



Dr. Karimi's Preventive Eye Care Recommendations

- For younger patients who have not had any previous ocular issues, a good baseline exam is recommended. After that, it can be determined how often the patient needs to be seen.
- For middle-aged and older patients, a thorough baseline exam can determine if there are any issues that need to be followed up closely, or if the patient can be followed on a regular but less frequent basis.
- If the patient wears glasses or contact lenses, regular check-ups on a recommended schedule is essential.
- People aged 65 and older, and patients with diabetes, should generally have an annual dilated eye exam.
- Patients who have diabetes, hypertension or coronary artery disease must have regular eye exams and based on what is found, should adhere to their recommended eye exam regimen.
- Regular follow-up for glaucoma patients is essential, because if the disease is left untreated (or inadequately treated), it can be progressive and lead to permanent loss of vision.

Neglect of Preventive Eye Care Can Be Devastating, Coastal Doctor Says

For seniors, getting regular eye examinations is critically important because such exams can detect common, serious eye diseases early when they are most treatable. An example is glaucoma, called “the sneak thief of sight,” which has no symptoms in its early stages. In many cases, early detection of glaucoma along with regular follow-up care can save the patient’s vision.

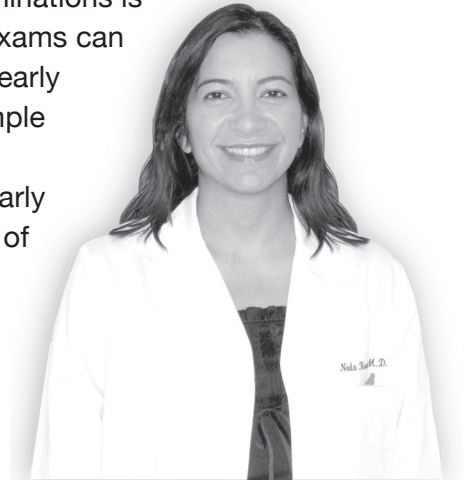
But a striking number of seniors are apparently neglecting to be seen for regular examinations, suggests a recent five-state survey by the U.S. Centers for Disease Control and Prevention.

Ignoring preventive eye care recommendations can lead to devastating consequences, observes Neda Karimi, M.D. of Coastal Eye.

“I have seen patients who have not followed up in several years come in with decreased vision, and in some cases I have found the advanced form of macular degeneration,” says Dr. Karimi. “I have had a few patients who did not continue regular care for treatment of their glaucoma, and after a few years they have come in with advanced nerve damage and visual field loss.”

Dr. Karimi thinks there may be several factors involved in seniors’ neglect of recommended preventive eye exams. For example, older patients may have multiple medical problems for which they are seeing several different specialists, and eye care falls by the wayside. “Although this is understandable, it is important to realize that many of these chronic diseases, such as diabetes and hypertension (high blood pressure) can have profound effects on vision and need to be checked by an eye doctor on a regular basis.”

(continued on page 2)



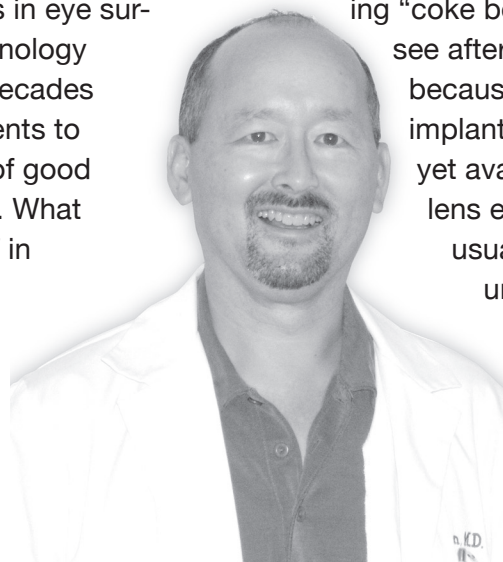
Neda Karimi, M.D.

