

# Pan American Association *of Ophthalmology*



**PHILOSOPHY**

**PRACTICES**

**PRINCIPLES**

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## *Curso de Liderazgo*

**Projects: 2012-2013**

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**Silvio Arellano Cruz, MD (Peru)**  
**Sociedad Peruana de Oftalmología**

**PAAO Leadership Course 2012-2013**  
**Project Abstract**

**Title of Project: Diabetic Retinopathy Club**

**Purpose:** To create the Diabetic Retinopathy Club which will provide advice for both Peruvian ophthalmologists and residents in ophthalmology, and adequate treatment of Diabetic Retinopathy to their patients.

**Methods and results:**

- (a) The Retina Chapter of the Peruvian Society of Ophthalmology and voluntary retina specialists created the Diabetic Retinopathy Club.
- (b) The Diabetic Retinopathy Club will receive documented clinical queries from general ophthalmologists and ophthalmology's residents on clinical cases for assessment and advice so they can offer proper treatment to their patients. All cases will send to [grupoderetina@spo.org.pe](mailto:grupoderetina@spo.org.pe).
- (c) The Retina chapter directors will distribute received clinical queries among voluntary retina specialists who will be in charge of assessing and replying the messages.
- (d) On July 25<sup>th</sup>, 2013, The Diabetic Retinopathy Club performed a workshop among retina specialists aiming to standardize criteria on proper treatment for local patients suffering Diabetic Retinopathy.
- (e) A two-page brochure was also designed on the spot with the scope of raising awareness in the issue, these were initially distributed September 7<sup>th</sup>, 2013, on the occasion of Peru's XIV Regional Congress of Ophthalmology; attendants' reaction was remarkably positive. Possibilities to expand this experience into other associated pathologies were assessed as well.

**Conclusions:** While this document heads to press, we're currently in the process of putting in place an implementing this project, we believe an awareness campaign is of utmost interest.



**José Gregorio Asilis Mera, MD (Dominican Republic)**  
**Sociedad Dominicana de Oftalmología**

**PAAO Leadership Course 2012-2013**  
**Project Abstract**

**Title of Project: No ROP en República Dominicana**

**Introducción:** La Republica Dominicana ocupa el 4to. lugar en América Latina de nacimientos prematuros (10.8%) y el 2do. en el caribe, seguidos de nuestro vecino país Haití el cual ocupa el primer lugar con 14.1%. Con los avances en la neonatología ha aumentado la supervivencia de prematuros y cada día vemos más retinopatía del prematuro.

Los retinólogos dominicanos estamos trabajando en 2 ciudades (Santo Domingo y Santiago) evaluando a los bebés que nos envían de otras provincias. El problema es que algunos bebés no llegan y para otros es demasiado tarde.

**Propuesta:** Evitar la ceguera por ROP en la Republica Dominicana llevando la RetCam a los cuneros de nuestros hospitales en cada rincón del país.

**Métodos:**

- 1- Comprar maquinas RetCam.
- 2- Viajar a las ciudades para impartir charlas a pediatras.
- 3- Elaborar cartillas informativas que se les entregaran a cada madre dominicana, donde se explica la importancia de su cita al mes de nacido para revisar fondo de ojo.
- 4- Involucrar a los oftalmólogos generales de cada ciudad y entrenarlos en el screening.
- 5- Preparar personal técnico para enviar a diferentes ciudades con UCI neonatal para captar y clasificar utilizando las maquinas RetCam.
- 6- Contamos con la Dra. Audina Berrocal (USA) y el Dr. Anand Vinekar (India) los cuales me están apoyando con la logística del proyecto. Siguiendo los pasos del programa KIDROP tan exitoso en India.

**Resultados:** Estamos viajando a diferentes ciudades a impartir charlas educativas (Puerto Plata, La Vega y San Francisco de Macorís). Nos unimos al programa Mama Canguro Dominicana en septiembre.

