

**HealthDay News, December 18, 2014 / Study Supports Benefit of Widely Used Glaucoma Drug**



“Prostaglandin analogue eye drops -- a common glaucoma drug -- significantly reduced the risk of vision loss in patients with the eye disease. However, they found that the use of latanoprost -- a form of prostaglandin analogue eye drops -- reduced the risk of vision loss in these patients by more than 50 percent over two years, compared to those who received an inactive placebo. The Lancet, received funding from drug maker Pfizer. “Medication to lower raised eye pressure has been used for decades as the main treatment for open-angle glaucoma to delay progressive vision loss, but, until now, the extent to which the most frequently prescribed class of pressure-lowering drugs (prostaglandin analogues) have a protective effect on vision was not known. Two experts in eye health said the study offers reassurance to patients. Dr. Mark Fromer said that glaucoma is typically treated by interventions that lower the level of pressure within the eye. “Elevated eye pressure can lead to optic nerve damage,” which can harm vision, Dr. Fromer explained, so glaucoma “is most commonly treated with a prostaglandin analogue eye drop to reduce eye pressure.” The new study shows “that the use of these medications can greatly reduce the risk of visual loss, and a significant benefit in the treatment group could be seen at one year,” he added. “It is necessary to educate patients that while glaucoma cannot be cured, proper follow up with a trained specialist can slow the progression of the disease allowing patients to maintain good vision throughout their lifetime.”

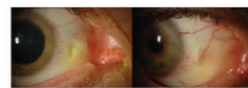
**WebMD News & HealthDay, February 18, 2015 / Study Compares Drugs for Diabetes-Linked Eye Disease**



“A vision-robbing condition called diabetic macular edema can strike people with diabetes. Now, a new study compared three leading drugs for the condition -- Avastin, Eylea and Lucentis -- and found that Eylea came out on top, at least for patients with “moderate” vision loss. The study, funded by the U.S. National Eye Institute (NEI), “will have a dramatic impact on patient care,” said Dr. Mark Fromer. The condition occurs in people with diabetes and it is called diabetic retinopathy. “Diabetic macular edema is the most common reason for visual loss” Dr. Fromer noted. “Macular edema occurs when abnormal blood vessels in the retina leak into the central area of the retina causing distorted vision,” he said. According to the NEI, the disabling illness can impair vision and interfere with everyday tasks such as reading, driving and watching television. “Currently, the mainstay of treatment consists of monthly intraocular [within the eye] injections of Avastin, Lucentis, or Eylea,” Dr. Fromer said. “Laser therapy is also used to decrease macular edema.” The new study shows those who took Eylea had greater vision improvement than those who took Avastin or Lucentis. However, the researchers stressed that all three drugs offered similar vision improvement in patients whose vision at the start of the study was rated as anywhere from 20/40 to 20/32. The three drugs were also similar in terms of safety. “This comparative effectiveness study will help doctors and patients make informed decisions when choosing treatments for diabetic macular edema.” According to Dr. Fromer, all of the drugs decreased the need for laser therapy, “with Eylea requiring the least laser therapy.””

**Plastic Surgery Practice, February 2, 2015 / Cosmetic Eye-Whitening Procedures**

“Cosmetic eye-whitening procedures are designed to make the eyes look brighter, whiter, and less red, but they may do more harm than good, experts warn. The procedure typically involves inhibiting blood vessel growth to the eyes. “This cosmetic procedure has a high risk of serious potential complications, and doctors should think twice about performing it, and patients should think twice about having it done.” “The majority of ophthalmologists will not do this procedure to whiten the eye, as the complications such as chronic dry eye, scleral melt, and diplopia don’t merit the benefits.” says Dr. Susan Fromer.” To read more, visit our website [www.fromereye.com](http://www.fromereye.com).



**Juvenile Diabetes Research Foundation Walk**

On Sunday September 28, 2014, Fromer Eye Centers’ team raised over \$4,000.00 at the JDRF walk.