Fast-moving Advances Portend

Revolutionary advances and steady progress in eye surgery and lens technology over the last few decades have enabled patients to enjoy more years of good vision in their lives. What was undreamed of in vision correction a quarter-century ago is now routine. The drumbeat continues, with the promise of even more remarkable progress in coming years.

Advances in cataract surgery

In the bad old days a generation or more ago, cataract surgery was a ponderous prospect for patients. The procedure involved



W. Lee Wan, M.D.

a long recovery time and wearing “coke bottle” glasses to see after the operation, because intraocular lens implants (IOLs) were not yet available. Back then, lens extraction was usually not performed until the patient was visually disabled — nearly blind. Today, surgery is typically performed far earlier in the development of cataracts because the

procedure is now safer, easier on the patient, quicker in recovery time and more effective than ever before. Standard IOLs, with which surgeons replace the eye’s clouded-up natural lenses, have been

vastly improved in recent years. Presbyopia-correcting lenses — which can provide vision at close as well as distance ranges, often eliminating the need for glasses — are available. A new generation of toric IOLs, which effectively correct astigmatism, are also an option for selected patients. The bottom line is that today’s post-op cataract patients can see better for more of their lifespan than those of previous years.

Refractive Lensectomy

This procedure, identical to cataract surgery — replacement of the eye’s natural lens with an IOL — is being used in selected non-cataract patients to correct refractive errors and reduce the need for glasses. Refractive lensectomy is typically an option for persons who are not candidates for laser vision

PREVENTIVE EYE CARE (continued from page 1)

In some cases, patients may have had a normal eye exam at one point and may assume that they do not need another exam unless they have a problem. But again, onset of some eye diseases is silent, without symptoms.

Or confusion about past exams may enter in. “I ask patients when their last dilated eye exam was,” says Dr. Karimi. “Many patients are not sure if their eyes were dilated at the last eye exam or not. Hav-

ing received eye drops during an eye exam does not necessarily mean a patient’s eyes were dilated. They may have received anesthetic drops which are used for checking eye pressure, but do not dilate the pupils. A dilated exam involves receiving dilating eye drops, waiting approximately 30 minutes for the drops to take effect, and then having the lens, the optic nerve, macula and the retina thoroughly examined.”

Patients who have neglected to get regular preventive exams in the past and are eventually found to have an eye disease tend to change their ways. “Most patients, once they are aware of the extent of their disease and once they understand the adverse effects on their eyesight if they do not receive regular eye care, become advocates for their ocular health and follow up more regularly,” she says.



More Years of Better Vision

correction, such as LASIK. It is also sometimes also offered for patients with early cataracts for whom cataract surgery is not yet medically necessary but who are interested in vision correction.

Implantable contact lenses (ICLs)

Recently approved by the FDA, ICLs are placed by the surgeon inside the eye at the front of the natural lens to correct nearsightedness. Dr. Wan, Coastal Eye's Medical Director, says that ICLs are an option for patients who are not good candidates for laser surgery, including those who are extremely nearsighted or have other conditions or characteristics that would preclude laser surgery. Current ICLs are for nearsighted patients only; the lenses do not correct farsightedness or astigmatism.

Correcting presbyopia

When people enter middle age, the natural aging of the eyes

causes difficulty in close-up focusing. The time-honored remedy is prescribing reading glasses. For many patients, that is changing, says Dr. Wan. "The IOLs are not perfect yet, but they now allow us to correct presbyopia in cataract patients and patients with selected refractive errors such as farsightedness. This technology will continue to improve," he says. "Eventually it may become routine that we take the natural lens out at age 40 and replace it with an implant when people start needing reading glasses. I wouldn't recommend that yet, but it's not farfetched at all."

Wavefront technology

Used routinely to fine-tune in laser vision correction, wavefront technology corrects aberrations of the eye, minimizing distortion, and improving vision especially in low light and low contrast situations. For the last two years, the vast majority of IOLs that Dr. Wan uses

in cataract surgery have wavefront compensation built in. Currently, the wavefront correction in IOLs is something of a one size-fits-all measure. "But I think we're heading to the point where we can measure a patient's natural aberrations and put in an implant that would better compensate for their aberrations to optimize the quality of their vision afterwards," says Dr. Wan. "These would be completely custom implants. I think that's still a few years off, although we're already doing a little of that now, with the different lens designs available."

