W. Walker Motley MS, MD

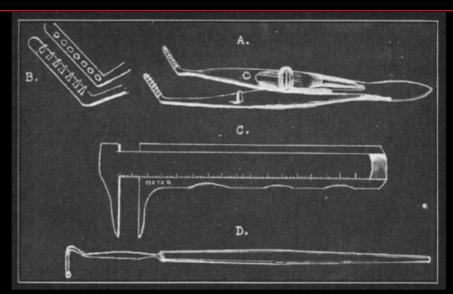


Fig. 10.—A, recession muscle forceps. B, detail of teeth of forceps. C, calliper. D, strabismus hook.



Patrick Chalmers Jameson. Arch of Ophthalmol, 1932



- Myopia control
- Treating ROP
- RetFlix

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#### **Local Control**

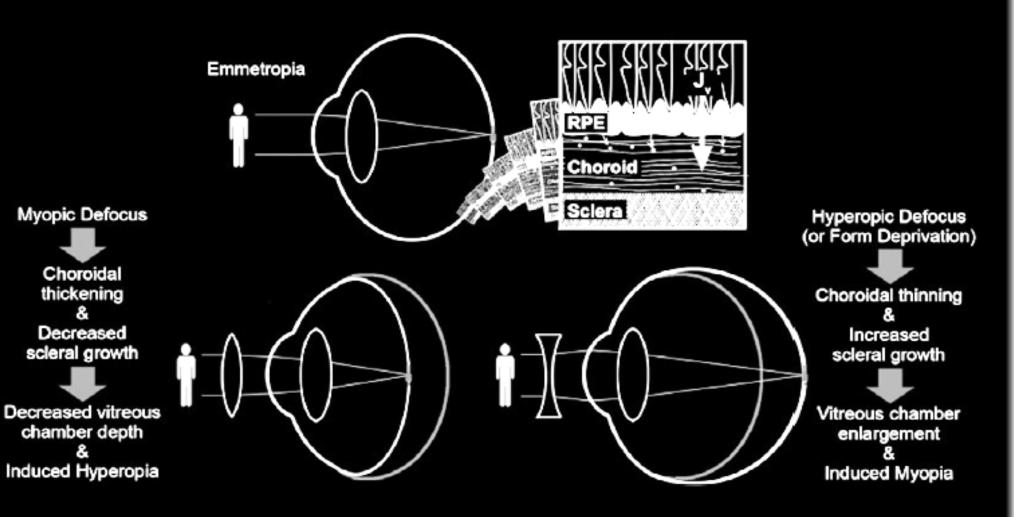
Myopic Defocus

Choroidal thickening

Decreased

scleral growth

chamber depth



Retina *Dopamine ↑Ach (M2) †Adenosine JEgr-1* ↑NO Glucagon *↑Retinoic* Acid Amacrine cells Ret ganglion cells

RPE DA receptors Ach recept (M2)VIP recept Glucagon recept Ion transport (K,Ph,↓Cl channels) Cytokines (IGF1,TGFβ, FGF, VEGF)

Choroid Accomm (thickness) K, Na, Cl *↑DA & ↑Glucagon* (thicken) Insulin TGF-β,FGF, VEGF, TPA, **MMPs** 

Sclera (50% Coll I) *↓Prot-gly syn* Ach recept *↑FGF recptr1 TGF* $\beta$ integrins **↓Collagen V/I** ratio *↑MMP-2 ↑cyclic AMP* ↑cyclic GMP

#### Acetylcholine blockade

- Proposed in 1920s
- Atropine blocks M<sub>1</sub> and M<sub>3</sub> receptors
- Paralyze accommodation (not nec.)
- Pirenzipine blocks only M<sub>1</sub> receptors
- Block receptors in the sclera, RPE and retina?

#### **Clinical Trials**

- Atropine 0.5% to 1% daily (multiple studies)
  - Slows myopic progression
  - Paralyzes accommodation
  - Photophobia
- Cyclopentolate 1% (Yen et al 1989) qhs
  - Slows progression by 0.3 D/y (vs 0.7 D/y atropine)
- Pirenzepine
  - Slows progression by 0.2 D/y

