculovisuels chez les enfants dans différents systèmes de santé
- Discuter des options de gestion des cas difficiles de strabisme

## MODERATORS | ANIMATEURS

Ian Clark MD, MA, MB, BChir  
Carlos Solarte MD

## KEYNOTE SPEAKER | CONFÉRENCIER INVITÉ

Erick D. Bothun MD

**3:45** Introduction

**3:46** Book it as a combined case: What combinations of paediatric eye cases might one get done under one anesthetic? • *Erick D. Bothun*

**4:02** Cost of glasses and travel for paediatric ophthalmology patients • *Sapna Sharan, Ryan Wilson, Erik Leci, Monali Malvankar*

**4:11** Economic evaluation of universal pediatric vision screening programs: A systematic review • *Stephanie Cheon, Amanda Ross-White, Christine Law*

**4:20** Validation of a novel strabismus surgery 3D-printed silicone eye model for ophthalmology resident simulation training

• *Lisa Jagan, Will Turk, Christian Petropolis, Rylan Egan, Nicholas Cofie, Kenneth Wright, Yi Ning Strube*

**4:29** 'Restraining the over-achiever' in incomitant strabismus: Scott's resect-recess procedure re-visited

• *Sharon Armarnik, Vaishali Mehta, Christy Giligson, Christopher J Lyons*

**4:37** Discussion

**4:45** Humble pie for the strabismus surgeon: Challenging cases panel discussion • *Ian Clark, Carlos Solarte, Robert LaRoche, Christopher Lyon*

**5:15** Adjourn

SCIENTIFIC PROGRAM  
PROGRAMME SCIENTIFIQUE



SUNDAY | DIMANCHE









## FIVE REASONS to become a Canadian Ophthalmological Society (COS) member

COS is the national public authority on eye and vision care in Canada, representing eye physicians and surgeons from every province. We work on behalf of our members to ensure that ophthalmologists are clearly recognized as the leading medical authority in eye and vision health.

Membership provides you with many career-enhancing opportunities and tools, including:

- 1 Continuing professional development, including accredited programs
- 2 Access to the COS Annual Scientific Meeting
- 3 A complimentary annual subscription to the *Canadian Journal of Ophthalmology*
- 4 Members-only access to resources including the online Membership Directory and more!
- 5 A voice in the COS's advocacy work

## CINQ RAISONS d'adhérer à la Société canadienne d'ophtalmologie (SCO)

La SCO est l'autorité publique reconnue en matière de soins oculaires et visuels au Canada. Nous représentons les médecins et chirurgiens ophtalmologistes de toutes les provinces. Nous travaillons au nom de nos membres pour nous assurer que les ophtalmologistes sont reconnus comme étant les sommités en matière de soins des yeux et de la vue.

L'adhésion vous donne droit à de nombreux avantages et outils sur le plan professionnel, y compris :

- 1 des occasions de perfectionnement professionnel, dont des programmes accrédités
- 2 l'accès au congrès scientifique annuel de la SCO
- 3 un abonnement annuel gratuit au *Journal canadien d'ophtalmologie*
- 4 un accès réservé aux membres à des ressources en ligne, y compris le répertoire des membres
- 5 une place dans les efforts menés par la SCO pour défendre les intérêts du secteur de l'ophtalmologie

To learn more about the benefits of  
COS membership, please visit:  
[www.cos-sco.ca/membership/member-benefits/](http://www.cos-sco.ca/membership/member-benefits/)

Pour en savoir davantage sur les avantages que confère  
l'adhésion à la SCO, veuillez consulter la page  
[www.cos-sco.ca/effectifs/les-avantages-des-membres](http://www.cos-sco.ca/effectifs/les-avantages-des-membres)

SUNDAY SNAPSHOT | LE DIMANCHE EN COUP D'ŒIL

| Québec City Convention Centre |                                                                                                                               |                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                           |                                                                                                                    |                                                                                 |                                                                                                                                                |
|-------------------------------|-------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|
| Time<br>Heure                 | Room   Salle<br>2000 C                                                                                                        | Room   Salle<br>204 AB                                                                                                                                                                                                                                                     | Room   Salle<br>205 BC                                                                                                                                                                                                                    | Room   Salle<br>202                                                                                                | Room   Salle<br>203                                                             | Room   Salle<br>206 B                                                                                                                          |
| 6:30 –<br>8:00 AM             |                                                                                                                               | WIO<br>Symposium<br>– Leading by<br>overcoming<br>obstacles<br><br>Symposium<br>WIO :<br>surmonter les<br>obstacles<br><br>Room   Salle<br>206 A<br>(p. 86)                                                                                                                |                                                                                                                                                                                                                                           |                                                                                                                    |                                                                                 |                                                                                                                                                |
| 7:00 –<br>8:00 AM             | Continental Breakfast   <i>Petit déjeuner continental</i>                                                                     |                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                           |                                                                                                                    |                                                                                 |                                                                                                                                                |
| 8:00 –<br>10:00 AM            | Current<br>Concepts III<br><br>Notions<br>courantes III<br>(p. 87)                                                            |                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                           |                                                                                                                    | TCOS Scientific<br>Session<br><br>Séance<br>scientifique de<br>LSCO<br>(p. 119) |                                                                                                                                                |
| 10:00 –<br>10:45 AM           | Break in the Exhibit Hall   <i>Pause dans la salle d'exposition</i><br>Poster Presentations   <i>Présentations d'affiches</i> |                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                           |                                                                                                                    |                                                                                 |                                                                                                                                                |
| 10:45 AM –<br>12:15 PM        | My New<br>Favourite Toy<br><br>Mon nouveau<br>jouet préféré<br>(p. 88)                                                        | Canadian Tele-<br>Retina Network<br>Symposium:<br>A vision for<br>optimizing<br>patient<br>outcomes across<br>Canada<br><br>Symposium<br>du Réseau<br>canadien de<br>télé-rétine : pour<br>optimiser les<br>résultats pour les<br>patients partout<br>au Canada<br>(p. 89) | Ocular<br>Regenerative<br>Medicine –<br>Translational<br>Medicine:<br>From bench to<br>bedside<br><br>Médecine<br>oculaire<br>régénérative –<br>La médecine<br>translationnelle<br>: du laboratoire<br>au chevet du<br>patient<br>(p. 90) | Future Trends<br>in Vision<br>Rehabilitation<br><br>Tendances<br>futures en<br>réadaptation<br>visuelle<br>(p. 91) | TCOS Scientific<br>Session<br><br>Séance<br>scientifique de<br>LSCO<br>(p. 119) | STC: Botulinum:<br>Smooth Moves<br>in Québec City<br><br>CTC : La toxine<br>botulique :<br>apprentissage<br>en douceur à<br>Québec<br>(p. 111) |

| Québec City Convention Centre |                                                                                                                                                                                                                |                                                                                                    |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                 |                                                                                       |
|-------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| Time<br>Heure                 | Room   Salle<br>2000 C                                                                                                                                                                                         | Room   Salle<br>204 AB                                                                             | Room   Salle<br>205 BC                                                                                                                                                                                                            | Room   Salle<br>202                                                                                                                                                                                                             | Room   Salle<br>203                                                                   |
| 12:15 –<br>1:30 PM            | Lunch in the Exhibit Hall   <i>Dîner dans la salle d'exposition</i>                                                                                                                                            |                                                                                                    |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                 |                                                                                       |
| 1:30 –<br>3:00 PM             | Nightmare in my<br>OR<br><br><i>Cauchemar<br/>dans ma salle<br/>d'opération<br/>(p. 92)</i>                                                                                                                    | 20/20 OCT<br><br><i>TCO 20/20<br/>(p. 93)</i>                                                      | Leveraging<br>Research and<br>Partnership to<br>Achieve Universal<br>Eye Health<br><br><i>Tirer parti de la<br/>recherche et des<br/>partenariats pour<br/>favoriser la santé<br/>oculovisuelle dans<br/>le monde<br/>(p. 94)</i> | Self-reflection: How<br>things are now, are<br>being done, and<br>what should we<br>change!<br><br><i>Introspection :<br/>comment les choses<br/>se font actuellement<br/>et ce que nous<br/>devrions changer !<br/>(p. 95)</i> | TCOS Scientific<br>Session<br><br><i>Séance scientifique<br/>de LSCO<br/>(p. 119)</i> |
| 3:00 –<br>3:45 PM             | Break   <i>Pause</i>                                                                                                                                                                                           |                                                                                                    |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                 |                                                                                       |
| 3:45 –<br>5:15 PM             | Hot Seat<br>(complaints and<br>lawsuits) and Hot<br>Stuff (new research)<br><br><i>Dossiers chauds<br/>(plaintes et<br/>poursuites<br/>judiciaires) et<br/>actualités (nouvelle<br/>recherche)<br/>(p. 96)</i> | Innovations in<br>Retinal Imaging<br><br><i>Innovations en<br/>imagerie rétinienne<br/>(p. 98)</i> | The Changing<br>Landscape of<br>Ophthalmic<br>Disease and Vision<br>Care<br><br><i>Le paysage<br/>changeant<br/>de la maladie<br/>ophtalmique et des<br/>soins de la vue<br/>(p. 99)</i>                                          | New Literature<br>in Neuro-<br>ophthalmology?<br><br><i>Du nouveau<br/>dans la littérature<br/>scientifique<br/>en neuro-<br/>ophtalmologie ?<br/>(p. 100)</i>                                                                  | TCOS Scientific<br>Session<br><br><i>Séance scientifique<br/>de LSCO<br/>(p. 119)</i> |

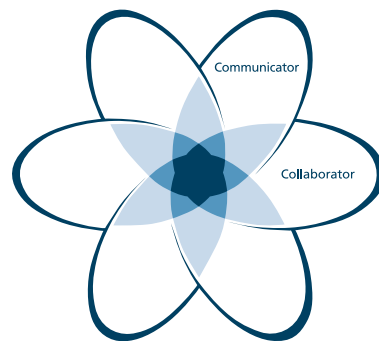
# Women in Ophthalmology Symposium – Leading by overcoming obstacles

Symposium Les femmes en ophtalmologie : surmonter les obstacles

6:30 – 8:00 AM

Room | Salle 206 A

**CANADIAN OPHTHALMOLOGICAL SOCIETY**  
**SOCIÉTÉ CANADIENNE D'OPHTALMOLOGIE**



**ROYAL COLLEGE** | **CANMEDS**  
OF PHYSICIANS AND SURGEONS OF CANADA

## LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Describe the main challenges women in ophthalmology encounter
- Describe key techniques to overcome the challenges women face in ophthalmology

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Décrire les principaux défis que doivent relever les femmes en ophtalmologie
- Décrire les principales techniques permettant de surmonter les défis auxquels font face les femmes en ophtalmologie

## MODERATOR | ANIMATRICE

Femida Kherani MD

## KEYNOTE SPEAKERS | CONFÉRENCIÈRES INVITÉES

Tara McCannel MD, PhD  
Yvonne Molgat MDCM

The panel will discuss personal and professional challenges in Ophthalmology and tips to overcome obstacles. Breakfast will be served.

Le groupe discutera des défis personnels en ophtalmologie et de façons de surmonter les obstacles. Petit-déjeuner sera servi.

**6:30** Introduction • *Femida Kherani*

**6:35** WIO survey results • *Femida Kherani*

**6:45** Panel discussion: Overcoming obstacles in ophthalmology • *Tara McCannel, Yvonne Molgat*

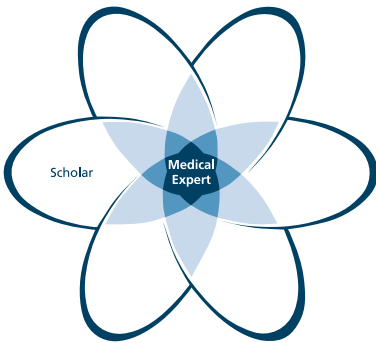
**7:45** Moderating questions • *Femida Kherani*

**8:00** Adjourn

Current Concepts III  
Notions courantes III

8:00 – 10:00 AM  
Room | Salle 2000 C

CANADIAN OPHTHALMOLOGICAL SOCIETY  
SOCIÉTÉ CANADIENNE D'OPHTALMOLOGIE



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CANMEDS

LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Name three capacity building interventions that increase eye care services
- Describe new technologies for managing patients with stem cell disease involving the ocular surface
- Identify the prevalence and impact of combined vision and hearing impairment
- Review the pathophysiology of ocular melanoma and highlight practical prevention strategies

OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Nommez trois interventions de renforcement des capacités qui accroissent les services de soins oculovisuels
- Décrire les nouvelles technologies de gestion des patients atteints d'une maladie à base de cellules souches touchant la surface oculaire
- Déterminer la prévalence et l'incidence des troubles combinés de la vue et de l'ouïe
- Passer en revue la pathophysiologie du mélanome oculaire et souligner les stratégies de prévention pratiques

MODERATORS | ANIMATRICES

Mona Harissi-Dagher MD  
Vivian Yin MD

KEYNOTE SPEAKERS | CONFÉRENCIERS INVITÉS

Sunir J. Garg MD, FACS  
Suzanne S. Gilbert PhD, MPH  
Aki Kawasaki MD, PhD  
Tara McCannel MD, PhD  
Paolo Rama MD

Jonathan D. Solomon, MD  
Carlos Torres MD, FRCPC  
Walter Wittich PhD, FAAO, CLVT

**8:00** Introduction • *Mona Harissi-Dagher*  
**8:02** Prevention in ocular melanoma  
• *Tara McCannel*  
**8:12** Current management of diabetic macular edema • *Sunir J. Garg*  
**8:22** Discussion  
**8:32** Shedding light on light sensitivity  
• *Aki Kawasaki*  
**8:42** Orbital trauma – Beyond fractures  
• *Carlos Torres*  
**8:52** Discussion

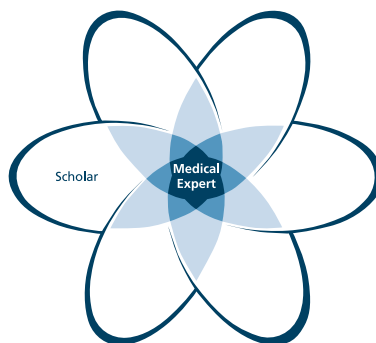
**9:02** Bilateral sequential lens based surgery: The time is now! • *Jonathan D. Solomon*  
**9:12** Autologous cultivated limbal stem cells transplantation • *Paolo Rama*  
**9:22** Discussion  
**9:32** Closing the global eye care gap through capacity building • *Suzanne S. Gilbert*  
**9:42** Eye care and multi-morbidity: The need to consider hearing in ophthalmic service delivery • *Walter Wittich*  
**9:52** Discussion  
**10:00** Adjourn

# My New Favourite Toy Mon nouveau jouet préféré

10:45 AM – 12:15 PM

Room | Salle 2000 C

CATARACT SURGERY | CHIRURGIE DE LA CATARACTE



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

## LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Assess new devices to integrate into your surgical practice
- Apply formulas for patients with prior refractive surgeries
- Describe how light adjustable lens (LAL) work

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Évaluer les nouveaux dispositifs à intégrer à sa pratique chirurgicale
- Appliquer des formules pour les patients ayant déjà subi une chirurgie réfractive
- Décrire le fonctionnement de l'implant ajustable par la lumière (LAL)

## MODERATORS | ANIMATEURS

Jit Gohill MD  
Devesh Varma MD, BEng

## KEYNOTE SPEAKERS | CONFÉRENCIERS INVITÉS

Ken Rosenthal MD, FACS  
Jonathan D. Solomon MD

**10:45** Introduction

**10:47** Practice patterns of the Canadian Ophthalmological Society members in cataract surgery – Survey 2019  
• *Lindsay Ong-Tone*

**10:51** Xpand ring • *Jonathan D. Solomon*

**10:59** Zepto • *Georges Durr*

**11:07** Discussion

**11:13** Prediction accuracy of intraoperative aberrometry compared to pre-operative biometry formulas for intraocular lens power selection • *Jingyi Ma, Sherif El-Defrawy, John C. Lloyd, Amandeep Rai*

**11:16** A comparative analysis of intraocular lens power formula accuracy • *Austin Pereira, Marko Popovic, John C. Lloyd, Sherif El-Defrawy, John Gorfinkel, Matthew B. Schlenker*

**11:19** Barrett TK formula • *Jit Gohill*

**11:27** 3-D surgical imaging • *Jonathan D. Solomon*

**11:35** Discussion

**11:42** Optimal IOLs for intrascleral haptic fixation • *Joshua C. Teichman*

**11:50** Light adjustable lens: LAL or LOL?  
• *Guillermo Rocha*

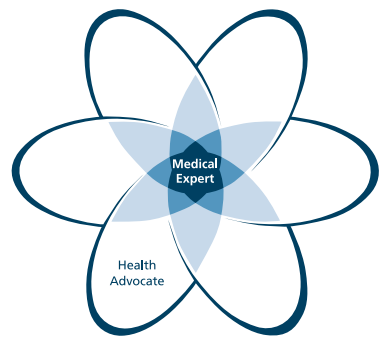
**11:59** Artisan phakic IOL: A new "old" era in secondary IOL fixation • *Ken Rosenthal*

**12:08** Discussion

**12:15** Adjourn

# Canadian Tele-Retina Network Symposium: A vision for optimizing patient outcomes across Canada

## Symposium du Réseau canadien de télé-rétine : optimisation des résultats pour les patients partout au Canada



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

10:45 AM – 12:15 PM  
Room | Salle 204 AB

CANADIAN RETINA SOCIETY  
SOCIÉTÉ CANADIENNE DE LA RÉTINE

### LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Describe cutting edge tele-retina initiatives across Canada and how they are impacting patient care for retinal disease
- Describe national research initiatives in tele-retina and how these initiatives are impacting patient care
- Explore current challenges and opportunities for future initiatives as it pertains to tele-retina projects across Canada

### OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Décrire les initiatives de pointe en matière de télé-rétine au Canada et leur incidence sur le soin des patients atteints de maladie rétinienne
- Décrire les initiatives de recherche nationales en télé-rétine et leur incidence sur le soin des patients
- Explorer les défis actuels et les possibilités d'initiatives futures en ce qui a trait aux projets de télé-rétine au Canada