Editor's note: Dr. Wan points out that the lenses described above are not perfect. The type of IOL selected is based on careful consideration of the individual patient's characteristics, visual needs and expectations. While no cataract implant will restore the perfect vision of a 20-year-old, they are now dramatically improved and highly effective solutions for aging eyes.



Medicare OKs Toric Lens Implant Exemption

Medicare has recently granted an exemption effectively enabling more cataract patients to opt for toric lens implants, which can correct some types of astigmatism and reduce a patient's need for glasses after cataract surgery. Medicare patients with cataracts who are candidates for the toric lens can now choose to have the lens implanted while still having Medicare cover the costs of standard cataract surgery. As with similar lens implants designed to reduce presbyopia (the need for reading glasses) after cataract surgery, patients are responsible for the extra costs associated with implantation of these optional "premium" lenses. However this now offers patients a unique opportunity to reduce their dependence on glasses at the same time they have their cataract removed.

1700 North Rose Avenue, Suite 200
Oxnard, CA 93030 • (805) 983-0700

W. Lee Wan, M.D.
Lucille Loignon, M.D.
Neda Karimi, M.D.
Meiya Liao, O.D.

PRSRT STD
U.S. POSTAGE PAID
OXNARD, CA
PERMIT NO. 1691

info@coastaleye.net

www.coastaleye.net



Patients, Friends and Colleagues Mourn the Passing of P.C. Wan, M.D.

We enjoyed his company and his quick wit. He was a wonderful physician and a good friend...

His contributions to his profession and community will be remembered and appreciated...

Not only was he one of the best ophthalmologists, he was a great caring person and a gentleman. Whenever you met him, he would always take time to speak to you and ask how you were doing...

These are among many affectionate tributes from patients, colleagues and friends marking the passing of Pin Chin (P.C.) Wan, M.D. Dr. Wan, who in 1963 founded the eye care practice that later became Coastal Eye Specialists, died in November after a long struggle with Alzheimer's disease.

Born in 1929 in Malaysia, Dr. Wan grew up in Singapore and came to America at age 21. He learned English quickly and worked his way through Columbia Union College, later earning his medical degree at Loma Linda University School of Medicine.

Throughout his years of practice, Dr. Wan was known to take pride and pleasure in helping his patients see better and healing their eyes. He kept up with the fast-moving advances in eye surgery throughout his career.

Dr. Wan was active on the Medical Staff at St. John's Regional Medical Center for 35 years, and

served on the boards of the hospital and its foundation. He helped establish the Camarillo Seventh-day Adventist Church and was active there for many years.

Serving on the Board of Directors of the World Eye Foundation, Dr. Wan was its U.S.-China coordinator, and led teaching missions to China, sharing advances in eye care with ophthalmologists there.

An inveterate traveler, Dr. Wan was enticed by exotic destinations such as Fiji, Burma, Kashmir and Turkey. He also spent a summer as a scholar at Cambridge in 1994. His camera was always close at hand. His photos and his Chinese watercolor paintings reflect his life and sense of humor.

Dr. Wan's legacy of excellence in eye care is carried on by his son, W. Lee Wan, M.D., who succeeded his father as Medical Director of Coastal Eye Specialists in the 1990s. Dr. P. C. Wan is survived also by his wife of 50 years, Siok Poh Wan; daughters Mae, Lynn, and Carol; and several grandchildren.



P.C. Wan, M.D.

Notice: Coastal Eye Specialists distributes this newsletter to educate our patients about eye health and care, and the services we provide. It is normally mailed to patients who have had a recent appointment in our office. If you wish to be added to or removed from our mailing list, or receive a copy of our Notice of Privacy Practices, please call (805) 983-0700 or send an e-mail to info@coastaleye.net.