En nuestra primera visita valoramos 15 prematuros de los cuales 7 presentaron algún grado de ROP. Uno de ellos con ROP agresivo que amerito tratamiento con laser el cual se realizó con buenos resultados. En Puerto Plata hemos realizado 2 viajes conociendo los centros con UCIs e involucrando a los pediatras y enfermeras que nos apoyaran en el proyecto.

La próxima semana tenemos una charla en La Vega para presentar el proyecto donde participara la prensa radial y televisión.

**Conclusión:** La Republica Dominicana cuenta con la primera máquina RetCam que llego en Agosto 2013 para el proyecto. Estamos muy motivados y seguros que con pasión, entrega y amor lograremos que en la Republica Dominicana no tengamos ciegos por ROP.

**José Gregorio Asilis Mera, MD (Dominican Republic)**  
**Sociedad Dominicana de Oftalmología**

**PAAO Leadership Course 2012-2013**  
**Project Abstract (TRANSLATION)**

**Title of Project: *No ROP in the Dominican Republic***

The Dominican Republic occupies the 4th. place in Latin America preterm birth (10.8 % ) and 2nd. in the Caribbean, followed by our neighboring country Haiti, which occupies the first place with 14.1 %. With advances in neonatology have increased the survival of premature and every day we see more retinopathy of prematurity ( ROP). Dominican retinologists are working in 2 cities (Santo Domingo and Santiago) evaluating infants submitted to us from other provinces. The problem is that some babies do not arrive and for others it is too late.

**Purpose:** Prevent blindness from ROP in the Dominican Republic bringing the RetCam to the nursery of our hospitals in every corner of the country.

**Methods:**

- 1 - Buy RetCam machines.
- 2 - Travel to cities to give lectures to pediatricians.
- 3 - Develop informational brochures to be given to each Dominican mother, which explains the importance of the appointment a month after birth to check fundus.
- 4 - Involve general ophthalmologists every city and train them in the screening.
- 5 - Prepare technical staff to send to different cities with neonatal NICUs to capture and classify using RetCam machines.
- 6 - We contact Audina Berrocal, MD (USA) and Anand Vinekar, MD (India) which are supporting me with the logistics of the project. Following in the footsteps KIDROP program so successful in India.

**Results:** We are traveling to different cities to provide educational talks (Puerto Plata , La Vega and San Francisco de Macoris) . We joined the program Mama Canguro in September. On our first visit 15 premature value of which 7 had some degree of ROP. One of them with aggressive ROP who required laser treatment which was performed with good results. In Puerto Plata we made 2 trips to NICUs centers and involving pediatricians and nurses who support us in the project. Next week we have a talk in La Vega to introduce the project where will participate radio and television reporters.

**Conclusions:** The Dominican Republic has the first Retcam machine that came in August 2013 for the project. We are very motivated and confident that with passion, commitment and love we will make the Dominican Republic a country without blinded by ROP.

**Eduardo José Flores Saucedo, MD (Honduras)**  
**Sociedad Hondureña de Oftalmología**

**PAAO Leadership Course 2012-2013**  
**Project Abstract**

**Title of Project: Mejoramiento en la Sala de Oftalmología de la Clínica ZOE como Modelo de Servicios de Cirugía de Catarata de Alta Calidad, Alto Volumen y Bajo Costo**

**Introducción:** El eje principal de acción de los programas de prevención de la ceguera gira alrededor de la cirugía de catarata, por ser la principal causa de ceguera en el mundo. Honduras es uno de los países panamericanos con menos tasa de cirugías de catarata (TCC de 830). Como Sociedad Hondureña de Oftalmología estamos involucrados en la prevención de la ceguera. La Clínica ZOE es una clínica sin fines de lucro orientada a la prevención de la ceguera. Necesitamos modelos eficientes para implementar servicios médicos que brinden mejores resultados.

**Propuesta:** Mejorar los Servicios Médicos de una Clínica sin Fines de Lucro para que sirva de modelo como servicio de alta calidad, alto volumen y bajo costo en cirugía de catarata.