### MODERATORS | ANIMATEURS

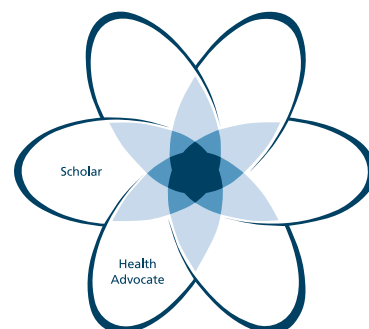
Michael Brent MD  
Varun Chaudhary MD

|                                                                                                                         |                                                                                                                                   |
|-------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|
| <b>10:45</b> Introduction                                                                                               | screening • <i>Stephen E. Kosar</i>                                                                                               |
| <b>10:50</b> Diabetes Action Canada • <i>Michael Brent</i>                                                              | <b>11:37</b> Q & A                                                                                                                |
| <b>10:57</b> Q & A                                                                                                      | <b>11:40</b> Tele-retina unit @ Hamilton Regional Eye Institute • <i>Varun Chaudhary</i>                                          |
| <b>11:00</b> Tele-retina screening and surveillance for diabetic retinopathy in Quebec<br>• <i>Marie Carole Boucher</i> | <b>11:47</b> Q & A                                                                                                                |
| <b>11:07</b> Q & A                                                                                                      | <b>11:50</b> Ontario tele-retina network • <i>David Wong</i>                                                                      |
| <b>11:10</b> Artificial intelligence and tele-retina screening • <i>Renaud Duval</i>                                    | <b>11:57</b> Q & A                                                                                                                |
| <b>11:17</b> Q & A                                                                                                      | <b>12:00</b> The epidemiology of diabetic retinopathy and state of teleophthalmology in northern Manitoba • <i>Raageen Kanjee</i> |
| <b>11:20</b> Population based approach to DR screening • <i>Michael Brent</i>                                           | <b>12:07</b> Q & A                                                                                                                |
| <b>11:27</b> Q & A                                                                                                      | <b>12:10</b> Concluding remarks                                                                                                   |
| <b>11:30</b> Northeastern Ontario experience in DR                                                                      | <b>12:15</b> Adjourn                                                                                                              |

# Ocular Regenerative Medicine – Translational Medicine: From bench to bedside

## Médecine oculaire régénérative – La médecine translationnelle : du laboratoire au chevet du patient

10:45 AM – 12:15 PM  
Room | Salle 205 BC



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

### CANADIAN OCULAR REGENERATIVE MEDICINE SOCIETY SOCIÉTÉ CANADIENNE DE MÉDECINE OCULAIRE RÉGÉNÉRATIVE

#### LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Describe the procedure for autogenous cultivated limbal stem cell transplanation and assess the advantages
- Describe how SLET may be used to treat complex pterygiums
- Assess the implications of corneal angiogenesis and the benefits of using topical nerve growth factor for non-healing corneal ulcers
- Compare techniques used for ex vivo limbal stem cell expansion and transplantation between Europe and Canada

#### OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Décrire la procédure de transplantation autologue de cellules souches limbiques cultivées et en évaluer les avantages
- Décrire comment la greffe simple de cellules limbiques épithéliales peut être utilisée pour traiter les ptérygions complexes
- Évaluer les implications de l'angiogenèse cornéenne et les avantages de l'utilisation topique du facteur de croissance des nerfs pour traiter les ulcères cornéens réfractaires
- Comparer les techniques utilisées pour l'expansion et la transplantation de cellules souches limbiques ex vivo entre l'Europe et le Canada

#### MODERATORS | ANIMATEURS

Isabelle Brunette MD  
Allan Slomovic MD

#### KEYNOTE SPEAKER | CONFÉRENCIER INVITÉ

Paolo Rama MD

**10:45** Autologous cultivated limbal stem cells transplanation • *Paolo Rama*

**11:00** Q & A

**11:05** Simple limbal epithelial transplantation for recurrent pterygium • *Tanya Trinh, Zale Mednick, Tanguy Boutin, Adi Einan, Nir Sorkin, Gisella Santaella, Allan Slomovic*

**11:15** Q & A

**11:19** Corneal angiogenesis: Friend or foe? • *Paolo Rama*

**11:29** Q & A

**11:33** Clinical application of topical nerve growth factor (NGF) • *Paolo Rama*

**11:43** Q & A

**11:47** Ex vivo corneal epithelial stem cell expansion and transplantation for limbal stem cell deficiency • *Lucie Germain, Richard Bazin*

**11:57** Q & A

**12:01** Canadian Ocular Regenerative Medicine Society business meeting

**12:15** Adjourn



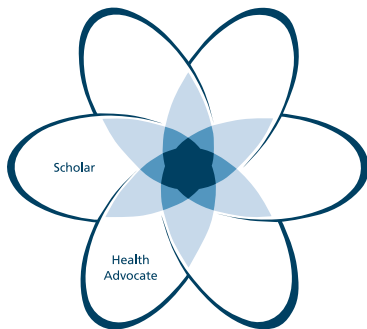
# Future Trends in Vision Rehabilitation

Tendences futures en réadaptation visuelle

10:45 AM – 12:15 PM

Room | Salle 202

CANADIAN VISION REHABILITATION SOCIETY  
SOCIÉTÉ CANADIENNE DE LA RÉADAPTATION VISUELLE



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

## LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Describe microperimetry and nystagmus
- Assess biophotomodulation for dry age related macular degeneration
- Describe vision and hearing rehabilitation in older adults
- Demonstrate vision impairment to cognitive function

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Décrire la micropérimétrie et le nystagmus
- Évaluer la biophotomodulation pour la dégénérescence maculaire sèche liée à l'âge
- Décrire la réadaptation visuelle et auditive chez les adultes âgés
- Faire la démonstration d'une déficience de la vue liée à la fonction cognitive

## MODERATOR | ANIMATEUR

Micah Luong MD

## KEYNOTE SPEAKER | CONFÉRENCIER INVITÉ

Walter Wittich PhD, FAAO, CLVT

**10:45** Linking vision impairment to cognitive function • *Aaron Johnson*

**11:00** Q & A

**11:05** Low vision rehabilitation in the 21<sup>st</sup> century: Are ophthalmologists still necessary? • *Olga Overbury*

**11:20** Q & A

**11:25** Biophotomodulation for dry age related macular degeneration • *Yulia Pyatova*

**11:35** Q & A

**11:40** Microperimetry and nystagmus • *Monica Nido*

**11:50** Q & A

**11:55** Vision and hearing rehabilitation in older adults • *Walter Wittich*

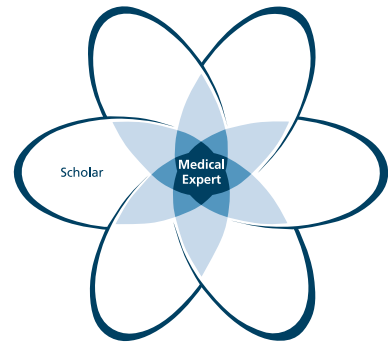
**12:15** Adjourn

# Nightmare in my OR Cauchemar dans ma salle d'opération

1:30 – 3:00 PM

Room | Salle 2000 C

**CATARACT SURGERY**  
**CHIRURGIE DE LA CATARACTE**



**ROYAL COLLEGE** | **CANMEDS**  
OF PHYSICIANS AND SURGEONS OF CANADA

## LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Describe techniques on managing vitreous in the anterior chamber
- Integrate a variety of techniques to insert IOLs in an eye with no capsule bag
- Assess if an aphakic individual is suitable for multifocal IOLs

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Décrire les techniques de gestion du vitré dans la chambre antérieure
- Appliquer une variété de techniques d'implantation de lentilles intraoculaires (LIO) chez un patient sans sac capsulaire
- Évaluer si un patient présentant une aphakie peut recevoir une LIO multifocale

## MODERATORS | ANIMATEURS

Jit Gohill MD

Devesh Varma MD, BEng

## KEYNOTE SPEAKER | CONFÉRENCIER INVITÉ

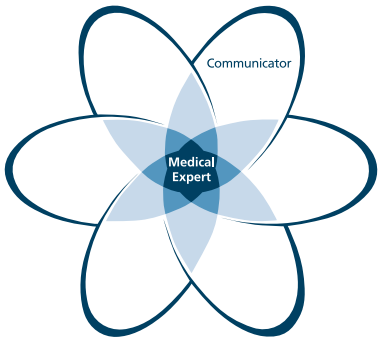
Ken Rosenthal MD, FACS

- 1:30** Introduction
- 1:31** Scary swelling • *Baseer Khan*
- 1:41** Discussion
- 1:43** Under pressure • *Andrew Toren*
- 1:53** Discussion
- 1:55** Shtinker • *Matthew Schlenker*
- 2:05** Discussion
- 2:07** An extended validation study of the iris glare, appearance and photophobia (iris GAP) questionnaire for patients with iris defects • **Michael T. Kryshalskyj**, *Amrit S. Rai, Georges Durr, Dominik W. Podbielski, Iqbal (Ike) Ahmed*

- 2:10** Iris repair and rehabilitation  
• *Ken Rosenthal*
- 2:20** Discussion
- 2:24** Frosty lens – Not a treat • *Sébastien Gagné*
- 2:34** Discussion
- 2:36** Extreme heme • *Dima Kalache*
- 2:46** Discussion
- 2:48** Puck vs. eye • *Devesh Varma*
- 2:58** Discussion
- 3:00** Adjourn

20/20 OCT  
TCO 20/20  
1:30 – 3:00 PM  
Room | Salle 204 AB

CANADIAN RETINA SOCIETY  
SOCIÉTÉ CANADIENNE DE LA RÉTINE



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Differentiate between age-related macular degeneration & masquerading conditions
- Diagnose and differentiate choroidal lesions
- Integrate the interpretation of retinal OCT testing into daily clinical practice

OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Faire la distinction entre la dégénérescence maculaire liée à l'âge et les troubles masqués
- Diagnostiquer et différencier les lésions choroïdiennes
- Incorporer l'interprétation de l'examen de la rétine par TCO dans la pratique

MODERATORS | ANIMATEURS

Netan Choudhry MD  
Wai-Ching Lam MD

KEYNOTE SPEAKER | CONFÉRENCIÈRE INVITÉE

Tara McCannel MD, PhD

- 1:30** Welcome & introduction  
• *Netan Choudhry*
- 1:35** Practical use of OCT in clinic  
• *Wai-Ching Lam*
- 1:50** Q & A
- 1:55** What you need to know: Cancer or not cancer? • *Tara McCannel*
- 2:10** Q & A

- 2:15** Age-related macular degeneration masqueraders • *Caroline Bauman*
- 2:30** Q & A
- 2:35** Mystery cases by the masters  
• *Netan Choudhry*
- 2:55** Q & A
- 3:00** Adjourn

Earn Section 3 Credits: Complete all three components; the pre-test, participation in the session, and the post-test to be eligible for Section 3: Self-Assessment Credits.

During the workshop, participants will work to expand their knowledge around the interpretation of retinal OCT testing in daily clinical practice, while also exploring diagnosis and differentiation of choroidal lesions, and between ARMD and masquerading conditions.

Obtien des crédits de la Section 3 : Compléter les trois volets : le pré-test, la participation à la séance et le post-test afin de recevoir des crédits de la Section 3 (autoévaluation).

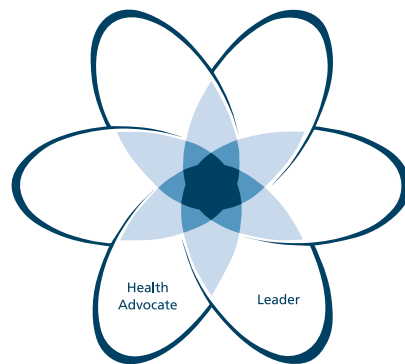
Durant l'atelier, les participants travailleront à élargir leurs connaissances en interprétation des examens de TCO rétinien dans la pratique clinique quotidienne, tout en explorant aussi le diagnostic et la différenciation des lésions choroïdiennes, et la différence entre la DMLA et les troubles de masque.

# Leveraging Research and Partnership to Achieve Universal Eye Health

## Tirer parti de la recherche et des partenariats pour favoriser la santé oculovisuelle dans le monde

1:30 – 3:00 PM

Room | Salle 205 BC



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CANMEDS

**CANADIAN NEURO-OPHTHALMOLOGY SOCIETY**  
**ASSOCIATION CANADIENNE DE LA SANTÉ PUBLIQUE ET OPHTALMOLOGIE MONDIALE**

### LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Apply research to the development of global health programs in eye care
- Leverage partnership and outreach to scale up for universal eye health
- Describe burden of blindness and barrier to access for eye health in Afghans and Syrians

### OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Appliquer la recherche au développement de programmes mondiaux de santé en soins oculovisuels
- Tirer parti des partenariats et de la sensibilisation pour accroître la santé oculovisuelle partout dans le monde
- Décrire le fardeau de la cécité et les obstacles à l'accès aux soins oculovisuels chez les Afghans et les Syriens

### MODERATORS | ANIMATEURS

Simon P. Holland MD  
 Vivian Yin MD

### KEYNOTE SPEAKER | CONFÉRENCIÈRE INVITÉE

Suzanne S. Gilbert PhD, MPH

**1:30** Introduction

**1:35** Unmet eye care needs among a Syrian paediatric refugee population • Tarek A. Bin Yameen, **Myrna Lichter**

**1:43** Research: A tool for strengthening service quality, equity, and sustainability  
 • Suzanne S. Gilbert

**1:58** Q & A

**2:13** Reaching the needed through outreach, Kakinada, India • Chandra Sankurathri

**2:29** The power of partnerships to scale results  
 • Suzanne S. Gilbert

**2:42** Q & A

**2:55** Closing

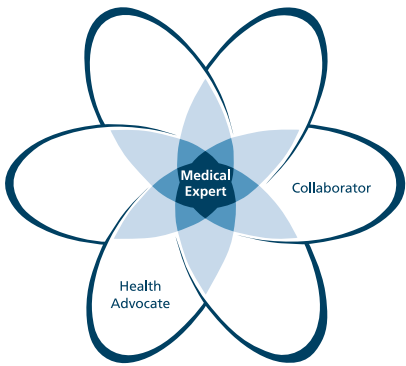
**3:00** Adjourn

Self-reflection: How things are now, are being done, and what should we change!

Introspection : comment les choses se font actuellement et ce nous devrions changer !

1:30 – 3:00 PM • Room | Salle 202

CANADIAN NEURO-OPHTHALMOLOGY SOCIETY  
SOCIÉTÉ CANADIENNE DE LA NEURO-OPHTALMOLOGIE



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Learn the incidence of NAION following topic clear corneal cataract surgery
- Discuss the epidemiology of LHON
- Compare and contrast GCA management between subspecialty and primary care setting and identify if there is room for improvement
- Compare and contrast the adverse outcomes between patients with pathological diagnosis of GCA versus healing/healed arteritis in an attempt to come close to understanding healing/healed arteritis

OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Décrire l'incidence de NOIA après une chirurgie de cornée claire pour la cataracte sous anesthésie topique
- Discuter de l'épidémiologie de la NOHL
- Comparer et différencier la gestion de l'ACG en surspécialité et en milieu de soins primaires et voir si l'on peut faire mieux
- Comparer et différencier les résultats indésirables entre les patients qui ont reçu un diagnostic pathologique d'ACG et ceux dont les artères ont guéri ou sont en voie de guérison, afin de tenter de mieux comprendre les processus de guérison de l'artérite

MODERATORS | ANIMATEURS

Danah H. Albreiki MD  
Amadeo Rodriguez MD

KEYNOTE SPEAKERS | CONFÉRENCIERS INVITÉS

Aki Kawasaki MD, PhD  
Carlos Torres MD, FRCPC

**1:30** Peri-neuritis? What should I be thinking?  
• **Aki Kawasaki**

**1:50** Diplopia: Key imaging findings • **Carlos Torres**

**2:10** Survey of the incidence of non-arteritic ischemic optic neuropathy following topical clear corneal cataract surgery  
• **Joseph Kam, Jasmine Cheng, Samuel Wong, Hermina Strungaru, Allan Slomovic, Lawrence Weisbrod, Edsel Ing**

**2:20** A large international study of LHON epidemiology • **Alexander L. Pearson, Lissa Poincenot, Rustum Karanjia**



**2:30** A comparison of giant cell arteritis management in subspecialty and primary care settings • **Kim Vo, Rahul A. Sharma, Lucia C. Petito, Danah H. Albreiki**

**2:40** Clinical evaluation of giant cell arteritis-related adverse outcomes in patients diagnosed with healing/healed arteritis on temporal artery biopsy • **Carter W. Lim, Harrish Nithianandan, Vinay Kansal, Sangsu Han, James Farmer, Danah H. Albreiki**

**2:50** Questions, discussion and wrap-up

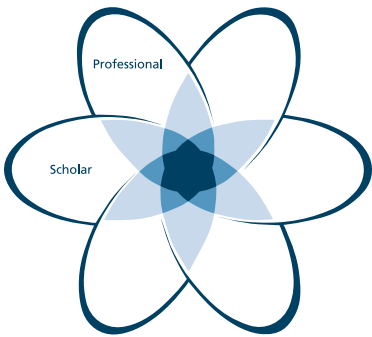
**3:00** Adjourn

# Hot Seat (complaints and lawsuits) and Hot Stuff (new research)

Dossiers chauds (plaintes et poursuites judiciaires) et actualités (nouvelle recherche)

3:45 – 5:15 PM • Room I Salle 2000 C

CATARACT SURGERY  
CHIRURGIE DE LA CATARACTE



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CANMEDS

## LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Describe risk factors that will get you sued
- Assess and integrate practice patterns of your colleagues
- Compare the latest research to your practice

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Décrire les facteurs de risque d'une poursuite en justice
- Évaluer et adopter les pratiques de ses collègues
- Comparer les études les plus récentes à sa propre pratique

## MODERATORS | ANIMATEURS

Jit Gohill MD

Devesh Varma MD, BEng

**3:45** Introduction

**3:47** Medicolegal risk in cataract surgery: A review of litigation against Canadian ophthalmologists (2013-2017) • **Alex Ragan**, Devesh Varma, Jit Gohill, Stephanie Dotchin

**3:50** Risk factors, experience and results in cataract surgery • *Harold W. Climenhaga*

**3:53** Feasibility and acceptability of tools for assessing competency in cataract surgery • **Nawaaz Nathoo**, Andrea Gingerich, Ravi Sidhu

**3:56** How not to get sued: A lawyer's field guide for cataract surgeons • *Joel Post*

**4:06** Discussion

**4:11** Cost effective analysis of multifocal and or extended-depth-of-focus IOL implantation during cataract surgery in Canada • **Rami A. Abo-Shasha**, Monali Malvankar, Bo Li

**4:14** Stereopsis for microsurgery: Does it really matter? • **Hanouf Alkarashi**, Robert G. La Roche

**4:17** Dropleess cataract surgery: Canadian experience with first 1000 eyes as an alternative advanced drug-delivery method for cataract surgery patients • **Barry Y. Emara**, Rasha Stino

**4:20** Discussion

**4:24** Comparison of toric intraocular lens prediction using Pentacam, OPD, and IOL master measurements • *Qayim Kaba, Hannah Chiu, Eric Tam, Raj Maini, Sohel Somani*

**4:27** Comparison of intraocular lens (IOL) calculation accuracy using Haigis and Barrett formulas in manual versus laser-assisted cataract surgery • **Soumya Sharma**, Harrish Nithianandan, Eric S. Tam, Hannah Chiu, Raj Maini, Sohel Somani