**OPTICAL LOCATION**  
3130 Grand Concourse in Bronx  
We accept optical insurance plans for most unions. Call us to find out if we accept your Optical Insurance  
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**2014 Educational Programs and Speaking Engagements in the Community**  
All continuing education (CE) courses are approved by the Council on Optometric Practitioner Education (COPE)

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| <b>February 19 &amp; February 26</b><br><i>Kenneth Schor, MD &amp; Marina Su, OD</i><br>“Ultrasound Biomicroscopy” (UBM)<br><i>Brian Brazzo, MD</i><br>“Oculoplastic Surgery: A Patient’s Perspective” | <b>Aug 19</b><br><i>Marina Su, OD</i><br>Diabetic Complications 101 Q & A<br>Juvenile Diabetes Research Foundation  |
| <b>March 20</b><br><i>Carolyn Graeber, MD</i><br>School nurses in Jamaica, Queens at PS/IS 178Q  | <b>Sept 16</b><br><i>Mark Fromer, MD</i><br>Juvenile Diabetes Research Foundation expert panel  |
| <b>April 30</b><br><i>Mark Fromer, MD</i><br>“The Diagnosis & Management of Retinal Cases”<br><i>Carolyn Graeber, MD</i><br>“Amblyopia”  | <b>October 15</b><br><i>Carolyn Graeber, MD</i><br>“Current Topics in Myopia”<br><i>Danli Lira Xing, MD</i><br>“Central Serous Chorioretinopathy, Epiretinal Membranes & Macular Holes” |
| <b>May 21</b><br><i>Brian Brazzo, MD</i><br>“What’s New in the Treatment of Epiphora”<br><i>Marina Su, OD</i><br>“Not All Angles Are Created Equally”  | <b>October 29</b><br><i>Carolyn Graeber, MD</i><br>“Current Topics in Myopia”<br><i>Danli Lira Xing, MD</i><br>“Central Serous Chorioretinopathy, Epiretinal Membranes & Macular Holes” |
- Some of the above lectures were repeated to allow a larger audience.**



**2015**

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**Announcement**



**Eye Surgery Centers of New York opened its doors in the Bronx**

This state of the art facility is the largest eye care center in New York City. Eye Surgery Centers of New York (ESCNY) will be creating jobs in the community and our goal is to serve the Bronx and surrounding boroughs. Our three operating rooms are equipped with the latest diagnostic technology and surgical equipment. In addition to performing retinal, cornea, glaucoma and oculoplastic surgeries, ESCNY is the first center to perform laser cataract surgery in the Bronx.

**Tips For Healthier Eyes**

- 1. Take a 20-second computer break.** Staring at a computer (or any digital screen) won't hurt your eyes, but it can make them feel tired and dry. Surprisingly, we blink about half as often when we're looking at a screen. Follow the 20/20/20 rule: Every 20 minutes, look at least 20 feet away for at least 20 seconds. Also, place your screen so it's about 25 inches away and slightly below eye level. Cut glare by moving light sources or using a screen filter.
- 2. Always wear sunglasses.** UV radiation can hurt your eyes just like it does your skin. Effects add up and can cause problems like cataracts, corneal burns, and even cancer of the eyelid. Whenever you're outside -- even on cloudy days -- wear sunglasses or contacts that block 99% to 100% of UV-A, UV-B and UV-C rays. Protective lenses don't have to be expensive, just check the label. Hats block exposure, too. Snow, water, sand, and concrete can all reflect UV rays.
- 3. Use safety glasses at work and play.** Nearly half of all eye injuries happen at home, not on the job. Use safety glasses whenever a project involves debris or hazardous chemicals. Protective eyewear may prevent 90% of sports-related eye injuries. Lenses should be made of polycarbonate plastic -- which is 10 times more impact resistant than other materials. The sports that cause the most injuries are baseball/softball, racket sports, lacrosse, and basketball.
- 4. Eat for your heart and your eyes.** Foods that help circulation are good for your heart and vision. Choose heart-healthy foods like citrus fruits, dark leafy greens, and whole grains. Foods rich in zinc -- beans, peas, peanuts, oysters, lean red meat, and poultry -- can help eyes resist light damage. Carrots also help eyesight because of its vitamin A. Other nutrients that help eyes include beta-carotene (found in many yellow or orange fruits and veggies), and lutein and zeaxanthin (found in leafy greens and colorful produce).



**Dr. Mark Fromer is the Eye Surgeon Director for the New York Rangers (National Hockey League) and an Honorary Police Surgeon**



**Did you know** that you can access your Electronic Medical Record (EMR) online? Since 2013, Fromer Eye Centers has complied with the government's mandate to provide patients access to their electronic medical record as well as allow patients to communicate with their physicians through a secure, encrypted patient portal. “We encourage patients to sign up for this access because it offers patients the ability to view their medical record 24/7,” said Ian Maltzman, Administrator of Fromer Eye Centers. For more information, please email [info@fromereye.com](mailto:info@fromereye.com)

**5. Don't ignore eye problems.** If your eyes are itchy, red, or gritty, use artificial tears. If symptoms continue or if you have eye pain, secretions, swelling, or sensitivity to light, see a doctor. Other reasons to see a doctor: dark floating spots, flashes of light, or reduced vision.