 ATOM 1 and 2 RCTs showed benefits of atropine 1%, 0.5%, 0.1% and even 0.01%

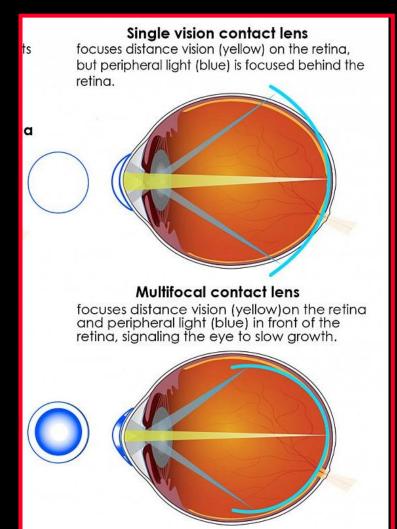
Chia et al Ophthalmology 2016

### **Myopia Control**

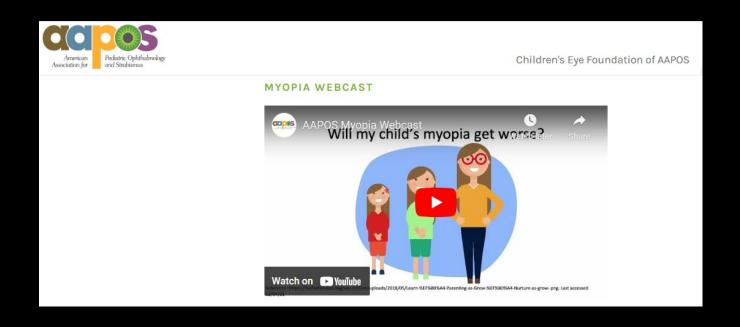
- Better control achieved with Atropine 0.05% than with Atropine 0.01% but also has higher relapse rate
- Consider tapering Atropine treatment
- Consider transition from Atropine to multifocal contact lenses in teens

### **Myopia Control Contact Lenses**

- MiSight
  - Multifocal contact lens
  - FDA approved for myopia control
  - BLINK RCT (JAMA 2020)
  - Manages peripheral defocus



# Reduce chair time with AAPOS patient education video



- Myopia control
- Treating ROP
- RetFlix

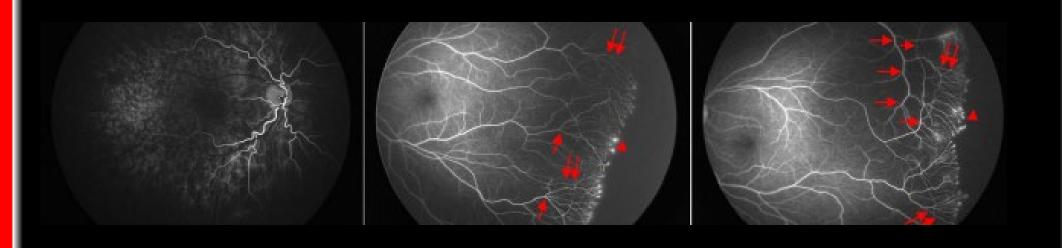
### **Treating ROP**

- BEAT ROP RCT NEJM 2011
  - Demonstrated efficacy of bevacizumab for treatment of type 1 ROP
  - Not FDA-approved
- FIREFLEYE ROP RCT JAMA 2022
  - Demonstrated efficacy of aflibercept for treatment of type 1 ROP
  - First and only FDA-approved ROP drug
  - Higher rate of ROP reactivation requiring retreatment – 20.6%

#### **Treating ROP**

- FIREFLEYE ROP RCT JAMA 2022
  - First and only FDA-approved ROP drug
  - Shorter half-life
  - Higher rate of ROP reactivation requiring retreatment – 20.6%
  - Potentially fewer systemic side effects

### **After IVT of Acute ROP**

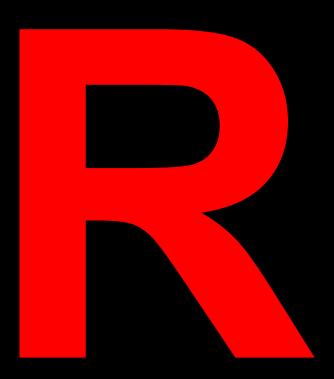


#### **Treating ROP**

- Varying treatment strategies of chronic avascularity after IVT
- Laser following IVT (Retina 2018)
  - At 60 weeks GA
  - Once peripheral vascularization plateaus at 12-18 weeks following IVT

- Myopia control
- Treating ROP
- RetFlix





### **RETFLIX - New Retinoscopy Tool**

- 3-D printed attachment for Welch Allen retinoscope
- Developed at Cleveland Clinic Cole Eye Institute
- \$45



### **RETFLIX - New Retinoscopy Tool**

- Place smartphone in tray
- Play video
- Entertains patient while maintaining proper alignment with visual axis







### **Questions?**