**4:30** Comparison of the refractive effect between femtosecond laser versus manual clear corneal incisions • **Austin Pereira**, Sohel Somani, Eric S. Tam, Hannah Chiu, Raj Maini

**4:33** Discussion

- 4:37** Physician and patient reporting of appropriateness and prioritization for cataract surgery • **Evan Michaelov**, Matthew Schlenker, Morgan Lim, Chelsea D'Silva, Simona Minotti, Dean Smith, Devesh Varma, Robert Reid, Iqbal (Ike) Ahmed
- 4:40** Catquest-9SF: Validation and application in various populations • **Anna Kabanovski**, Matthew B. Schlenker, Wendy Hatch, Varun Chaudhry, Sherif El-Defrawy, Rob Reid, Iqbal (Ike) Ahmed
- 4:43** Catquest-9SF questionnaire and eCAPS: Validation in a Canadian population • **Anna Kabanovski**, Simona C. Minotti, Matthew B. Schlenker, Morgan Lim, Chelsea D'Silva, Amalraj Antony, Rob Reid, Iqbal (Ike) Ahmed
- 4:46** Assessing minimally important difference for cataract surgery using the CATQUEST 9-SF (the MIDUS study) • **Prima Moinul**, Joshua Barbosa, Bryon McKay, Anne Beattie, Nina Ahuja, Mark Fava, Mei Lin Chen, Enitan Sogbesan, Forough Farrokhyar, Varun Chaudhary
- 4:49** Functional vision changes following cataract surgery in five southern Ontario healthcare centers • **Jenny Qian**, Tiandra Ceyhan, Joshua Barbosa, Varun Chaudhary
- 4:52** Discussion
- 4:56** Models of intracameral (IC) antibiotic concentration decay in the anterior chamber (AC) increase our understanding of IC antibiotic efficacy • **Steve A. Arshinoff**, Tina Felfeli, Milad Modabber
- 4:59** An eye on the air: Settle plate testing to measure air quality in a tertiary care ophthalmology department during fast track vs. regular cataract procedures • **Aishwarya Sundaram**, Joline Head, Ian Davis, Mark Seamone, Daniel M. O'Brien, Audra Russell-Tattrie, Christopher D. Seamone
- 5:02** OVDs to avoid incomplete caps and prevent capsulorhexis extension in FLACS • **Steve A. Arshinoff**
- 5:05** Corneal changes associated with intrastromal limbal relaxing incisions using the femtosecond laser • **Carter W. Lim**, Sohel Somani, Hannah Chiu, Raj Maini, Eric S. Tam
- 5:08** Histopathological software analysis of the trabecular meshwork and corneal endothelium between anterior and posterior chamber intraocular lenses in donor eyes • **Christina Mastromonaco**, Matthew Balazsi, Dyvia Rao, Rafael Nojiri, Thiago Figueiredo, Nabil Saheb, Miguel Burnier
- 5:11** Discussion
- 5:15** Adjourn

## App Tips – to help you get the most out of your mobile event app!

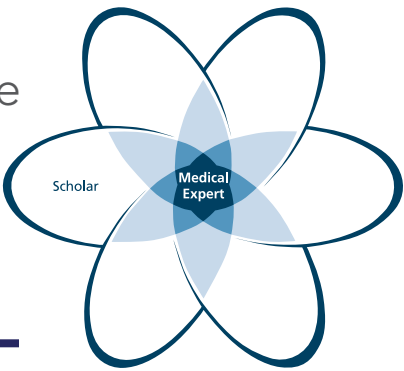
Add your favourite sessions from the schedule to your itinerary by clicking the plus sign. Then view the sessions you have flagged to attend under “My Schedule”.

## Les Astuces – Optimiser votre expérience avec l'appli mobile !

À partir de l'horaire, ajoutez vos séances préférées à votre itinéraire en cliquant sur le signe plus. Les séances que vous aurez ainsi choisies apparaîtront maintenant dans la section « Mon Horaire ».

Innovations in Retinal Imaging  
Innovations en imagerie rétinienne  
3:45 – 5:15 PM  
Room | Salle 204 AB

CANADIAN RETINA SOCIETY  
SOCIÉTÉ CANADIENNE DE LA RÉTINE



LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Describe the OCT angiography features of diabetic retinopathy
- Integrate multi-modal imaging in the management of various retinal diseases including intraocular lymphoma, retinitis pigmentosa and plaquenil toxicity
- Describe the utility of OCT angiography in the diagnosis of different maculopathies

OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Décrire les caractéristiques angiographiques de la rétinopathie diabétique en OCT
- Intégrer l'imagerie multimodale dans la gestion de diverses maladies rétinienues, y compris le lymphome intraoculaire, la rétinite pigmentaire et la toxicité du plaquénil
- Décrire l'utilité de l'angiographie en TCO dans le diagnostic de différentes maculopathies

ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

MODERATORS | ANIMATEURS

Serge Bourgault MD

Eric Tourville MD

|             |                                                                                                                                                                                                                                                                                                                               |             |                                                                                                                                                                                                                                                                                    |
|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>3:45</b> | Introduction                                                                                                                                                                                                                                                                                                                  | <b>4:37</b> | Q & A                                                                                                                                                                                                                                                                              |
| <b>3:50</b> | Clinical update: The evolution of retinal detachment surgery inspired by clinical trials and multimodal imaging<br>• <b>Rajeev Muni</b>                                                                                                                                                                                       | <b>4:40</b> | Prospective analysis of retinal vessel printing on fundus autofluorescence following pneumatic retinopexy<br>• <b>Carolina L. M. Francisconi</b> , Koby Brosh, Verena Juncal, Alan R. Berger, Filiberto Altomare, David R. Chow, David T. Wong, Louis R. Giavedoni, Rajeev H. Muni |
| <b>4:00</b> | Q & A                                                                                                                                                                                                                                                                                                                         | <b>4:47</b> | Q & A                                                                                                                                                                                                                                                                              |
| <b>4:05</b> | Use of multimodal imaging in the diagnosis and management of intraocular lymphoma • <b>Wai-Ching Lam</b> , Nick Fung, Qing Li, Ian Wong                                                                                                                                                                                       | <b>4:50</b> | A novel multifocal electroretinography stimulus for detecting hydroxychloroquine retinal toxicity • <b>Adrian C. Tsang</b> , Gianni Virgili, Ange-Lynca Kantungane, Chloe Gottlieb, Stuart Coupland                                                                                |
| <b>4:15</b> | Q & A                                                                                                                                                                                                                                                                                                                         | <b>4:57</b> | Q & A                                                                                                                                                                                                                                                                              |
| <b>4:20</b> | Retinal displacement after retinal detachment repair – Retrospective study<br>• <b>Koby Yaacov Brosh Heshin</b> , Carolina Francisconi, Verena Juncal, Alan Berger, Louis Giavedoni, David Wong, Fill Altomare, Roxane J Hillier, Francesco Sabatino, Mustafa Kadhim, Richard Newsom, Varun Chaudhary, Jenn Qian, Rajeev Muni | <b>5:00</b> | Multimodal analysis of hyperautofluorescent ring size in retinitis pigmentosa • <b>Collier (Shangjun) Jiang</b> , Netan Choudhry                                                                                                                                                   |
| <b>4:27</b> | Q & A                                                                                                                                                                                                                                                                                                                         | <b>5:07</b> | Q & A                                                                                                                                                                                                                                                                              |
| <b>4:30</b> | Early signs of microangiopathy secondary to diabetes measured with swept source OCTA • <b>Sonja Karst</b> , Morgan Heisler, Natalia Page, Timothy Yu, Julian Lo, Mahyar Etminan, Simon Warner, Marinko Sarunic, David Maberley, Eduardo Navajas                                                                               | <b>5:10</b> | Concluding remarks                                                                                                                                                                                                                                                                 |
|             |                                                                                                                                                                                                                                                                                                                               | <b>5:15</b> | Adjourn                                                                                                                                                                                                                                                                            |

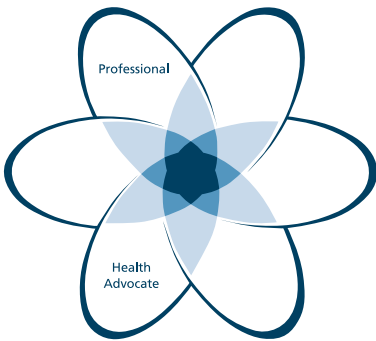


# The Changing Landscape of Ophthalmic Disease and Vision Care

Le paysage changeant de la maladie ophtalmique et des soins de la vue

3:45 – 5:15 PM

Room | Salle 205 BC



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

CANADIAN ASSOCIATION FOR PUBLIC HEALTH AND GLOBAL OPHTHALMOLOGY | ASSOCIATION CANADIENNE DE LA SANTÉ PUBLIQUE ET OPHTHALMOLOGIE MONDIALE

## LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Describe the practice pattern of optometrist and ophthalmologist and influence of insurance coverage
- Explain determinants of visual health for Canadians and vulnerable populations
- Integrate impact of communicable disease trends in public health on visual health

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Décrire le modèle de pratique de l'optométriste et de l'ophtalmologiste et l'influence de la couverture d'assurance
- Démontrer une compréhension des déterminants de la santé visuelle chez les Canadiens et dans la population vulnérable
- Intégrer l'incidence des tendances des maladies transmissibles en santé publique sur la santé visuelle

## MODERATORS | ANIMATRICES

Marie-Josée Aubin MD, MPH, MSc (PHO)

Myrna Lichter MD

**3:45** Introduction

**3:48** Microbial prevalence and antibiotic susceptibility in ocular infection at London Health Sciences Center • **Ritesh Gupta**, Gayathri Sivakumar, Rookaya Mather

**3:55** Association of reproductive factors with visual impairment & eye disease: The Canadian Longitudinal Study on Aging (CLSA) • **Christy Costanian**, Marie-Josée Aubin, Ralf Buhrmann, Ellen Freeman

**4:02** The prevalence and impact of eye disease in urban homeless population • **Collier (Shangjun) Jiang**, Mirriam Mikhail, Jackie Slomovic, Austin Pereira, Gerald Lebovic, Christopher Noel, Myrna Lichter

**4:09** Frequency and source of eyeglass insurance coverage in Ontario: Results from 2003 to 2014 • **Prem Nichani**, Graham E. Trope, Yvonne M. Buys, Samuel N. Markowitz, Sophia Liu, Gordon Ngo, Michelle Markowitz, Yaping Jin

**4:16** Q & A

**4:27** De-listed routine eye exams significantly reduced the use of government-induced optometrists but increased the use of government-insured primary care provider for ocular diagnosis • **Yaping Jin**, William Jeon, Rick H. Glazier, Michael H. Brent, Yvonne M. Buys, Graham E. Trope

**4:34** A comparative analysis of the practice profile of ophthalmology to other surgical specialties in Canada • **Elizabeth Y. Lee**, Jason Noble, Nirojini Sivachandran

**4:41** The landscape of ophthalmologists and optometrists in Ontario from 2011 to 2016 • **Shicheng (Tony) Jin**, Sherif El-Defrawy, Jonathan A. Micieli, Yaping Jin, Peng Yan

**4:48** Complaints against ophthalmologists in the province of Ontario, Canada: A five year review • **Rini Saha**, Anna Kabanovski, Susan Klejman, Edward Margolin, Yvonne M. Buys

**4:55** Q & A

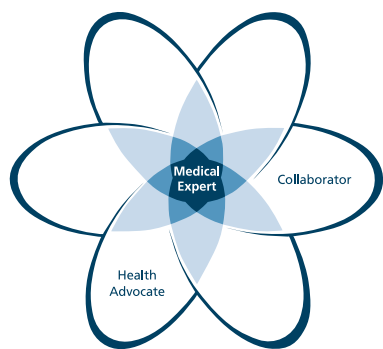
**5:10** Closing

**5:15** Adjourn

# New Literature in Neuro-ophthalmology?

## Du nouveau dans la littérature scientifique en neuro-ophthalmologie ?

3:45 – 5:15 PM • Room | Salle 202



CANADIAN NEURO-OPHTHALMOLOGY SOCIETY

SOCIÉTÉ CANADIENNE DE LA NEURO-OPHTALMOLOGIE

ROYAL COLLEGE  
OF PHYSICIANS AND SURGEONS OF CANADA

CANMEDS

### LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Assess whether successful medical treatment of IIH correlate with changes of TSS
- Evaluate initial GCIPL thickness as a predictor for long term structural changes of the optic nerve and as a predictor for visual prognosis in optic neuritis cases
- Differentiate what Proteome is, how it might be linked to understanding the pathogenesis of symptomatic LHON, and interpret how it might direct potential targets for treatment
- Compare and contrast octopus visual field testing versus SITA-FAST HVF with regards to monitoring, detecting, and following patients with neurological pathology impacting visual fields

### OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Évaluer si le traitement médical réussi de l'HII est en corrélation avec les changements de la SST
- Évaluer l'épaisseur initiale de la GCIPL comme prédicteur des changements structuels à long terme du nerf optique et du pronostic visuel dans les cas de névrite optique
- Différencier ce qu'est le protéome, comment il pourrait être lié à la compréhension de la pathogenèse de la NOHL symptomatique, et interpréter comment il pourrait orienter les cibles potentielles pour le traitement
- Comparer et différencier les tests du champ visuel de la pieuvre par rapport au VHF SITA-FAST en ce qui concerne la surveillance, la détection et le suivi des patients atteints d'une pathologie neurologique ayant un impact sur les champs visuels

### MODERATORS | ANIMATEURS

Danah H. Albreiki MD  
Amadeo Rodriguez MD

### KEYNOTE SPEAKERS | CONFÉRENCIERS INVITÉS

Aki Kawasaki MD, PhD  
Carlos Torres MD, FRCPC

- 3:45

Don't make that mistake! Pitfalls in neuro-ophthalmology • *Aki Kawasaki*
- 4:05

MR imaging of papilledema: What you need to know! • *Carlos Torres*
- 4:25

Transverse venous sinus stenosis in idiopathic intracranial hypertension – A prospective pilot study • **Wesley Chan**, *Laine Green, Anuradha Mishra, Charles Maxner, Jai J. Shankar*
- 4:35

Proteomic analysis of patient-derived fibroblasts harbouring the G11778A mutation of LHON • **Heidi Britton**, *Bryce Pasqualotto, Leonard Foster, Gordon Rintoul, Claire Sheldon*

- 4:45

Comparison of 24-2 sita fast humphrey visual fields verses octopus visual field testing in monitoring and following patients with neurological lesions impacting the visual field • **Scott Anderson**, *Adrian Battiston, Donna Bong, Karim Damji*
- 4:55

Predictive effect of ganglion cell analysis on visual function after episode of optic neuritis • **Jérémy Claes**, *Emmanuelle Chalifoux, David Simonyan, Andréane Lavallée*
- 5:05

Questions, discussion and wrap-up
- 5:15

Adjourn

SURGICAL SKILLS TRANSFER COURSES  
COURS DE TRANSFERT DE COMPÉTENCES





# SURGICAL SKILLS TRANSFER COURSES

## COURS DE TRANSFERT DE COMPÉTENCES

COS Surgical Skills Transfer Courses (STCs) are physician-developed and physician-led hands-on wet-labs or interactive workshops that offer instruction, demonstration, discussion and simulation of surgical, diagnostic and management techniques. Topics can include any ophthalmic surgical technique. COS has developed the STCs with the overall goal of providing intensive instruction leading to new knowledge and/or skills.

Delivered as part of the COS Annual Meeting, Skills Transfer Courses are planned and facilitated independently by the STC Chair, AMPC Session Chair and STC Course Directors, according to Royal College of Physicians and Surgeons of Canada's (RCPSC) accreditation guidelines.

STCs are accredited for Section 3 – Simulation credits of the MOC Program as designated by the RCPSC.

Les cours de transfert de compétences (CTC) chirurgicales de la SCO sont mis au point et donnés par des médecins. Il peut s'agir d'aqualabos pratiques ou d'ateliers interactifs qui prennent la forme d'un cours, d'une démonstration, d'une discussion ou d'une simulation concernant des techniques chirurgicales, diagnostiques ou de prise en charge. Les sujets peuvent inclure toute technique chirurgicale ophtalmique. La SCO a développé les CTC avec l'objectif général de fournir un enseignement intensif menant à de nouvelles connaissances et compétences.

Offerts dans le cadre du congrès annuel de la SCO, les CTC sont planifiés et animés indépendamment par le président des CTC, le président du comité du programme du congrès et les directeurs des CTC, conformément aux directives du Collège royal des médecins et chirurgiens du Canada (CRMCC) concernant l'agrément.

Les CTC sont accrédités au titre de la section 3 – crédits relatifs au programme de simulation du programme de MDC désigné par le CRMCC.



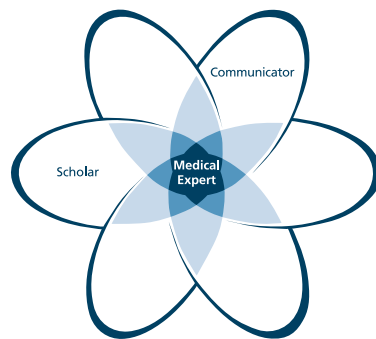
# Laser Simulation and Cost-Effective Video Recording

## Simulation laser et enregistrement video rentabilisé

Friday, June 14 | Vendredi 14 juin

10:45 AM – 12:15 PM

Room | Salle 2000 B



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

### LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Integrate artificial eyes into simulation training for commonly encountered lasers in residency and comprehensive practice, including YAG Peripheral Iridotomy, YAG Capsulotomy, Laser Trabeculoplasty, Micropulse Cyclophotocoagulation, and Laser Retinopathy
- Apply smartphone technology to slit lamps and microscopes to capture clinical photos and videos for education and research
- Demonstrate the use of wearable, point of view (POV) cameras to capture clinical photos and videos in strabismus, glaucoma, retina, and oculoplastics surgery for ergonomic awareness, education and research

### OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Intégrer les yeux artificiels à la formation en simulation pour les lasers fréquemment rencontrés en résidence et pratique générale, y compris l'iridotomie périphérique YAG, la capsulotomie YAG, la trabéculoplastie laser, la cyclophotocoagulation par micro-impulsion et la rétinopexie laser
- Appliquer la technologie des téléphones intelligents aux lampes à fentes et aux microscopes pour capturer des photos et des vidéos cliniques aux fins d'éducation et de recherche
- Démontrer l'utilisation de caméras POV portables pour capturer des photos et des vidéos cliniques dans le strabisme, le glaucome, la rétine et la chirurgie oculoplastique aux fins d'éducation, de recherche et de sensibilisation à l'ergonomie

### COURSE DIRECTORS | DIRECTEURS DU COURS

Helen Chung MD  
Micah Luong MD  
Matthew Schlenker MD

### INSTRUCTORS | FORMATEURS

Yusuf Ahmed  
Anish Arora  
Andrew Crichton MD  
Adam Gorner  
David Loewen  
Andrew Swift  
Joshua C. Teichman MD, MPH  
Daniel Waldner  
Jonathan Wong MD

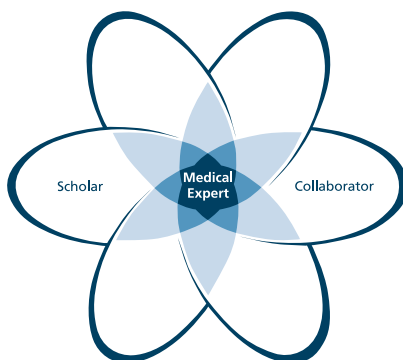
This multidisciplinary STC is aimed at those looking to improve their imaging skills and in-clinic procedure techniques, giving participants an opportunity to train and learn how to train others on artificial eyes with realistic tissue feedback prior to performing the procedure in clinic or on call. It will also be of interest to physicians/administrators wishing to trial ophthalmic laser equipment. The course may be particularly useful for those involved in education and research, as we will showcase useful and cost effective tips and tricks to capture clinical video and photos for education, research, and presentations.