**6. Clean your contact lenses.** Take care of your eyes by taking care of your contacts. Always wash your hands before handling lenses. Use only cleaners and drops approved by your eye doctor. Clean, rinse, and dry the case each time you remove the lenses, and replace it every two to three months. Don't wear lenses when you're swimming or using cleaning products like bleach. Don't leave daily wear lenses in while you sleep, even for a nap. And don't wear lenses longer than recommended.

**7. Know your health history.** Many seemingly unrelated health conditions can affect your eyes. High blood pressure and diabetes can reduce blood flow to the eyes. Immune system disorders in the lungs, thyroid glands, or elsewhere can inflame your eyes, too. Other threats include multiple sclerosis, aneurysms, and cancer. Tell your eye doctor about any current or past health issues, including family members with eye problems or serious illnesses.

**8. Read drug labels.** Many types of drugs, or combinations of drugs, can affect your vision. Be on the lookout for possible side effects from various medications used to treat different conditions. Tell your doctor if you notice issues like dry or watery eyes, double vision, light sensitivity, puffy or droopy eyelids, and blurred vision.

**9. Throw away old eye makeup.** Bacteria grow easily in liquid or creamy eye makeup. Throw out products after 3 months. If you develop an infection, immediately get rid of all your eye makeup and see a doctor. If you tend to have allergic reactions, try only one new product at a time. Never share cosmetics and don't use store samples. Clean your face thoroughly before and after using makeup, and don't apply cosmetics inside lash lines.

**10. Get regular eye exams.** You should get your eyes checked regularly, even if you don't wear glasses. Ask your doctor how often. It will be at least every other year from ages 18-60, or every year if you're older, wear contact lenses, or have risk factors like diabetes, high blood pressure, or a family history of eye disease.

**11. Stop smoking.** If you smoke, stop. Smoking raises your risk of developing cataracts and aggravates uncomfortable and dry eyes. It also builds up plaque in your bloodstream and weakens arteries. This not only raises your risk of a heart attack, but it can damage the retina and cause vision loss. The good news is that after you quit, your risk of eye disease is about the same as for non-smokers.

*Annual eye examinations can detect early warning signs. Make an appointment for a comprehensive eye examination every year. Visit us at [www.fromereye.com](http://www.fromereye.com)*

## INTERVIEWS

### ABC NEWS, January 17, 2014 / Contact Lenses that Could Monitor Blood Sugar

"Eyeing a new contact lens that could monitor blood sugar. Some experts say the Google device looks promising. Could a contact lens-sized device that is worn on the surface of the eye ever permit individuals with diabetes to better control their blood sugar? Google (x) is hoping that its new wearable eye device will prove to be so accurate that users will be able to rely on it to get an accurate blood sugar reading and to calculate their insulin dose. The lens came about as a possible solution to measure the glucose in tears. Putting this idea into an actual device was the natural next step. Google (x) recently revealed a functional prototype of its smart lens, which uses a tiny wireless computer chip and miniature glucose sensor that are sandwiched between two layers of soft contact lens material. Once the glucose is detected, the information can be sent to a smart phone or to another device. So could this teensy device actually provide an accurate blood sugar reading? "One question to be answered is timing. If the lens gives a reading of what the blood sugar was an hour ago, it would not be that useful, but if it could tell what the blood sugar was 10 minutes ago, it could be worthwhile." One possible problem with the little device is that the glucose found in tears may not accurately reflect an individual's blood sugar, says Dr. Mark Fromer. "Tears are right on the surface of the eye," he explains. "But the Google lens does not have access to the aqueous fluid underneath. What we need to find out is how quickly the tear film will change based on what someone's blood sugar level is. If the tears give a delayed response, then it is not useful information." If there is a lack of accuracy, people could give themselves too much or too little insulin."

### HealthDay, February 4, 2014 / Eye Condition in Premies Hints at Risk for Later Disabilities

"Premature infants who develop an eye condition that can threaten their vision are three to four times more likely to have other serious health problems by the age of 5, a new study found. The finding suggests that doctors be on the lookout for future problems once they diagnose severe retinopathy of prematurity, which is caused by exposure to high levels of oxygen when the infant is in the neonatal intensive care unit. "This study reminds people that children who have severe retinopathy still have other risks," said Dr. Mark Fromer. "Even if you prevent blindness, you still have to be aware that a low-birth-weight infant that has received an excessive amount of oxygen is still very likely to develop other problems, such as motor impairment, mental impairment and hearing loss," Dr. Fromer said. But the first condition to tackle is the retinopathy, experts said. The excess oxygen can cause severe damage to the retinas. That damage can include bleeding and retinal detachments. When that happens, it can lead to blindness, Dr. Fromer said. The study authors said doctors need to do their best to keep retinopathy from developing. "Although blindness can be prevented by diligent screening and timely treatment, severe retinopathy of prematurity remains a poor outcome of neonatal intensive care," said study author Dr. Barbara Schmidt."