**Métodos:** 1) Consensuar con la directiva de la clínica un plan de mejoramiento apuntando a aumentar la eficiencia en la cirugía de catarata. 2) Aumentar la capacidad de la consulta ambulatoria y del quirófano. 3) Aumentar la calidad del servicio en general de la clínica. 4) Mejorar la eficiencia del programa actual de extensión comunitaria. 5) Aumentar la cantidad de cirugías de catarata. 6) Hacer alianzas estratégicas con organizaciones de ayuda internacional para el patrocinio de pacientes de escasos recursos.

**Resultados:** Se creó un plan de mejoramiento apuntando a aumentar la eficiencia en las diferentes áreas de servicio de la Clínica ZOE. En el transcurso de un año se logró aumentar en un 33% la cantidad de horas de oftalmólogos contratados. Se ampliaron los horarios de la clínica en todos sus servicios en un 20%. Se implementó un sistema de citas por hora, para evitar las líneas de espera. Se remodelaron todas las áreas de la sala de oftalmología, con la debida rotulación, aumentando así la calidad desde el punto de vista del paciente, reduciendo la estancia de los pacientes y ofreciéndoles un servicio más ordenado. El número de atenciones en los servicios oculares aumentó en un 21% comparado al año anterior. Se contrató personal capacitado en el programa de extensión comunitario para personalizar el seguimiento de los pacientes captados con catarata en las comunidades y la eficiencia aumentó en un 38% (pacientes captados con catarata operable versus pacientes captados que fueron operados). Finalmente, todo esto llevó a un aumento de un 40% en el número de cataratas operadas en esta institución, posicionando la clínica como líder nacional en prevención de la ceguera por catarata.

**Conclusiones:** Un programa de extensión comunitaria eficiente, una mejora en la calidad de atención y una ampliación en la capacidad y los horarios de atención pueden impactar en gran medida en el número de cirugías de catarata realizadas por una clínica. Esto puede servir como modelo a tomar en cuenta por otras instituciones involucradas en prevención de la ceguera en el país.



**Eduardo José Flores Saucedo, MD (Honduras)**  
**Sociedad Hondureña de Oftalmología**

**PAAO Leadership Course 2012-2013**  
**Project Abstract (TRANSLATION)**

**Project Title: Improvement of ZOE Clinic as Model of High Quality, High Volume and Low Cost Cataract Surgery Services**

**Introduction:** The main line action of blindness prevention programs revolves around cataract surgery, being the leading cause of blindness worldwide. Honduras is one of the Pan American countries with less cataract surgery rate (TCC 830). The Honduran Society of Ophthalmology is involved in the prevention of blindness. ZOE Clinic is a Honduran nonprofit medical organization oriented to blindness prevention. We need models in Honduras that prove efficiency to implement medical services that provide better results nationwide.

**Purpose:** To improve medical care in a nonprofit clinic to serve as a model of high quality, high volume and low cost cataract surgery services in Honduras.

**Methods:** 1) To come to an agreement with clinic directives in the development of an improvement plan aiming to increase efficiency in cataract surgery. 2) Increase the capacity of the outpatient clinic and the operating room. 3) Increase overall service quality of the clinic. 4) Improve the efficiency of current community outreach program. 5) Make strategic alliances with international aid organizations to sponsor poor patients. 6) Increase the number of cataract surgeries.

**Results:** An improvement plan aimed at increasing efficiency in the different service areas of ZOE Clinic as created. In the course of a year the amount of hours of hired ophthalmologists was increased by 33 %. The number of hours a day the clinic was open was extended by a 20 %. A system of appointments per hour to avoid waiting lines was implemented. All areas of the ophthalmology outpatient area were remodeled, including proper labeling. This reduced patient stay and offered a more orderly service, thus increased the quality from the point of view of the patient. The number of eye patient consultations increased by 21 % compared to the previous year. Qualified staff was recruited in the community outreach program to improve the monitoring of patients with cataracts diagnosed in the communities and the efficiency increased by 38 % (cataract diagnosed patients in the community versus cataract surgeries done). Strategic alliances with international aid organizations to sponsor poor patients were maintained and improved. Ultimately, all this led to a 40% increase in the number of cataracts operated at this institution, placing the clinic as a national leader in cataract blindness prevention.