Ce CTC multidisciplinaire s'adresse à ceux et celles qui souhaitent améliorer leurs compétences en imagerie et leurs techniques d'intervention en clinique. À l'aide d'yeux artificiels à rétroaction tissulaire réaliste, les participants pourront acquérir une formation et apprendre à former d'autres personnes aux interventions, avant d'effectuer la procédure en clinique ou sur appel. Le cours intéressera également les médecins et les administrateurs qui souhaitent mettre à l'essai des appareils laser ophtalmiques. Le cours peut être particulièrement utile pour les personnes qui s'occupent d'éducation et de recherche, car nous présenterons des conseils et des astuces utiles et rentables pour saisir des vidéos et des photos cliniques aux fins d'éducation, de recherche et de présentation.

## Suturing an Intraocular Lens and How to Save Yourself

### Suture d'une lentille intraoculaire et dépannage

Friday, June 14 | Vendredi 14 juin  
1:30 – 3:00 PM • Room | Salle 2000 B



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

#### LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Recognize indications for scleral fixated intraocular lens implant (IOL) in eyes with absent capsular support
- Describe surgical steps of fixating IOL in the sulcus
- Troubleshoot complications that can occur during scleral fixation of IOL

#### OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Reconnaître les indications d'un implant de lentille intraoculaire (LIO) à fixation sclérale dans les yeux en l'absence de soutien capsulaire
- Décrire les étapes chirurgicales de la fixation sclérale de la LIO dans le sulcus
- Dépanner des complications qui peuvent survenir pendant la fixation sclérale de la LIO

CONTINUED ON PAGE 106

## COURSE DIRECTORS | DIRECTEURS DU COURS

Varun Chaudhary MD  
Nigel Rawlings MD  
David Wong MD  
Deepa Yoganathan MD

## INSTRUCTORS | FORMATEURS

Michael Dollin MD  
John Galic MD  
Robert Gizicki MD  
Cynthia Qian MD  
David Ta Kim MD  
Geoff Williams MD

This practical hands-on session will deliver one-on-one instruction of sutured scleral fixated intraocular lens implant techniques. A silicone eye model will be used to outline the surgical steps of these methods. Each participant will have their own microscope with individualized live feedback from instructors, and therefore can approach this practice at their own pace.

Cette séance pratique consiste en une formation individuelle aux techniques d'implantation intraoculaire de lentille à fixation sclérale avec suture. Un modèle oculaire en silicone sera utilisé pour décrire les étapes chirurgicales de ces méthodes. Chaque participant aura son propre microscope et bénéficiera de commentaires personnalisés en direct de la part des formateurs et formatrices, et pourra donc aborder cette pratique à son propre rythme.

## Anterior Vitrectomy Vitrectomie antérieure

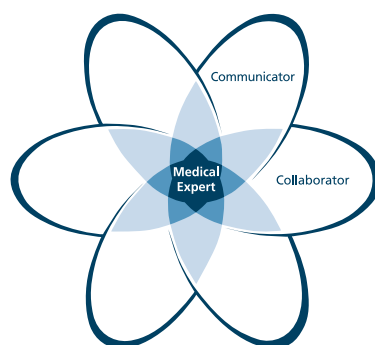
Friday, June 14 | Vendredi 14 juin

3:45 – 5:15 PM

Saturday, June 15 | Samedi 15 juin

10:45 AM – 12:15 PM

Room | Salle 2000 B



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

## LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Describe the approach to anterior vitrectomy, including techniques to stain vitreous and minimize vitreous loss
- Integrate knowledge of fluidics to optimize phaco machine settings for anterior vitrectomy
- Analyze various models for anterior vitrectomy

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Décrire l'approche pour la vitrectomie antérieure et les techniques de coloration du vitré et de minimisation de perte du vitré
- Intégrer la connaissance de la fluidique afin d'optimiser les paramètres du phacoémulsificateur pour une vitrectomie antérieure
- Analyser divers modèles de vitrectomie antérieure

## COURSE DIRECTORS DIRECTEURS DU COURS

Helen Chung MD  
Kevin J. Warrian BA (Hons.),  
BSc. (Med), MA, MD

## INSTRUCTORS | FORMATEURS

Jamie Bhamra MD  
Mahshad Darvish-Zargar MD  
Ali Dirani MD  
Julia Farah MD  
Kulbir Gill MD  
Jit Gohill MD

Patrick Gooi MD  
Kailun Jiang MD  
Dima Kalache MD  
Ananda (Andy) Kalevar MD  
Micah Luong MD  
Nir Shoham-Hazon MD



Participants will gain hands-on experience in anterior vitrectomy to manage vitreous prolapse encountered during anterior segment surgery. They will gain a better understanding of vacuum and pump settings to optimize fluidics for various tasks. They will also compare various models for anterior vitrectomy in the wet-lab setting, including bimanual anterior vitrectomy and anterior chamber maintainer models. This segment will also contrast options for secondary IOL placement, including sulcus IOL insertion and advanced approaches for preservation of 3 piece IOLs with reverse optic capture (ROC). Faculty will include both experienced cataract and vitreoretinal surgeons.

**NOTE:** A limited number of three different models of phaco machines will be available for use during the Cataract STC. Choice of phaco machine will be on a first-come, first-served basis.

Les participants s'initieront à pratiquer la vitrectomie antérieure pour la gestion du prolapsus vitréen qui survient pendant la chirurgie du segment antérieur. Ils comprendront mieux les principes et les réglages de la pompe à vide pour optimiser les fluides en fonction des diverses étapes de l'intervention. Ils pourront aussi comparer les divers modèles de vitrectomie antérieure en contexte d'aqualabo, y compris les modèles de vitrectomie antérieure bimanuelle et de trocart de la chambre antérieure. Ce segment mettra également en contraste les options de placement secondaire de la LIO, y compris l'insertion de la LIO dans le sulcus et les approches avancées pour la préservation des LIO à capture optique inverse composées de trois morceaux. Les formateurs seront des chirurgiens d'expérience en cataracte et en interventions vitréo-rétiniennes.

**NOTE :** Un nombre limité de trois modèles de phacoémulsificateurs seront mis à la disposition des participants au cours de transfert de compétences (CTC) sur la cataracte. Le choix d'appareil se fera selon la règle du premier arrivé, premier servi.

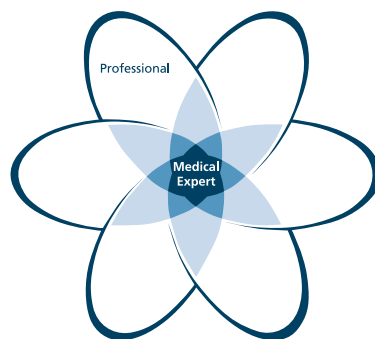
## Microinvasive Glaucoma Surgery and Adjuncts to Cataract Surgery

### Chirurgie micro-invasive du glaucome et procédures connexes pendant la chirurgie de la cataracte

Saturday, June 15 | Samedi 15 juin

1:30 – 3:00 PM

Room | Salle 2000 B



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

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#### LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Describe the indications, advantages, disadvantages, and post operative management for XEN microstents, Gonioscopy Assisted Transluminal Trabeculectomy/ABiC/iTrack, Goniosynechialysis, and Ab Interno needling
- Apply and learn the technique involved in performing these microinvasive glaucoma surgery (MIGS) procedures as well as adjunctive glaucoma procedures during cataract surgery
- Integrate simulation-based learning of MIGS and adjunctive glaucoma procedures during cataract surgery into residency/fellowship training programs

CONTINUED ON PAGE 108

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Décrire les indications, les avantages, les inconvénients et la gestion postopératoire des microstents XEN, de la trabéculéctomie transluminale assistée par gonioscopie/ABiC/iTrack, de la goniosynéchiolyse et de la ponction à l'aiguille ab interno
- Appliquer et apprendre la technique utilisée pour effectuer ces chirurgies micro-invasives du glaucome (CMIG) ainsi que les dispositifs auxiliaires de chirurgie du glaucome pendant la chirurgie de la cataracte
- Intégrer dans les programmes de formation en résidence et les stages postdoctoraux l'apprentissage par simulation de la CMIG et des interventions auxiliaires de chirurgie du glaucome pendant la chirurgie de la cataracte

### COURSE DIRECTORS | DIRECTEURS DU COURS

Matthew Schlenker MD, MSc  
Jing Wang MD

### INSTRUCTORS | FORMATEURS

Toby Chan MD  
Bryce Ford MD  
Sébastien Gagné MD  
Patrick Gooi MD  
Priya Gupta MD  
Paul Harasymowycz MD  
Oscar Kasner MD  
Hady Saheb MD, MPH  
Steven Schendel MD  
Nir Shoham-Hazon MD  
David Yan MD  
Darana Yuen MD

The session introduces clinical application and surgical techniques for XEN microstents, Gonioscopy Assisted Transluminal Trabeculectomy with ABiC and iTrack, and adjunctive glaucoma procedures during cataract surgery: Goniosynechialysis and ab interno needling. The audience will be general ophthalmologists, glaucoma specialists, and senior trainees with interest in glaucoma. Each candidate will have his/her own microscope with instructors supervising (ratio 1:2). Each surgical approach will have seven stations and attendees will rotate through three stations. Either dry-lab or wet-lab versions will be present, depending on the best model for each device.

Video projection of surgical videos of each device will be played throughout the session.

La séance présente les applications cliniques et les techniques chirurgicales pour les microstents XEN, la trabéculéctomie transluminale assistée par gonioscopie avec ABiC et iTrack, et les techniques connexes de chirurgie du glaucome pendant la chirurgie de la cataracte (goniosynéchiolyse et ponction à l'aiguille ab interno). L'assistance se composera d'ophthalmologistes généralistes, de spécialistes du glaucome et de stagiaires seniors qui s'intéressent au glaucome. Chaque participant aura son propre microscope et bénéficiera de la supervision des formateurs (ratio 1:2). Sept stations seront consacrées à chaque dispositif et les participants feront la rotation entre trois stations. Les installations prendront la forme de laboratoires secs ou d'aqualabos, selon le modèle qui convient le mieux à chaque dispositif.

Des vidéos d'interventions chirurgicales mettant en cause chacun des dispositifs seront projetées tout au long de la séance.

The COS is on Twitter! Join the conversation by using **#COS2019**.

La SCO est sur Twitter! Joignez-vous à la conversation en utilisant le mot-clic **#SCO2019**.



@CanEyeMDs

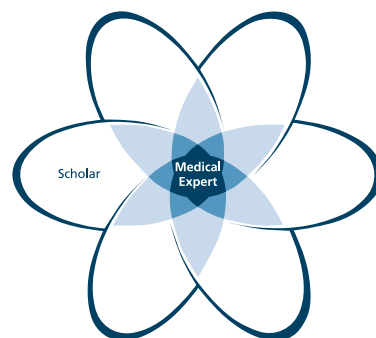
# On Top of Tomography and Above Aberrometry

Supérieurs à la tomographie et à l'aberrométrie

Saturday, June 15 | Samedi 15 juin

3:45 – 5:15 PM

Room | Salle 206 A



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

## LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Analyze testing from various corneal and ocular imaging devices including topographers, tomographers, aberrometers, biometers, and anterior segment optical coherence tomographers (AS-OCTs)
- Assess preoperative/intraoperative/postoperative testing for corneal/anterior segment procedures and monitoring of disease
- Assess patient's imaging to describe which intraocular lenses (IOLs) are indicated or contraindicated in a specific patient (including aspheric, toric, multifocal, and EDOF IOLs)
- Use imaging postoperatively to identify reasons for unexplained outcomes or visual complaints
- Analyze corneal imaging including epithelial mapping, to assess for candidacy of laser refractive surgery
- Analyze corneal imaging to confirm ectasia and plan corneal-crosslinking (CXL) combined with topography-guided photorefractive keratectomy (tgPRK) or intrastromal corneal ring segments (ICRS)

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Analyser les tests réalisés au moyen de divers appareils d'imagerie cornéenne et oculaire, y compris des topographes, des tomographes, des aberromètres, des appareils de biométrie et des appareils de tomographie de cohérence optique du segment antérieur (AS-OCT)
- Évaluer les tests préopératoires/intraopératoires/postopératoires pour les interventions cornéennes/du segment antérieur et la surveillance de la maladie
- Évaluer l'imagerie du patient pour décrire quelles lentilles intraoculaires (LIO) sont indiquées ou contre-indiquées chez un patient en particulier (y compris les LIO asphériques, toriques, multifocales et EDOF)
- Utiliser l'imagerie postopératoire pour déterminer la cause des résultats inexplicables ou des plaintes visuelles
- Analyser l'imagerie cornéenne, y compris la cartographie de l'épithélium, pour évaluer la candidature à la chirurgie réfractive au laser
- Analyser l'imagerie cornéenne pour confirmer l'ectasie et planifier le traitement de réticulation cornéenne (cross-linking – CXL) combiné à la kératectomie photoréfractive guidée par topographie (tgPRK) ou à l'implantation de segments de l'anneau intrastromal cornéen (ICRS)

CONTINUED ON PAGE 110

COURSE DIRECTOR | DIRECTEUR DU COURS

Joshua C. Teichman MD, MPH

KEYNOTE SPEAKERS | CONFÉRENCIERS INVITÉS

Arthur B. Cummings MMed(Ophth), FCS(SA),  
FRCSEd, PCEO  
Jonathan D. Solomon MD

This year's Cornea Skills Transfer Course will be a small group session focusing on corneal and ocular imaging technologies applicable to the cornea specialist and comprehensive ophthalmologist. With newer IOL options for cataract surgery, minimizing astigmatism, as well as excluding patients with various levels of higher order aberrations or less common ocular anatomy is paramount. Moreover, these technologies can be helpful in patients with postoperative visual complaints. With the popularity of refractive surgery, it is important to exclude patients who are more likely to have poor outcomes. With newer treatments for diseases such as keratoconus and postoperative ectasia, it is important to identify people early to halt disease progression. Lastly, many existing machines have new software packages, and the utility of these will be discussed.

Cette année, le cours de transfert de compétences de la cornée prendra la forme d'une séance de travail en petits groupes axée sur les technologies d'imagerie cornéenne et oculaire intéressant les spécialistes de la cornée et les ophtalmologistes. Avec de nouvelles options de LIO pour la chirurgie de la cataracte, il est de plus en plus important de minimiser l'astigmatisme et d'exclure les patients qui ont divers niveaux d'aberrations d'un ordre plus élevé ou une anatomie oculaire moins courante. De plus, ces technologies peuvent être utiles chez les patients qui ont une plainte visuelle postopératoire. Compte tenu de la popularité de la chirurgie réfractive, il est important d'exclure les patients qui sont plus susceptibles d'obtenir de mauvais résultats. Avec de nouveaux traitements pour des maladies comme le kératocône et l'ectasie postopératoire, il est important d'identifier rapidement ces personnes pour arrêter la progression de la maladie. Enfin, de nombreux appareils existants ont de nouveaux logiciels, et l'utilité de ceux-ci sera discutée.

|             |                                                                                            |             |                                                                                                               |
|-------------|--------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------------------------------------------------------|
| <b>3:45</b> | Opening                                                                                    | <b>4:30</b> | Discussion                                                                                                    |
| <b>3:50</b> | AS-OCT and epithelial mapping pearls<br>• Francis Roy                                      | <b>4:35</b> | Tomography pearls for keratoconus and refractive screening • David Rootman                                    |
| <b>4:00</b> | Discussion                                                                                 | <b>4:45</b> | Discussion                                                                                                    |
| <b>4:05</b> | Topography pearls for cataract surgery and topography-guided treatments • Simon P. Holland | <b>4:50</b> | Aberrometry pearls in cataract/refractive surgery and in managing the 20/unhappy patient • Arthur B. Cummings |
| <b>4:15</b> | Discussion                                                                                 | <b>5:00</b> | Discussion                                                                                                    |
| <b>4:20</b> | IOL calculation with artificial intelligence and 3-D super formula • Jonathan D. Solomon   | <b>5:15</b> | Adjourn                                                                                                       |

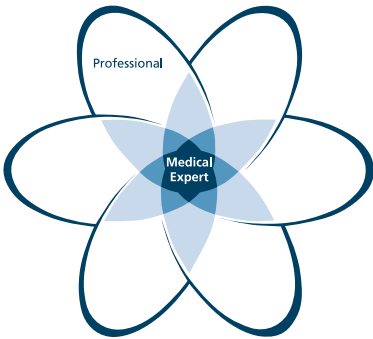
# Botulinum: Smooth Moves in Québec City

## La toxine botulique : Apprentissage en douceur à Québec

Sunday, June 16 | Dimanche 16 juin

10:45 AM – 12:15 PM

Room | Salle 206 B



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CANMEDS

### LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Assess the functional and cosmetic indications for treatment with botulinum toxin and describe the related muscular anatomy
- Choose the appropriate botulinum toxin and describe proper dilution and preparation methods
- Apply the injection techniques learned during the course on patients in their practice

### OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Évaluer les indications fonctionnelles et cosmétiques du traitement par toxine botulique et décrire l'anatomie musculaire associée
- Choisir la toxine botulique appropriée et décrire les méthodes de dilution et de préparation adéquates
- Appliquer les techniques d'injection apprises pendant le cours aux patients dans leur pratique

### COURSE DIRECTOR DIRECTEUR DU COURS

Patrick R. Boulos MD

### INSTRUCTORS | FORMATEURS

Chantal Arès MD

Bryan Arthurs MD

Yannik Boutin MD

Katherine Byrns MD

Nicolas Cadet MD

Ryan Eidsness MD

Marcele Falcao MD

Harmeet Gill MD

Isabelle Hardy MD

Edsel Ing MD

Conrad Kavalec MD

Femida Kherani MD

Dominique Meyer MD

Julie Morin MD

Navdeep Nijhawan MD

Jamie Wong MD

This course is designed for comprehensive ophthalmologists and residents who are interested in learning and reviewing functional and cosmetic injections of botulinum toxins. Attendees will learn how to choose the appropriate toxin for a variety of cases and patients. The preparation and dilution methods for each toxin will be reviewed and participants will practice various functional and cosmetic injection techniques under the direct supervision of an instructor (experienced botulinum toxin injector).