### HealthDay News, February 12, 2014 / Bob Costas's Eye Trouble

"While skiers, snowboarders and skaters held viewers' attention during this week's Winter Olympics, it was tough not to notice TV broadcaster Bob Costas's glaring eye infection as well. The persistent infection, known as conjunctivitis, that forced Costas to break away from his post Tuesday is caused by the same virus as the common cold, experts say. But instead of latching on to the membranes in the nose or throat, conjunctivitis infects similar membranes in the eye. "It's usually an adenovirus -- the same virus that infects you when you get a sore throat or a runny nose," explained Dr. Mark Fromer." To read the full article visit our website.

### Livescience, February 12, 2014 / Corneal Melt Arthritis Complication

"A 61-year-old woman with rheumatoid arthritis suffered a serious repercussion of her condition: The irides began to protrude, and she needed immediate surgery, according to a new report of her case. In people with rheumatoid arthritis, which causes high levels of inflammation throughout the body, a condition called "corneal melt" can occur. The patient's own immune system attacks the area of the eye adjacent to the cornea, tearing the tissue and allowing the iris, which sits just behind the cornea, to slip out. The result is pupils that look quite irregular. It is very rare for corneal melt to affect both eyes, said Dr. Mark Fromer. However, it's not rare for doctors to see weakened corneas. Rheumatoid arthritis is a systemic inflammatory disease that affects the body's joints , but

it can also affect other organs. The causes of the disease are not fully known, but it is thought that a faulty immune response plays a role. "People with rheumatoid disease often think about arthritis in the hands and the knees, but it's important to understand that rheumatoid arthritis can affect the eye as well, in a serious way," Dr. Fromer said. People with rheumatoid disease or any autoimmune disorder should have their eyes checked regularly, preferably twice a year, Dr. Fromer said. "With regular checkup, the condition can be detected earlier," he added. "Once the eye perforates, then it's a real emergency."

### Livescience, April 8, 2014 / Surfer Treats His Own Eye Problem with Giant Wave

"Instead of getting surgery, an adventurous surfer in Hawaii sought a different approach to treat his eye condition — he dipped his head into the rushing water while surfing a gigantic wave. A band of fibrous tissue growing over the outer layers of the surfer's eye caused his eye problem, a condition called pterygium. In an interview with LiveScience, Dr. Mark Fromer said that this vascular tissue is even difficult to remove with scalpels and scissors. "I think it's possible he got some sort of blast to the eye that might have torn his conjunctiva. And the blood supply to the pterygium was interrupted, so maybe it died," Dr. Fromer said. "But it would take a heck of a shot of water to do that. Pretty unlikely this is going to happen to anyone else." Dr. Fromer noted that pterygium can be avoided by wearing sunglasses and hats."

### Livescience, July 11, 2014 / Dangers of Contact Lenses and Amoeba Eye Infection Blinds Woman

"A student in Taiwan who left contact lenses in her eyes for six months straight developed a rare and serious eye infection that ultimately took her vision, according to a news report. A single-celled organism called an amoeba was able to infect the outer covering of the woman's eye because she did not remove and clean the lenses at all during this time, according to the Daily Mail. The condition is known as Acanthamoeba keratitis, and is most common among people who wear contact lenses, according to the Centers for Disease Control and Prevention. Symptoms from the infection — including eye pain, redness and blurred vision — can last for weeks or months, and can cause vision loss or blindness if left untreated, the CDC says. Dr. Mark Fromer said that leaving contact lenses in too long increases the risk of eye infections because the contact lens prevents the cornea — the transparent outer covering of the eye — from getting enough oxygen. "It's a living, breathing organ, the cornea; it needs oxygen". Without adequate oxygen, the cells of the cornea can break down and fall off, essentially removing the eye's barrier to infection. Because of this risk, Dr. Fromer tells his patients to never keep their contact lenses in overnight. Although eye infections caused by bacteria also can happen when people leave their contact lenses in too long, don't change their contact solution regularly or don't keep their contact-lens case clean, Dr. Fromer said."