**Conclusions:** An effective outreach community program, with an improvement in the quality of care and an expansion in capacity and hours of operation can impact heavily on the number of cataract surgeries performed by a clinic. This can serve as a model to take into account by other institutions involved in preventing blindness in the country.

**Shelly-Anne Lalchan, MBBS (West Indies)  
OSWI (Ophthalmology Society of the West Indies)**

**PAAO Leadership Course 2012-2013  
Project Abstract**

**Title of Project: WINGS (West Indian Society of Glaucoma Surgeons)**

**Aim:**

1. Implement WINGS to improve regional glaucoma care by encouraging patient education, fostering professional development and initiate research- based approach.
2. Register WINGS with World Glaucoma Association

**Methods:**

1. Internet-based forum for communication and education
2. Launch WINGS during World Glaucoma Week 2013
3. Democratic election of executive body at AGM Meeting July 2013
4. Signature ribbon as visual representation
5. Register with The World Glaucoma Association

**Results:** The concept of WINGS was introduced during WGW 2013; local projects were encouraged as it was felt that it would be a more effective panoramic approach for patients collectively. Communications networks were established electronically via OSWI and all members were invited to participate and register WGW activities. The website [www.wingsinfo.org](http://www.wingsinfo.org) has been dedicated for both patient education and professional activities.

The logo and executive body was elected in July 2013 and the constitution is being drafted. The region was represented at the World Glaucoma Congress 2013 at Vancouver at which the ribbon was well received.

**Conclusion:** It has been an exciting year for glaucoma in the region for both patients and professionals. The junior poster competition aims to encourage young ophthalmologists to adopt an evidenced-based approach to glaucoma care. We hope to have a regional registry to determine the burden of glaucoma. Local research into the myocilin gene has approved ethics and funding by the University of the West Indies.

Patient education remains at WINGS' core with the website in addition to links, helpline and a blog which specifically focuses on support for glaucoma surgical interventions. It is hoped that this support group will dispel misconceptions, educate more effectively and foster better comprehensive glaucoma care. We look forward to WINGS flight.



**José M. Martínez De La Casa, MD PhD (Spain)**  
**Sociedad Española de Oftalmología**

**PAAO Leadership Course 2012-2013**  
**Project Abstract**

**Title of Project: Jóvenes Oftalmólogos en España**

**Purpose:** Desarrollar en nuestro país una conjunto de recursos específicamente desarrollada para los jóvenes oftalmólogos (aquellos en periodo de formación o en sus primeros años de carrera profesional).

**Methods:** En primer lugar se va a crear una página web con recursos específicamente creados para los jóvenes oftalmólogos. En esta figurará información acerca de los programas de formación, fellowships, master, exámenes oficiales etc..., así como links a recursos específicos de formación existentes en otras webs. Esta página, por tanto, trataría de unificar toda la información de utilidad para los oftalmólogos en los años posiblemente más cruciales de su formación. La segunda parte de este proyecto consistirá en organizar una reunión científica por y para los jóvenes oftalmólogos. Esta reunión servirá de punto de encuentro para ellos y les permitiría compartir y mejorar los proyectos científicos que estén desarrollando. Su participación se verá estimulada con la creación de uno o dos premios por parte de la industria que recompensará los mejores trabajos presentados en esta jornada.

La tercera parte del proyecto consistirá en poner en contacto y colaborar con otras asociaciones similares ya presentes en otros países como la Young Ophthalmologist de la Academia Americana de Oftalmología.