Ce cours est destiné à l'ophtalmologiste généraliste et aux résidents qui sont intéressés à apprendre et à examiner les injections fonctionnelles et esthétiques de toxines botuliques. Les participants apprendront à choisir la toxine appropriée (botox, dysport ou xeomin) pour une variété de cas et de patients. Les méthodes de préparation et de dilution de chaque toxine seront examinées et les participants pratiqueront diverses techniques d'injection fonctionnelle et esthétique sous la supervision directe d'un formateur (injecteur de toxine botulique expérimenté).

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ALLIED HEALTH SESSIONS  
SÉANCES DES SOCIÉTÉS CONNEXES DE LA SANTÉ







# Glaucoma: Thriving Under Pressure

September 12 – 14, 2019  
Westin Hotel, Ottawa, Ontario

**PROGRAM CHAIR**

Iqbal (Ike) Ahmed, MD  
University of Toronto

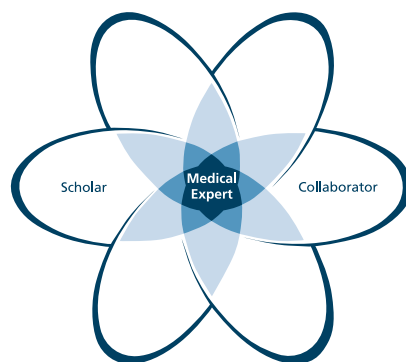
**CO-CHAIR**

Garfield Miller, MD  
University of Ottawa Eye Institute

# TCOS Workshop Atelier LSCO

Thursday, June 13 | Jeudi 13 juin  
1:00 – 5:00 PM • Room | Salle 203

THE CANADIAN ORTHOPTIC SOCIETY  
LA SOCIÉTÉ CANADIENNE D'ORTHOPTIQUE



ROYAL COLLEGE  
OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

## LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Develop an approach to managing miswiring syndromes
- Explore various imaging modalities used to assess extraocular muscle characteristics in complex strabismus
- Explain cortical visual impairment (CVI) and the prognosis of treatment
- Manage considerations of surgical intervention for exotropia including parental expectations

## OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Élaborer une approche pour gérer les troubles de connexion des fibres nerveuses
- Explorer diverses méthodes d'imagerie utilisées pour évaluer les caractéristiques des muscles extraoculaires dans le strabisme complexe
- Expliquer la déficience visuelle corticale et le pronostic du traitement
- Gérer les considérations de l'intervention chirurgicale pour l'exotropie, y compris les attentes des parents

**1:00** Opening remarks • *Mallory Coughlin*  
**1:05** Synkinesis and congenital cranial dysinnervation disorders • *David Plemel*  
**1:55** Discussion  
**2:00** Extraocular muscle imaging in strabismus • *Helya Aghazdeh, Brad Wakeman*  
**2:50** Discussion

**3:00** Break  
**3:10** Answering perplexing ocular questions: Workshop • *Darren Oystreck, Sarah Whitecross, Jennifer Lambert, Linda Colpa, May Chidiac, Louise-Etienne Marcoux*  
**5:00** Adjourn

# CSOMP Annual Education Day

## Journée annuelle d'éducation de la SCPMO

Friday, June 14 | Vendredi 14 juin  
8:00 AM – 5:00 PM • Room | Salle 203

CANADIAN SOCIETY OF OPHTHALMIC MEDICAL PERSONNEL  
SOCIÉTÉ CANADIENNE DU PERSONNEL MÉDICALE EN OPHTALMOLOGIE

**MODERATORS | ANIMATEURS**

Marc Lafontaine MD  
Craig Simms BSc, COMT, CDOS, ROUB

- 7:30** Registration

**7:55** Welcome • *Marc Lafontaine, Craig Simms*

**8:00** Emerging use of smartphones in clinical ophthalmology settings • *Mona Koaik*

**8:50** Updates in keratoplasty • *Ralph Kyrillos*

**9:40** **Break**

**9:55** Loose lens? Torn iris? We have an app for that! • *Mahshad Darvish-Zargar*

**10:45** Latest applications of aberration analysis in cataract and refractive surgery  
• *Kashif Baig*

**11:15** Fluorescein angiography • *Craig Simms*

**12:05** **Lunch**

**1:05** B-scan ultrasound: A review of technique and important tips to obtain high quality images • *Ashley Alexander*
- 1:55** Biometry: Trouble shooting challenging cases • *Carla Blackburn*

**2:45** **Break**

**3:00** Anterior segment pathology imaged with UBM • *Craig Simms*

**3:50** Episcleritis vs scleritis? Tips and tricks!  
• *Karin Oliver*

**4:20** Principles and applications of optical coherence tomography (OCT)  
• *Nadia Sayed*

**4:50** Adjourn

*The CSOMP Annual Education Day is approved for 8.5 JCAHPO "A" credits.*

# CSORN: Patient Advocacy & Leadership

## SCIO : Défense des intérêts des patients et leadership

Saturday, June 15 | Samedi 15 juin

8:00 AM – 4:30 PM • Room | Salle 203

**CANADIAN SOCIETY OF OPHTHALMIC REGISTERED NURSES**  
**LA SOCIÉTÉ CANADIENNE DES INFIRMIÈRES ET INFIRMIERS EN OPHTALMOLOGIE**

### LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Explain updates on trends in nursing leadership, surgical cataract complications, diabetic retinopathy, patient pre-op care
- Integrate the knowledge and skills gained from the sharing of the new and upcoming practices within the surgical and clinical settings into their practice
- Demonstrate knowledge on patient advocacy in the vision rehabilitation and CNIB settings and how nurses can become advocates for this patient population

### OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Expliquer les dernières tendances en matière de leadership infirmier, de complications de la cataracte chirurgicale, de rétinopathie diabétique, de soins préopératoires aux patients
- Intégrer les connaissances et compétences acquises lors du partage des pratiques nouvelles et à venir dans les contextes chirurgicaux et cliniques dans leur pratique
- Démontrer ses connaissances sur la défense des droits des patients dans les contextes de réadaptation visuelle et d'INCA et sur la manière dont les infirmières peuvent devenir des porte-parole de cette population de patients

**7:30** Registration

**8:00** Welcome & opening remarks  
 • *Kate Callaghan*

**8:05** Complicated cataracts: A retinal perspective • *Steve Levasseur*

**8:45** Diabetic retinopathy • *Jesia Hasan*

**9:25** Town hall discussion

**10:00 Break**

**10:45** Pre-operative assessment for cataract surgery • *Nawaaz Nathoo*

**11:20** Annual General Meeting • *Kate Callaghan*

**12:15 Lunch**

**1:30** Vision rehabilitation as part of the continuum of eye care  
 • *Mary Lou Jackson*

**2:25** The role of CNIB in vision rehabilitation  
 • *Jennifer Urosevic*

**3:00 Break**

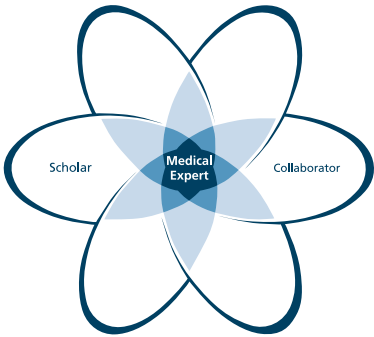
**3:30** Leadership in the role of nurses and nurse managers in ophthalmology  
 • *Andrée-Anne Berube*

**4:15** Closing remarks • *Kate Callaghan*

**4:30** Adjourn

TCOS Scientific Session  
Séance scientifique de LSCO  
Sunday, June 16 | Dimanche 16 juin  
8:00 AM – 5:00 PM  
Room | Salle 203

THE CANADIAN ORTHOPTIC SOCIETY  
LA SOCIÉTÉ CANADIENNE D'ORTHOPTIQUE



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA | CanMEDS

LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- Evaluate functional vision loss; strategies for examination techniques and appropriate management techniques
- Describe the pros and cons and limitations of adjustable sutures in strabismus surgery
- Describe binocular management of amblyopia
- Describe the many etiologies and clinical management of headache patients presenting to the ocular motility clinic

OBJECTIFS D'APPRENTISSAGE

À la fin de la session, les participants pourront :

- Évaluer la perte de vision fonctionnelle, les stratégies d'examen et les techniques de gestion appropriées
- Décrire les avantages, les inconvénients et les limites des sutures ajustables en chirurgie du strabisme
- Décrire la gestion binoculaire de l'amblyopie
- Décrire les nombreuses étiologies et la prise en charge clinique des patients souffrant de céphalées qui se présentent à la clinique de motilité oculaire

MODERATORS | ANIMATRICES

Meggie Caldwell OC(C)

Annick Fournier MD

|       |                                                                                                                                                          |      |                                                                                                                                                          |
|-------|----------------------------------------------------------------------------------------------------------------------------------------------------------|------|----------------------------------------------------------------------------------------------------------------------------------------------------------|
| 8:00  | Opening remarks and introductions • <i>Meggie Caldwell</i>                                                                                               | 1:30 | Orthoptic graduate presentations • <i>Ian Clark</i>                                                                                                      |
| 8:10  | Introduction of John Pratt-Johnson Lecturer                                                                                                              | 2:00 | Lunn Lecture • <i>Linda Colpa</i>                                                                                                                        |
| 8:15  | <b>The John Pratt-Johnson Lecture:</b> The complex clinical challenge of functional vision loss • <i>Laura Irons</i>                                     | 2:30 | The game of therapy – Current evidence for binocular treatment of amblyopia • <i>Belva See</i>                                                           |
| 9:00  | Inter-observer reliability among trained observers, while testing prism vergences in patients • <i>Alexandra Sherven</i>                                 | 2:45 | Headaches in strabismic patients • <i>Robert La Roche</i>                                                                                                |
| 9:15  | Revisiting spasmus nutans: What have we learned? • <i>Sarah Whitecross</i>                                                                               | 3:00 | Discussion                                                                                                                                               |
| 9:30  | Adjustable sutures and strabismus surgery: What is the evidence and where are we heading? • <i>Kamiar Mireskandari</i>                                   | 3:15 | <b>Break</b>                                                                                                                                             |
| 9:45  | Discussion                                                                                                                                               | 3:45 | A review of ocular abnormalities in neonatal abstinence syndrome • <i>Jennifer Lambert</i>                                                               |
| 10:00 | <b>Break</b>                                                                                                                                             | 4:15 | Interobserver reliability between varying years of experienced orthoptists • <i>Aqsa Saleem</i>                                                          |
| 10:45 | Difficult strabismus cases: Case presentation and panel discussion • <i>Ian Clark, Linda Colpa, May Chidiac, Annick Fournier, Louise-Etienne Marcoux</i> | 4:30 | Binocularity outcomes for treatment following treatment for retinopathy of prematurity: Results analysis and future indications • <i>Sonia Manuchian</i> |
| 12:15 | <b>Lunch</b>                                                                                                                                             | 4:45 | Discussion                                                                                                                                               |
|       |                                                                                                                                                          | 5:00 | Closing remarks and adjourn • <i>Meggie Caldwell</i>                                                                                                     |

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POSTER PRESENTATIONS  
PRÉSENTATIONS D’AFFICHES







# POSTER PRESENTATIONS

10:00 – 10:45 AM • COS Annual Meeting Exhibit Hall

## **COS Awards of Excellence Presentation:**

Friday, June 14 during Current Concepts I (8:00 – 10:00 AM, Room 2000 C)

**Poster Presentation Schedule:** Question periods are organized by subspecialty and scheduled during the morning break (10:00 – 10:45 AM), Friday, June 14 – Sunday, June 16:

**Friday, June 14:** Glaucoma, Oculoplastics, and Uveitis

**Saturday, June 15:** Cataract, Cornea, and Paediatric Ophthalmology

**Sunday, June 16:** Neuro-ophthalmology, Ocular Regenerative Medicine, Public Health and Global Ophthalmology, Retina, and Vision Rehabilitation

**Earn Your Section 2 Credits:** Learning from poster presentations may be claimed as a Scanning Activity under Section 2, as defined by the RCPSC. To claim credits, you must enter the title of each poster reviewed along with one learning outcome per poster. You may claim 0.5 credits per poster with a documented learning outcome in MAINPORT. To facilitate the documentation process you can:

1. Use the checklist available in the print program poster list to mark which posters you viewed. The notes sections can be used to document your learning outcomes.
2. Download the fillable PDF from the event App or website to log the posters you viewed and your learning outcomes electronically.

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# PRÉSENTATIONS D’AFFICHES

10 h à 10 h 45 • Salle d’exposition de la SCO

## **Remise des Prix d’excellence de la SCO :**

Le vendredi 14 juin durant la séance Notion courantes I (8 h à 10 h – Salle 2000 C)

**Horaire des présentations d’affiches :** Les périodes de questions sont organisées par subsécialité et programmées pendant la pause du matin (10 h à 10 h 45), du vendredi 14 juin au dimanche 16 juin :

**Le vendredi 14 juin :** Glaucome, Oculoplastie, et Uvéite

**Le samedi 15 juin :** Cataracte, Cornée, et Ophtalmologie pédiatrique

**Le dimanche 16 juin :** Médecine oculaire régénérative, Neuro-ophtalmologie, Réadaptation visuelle, Rétine, et Santé publique et ophtalmologie mondiale

**Obtenez vos crédits de la section 2 :** Le temps passé à l’étude d’affiches peut être inscrit à titre d’activité d’analyse de section 2, comme le stipule le CRMCC. Pour inscrire des crédits, vous devez inscrire le titre de chaque affiche étudiée ainsi qu’un résultat d’apprentissage. Les participants peuvent inscrire 0,5 crédit par affiche s’ils ont consigné le résultat d’apprentissage dans MAINPORT. Pour simplifier le processus de documentation, vous pouvez :

1. utiliser la liste de vérification qui se trouve à la section des affiches dans la version imprimée du programme afin de consigner les affiches étudiées; la section des notes du programme peut servir à documenter vos résultats d’apprentissage;
2. télécharger le PDF à remplir que vous trouverez dans l’application et sur le site Web du Congrès afin de consigner en format électronique les affiches étudiées et vos résultats d’apprentissage.

## FRIDAY, JUNE 14 | VENDREDI 14 JUIN

### GLAUCOMA | GLAUCOME

- 1. Evaluating a novel ab-externo technique for implantation of XEN gel stent in eyes with previous failed glaucoma surgery  
**Armin Abadeh**, David Yan, Iqbal (Ike) Ahmed
- 2. Incidence of steroid-induced IOP elevation following phacoemulsification cataract extraction (PCE) combined with trabecular micro-bypass stent or ab interno trabeculectomy  
**Maryam Abtahi**, Chris J. Rudnisky, Samir Nazarali, Karim F. Damji
- 3. Patient perception of generic glaucoma eye medication as compared to their brand-name counterpart  
**Steven Alchi**, Arbaaz Patel, Sharnjit Bains, Enitan Sogbesan
- 4. Ophthalmology competency based medical education structured technical assessment rubric (OSTAR) for gonioscopy assisted transluminal trabeculotomy (GATT)  
**Anish Arora**, Samir Nazarali, Dani Wang, Helen Chung, Matthew B. Schlenker, Malcolm Gooi, Patrick Gooi
- 5. A comparison between standard of care full field electroretinogram (ERG) and the envoy pattern ERG in glaucoma subjects  
**Shveta Bali**, Irfan Kherani, Herman Asma, Lynca Kantungane, Garfield Miller, Stuart Coupland
- 7. Trabeculectomy: Comparison of long term efficacy of injection or sponge application of mitomycin-c  
**Mathieu Carrière**, Caroline Lajoie, Emmanuelle Chalifoux
- 8. Improving glaucoma surgery with the small molecule ALK-5 inhibitor SB-431542  
**Jim T. Denstedt**, James J. Armstrong, Cindy M. L. Hutnik
- 9. Study of the concentration-dependent structural effects of pilocarpine on the anterior segment of the eye  
Daniel Peretz, **Gerardo Discepolo**, Hady Saheb
- 10. Gonioscopy-assisted transluminal trabeculotomy: A retrospective review of cases with 6 month follow up  
**Gavin Docherty**, Paul Crichton, Carolyn Lee, Natalia Maes, Louise Robinson, Paul Mackenzie, Steven Schendel
- 11. Intermediate term outcomes of superior or inferior ab-externo SIBS microshunt in refractory eyes  
**Georges Durr**, Matthew B. Schlenker, Evan Michaelov, Iqbal (Ike) Ahmed
- 12. The psychosocial impact of glaucoma: Preliminary results regarding depression  
**Michael L. Groff**, Bohmyi Choi, Monali Malvankar
- 13. The effects of timolol and brimonidine on lymphatic drainage from the eye  
**Joseph Hanna**, Yeni Yucel, Xun Zhou, Nayeon Kim, Neeru Gupta
- 14. Cost of failing to modernize the fee schedule for minimally invasive glaucoma surgery in Ontario  
**Shicheng (Tony) Jin**, Yvonne M. Buys
- 15. Cost-related nonadherence with topical glaucoma medications in patients aged 25-64  
**Dov B. Kagan**, Graham E. Trope, Yvonne M. Buys, Yaping Jin
- 16. Laser trabeculoplasty practice patterns of Canadian ophthalmologists  
**Elizabeth Y. Lee**, Forough Farrokhyar, Enitan Sogbesan
- 17. Retinal vein occlusion in primary angle closure suspects (PACS), primary angle closure (PAC) and Primary angle closure glaucoma (PACG) patients: A prospective case-control study  
**Cody Li**, Ali Salimi, Harrish Nithianandan, Alaa Mofti, Jesia Hasan, John Galic, John Chen, Hady Saheb
- 18. Medium term outcomes of multiple trabecular microbypass stents in combination with phacoemulsification  
**Taylor Lukasik**, Nick Andrew, Jithin Yohannan, Iqbal (Ike) Ahmed