### HealthDay News, Sept. 18, 2014 / Vitamin E, Selenium Supplements Don't Seem to Prevent Cataracts

"Daily supplements of selenium or vitamin E don't seem to protect against the development of age-related cataracts among men, a new study indicates. Previous animal research has suggested that one or both could help prevent cataracts. To investigate this further, William Christen, from Brigham & Women's Hospital and Harvard Medical School in Boston, and his colleagues examined data from a randomized, placebo-controlled trial of selenium and vitamin E. The trial was initially designed to study prevention of prostate cancer. The men taking the supplements and those who didn't also had similar rates of cataract removal. "These randomized trial data from a large [group] of apparently healthy men indicate that long-term daily supplemental use of vitamin E has no material impact on cataract incidence." "To date, there has been no study that has conclusively identified vitamins or minerals as being a useful aid in the prevention of cataracts," said Dr. Mark Fromer. "At the present time, there are no preventative solutions to slowing the progression of cataract formation other than decreasing exposure to ultraviolet light through the use of sunglasses," Dr. Fromer said."

### HealthDay News, October 14, 2014 / Embryonic Stem Cell Therapy Shows Long-Term Effectiveness

"A new study is the first to show the long-term safety of embryonic stem cell transplants to treat human disease. The research involved 18 people who received the transplants to treat forms of macular degeneration, a leading cause of vision loss. "Embryonic stem cells have the potential to become any cell type in the body, but transplantation has been complicated by problems." Those problems include the rejection of the transplanted cells by the patient's immune system, as well as the danger that the cells might spur certain types of cancers called teratomas. Because of these issues, scientists interested in embryonic stem cell therapy have tended to focused on sites in the body that typically do not produce a strong immune response. The eye is one such spot. In the new study, human embryonic stem cells were first prompted to develop into eye cells called retinal pigment epithelial cells. They were then transplanted into nine people with Stargardt's macular dystrophy, and another nine with dry atrophic age-related macular degeneration. Patient outcomes were tracked for up to three years after transplant. No signs of either cancer-like cell growth (hyperproliferation) or immune system rejection were found in any of the treated eyes after a median follow-up of 22 months. "The fact that studies are being done on patients means we are starting what is hopefully the final stage of learning how to reverse vision loss in patients with retinal disease." Dr. Mark Fromer said that "this early study offers great promise in the successful utilization of stem cells for the treatment of degenerative diseases in the future."

### WebMD News & HealthDay, October 23, 2014 / Disease Severity in One Eye May Predict Progression in the Other

"The severity of age-related macular degeneration in one eye is associated with the risk of developing the disease and its progression in the other eye, a new study finds. "Macular degeneration is a disease of the retina which damages central vision and can lead to legal blindness, and this disease is more prominent in the geriatric population," said Dr. Mark Fromer. "Macular degeneration is also a 'symmetrical' disease, although one eye may precede the other in the progression of retinal damage and subsequent visual loss," explained Dr. Fromer. The researchers sought to assess how the severity of age-related macular degeneration in one eye might affect disease risk and progression in the other eye. They found that disease severity was key: More seriously age-related macular degeneration in one eye was associated with increased risk and more rapid progression of the disease in the other eye. However, less severe disease in one eye was associated with slower progression of the disease in the other eye, the researchers said. "The severity of macular degeneration in one eye largely tracks the same course as in the fellow eye," Dr. Fromer said."

### HealthDay News , December 5, 2014 / Daily Statin Might Raise Your Risk for Cataracts

"Taking a statin to lower your cholesterol may raise your risk of developing cataracts, Canadian researchers report. While statins such as Zocor, Crestor and Lipitor protect many people from heart attack and stroke, they may raise the odds of developing the vision problem by 27 percent, the researchers report. But the risk of developing cataracts -- a clouding of the lens of the eye -- is insignificant compared with the benefits of these drugs", said lead researcher Dr. G.B. John Mancini. "The benefits of statins are far outweighed by any small risk for cataract surgery," said Mancini, a professor of medicine at the University of British Columbia in Vancouver. "However, the indication for statin use should be solid from the outset and fully understood by patients," he added. Mancini said this study can't prove that statins cause cataracts. "Careful observations in clinical trials are needed to support or refute this association," he said. Dr. Mark Fromer, said cataracts are very common. "In one's lifetime, the chance of developing a cataract is 100 percent," he said. "The goal is we want to keep you alive long enough to get one, and that's where statins come in," he said. "Statins increase the length of life by decreasing strokes and heart attacks." Cataracts can be treated with surgery that is "quick, painless and 99.9 percent successful," Dr. Fromer said. "So, since you are going to get a cataract anyway, you might as well take your statin -- it's in your best interest." The study was published in the December issue of the Canadian Journal of Cardiology.