**Results:** El proyecto de la página web está en marcha gracias a aportaciones realizadas por entidades privadas. Existe un grupo de jóvenes oftalmólogos trabajando en ella y dotándola de los contenidos necesarios para su publicación. Del mismo modo existe una comisión que está elaborando el programa científico de la reunión a la que se convocara a todos aquellos oftalmólogos españoles menores de 35 años que quieran participar.

**Conclusion:** La implantación de este proyecto en nuestro país permitirá a los jóvenes oftalmólogos españoles tener una herramienta de formación e información fundamental para su completo desarrollo como profesionales de la Oftalmología.

**José M. Martínez De La Casa, MD PhD (Spain)**  
**Sociedad Española de Oftalmología**

**PAAO Leadership Course 2012-2013**  
**Project Abstract (TRANSLATION)**

**Title of Project:** *Young Ophthalmologists in Spain*

**Purpose:** To compile a series of resources to be used by young ophthalmologists practicing in Spain (those training or just starting their professional career).

**Methods:** A web page will be set up with resources targeted specifically at young ophthalmologists. The site will offer information about training programs, fellowships, master's degrees, official examinations, **job opportunities** etc., along with links to other training resources at other sites. This web page will thus attempt to gather all the useful information that ophthalmologists will need in possibly the most crucial years of their training. The second part of the project consists of organizing a scientific meeting by and for young ophthalmologists. This meeting will be a reunion point where they can discuss and improve on the research projects they are working on. Participation will be encouraged through one or two prizes offered by the industry that will help fund the best projects presented at the meeting. In the third and final part of the project, contacts will be established with similar associations in other countries, such as the Young Ophthalmologists society of the American Academy of Ophthalmology.

**Results:** The web page project is underway owing to the contributions of private enterprises. A group of young ophthalmologists is presently setting up the page with the necessary contents for its publication. A committee has been also set up to prepare the scientific program for the meeting, which will bring together all Spanish ophthalmologists under 35 years of age wishing to participate.

**Conclusion:** This tool will provide young ophthalmologists in our country with useful comprehensive information for their training and development as professionals in Ophthalmology.

**Héctor M. Mayol Del Valle, MD (Puerto Rico)**  
**Sociedad Puertorriqueña de Oftalmología**

**PAAO Leadership Course 2012-2013**  
**Project Abstract**

**Title of Project: 5k Corriendo por la Visión**

En su compromiso con la salud visual de Puerto Rico, la Sociedad Puertorriqueña de Oftalmología llevará a cabo su primera carrera 5k: “Corriendo por la Visión”, el domingo, 29 de septiembre en el Parque Central. La meta de este gran evento es lograr la participación de 500 corredores y lograr recaudar fondos para la organización de la Red del Síndrome de Hermansky-Pudlak (HPS, por sus siglas en inglés), la cual brinda ayuda a los pacientes de albinismo.

Puerto Rico tiene la incidencia más alta de HPS, enfermedad responsable de ocasionar albinismo, en el mundo entero y con tales fines, la organización sin fines de lucro Red HPS ayuda y ofrece apoyo a las personas afectadas con este síndrome así como a sus familiares y amigos. La Red tiene como misión recolectar y suministrar información así como promover el conocimiento, la investigación y brindar apoyo a sus miembros. La entidad también ofrece materiales educativos, guías para la atención médica estándar y celebra conferencias y clínicas gratuitas para ayudar a las familias y profesionales de la salud a entender las necesidades creadas por el HPS.

**Title of Project: 5k Run for Sight**

In its commitment to the visual health of Puerto Rico , the Puerto Rican Society of Ophthalmology will hold its first 5k " Run For Sight " on Sunday, September 29th in Central Park . The goal of this great event is to have 500 runners and raise funds for the organization of the Hermansky-Pudlak Syndrome Network ( HPS , for its acronym in English) , which provides assistance to patients of albinism.