- 19. Intermediate term outcomes of first generation trabecular microbypass stents and second generation stents in combination with phacoemulsification  
**Taylor Lukasik**, Jithin Yohannan, Iqbal (Ike) Ahmed, Devesh Varma, Diamond Tam
- 20. Intermediate term outcomes of SIBS microshunt alone or in combination with phacoemulsification  
**Evan Michaelov**, Matthew B. Schlenker, Georges Durr, Iqbal (Ike) Ahmed
- 21. Health state measurement of glaucoma patients  
**Keean Nanji**, Gurkaran Sarohia, Dominik Podbielski, Kevin Kennedy
- 22. EHCO interprofessional eye-care guidelines: Awareness, perspectives and practice of eye-care professionals  
**Laura Nguyen**, Sharan Bains, Enitan Sogbesan
- 23. Effectiveness and risk factors for failure of an ab interno gel stent in the management of open angle glaucoma  
**Saama Sabeti**, Sangsu Han, Garfield Miller, Robert L. Chevrier, David Marshall, Ralf Buhrmann
- 24. The effect of topical corticosteroid therapy on early postoperative intraocular pressure profile of patients undergoing combined cataract and trabecular micro-bypass surgery  
**Ali Salimi**, Aaron Winter, Cody Li, Paul Harasymowycz, Hady Saheb
- 25. Intra- and inter-hemispheric travelling wave propagation of rivalry dominance in early glaucoma  
**Saba Samet**, Graham E. Trope, Esther G. Gonzalez, Luminita Tarita-Nistor
- 26. Intraocular pressure spikes following therapeutic intravitreal injections are correlated with ocular rigidity  
**Diane N. Sayah**, Javier Mazzaferri, Renaud Duval, Flavio Rezende, Santiago Costantino, Mark R. Lesk
- 27. Intermediate term outcomes of ab-interno gelatin microstent implantation alone or in combination with phacoemulsification: Canadian multicentre review  
**Fady Sedarous**, Matthew B. Schlenker, Andrei-Alexandru Szigiato, Husayn Gulamhusein, Paul Harasymowycz, Michael Dorey, Maryam Abtahi, Barend Zack, Delan Jinapriya, Iqbal (Ike) Ahmed
- 28. Post-operative outcomes of the ab-interno gelatin microstent with and without phacoemulsification: Preliminary results  
**Andrei-Alexandru Szigiato**, Samir Touma, Samir Jabbour, Younes Agoumi, Harmanjit Singh
- 29. Gonioscopy-assisted transluminal trabeculotomy and trabecular micro-bypass stent cost-effectiveness analysis  
**Danielle D. Wentzell**, Malcolm Gooi, Bryce Ford, Patrick Gooi
- 30. Efficacy and safety of micropulse cyclophotocoagulation in patients with ocular hypertension and glaucoma  
Qayim Kaba, Eric Tam, Sohel Somani, **Darana Yuen**
- 31. Corneal endothelium decompensation in patients with chronic hypotony after glaucoma surgery  
Tianwei Ellen Zhou, **Diane N. Sayah**, Mark Lesk

## OCULOPLASTIC AND RECONSTRUCTIVE SURGERY OCULOPLASTIE ET CHIRURGIE RECONSTRUCTIVE

- 32. Case report – Central retinal artery occlusion with partial ophthalmic artery occlusion after cosmetic dermal filler injection  
**Zhi Hong Toh**, John Tsia-Chuen Kan, Chee Chew Yip

## UVEITIS | UVÉITE

- 33. Peripapillary retinal nerve fiber layer thickness variation in anterior uveitis and intermediate uveitis  
**Elianne De Larochellière**, Isabelle Schmit, David Simonyan, Simon Couture

- 34. Herpes zoster ophthalmicus presenting as diffuse anterior and posterior scleritis and orbital myositis  
**Shaobo Lei**, Imran Jivraj, Nupura Bakshi
- 35. Application of ozurdex in the treatment of intermediate, posterior and panuveitis: A systematic review of the current evidence  
**Saanwalshah S. Saincher**, Chloe Gottlieb

## SATURDAY, JUNE 15 | SAMEDI 15 JUIN

### CATARACT SURGERY | CHIRURGIE DE LA CATARACTE

- 36. Incidence of perioperative systemic hypertension in phacoemulsification surgery  
**Alexandra N. Budure**, James J. Armstrong, Jillian Belrose, Cindy Ly, Cindy M. L. Hutnik
- 37. Impact of blue-filtering intraocular lenses implant on exudative age-related macular degeneration: A case-control study  
Thierry Hamel, **Serge Bourgault**, Patrick Rochette, Justine Rheault
- 38. Adjusting the Scheimpflug total corneal power in intraocular lens power calculation in eyes that have undergone keratorefractive surgery  
**Mona Koalk**, Carl-Joe Mehanna, Bahaa Nouredine, Shady Awwad
- 39. Delayed disc swelling in Irvine-Gass syndrome: Two case reports  
John Tsia-Chuen Kan, **Zhi Hong Toh**, Benjamin Julian Chong Ming Chang

### CORNEA, EXTERNAL DISEASE AND REFRACTIVE SURGERY CORNÉE, MALADIES EXTERNES ET CHIRURGIE RÉFRACTIVE

- 40. Retreatment rate after topography guided photorefractive keratectomy (TG PRK) for post-keratoplasty astigmatism (PKA) using two lasers  
**Albert Covello**, Simon P. Holland, David T.C. Lin, Geoffrey Ching, Nikhil Dewan
- 41. Topography-guided photorefractive keratectomy for correction of irregular astigmatism following penetrating keratoplasty  
**Albert Covello**, Simon P. Holland, David T.C. Lin, Samuel Arba Mosquera
- 42. Concomitant herpetic keratitis and acute retinal necrosis  
**Nikhil Dewan**, Wendy Ming, Sonia N. Yeung, Alfonso Iovieno
- 43. Interface keratitis following lamellar keratoplasty - a retrospective case series  
**Jennifer Ling**, Grace Qiao, Titus Wong, Sonia N. Yeung, Alfonso Iovieno
- 44. Soft contact lens wear following Boston keratoprosthesis type 1 implantation  
**Jiaru Liu**, Mona Harissi-Dagher
- 45. Transepithelial versus epithelium-off corneal collagen cross-linking for corneal ectasia: A systematic review and meta-analysis  
**Siddharth Nath**, Carl Shen, Alex Koziarz, Laura Banfield, Mark A. Fava, William G. Hodge
- 46. Compared effectiveness of Dresden-protocol versus pulsed-accelerated crosslinking for halting keratectasia in progressive keratoconus  
**Liam M. O'Sullivan**, Davin Johnson, Ankur Ralhan
- 47. The effect of ophthalmic antibiotics on the ocular surface microbiome and its association with ocular surface disease: A prospective study of patients undergoing cataract surgery  
**Jacob Rullo**, Yao Wang, Isabella Irrcher, Mark Bona, Stephanie Baxter
- 48. Rates of dry eye after refractive surgery: A systematic review and meta-analysis  
**Raman-Deep S. Sambhi**, Gagan Deep S. Sambhi, Monali Malvankar, Rookaya Mather
- 49. Impact of dry eye disease on work performance and productivity: A systematic review and meta-analysis  
**Gayathri Sivakumar**, Janhavi Patel, Garmen Ng, Rookaya Mather, Monali Malvankar
- 50. Management of patients with neuropathic corneal pain  
**Jaime C. Sklar**, Vishakha Thakrar, Raymond Stein, Clara C. Chan

- 51. Long term visual outcomes of the Boston keratoprosthesis Type I  
**Andrei-Alexandru Szigiato**, Cristina Bostan, Taylor Nayman, Mona Harissi-Dagher
- 52. Lifitegrast efficacy and safety for treatment of dry eye disease: Overview of 5 randomized controlled trials  
**Pierre Trottier**, Mahshad Darvish-Zargar, Eric D. Donnenfeld, Edward J. Holland, Kelly K. Nichols, Mohamed Hamdani, Amir Shojaei

### PAEDIATRIC OPHTHALMOLOGY AND STRABISMUS L'OPHTHALMOLOGIE PÉDIATRIQUE ET STRABISME

- 53. Two children with mucopolidosis type IV: Corneal imaging with optical coherence tomography and novel MCOLN1 mutation  
Patrick Hamel, **Cristina Bostan**, Grant Mitchell, Benjamin Ellezam, Jean-François Soucy, Mona Harissi-Dagher
- 54. Ophthalmology referral as part of a multidisciplinary approach to suspected abusive head trauma  
**Laura Donaldson**, Gloria Isaza, Burke Baird, Varun Chaudhary
- 55. Incomplete retinal vascularization in a patient with Joubert syndrome: A case report  
**Catherine Liu**, Ayesha Khan
- 56. Recovery of stereopsis after strabismus surgery in x-linked ocular albinism  
**Jingyi Ma**, Maya Tong, Ian M. MacDonald
- 57. Treatment of acquired, progressive esohypotropia associated with high myopia: A surgical adventure  
**Gareth D. Mercer**, Michael Flanders
- 58. Isolated congenital bilateral lacrimal gland agenesis – A case series and literature review  
**Milad Modabber**, Nebras Alghazawi, Rami Darwich, Laura Russell, Ayesha Khan
- 59. Clinical outcomes of intravitreal bevacizumab compared to laser photocoagulation in retinopathy of prematurity: 11-year retrospective study  
**Prima Moinul**, Varun Chaudhary, Ashlyn Pinto, Gloria Isaza
- 60. Systematic review of use of neuromuscular blocking drugs during strabismus surgery  
Yi Ning J. Strube, **Caberry Yu**

## SUNDAY, JUNE 16 | DIMANCHE 16 JUIN

### NEURO-OPHTHALMOLOGY | NEURO-OPHTALMOLOGIE

- 61. Phosphodiesterase-5 inhibitor and excessive dosing of antihypertensive drug causing non arteritic anterior ischemic optic neuropathy—a double whammy for the optic nerve!  
**Samuel A. Minaker**, Arun Sundaram
- 62. Features and management of strabismus from skull base chordoma: A case series  
**Georges B. Nassrallah**, Michael Flanders
- 63. Traumatic optic tract syndrome with a decade-old head trauma  
**Solin Saleh**, Jack Mouhanna, Danah H. Albreiki
- 64. Acute orbital myositis preceding skin rash of herpes zoster ophthalmicus  
Angela Zhang

### OCULAR REGENERATIVE MEDICINE | MÉDECINE OCULAIRE RÉGÉNÉRATIVE

- 65. Sustained delivery of protein therapeutics to the back of the eye using novel hydrogel scaffold  
**Ben Muirhead**, Todd Hoare, Heather Sheardown

**PUBLIC HEALTH AND GLOBAL OPHTHALMOLOGY  
LA SANTÉ PUBLIQUE ET OPHTALMOLOGIE MONDIALE**

- 66. A two-year-old girl in Tanzania with crying tears of blood  
**Marie-Josée Aubin**, Laura Reyes, Daniel Martinez, Marie-Claude Bottineau, James Oestreicher, William Mapham, Jan Hajek
- 67. Drs. Walter Wright and Alexander E. MacDonald: The First World War and its influence on ophthalmology in Canada  
**Michael T. Kryshalskyj**, Bradley St. Croix, Chryssa N. McAlister
- 68. Canadian national survey for tonometer disinfection in ophthalmology clinics  
**Dina Moinul**, Prima Moinul, Patricia Harvey
- 69. The trend in publication rate of abstracts presented at the Canadian Ophthalmological Society annual meetings: 2010-2015  
**Sarah J. Mullen**, Jenny Qian, Tiandra Ceyhan, Michael Nguyen, Sabrina Chaudhry, Forough Farrokhyar, Varun Chaudhary
- 70. Carbon footprint of cataract surgery - Are we missing a wake up call?  
Madhu Uddaraju

**RETINA | RÉTINE**

- 71. Examining the relationship between diabetic retinopathy, diabetic macular edema, and obstructive sleep apnea  
**Ahmad Al-Awadi**, Qayim Kaba, Sohel Somani
- 72. Does education, gender, or household income affect outcomes of retinal detachment repair: The Canadian experience  
**Parnian Armjand**, John Adam McLaughlin, Mohamed Soliman, Raymond Ko, Bernard Hurley, Michael Dollin
- 73. Mental health disease and cancer as predictors of poor visual outcomes in patients with proliferative vitreoretinopathy  
**Parnian Arjmand**, Harrish Nithianandan, Eric K. Chin, David R. P. Almeida
- 74. Oguchi disease: A tale of two fundi  
**Brian G. Ballios**, Radha Kohly, Rajeev Muni, Daniel Weisbrod, Tom Wright, Peng Yan
- 75. Retrospective review of outcomes following pneumatic retinopexy in patients with primary rhegmatogenous retinal detachment  
**Motaz Bamakrid**, Quratulain Paracha, Shicheng Jin, Caroline Lampert Francisconi, Verena Juncal, Rajeev Muni
- 76. A family affair: Two father-son pairs with familial optic disc pits  
**Devin Betsch**, Andrew Orr, R. Rishi Gupta
- 77. Patient comfort after antisepsis with povidone-iodine or chlorhexidine for intravitreal injection  
**Marvi K. Cheema**, C. Maya Tong, Uriel Rubin, Tyler Henry, Rizwan Somani, Matthew T. S. Tennant
- 78. Internal chandelier-assisted macular buckling for myopic foveoschisis  
**Adam P. Deveau**, Parampal S. Grewal, Mark E. Seamone, Mark Greve, R. Rishi Gupta
- 79. Incorporation of the diagnosis D341 envoy electrophysiology systems into the clinical setting  
**Aya El koussy**, Karen Liu, Ange-Lynca Kantungane, Stuart Coupland
- 80. Status of the central retinal artery post-intravitreal injection in patients with intact gross visual acuity  
**Danica R. Kindrachuk**, Joshua Manusow, Frank Stockl

- 82. Evaluation of the RETeval 30Hz Flicker ERG in the assessment of adult diabetic patients  
**Syilia Mohand-Said**, Lynca Kantungane, Nadia Sayed, Vanja Popovic, Stuart Coupland
- 83. Patient comfort and preference for aqueous chlorhexidine compared to povidone-iodine as antisepsis for intra-vitreous injection preparations.  
**Rahul Moorjani**, Monique Munro, Feisal Adatia
- 84. Texture analysis of digital fundus photographs: A quantitative algorithm for teleophthalmology  
**Damien Pike**, Ahmad Sidiqi, Justin French, Xavier Campos-Möller, Efrem Mandelcorn, Tom Sheidow, James H. Whelan
- 85. Treatment of large and persistent macular holes using subretinal amniotic membrane transplant  
**Michael Politis**, John C. Chen
- 86. Assessing the extent of diabetic retinopathy in an inpatient psychiatric population  
**Jenny Qian**, Amirthan Sothivannan, Joshua Barbosa, Varun Chaudhary
- 87. Practice patterns of Canadian retina specialists in the management of postoperative endophthalmitis  
**Jessica Ruzicki**, Si Xi Zhao, Isabella Irrcher, Wilma Hopman, Paul Yan, Rishi Gupta, Sanjay Sharma, Manpartap Bal
- 88. Choroidal detachment containing metastatic cells of undiagnosed malignancy: A case series  
**Nirojini Sivachandran**, Lauri De Nicola, Shaheer Aboobaker, Hatem Krema, Filiberto Altomare
- 89. Amyloid- $\beta$  localization in the human retina: Exploring potentials of early and non-invasive ocular detection of Alzheimer's disease  
**Qinyuan (Alis) Xu**, Sieun Lee, Veronica Hirsch-Reinshagen, Ian Mackenzie, Robin Hsiung, Geoffrey Charm, Elliott To, Kailun Jiang, Alice Liu, Marinko Sarunic, Mirza Faisal Beg, Jing Cui, Eleanor To, Joanne Matsubara
- 90. Comparing bevacizumab and ranibizumab for treatment of neovascular age-related macular degeneration: A meta-analysis of noninferiority randomized controlled trials  
Xiaotang Wang, **Ying Wang**
- 91. Iluvein real world evidence: Intraocular pressure outcomes in patients receiving 0.19 mg fluocinolone acetonide intravitreal implant for diabetic macular edema  
Deepa Yoganathan
- 92. The effectiveness of ocriplasmin vs. surgery for the treatment of macular holes: A systematic review  
**Brian Yu**, Tom Sheidow, Raman-Deep Sambhi, Phil Hooper, Monali Malvankar-Mehta

#### **VISION REHABILITATION | RÉADAPTATION VISUELLE**

- 93. Quality of life of low vision patients: A systematic review and meta-analysis  
**Manav Nayeni**, Monali Malvankar

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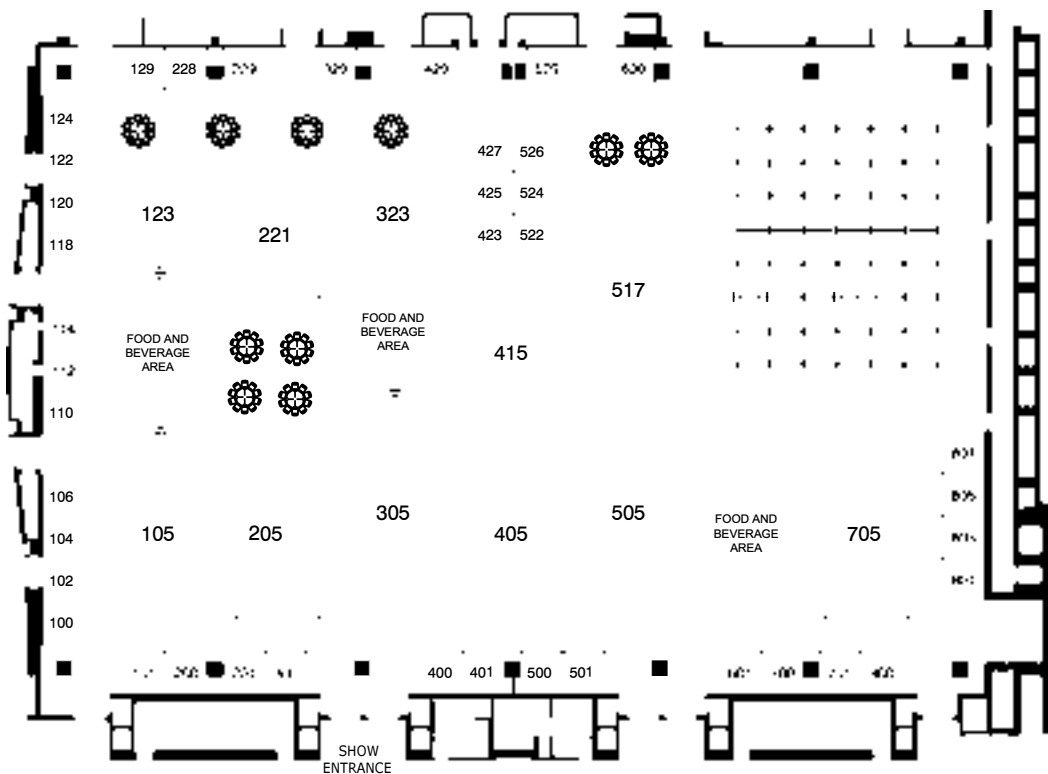






# EXHIBITION | EXPOSITION

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The moment innovation and passion lead to the best vision for your patient. This is the moment we work for. With products and services for patients, Carl Zeiss Canada strives to contribute to medical progress in eye care and to create added value for your daily work. ZEISS offers a comprehensive portfolio of state-of-the-art, integrated ophthalmic systems for Glaucoma, Retina, Cataract & Refractive.

Le moment où l'innovation et la passion aident à améliorer la vision de votre patient. C'est le moment pour lequel nous travaillons. Avec des produits et services pour les patients, Carl Zeiss Canada s'efforce de contribuer au progrès médical en matière de soins de la vue et de créer une valeur ajoutée pour votre travail quotidien. ZEISS propose un portefeuille complet de systèmes ophtalmiques intégrés pour le glaucome, la rétine, la cataracte et la réfraction.

## Candorvision

### Booth 114



**Dr. Frank Heidemann**  
President & Founder

CANDORVISION (a division of Candorpharm Inc.)

T: 1-514-380-5270  
E: [info@candorvision.com](mailto:info@candorvision.com)  
**[www.candorvision.com](http://www.candorvision.com)**

Candorvision markets highest quality ophthalmics: preservative-free, phosphate-free, 300-dose family of HYLO® drops, OCUNOX® ointment and CALMO® Eye Spray are the refreshing alternative for your dry eye patients! CALMO® Lid Care is a fragrance-free, paraben-free, tenside (soap)-free liposomal suspension for effective lid care that protects the tear film.

Candorvision - Feel the Difference!

La famille de gouttes HYLO® de 300 doses sans agent de conservation ni phosphate, OCUNOX® onguent et CALMO® vaporisateur oculaire sont l'alternative rafraichissante! CALMO® soin des paupières (sans parfum ni parabènes ni tensioactifs), nettoie tout en protégeant la couche lipidique et convient aux peaux sensibles.

Candorvision - sentez la différence!

## Clarion Medical Technologies

### Booth 118, 120, 122, 124



125 Fleming Drive  
Cambridge, ON N1T 2B8

T: 519-620-3900

T: 1-800-668-5236

E: [info@clarionmedical.com](mailto:info@clarionmedical.com)

Clarion Medical Technologies is a leading medical technology provider in Canada, offering innovative solutions for vision care. Our solutions include; Oculentis IOLs, iTrack for MIGS procedures, Optovue OCT and OCTA, ultrasounds, Dry Eye imaging and management, and leading laser technology for photocoagulation, photodisruption, AMD and SLT procedures.

Clarion Medical Technologies est un fournisseur chef de file de technologies médicales au Canada, offrant des solutions innovantes pour les soins de la vue. Nos solutions incluent; LIOs par Oculentis, iTrack pour les procédures MIGS, TCO et TCO A par Optovue, l'échographies, imagerie et gestion des sécheresse oculaire, et technologie laser de pointe pour les procédures de photocoagulation, de photodisruption, DMLA et de SLT.

## Diagnosys LLC

### Booth 522



**John O'Brien**

Sales and Business Development  
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**[diagnosysllc.com](http://diagnosysllc.com)**

A technology leader in the field of visual electrophysiology, Diagnosys LLC provides you with the capability to test visual function, objectively, using ERG and VEP techniques for treatment evaluation and diagnostics. Trusted by hospitals, universities, and clinical trials since the 80's.

## Dioptech Inc.

### Booth 100



**Denis Sarrazin**

Sales and Business Development  
98 Blanchard St. Suite 119  
Ste-Thérèse, QC J7E 4R9

C: 514-975-4088

E: [dsarrazin@dioptech.com](mailto:dsarrazin@dioptech.com)

**[dioptech.com](http://dioptech.com)**

Dioptech offre une solution de virtualisation de salle d'examen. Soyez en contact avec vos patients peu importe votre localisation. Solution développée au Canada.

Dioptech offers a test room virtualization solution. Be in touch with your patients no matter where you are. Solution developed in Canada.

## Epsilon Canada

### Booth 427



**Kaleem Mohammed**

Account Manager

91 Rylander Unit 7  
Toronto, ON M1B 5M5

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E: [epsiloncanada@hotmail.com](mailto:epsiloncanada@hotmail.com)

**[www.epsilonusa.com](http://www.epsilonusa.com)**

Epsilon offers a wide variety of titanium and stainless steel instruments that combine the precision you expect from your ophthalmic instruments. We carry instruments that continue a more than 15-year tradition of innovation, and unparalleled quality.

Epsilon Canada is a professionally managed organization which places the responsibility of maintaining high quality at every level- through its business network partners and after-sales support. A leading edge ophthalmic products company, Epsilon Canada carries a wide range of high quality, precision instruments. A strong quality management system, well internalized by its entire staff, enables Epsilon Canada to provide a superior product line.

Vision correction surgery, complex corneal surgery and advanced refractive cataract surgery are specialties where our instruments have proven quality.

Our success is built through partnerships with specialists which cascade to impact procedures and correct vision problems.

You can be assured – we have a commitment to excellence when it comes to the quality of our products.

## eSight

### Booth 524



**Nikki Nathanielsz**

Marketing Specialist  
1 Eglinton Ave E #401  
Toronto, ON M4P 3A1

T: 1-416-848-4148

E: [nikki@esighteyewear.com](mailto:nikki@esighteyewear.com)

**[www.esighteyewear.com](http://www.esighteyewear.com)**

eSight are clinically-validated electronic glasses for the visually impaired. As a Class I Medical Device registered with the FDA and EUDAMED, and inspected by Health Canada, eSight has empowered thousands of low vision individuals to gain or regain access to the Activities of Daily Living that can provide them with full independence.

eSight is currently worn by individuals managing a wide variety of common conditions, including Macular Degeneration, Diabetic Retinopathy, Glaucoma, and many more.

For more information, including a product demonstration, we invite you to join us at Booth #524.



## Glaukos Canada Inc.

Booth 201

### Kevin Shearer

95 Mural Street, 6th Floor  
Richmond Hill, ON L4B3G2

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E: [kshearer@glaukos.com](mailto:kshearer@glaukos.com)

[www.glaukos.com](http://www.glaukos.com)



Glaukos Corporation is an ophthalmic medical technology company focused on the development and commercialization of breakthrough products and procedures to transform the treatment of glaucoma, one of the world's leading causes of blindness. The company pioneered MicroInvasive Glaucoma Surgery, or MIGS, to revolutionize the traditional glaucoma treatment and management paradigm. Glaukos launched the iStent® Trabecular Micro-Bypass Stent, our first MIGS device, in Canada in 2009 and launched the iStent inject® Trabecular Micro-Bypass Stent in 2016. We are leveraging our platform technology to build a comprehensive and proprietary portfolio of micro-scale injectable therapies designed to address the complete range of glaucoma disease states and progression.

## Icare USA Inc.

Booth 800

### Seth Rogers

National Account Director

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E: [seth.rogers@icare-usa.com](mailto:seth.rogers@icare-usa.com)

[www.icare-usa.com](http://www.icare-usa.com)



The Icare® ic100 is based on a rebound measuring principle that requires no drops, air or specialized skills for its use. This device uses patented rebound technology to measure intraocular pressure. Its light-weight probe makes momentary contact with the cornea. Icare's proprietary algorithm coupled with state-of-the-art software allows the device to evaluate deceleration, contact time and other motion parameters of the probe when it touches the cornea. The premium design and user interface brings IOP measuring to a higher level.

**REVOLUTIONARY, EASY ROUTINE.** The easy-to-use Icare® tonometers revolutionize effective, early glaucoma detection and control by making the IOP measuring routine quick, effortless and effective. **SAFE, PAINLESS AND HYGIENIC PROCEDURE.** No anesthetic or disinfection is needed with the Icare® tonometer. As a result, the patient flow can be kept dynamic with this time efficient instrument. **SUITABLE FOR ANY KIND OF PATIENT.** The Icare® tonometer's disposable probe touches the cornea very lightly for only a fraction of a second. The measurement is barely noticeable by the patient and therefore suitable even for non-compliant subjects, such as children. Safe for LASIK, corneal and cataract surgery patients with no epithelial or corneal disruption, retina and difficult to applanate patients.

## I-MED Pharma Inc.

Booth 400, 401



### Katherine Bonenfant

Event Coordinator

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Dollard des Ormeaux, QC H9B 3H7

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**www.imedpharma.com**

I-MED Pharma Inc. is a privately held Canadian company, headquartered in Montreal, Quebec, servicing Canadian ophthalmologists, optometrists and the global eye care community.

**Established thirty years ago**, I-MED Pharma creates and distributes innovative medical and surgical eye care products worldwide. It continually researches, develops and sources the most effective and advanced solutions to eye disorders like cataracts, corneal degeneration, dry eye, glaucoma and meibomian gland dysfunction.

I-MED Pharma is proud to have been at the forefront of managing dry eye syndrome as a serious disease and invests heavily into education and developing effective dry eye products. I-MED Pharma's ocular surface disease product range includes diagnostic tools, dry eye drops, ocular hygiene, nutrition and therapeutic accessories.

## Imprimis Pharmaceuticals

Booth 129



### John Di Genova

Imprimis Pharma

5858 Côte-des-Neiges

Montreal, QC, H3S 1Z1

T: 1-514-463-3643

E: jdigenova@advanceddosageforms.com

**www.imprimisrx.com**

Imprimis Pharmaceuticals is a pharmaceutical company dedicated to delivering high-quality and innovative medicines to physicians and patients at affordable prices. We are pioneering a new commercial pathway in the industry, using compounding pharmacies for the formulation and distribution of high-quality, proprietary formulations that are supported by the clinical experience of physicians and patients. We specialize in Ophthalmology, however we also sell formulations outside of our core therapeutic area. Come to our booth for more information on our game-changing therapies in ophthalmology for post-cataract surgery care and glaucoma treatment... LessDrops™, DropLess™, and SimpleDrops™!

## INNOVA Medical Ophthalmics Inc.

Booth 517

### **Thomas Bourson**

Marketing Coordinator

48 Carnforth Road  
Toronto, ON M4A 2K7

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F: 1-416-631-8272

E: [marketing@innovamed.com](mailto:marketing@innovamed.com)

**[www.innovamed.com](http://www.innovamed.com) | [www.innovamed.com/fr](http://www.innovamed.com/fr)**

For over 30 years, INNOVA Medical Ophthalmics has been supplying the Canadian ophthalmic community with the most comprehensive line of diagnostic instruments, supplies, and technical services. Our combination of quality manufacturer partnerships, core company values, and dedicated employees enables INNOVA to provide customers with an unmatched ophthalmic instrument experience.

Depuis plus de 30 ans, Innova Medical Ophthalmics fournit à la communauté ophtalmique canadienne la gamme la plus complète d'instruments de diagnostics, de fournitures et de services techniques. La politique de l'entreprise, ses partenariats avec des fabricants reconnus pour la qualité de leurs équipements ainsi que ses équipes de professionnels dédiées permettent à Innova d'offrir à ses clients une expérience inégalée en matière d'instruments ophtalmiques.

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## Instrumentarium

Booth 501



### **Robert Grignon**

1273 rue Saint-Louis  
Terrebonne, QC J6W 1K4

T: 1-800-361-1502

F: 1-450-471-1030

E: [info@instrumentarium-online.com](mailto:info@instrumentarium-online.com)

**[www.instrumentarium-online.com](http://www.instrumentarium-online.com)**

Since 1977, we have built our reputation on the quality of our products and services. Our highly qualified, experienced team has always made Instrumentarium a partner that meets your needs in ophthalmology with integrity and effectiveness, so that you get the most out of your investment.

## Johnson & Johnson Vision Booth 305



### **Carolyn Treacy**

80 Whitehall Dr, Unit 2  
Markham, ON L3R 0P3

T: 905-305-3314  
F: 905-305-3313  
E: [ctreacy@its.jnj.com](mailto:ctreacy@its.jnj.com)

Caring for the world one person at a time inspires and unites the people of Johnson & Johnson. We embrace research and science – bringing innovative ideas, products and services to advance the health and well-being of people. Our more than 230 Johnson & Johnson operating companies work with partners in health care to touch the lives of over a billion people every day, throughout the world.

Johnson & Johnson Vision, through its operating companies, is committed to improving and restoring sight for patients worldwide. Since debuting the world's first disposable soft contact lens in 1987, Johnson & Johnson has been helping patients see better through their world-leading ACUVUE® Brand Contact Lenses portfolio. In 2017, Johnson & Johnson invested further in eye health, expanding into cataract surgery, laser refractive surgery (LASIK), consumer eye health and dry eye. Serving more than 60 million patients a day across 103 countries, Johnson & Johnson Vision is committed to helping more people in more places improve or restore their sight. Dual headquartered in Jacksonville, Florida, and Santa Ana, California, Johnson & Johnson Vision has more than 10,000 employees worldwide.

## Keeler Booth 526



### **Eugene VanArsdale**

Canadian Sales Manager & Head of Marketing

3222 Phoenixville Pike, Bldg. 50  
Malvern, PA 19355  
U.S.A

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**[www.keelerusa.com](http://www.keelerusa.com)**

Keeler Instruments, long known for their superior optics, will be exhibiting our wide range of optometric and ophthalmic instruments, including the Vantage Indirect Ophthalmoscopes Wired, Wireless and Digital Video systems, slit lamps, and loupes. Keeler Instruments is also proud to showcase its line of ultrasound diagnostic and imaging devices, including the A-scan Connect, B-scan Plus, UBM Plus, 4Sight combination unit, AccuPen tonometer, and PachPen pachymeter.

## Keir Surgical Ltd.

### Booth 110

126-408 Kent Ave. South E.  
Vancouver, BC V5X 2X7

T: 1-604-261-9596

F: 1-604-261-9549

E: [marketing@keirsurgical.com](mailto:marketing@keirsurgical.com)

**[www.keirsurgical.com](http://www.keirsurgical.com)**

Keir Surgical Ltd. is a Canadian owned and operated surgical products company that for over 95 years has been dedicated to providing its customers with quality products and services. Keir Surgical is a leading provider of surgical instruments, headlights and light sources, sterilization containers and trays, and sterile processing supplies to hospitals and clinics across the country. We are the exclusive Canadian distributor of KATENA ophthalmic instruments and a distributor of Rhein Medical instruments, both renowned as the highest quality instruments that have been helping surgeons achieve optimal clinical outcomes worldwide.



## Knight Therapeutics Inc.

### Booth 425

1055-3400 de Maisonneuve W.  
Montreal, QC H3Z 3B8

T: 514-484-4483

F: 514-481-4116

E: [info@gud-knight.com](mailto:info@gud-knight.com)

**[www.gud-knight.com](http://www.gud-knight.com)**

Knight Therapeutics Inc. (TSX:GUD) is a publicly-traded, specialty pharmaceutical company focused on acquiring, in-licensing, out-licensing, marketing and distributing innovative prescription pharmaceuticals, consumer health products and medical devices in Canada and select international markets. In addition, Knight finances other life sciences companies and invests in life sciences venture capital funds with the goal of securing product distribution rights. Knight has acquired or in-licensed a portfolio of over 20 products that are marketed, under regulatory review or in various stages of development. Knight is headquartered in Montreal, Quebec, Canada and has approximately 40 employees.



## Labtician Ophthalmics, Inc. & Labtician Théa

### Booth 123



Bringing innovation to practice

#### Carine Martineau

5-2150 Winston Park Dr  
Oakville, ON L6H 5V1

T: 289-834-0249

E: carine.martineau@labticianthea.com

**www.labtician.com**

#### Sandeep Mankikar

6-2140 Winston Park Dr  
Oakville, ON L6H 5V5

T: 905-301-3113

E: smankikar@labtician.com

**Labtician Ophthalmics, Inc.** is a solutions focused provider of specialty medical devices & pharmaceutical products to the Canadian Eye care community. Our vision is to "Bring Innovation and Vision to Practice Globally through Principled People". We commercialize a number of exclusive and innovative medical devices for use in surgery, such as the Kahook Dual Blade and Geuder DMEK cartridge. Most recently we introduced a complete portfolio of diagnostic and therapeutic products focused on Dry Eye management. Ideally, these are incorporated into Kyklos, a comprehensive Practice Management & patient persistency and compliance program for the management of Dry Eye. Labtician Théa is Canada's new leader in the preservative-free management of glaucoma, dry eye disease and lid hygiene. A rich history of innovation runs deep within its two founding companies, Labtician Ophthalmics and Laboratoires Théa. Laboratoires Théa with 150 years of history in eye care, is the pioneer and leader in the development of preservative-free eye care treatments. Labtician Théa is quickly becoming an essential partner to Canadian optometrists and ophthalmologists.

## MD Financial Management

### Booth 529



#### Tiffany St Denis

Partnership Development Manager  
1870 Alta Vista Dr  
Ottawa, ON K1G 6R7

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**MD Financial  
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MD Financial Management is the only national financial services firm exclusively dedicated to the financial well-being of Canada's physicians and their families. Supported by 50 years of physician-focused experience, MD's Advisors and teams of professionals provide comprehensive financial plans, advice and solutions specific to physicians' needs at every stage of their careers – from medical school through retirement and beyond.

## Nova Scotia Health Authority

### Booth 701



E: [Physicianrecruit@nshealth.ca](mailto:Physicianrecruit@nshealth.ca)

**MorethanMedicine.ca**

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Welcome to an ocean playground.

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## Novartis Pharma Canada Inc.

### Booth 221



385 boulevard Bouchard  
Dorval, QC H9S 1A9

T: 514-631-6775

T: 1-877-631-6775

F: 514-633-7885

**[www.novartis.ca](http://www.novartis.ca)**

Depuis une dizaine d'années, Novartis Pharma Canada a créé 20 nouveaux médicaments qui ont permis d'alléger considérablement les souffrances de patients. Ces médicaments sont commercialisés pour plusieurs maladies graves, y compris le cancer, les maladies cardiovasculaires, la maladie d'Alzheimer, la dégénérescence maculaire liée à l'âge, la transplantation d'organes et l'ostéoporose.

#### **Notre objectif / l'ophtalmologie**

En ophtalmologie, notre objectif est de changer la pratique de la médecine afin de permettre aux personnes vivant avec une maladie des yeux de voir à quel point le monde est merveilleux.

200 millions de patients dans le monde ont été traités avec les produits ophtalmiques de Novartis en une année. En tant que société ophtalmologique de premier plan, nous produisons des thérapies qui traitent à la fois les troubles des segments antérieurs et postérieurs de l'oeil, y compris les maladies de la rétine, le glaucome et d'autres maladies des yeux externes.

Over the past decade, Novartis Pharmaceuticals Canada has introduced 20 new medicines that have had an important impact on patients suffering from a wide variety of major illnesses including cancer, cardiovascular diseases, Alzheimer's disease, age-related macular degeneration, organ transplantation and osteoporosis.

#### **Our Focus / Ophthalmology**

200 million patients worldwide were treated with Novartis ophthalmic products in one year. As a leading ophthalmology company, we produce therapies that treat both front- and back-of-the-eye disorders, including retinal diseases, glaucoma and other external eye diseases.

In ophthalmology, we are focused on changing the practice of medicine, enabling those living with eye disease to see how wonderful the world is.

## OCULUS Inc.

Booth 101



### **Paivi Hodgins**

COT Sales Consultant

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**[www.oculus.ca](http://www.oculus.ca)**

German precision since 1895.

OCULUS has been setting milestones in the eye care industry since 1895. With our products, such as the Pentacam®, Keratograph® 5M, and Easyfield® C, we have established a gold standard in ophthalmic diagnostic devices. OCULUS products are 100% made in Germany and fully supported in the United States.