Puerto Rico has the highest incidence of HPS disease responsible for causing albinism in the world and for such purposes, the nonprofit organization HPS Network offers help and support to people with this syndrome and their families and friends. The Network's mission is to collect and provide information and promote knowledge, research and support to its members. The organization also offers educational materials, guides for standard medical care and holds lectures and free clinics to help families and health professionals to understand the needs created by the HPS.



**Carlos Augusto Medina Siervo MD (Colombia)**  
**Sociedad Colombiana de Oftalmología**

**PAAO Leadership Course 2012-2013**  
**Project Abstract**

**Title of Project: Impulsando la Investigación Oftalmológica en Colombia**

**Introducción:** La prevención de la ceguera es tarea exclusiva de los oftalmólogos. A pesar de los esfuerzos públicos y privados dirigidos a cumplir esta labor social, en Honduras no hay estadísticas de ceguera. Existen encuestas ya validadas y aplicadas en todo el mundo que nos permitirían medir los diferentes indicadores de salud visual, de las cuales la ERCE (Evaluación Rápida de la Ceguera Evitable) es una de las más utilizadas. Con los datos que nos brinda esta encuesta se puede facilitar la planificación de un Plan Marco para la Prevención de la Ceguera Evitable en Honduras.

**Propuesta:** Organizar a los oftalmólogos de la Sociedad Hondureña de Oftalmología para aplicar la encuesta ERCE a nivel de toda la nación hondureña.

**Métodos:** 1) Reactivar el Comité Visión 2020 para lleve el liderazgo en la organización y aplicación de la encuesta. 2) Involucrar a la Organización Panamericana de la Salud y organizaciones internacionales sin fines de lucro para el apoyo financiero. 3) Contactar a los creadores de la encuesta ERCE para una capacitación completa de 1 semana en la aplicación de la encuesta, junto con los epidemiólogos y bioestadistas de la Universidad Nacional Autónoma de Honduras y el Ministerio de Salud. 4) Organizar a los oftalmólogos para su apoyo en la aplicación de la encuesta a nivel nacional. 5) Monitorizar el avance de la aplicación de la encuesta y el levantamiento de datos en el curso de 3 meses. 6) Analizar los datos obtenidos y publicar los resultados para su uso.

**Resultados:** Se logró reactivar el Comité Nacional Visión 2020 con la participación de oftalmólogos del sector público y privado, así como representaciones de la Sociedad de Oftalmología y de **Propósito:** Para el caso específico de Colombia, la sociedad reclama aportes verificables que respondan a los grandes desafíos sociales económicos y a el fortalecimiento de una medicina más acorde al entorno global, en donde no solo se preste un servicio, sino que la investigación haga parte de nuestra formación académica. A pesar de su visible crecimiento en los últimos 20 años, la investigación nacional está rezagada frente a los otros países de América latina. El propósito es crear una organización que brinde el apoyo en la formación de investigadores, con una estructura sólida y un grupo de especialistas en Oftalmología dedicados a fomentar la Investigación en el país, y que este dirigida a todas las disciplinas de la salud visual y en donde participen todos los Oftalmólogos del país.

**Metodología:** 1. Se discutió la problemática del estado actual de la investigación de la Oftalmología en Colombia con la Junta directiva de la sociedad colombiana de oftalmología, con el objetivo de sensibilizarlos del problema y tener su apoyo. 2. Se hizo un diagnóstico del estado actual de los procesos de investigación en los diferentes centros oftalmológicos del país y en los programas de formación académica utilizando como herramientas las encuestas dirigidas y la evaluación de la cantidad de publicaciones de artículos científicos que cada uno de ellos habían producido. 3. Se realizó la búsqueda de potenciales aliados que tuvieran experiencia en investigación en oftalmología preferiblemente a nivel mundial y para este caso se solicitó apoyo a ARVO 4. Se formalizaron las relaciones con ARVO dejándoles ver nuestro nivel actual de investigación y nuestras necesidades.