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## OCuSOFT, Inc.

Booth 500



### **Nick Townsell**

Trade Show Coordinator

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**[www.ocusoft.com](http://www.ocusoft.com)**

OCuSOFT®, most recognized for its #1 Doctor Recommended Brand of Eyelid Cleansers, is an ophthalmic research, development and supply company with an established reputation for innovation, particularly in the area of Ocular Surface Disease (OSD). Since 1986, OCuSOFT® has served the ophthalmic community with a unique selection of proprietary brands. OCuSOFT® offers a full line of ophthalmic pharmaceutical supplies including OCuSOFT® Lid Scrub® Eyelid Cleansers for daily eyelid hygiene and Retaine® MGD® Ophthalmic Emulsion Preservative-Free Eye Drops for complete tear film enhancement. Visit our booth to learn more.



## Ophthalmic Direct

### Booth 229



Ophthalmic Direct offers a unique direct distribution channel for specialty ophthalmic products via our partnering network of ophthalmology clinics across Canada.

Through our direct distribution model we ship products directly to ophthalmologist's office where we also set up and manage the infrastructure required for proper storage and handling.

Ophthalmic Direct fosters close working relationships with all stakeholders in the process, thereby allowing for seamless service and care. Our team of dedicated specialists ensures that product supplies are available at the clinics when they are needed and also help patients navigate the often cumbersome insurance process needed to obtain coverage.

Our leadership presence in Canada positions us uniquely to ensure ophthalmologists and patients have access to the required treatment when it is required.

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## Optego Vision, Inc.

### Booth 228



#### **Wayne McDowall**

Customer Care Specialist  
OPTEGO Vision

T: 1-877-678-3464

E: [orders@optego.com](mailto:orders@optego.com)

**[www.ortopad.ca](http://www.ortopad.ca) | [www.optego.com](http://www.optego.com)**

Optego Vision has been supplying eyecare professionals with quality products since 2000. We have satisfied customers not only in Canada but also across North America and in many countries around the world.

Optego has been expanding its product line to meet the needs of our customers. We are the Canadian Distributor for Ortopad Eye Patches, the "best patch" for the treatment of kids with amblyopia. Many fun designs to choose from for better compliance with patching.

Our Accommodative Flippers are well priced and extremely durable. All lenses are made from chemically hardened glass. We custom-make any power and pride ourselves in giving exceptional service.

## Optos, Inc. Booth 200



### Charles Roy

500 Nickerson Rd. Suite 201  
Marlborough, MA 01752

T: 800-854-3039

E: [usinfo@optos.com](mailto:usinfo@optos.com)

**[www.optos.com](http://www.optos.com)**

Optos plc has the vision to be The Retina Company and recognised as a leading provider of devices to eyecare professionals for improved patient care. Optos' devices produce ultra-widefield, high resolution images (optomap®) of approximately 200° of the retina, something no other device can capture in any single image.

L'ambition d'Optos plc est de devenir le spécialiste de la rétine et le fournisseur de référence en appareils dédiés aux professionnels de la vue afin d'améliorer la prise en charge des patients. L'optomap® est une image ultra-grand champ haute résolution couvrant env. 200° de la rétine, ce qu'aucun autre appareil ne réalise en une seule prise.

## Sacor Inc. Booth 429



### Chris Cowan

12-300 Steelcase Rd W.  
Markham, ON L3R 2W2

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F: 1-800-775-5749

E: [crcowan@sacor.com](mailto:crcowan@sacor.com)

**[www.sacor.com](http://www.sacor.com)**

Over 20 years of delivering great products, service and value! We have been meeting your specialty surgical, diagnostic equipment and supply needs in all areas of ophthalmology, specializing in cataract, refractive, and dry eye. Always something new! Visit our Booth for great new products at fantastic prices and customer service second-to-none!

## Salient Medical Solutions

Booth 601, 700



### Jay Herman

111-5050 Dufferin St.  
Toronto, ON M3H 5T5

T: 1-416-736-3553

F: 1-416-736-3554

E: [info@salientmed.com](mailto:info@salientmed.com)

**[www.salientmed.com](http://www.salientmed.com) | [shop.salientmed.com](http://shop.salientmed.com)**

At Salient Medical Solutions, we focus on introducing the newest and most innovative products in Ophthalmology. With over 20 years of experience including the introduction of excimer lasers, femtosecond lasers, corneal inlays and AqueSys XEN Gel Stent for glaucoma to Canada we continue this trend with the recent introduction of IRIDEX Cyclo G6 Glaucoma laser and Avedro Mosaic System for non-surgical refractive correction.

## Santen Inc.

Booth 323



### Carol Stiff

First Canadian Place  
100 King Street West Suite 5600  
Toronto, ON M5X 1C9

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A New Vision in Canadian Eye Health.

At Santen Canada, our singular focus is our commitment to the ophthalmic community to improve vision health in Canada. From our founding in Japan over 100 years ago, to our expanding global presence, Santen has a long history of supporting the ophthalmic community through pioneering medical treatments. Working with eye care professionals, Santen has developed innovative products for global markets to help improve lives of patients world-wide. As we expand our global horizons, Santen is also focused on channeling our resources to develop therapies to address unmet needs in ophthalmology. After over a century of helping protect the world's vision, Santen is committed to seeking ways to offer Canadians a brighter future through innovative medicines. For further information, please drop by our booth #323.

Santen Canada, vision is our focus.

## Specialty Pharma Solutions Booth 300



44 Richmond Street West, Suite 202  
Oshawa, ON L1G 1C7

T: 905-240-6485

F: 1-855-888-8598

E: [info@specialtypharmasolutions.ca](mailto:info@specialtypharmasolutions.ca)

**[www.specialtypharmasolutions.ca](http://www.specialtypharmasolutions.ca)**

Specialty Pharma Solutions provides comprehensive healthcare network solutions for ophthalmic therapies and other specialty drugs.

Our state-of-the-art laboratories and expertise enable us to produce pharmaceutical products of the highest quality. We are a trusted source of specialty drug therapies, including ophthalmic biologics.

From ordering to delivery, we facilitate the entire process to make it as efficient and streamlined as possible. Our team of professionals works closely with ophthalmologists and their offices to provide the customized support service solutions needed to assist the ophthalmology team in delivering the best patient care.

## Takeda Booth 205



### **Michael Muench**

Head of Canada, Ophthalmics

Takeda Canada Inc.

22 Adelaide Street West, Suite 3800

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**[www.takeda.com](http://www.takeda.com)**

### **Shire is now part of Takeda.**

Takeda is a global, values-based, R&D-driven biopharmaceutical leader headquartered in Japan, committed to bringing Better Health and a Brighter Future to patients by translating science into highly-innovative medicines. Takeda focuses its R&D efforts on four therapeutic areas: Oncology, Gastroenterology (GI), Neuroscience and Rare Diseases. We also make targeted R&D investments in Plasma-Derived Therapies and Vaccines. We are focusing on developing highly innovative medicines that contribute to making a difference in people's lives by advancing the frontier of new treatment options and leveraging our enhanced collaborative R&D engine and capabilities to create a robust, modality-diverse pipeline. Our employees are committed to improving quality of life for patients and to working with our partners in health care in approximately 80 countries and regions.

## Topcon Canada Inc.

Booth 803, 805, 807

110 Provencher Avenue  
Boisbriand, QC J7G 1N1

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E: [info@topcon.ca](mailto:info@topcon.ca)

**[www.topcon.ca](http://www.topcon.ca)**

**Topcon Canada** offers an extensive portfolio of ophthalmic technologies which provides workflow solutions to best meet your specific practice needs. You will diagnose better and more completely, treat your patients with optimal outcomes, work with greater efficiency and flexibility and grow your practice and service offerings. And always backed by excellent training, service and support.

We also distribute products and supplies from other world renowned manufacturers such as Accutome, Bernal, Gulden Ophthalmics, Heine Instruments, Icare Finland, MorTan, M&S Technologies, Ocular Instruments, SK MED, Stereo Optical, Volk Optical and Welch Allyn Canada.

**Topcon Canada:** Your Vision. Our Focus.



## Walsh Medical Devices Inc.

Booth 630

Unit #3 1200 South Service Road West  
Oakville ON L6L 5T7

T: 905-844-8344

F: 905-338-0488

E: [custservice@walshmedical.com](mailto:custservice@walshmedical.com)

**[www.walshmedical.com](http://www.walshmedical.com)**

Walsh Medical Devices Inc. manufactures and distributes the Crawford Lacrimal Intubation system. The products within the Crawford system include the Original Crawford Set, the Crawford Set with Suture, the Crawford Mono Canaliculus Set, the Crawford Bellan Set, and Large Diameter Crawford II Sets with and without Suture. Associated instruments, which are part of the system, include the Crawford retrieval Hook, the Anderson-Hwang Grooved Director and the Tubing Stripper. Walsh also manufactures a battery powered cautery which may be used during Ophthalmic, General and Plastic Surgery. Walsh also conducts research related to products such as fibre optic dosimetry probes and fibre optic light diffusers.





Alcon is the global leader in eye care, dedicated to helping people see brilliantly. With our 70-plus-year heritage, we are the largest eye care device company in the world – with complementary businesses in Surgical and Vision Care. Being a truly global company, we work in over 70 countries and serve patients in more than 140 countries. We have a long history of industry firsts, and each year we commit a substantial amount in Research and Development to meet customer needs and patient demands.

We aspire to lead the world in innovating life-changing vision and eye care products because when people see brilliantly, they live brilliantly.

**Alcon**

# BOLD FOR LIFE

Allergan is a bold, global pharmaceutical company with a purpose. We are focused on developing, manufacturing and commercializing products for eye care, medical aesthetics & dermatology, women's health, the central nervous system, urology, gastroenterology and anti-infective therapeutic categories.

We are committed to working with healthcare providers for patients—to deliver innovative and meaningful treatments that help people around the world live longer, healthier lives. We are Bold for Life.

[www.Allergan.com](http://www.Allergan.com)

Wil G.  
Global Medical Affairs  
Irvine, CA







Novartis Ophtalmologie  
Novartis Ophthalmology

### Changer la pratique de la médecine

Chez Novartis, nous exploitons la puissance de l'innovation scientifique pour répondre aux problèmes de santé les plus complexes de la société. Nos chercheurs travaillent à repousser les limites de la science, à élargir notre compréhension des maladies et à développer de nouveaux produits dans les zones de grands besoin médical non-satisfaits. Nous avons une passion pour la découverte de nouvelles façons d'améliorer et de prolonger la vie des gens.

### Changing the practice of medicine

At Novartis, we harness the innovation power of science to address some of society's most challenging healthcare issues. Our researchers work to push the boundaries of science, broaden our understanding of diseases and develop novel products in areas of great unmet medical need. We are passionate about discovering new ways to improve and extend people's lives.

[www.novartis.ca](http://www.novartis.ca)



**Novartis Pharma Canada inc.**

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*Johnson & Johnson* VISION

abbvie



## Reshaping people's lives

It takes the will to find a new way forward. And no one gets there alone.

Uniting the best of pharma with the boldness of biotech, together we're going beyond conventional thinking to innovate end-to-end approaches that make a real difference.

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## Transformer la vie des gens

Comment? Grâce à la volonté d'explorer de nouvelles voies. Mais personne ne peut y arriver seul.

En alliant le meilleur de l'industrie pharmaceutique à l'audace de la biotechnologie, nous sortons des sentiers battus et innovons au moyen d'approches globales qui font une réelle différence.

**Pour en savoir plus, visitez [abbvie.ca](http://abbvie.ca)**

**FOR MANY  
AN ACTIVE LIFE  
STOPS FAR  
TOO EARLY** | **OUR  
SCIENTISTS  
WON'T  
ACCEPT THAT**

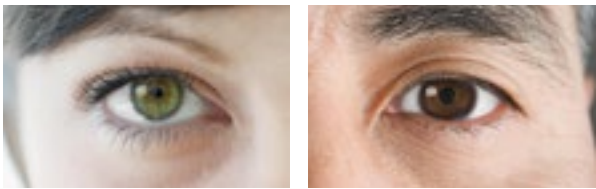


By 2050 the world's population over 60 will have doubled to two billion, making age-related illness an even greater challenge for society.

That's why we're seeking to help people stay healthier and more active in later life, be it through more targeted treatments for cancer and cardiovascular conditions, solutions for eye diseases, or ways to keep those with arthritis moving. Because life shouldn't stop at 60 – not by any means.

To find out how our innovations are helping to change lives for the better, visit [www.bayer.ca](http://www.bayer.ca)





# Each day, we have 14 billion little reminders to continue advancing eye health.

From the moment we open our eyes and start to view the possibilities of each new day, we look at how we can improve the well-being of the world’s 14 billion eyes. Will this be the day when one of us unlocks a way to eliminate visual impairment in newborns? Or strikes upon a treatment that actually helps the eye heal itself? To us, these are not some distant hopes. They are the daily questions that add new urgency to all we do and everything we see for the future. We’re Bausch + Lomb, a company solely focused on advancing the vision and care of the world’s eyes.

Visit us at booth 105

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Bringing innovation to practice

## Their Eyes. Our Focus.



**A New Vision In Canadian Eye Health.** At Santen Canada, our focus is our commitment to the ophthalmic community to improve vision health in Canada. From our founding in Japan over 100 years ago, to our current global presence, we are now committed to offering Canadians a brighter future through innovative medicines. At Santen Canada, vision is our focus.

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*A Clear Vision For Life®*





#### PROUD SPONSOR OF THE 2019 COS MEETING

Specialty Pharma Solutions provides comprehensive healthcare network solutions for ophthalmic therapies and other specialty drugs.

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The professional team at Specialty Pharma Solutions works closely with ophthalmologists and their offices. We provide the customized support service solutions needed to assist the ophthalmology team in delivering the best patient care.

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## Ambassador | Ambassadeur



ASSOCIATION DES MÉDECINS OPHTALMOLOGISTES  
DU QUÉBEC



L'Association des médecins ophtalmologistes du Québec est fière de supporter financièrement la Société canadienne d'ophtalmologie pour l'organisation de son 82<sup>e</sup> Congrès annuel.

Nous vous souhaitons un excellent congrès et un bon séjour dans la belle ville de Québec.

L'Association des médecins ophtalmologistes du Québec is proud to sponsor the Canadian Ophthalmological Society's 82<sup>th</sup> Annual General Meeting and Exhibition.

We wish all attendees a good meeting and time to enjoy your stay in beautiful Québec City.



# It's Really Here! C'est Lancé !

## The COS Practice Resource Centre Le Carrefour de ressources pour la pratique de la SCO

[www.cosprc.ca](http://www.cosprc.ca)

### Are you...

- Looking for ways to get your RCPSC Maintenance of Certification (MOC) credits for the year?
- Looking for Continuing Professional Development opportunities relevant to your practice?
- Looking for valuable insights from your peers in ophthalmology?

### Vous cherchez...

- des façons d'obtenir vos crédits de maintien du certificat (MDC) du CRMCC pour l'année ?
- des occasions de développement professionnel continu pertinentes pour votre pratique ?
- à connaître les perspectives éclairées de vos pairs en ophtalmologie ?

**Stop by the COS booth in the foyer outside the exhibit hall to check it out!**

**Visitez le kiosque de la SCO dans le foyer à l'extérieur de la salle d'exposition pour y jeter un coup d'oeil !**



# SKILLS TRANSFER COURSE CONTRIBUTORS COLLABORATIONS AUX COURS DE TRANSFERT DE COMPÉTENCES

COS gratefully acknowledges the support of the following corporate contributors, each of whom has provided an unrestricted grant or in-kind support of our Surgical Skills Transfer Courses. Their generous support allows us to offer specialized workshops focused not only on clinical education, but also practice management skills, ethical decision-making, evidence-based care and managed care principles. Our STC Contributors help to advance specialized ophthalmic education and provide better patient care.

La SCO remercie sincèrement de leur soutien et de leurs contributions les entreprises suivantes, qui ont versé une subvention non restreinte ou apporté un soutien en nature à nos Cours de transfert de compétences. Leur générosité nous permet d'offrir des ateliers spécialisés axés non seulement sur la formation clinique, mais aussi sur les compétences de gestion de la pratique, la prise de décision éthique et les principes de gestion des soins fondés sur les données probantes. Nos commanditaires des CTC aident à faire progresser la formation ophthalmique spécialisée et à améliorer la prestation des soins aux patients.

## VISIONARY | VISIONNAIRE



## INNOVATOR | INNOVATEUR



Bringing innovation to practice

## ADVOCATE | PROMOTEUR





# **2020 ANNUAL MEETING SAVE THE DATE**

**83<sup>rd</sup> COS Annual Meeting and Exhibition**

**JUNE 25 – 28 JUIN, 2020**

Vancouver Convention Centre  
Vancouver, British Columbia

**83e Congrès annuel et exposition de la SCO**

# **CONGRÈS ANNUEL 2020 MARQUEZ VOTRE CALENDRIER**



# Québec



## **COS Annual Meeting & Exhibition** **Congrès annuel et exposition de la SCO**

### **AFFILIATED SOCIETIES AND SPECIAL INTEREST GROUPS**

Canadian Association of Paediatric  
Ophthalmology and Strabismus  
Canadian Association for Public Health and  
Global Ophthalmology  
Canadian Cornea, External Disease & Refractive  
Surgery Society  
Canadian Glaucoma Society  
Canadian Neuro-ophthalmology Society  
Canadian Ocular Regenerative Medicine Society  
Canadian Ophthalmic Pathology Society  
Canadian Retina Society  
Canadian Society of Oculoplastic Surgeons  
Canadian Uveitis Society  
Canadian Vision Rehabilitation Society  
Cataract Surgery  
Council of Canadian Ophthalmology Residents

### **ALLIED HEALTH**

Canadian Society of Ophthalmic Medical  
Personnel  
Canadian Society of Ophthalmic Registered  
Nurses  
The Canadian Orthoptic Society

### **SOCIÉTÉS AFFILIÉES ET GROUPES D'INTÉRÊT PARTICULIER**

Association canadienne des ophtalmologistes  
pédiatriques et strabisme  
Association canadienne de la santé publique et  
ophtalmologie mondiale  
Chirurgie de la cataracte  
Le Conseil des résidents en ophtalmologie au Canada  
Société canadienne de la cornée, des maladies  
externes et de la chirurgie réfractive  
Société canadienne du glaucome  
Société canadienne de médecine oculaire régénérative  
Société canadienne de la neuro-ophtalmologie  
Société canadienne de la pathologie oculaire  
Société canadienne de réadaptation visuelle  
Société canadienne de la rétine  
Société canadienne de chirurgie oculoplastique  
Société canadienne de l'uvéite

### **SOCIÉTÉS CONNEXES DE LA SANTÉ**

La société canadienne d'orthoptique  
Société canadienne des infirmières et infirmiers  
en ophtalmologie  
Société canadienne du personnel médical en  
ophtalmologie  
La société canadienne d'orthoptique