**Resultados:** Como resultados se encontraron: 1. Fallas en los procesos metodológicos para realización de proyectos probablemente por la falta del acompañamiento de personal con experiencia en investigación 2. Falta de estímulos para los profesionales en esta área, falta de apoyo económico y de infraestructura en algunos casos, 3. Con la ayuda de ARVO se creó el Capítulo Internacional de ARVO Colombia (CARVO) cuyo objetivo y misión fomentar y desarrollar la Investigación de la Oftalmología en Colombia siguiendo los lineamientos de ARVO 4. CARVO funciona como una asociación que hace parte de la Sociedad Colombiana de Oftalmología 5. Se realizó el primer curso de Investigación para residentes en el país en septiembre de 2013 con la participación de todos los programas de residencia del país.

**Conclusiones:** La investigación es una herramienta importante para el crecimiento y desarrollo de un país , hay una gran oportunidad en nuestro país de incorporar este proceso como parte de la formación académica de nuestros profesionales , la motivación frente a este tema ha sido muy alta , y vemos como diferentes actores de la Oftalmología desean participar de este proyecto , prueba de ello fue el curso de investigación que se realizó de la ayuda de ARVO para los programas de residentes del país. Tenemos unas metas claras dentro de las cuales destacamos.

Promover programas regionales de educación, las oportunidades de creación de redes y el intercambio de resultados de investigación. Aumentar las oportunidades de financiación disponibles para los investigadores de la visión . Promover la investigación oftalmológica a nivel de los gobiernos, la industria y el público con el objetivo de seguir desarrollando la profesión oftalmológica a nivel global.

**Carlos Augusto Medina Siervo MD (Colombia)**  
**Sociedad Colombiana de Oftalmología**

**PAAO Leadership Course 2012-2013**  
**Project Abstract (TRANSLATION)**

**Title of Project: Boosting Eye Research in Colombia**

**Purpose:** In the specific case of Colombia, the society claims verifiable contributions that respond to the economic and social challenges and the strengthening of more appropriate medicine to the global environment, in which not only provides service, but that research becomes part of our academic training. Despite its visible growth in the last 20 years, our national research lags behind other countries in Latin America. The purpose is to create an organization that provides support in the training of researchers, with a solid structure, and create an Ophthalmology specialist group dedicated to promoting research within the country, and targeted to all visual health disciplines involving all of the ophthalmologists in the country.

**Methodology:** 1. The problems of the current state of research of Ophthalmology in Colombia were discussed with the Board of Ophthalmology Colombian society, with the aim of sensitizing the problem and obtaining their support. 2. There was a diagnosis of the current state of research processes in different eye centers and academic programs in the country, using tools such as targeted surveys and evaluation of the number of scientific articles published each one. 3. We performed the search for potential allies who have research experience in ophthalmology preferably globally and for this case we requested ARVO support 4. Relations were formalized with ARVO letting them see our current research level and our needs.

**Results:** The results found were: 1. Failure of methodological processes for implementation of projects probably from lack of support from experienced staff in research. 2. Lack of incentives for professionals in this area, lack of financial support and infrastructure in some cases. 3. With the help of ARVO, the ARVO International Colombia (**CARVO**) chapter was created, whose purpose and mission is to promote and develop the Ophthalmology Research in Colombia following the guidelines of ARVO. 4. CARVO operates as a partnership that is part of the Colombian Society of Ophthalmology. 5. In September 2013 the first investigation course was conducted with the participation of all residency programs in the country.

**Conclusions:** Research is an important tool for growth and development of a country. There is great opportunity in our country to incorporate this process as part of the academic training of our professionals, motivation addressing this issue has been very high, and we can see how different actors of Ophthalmology wish to participate in this project, the proof was the course in research conducted with ARVO aid for residents of programs in our country. We have clear goals in which we highlight.

To promote regional education programs, opportunities for creating networking and exchange of research results. To increase funding opportunities available for vision researchers. Promote eye research at the level of governments, industry and the public with the aim of further developing the global ophthalmic profession



**Mariana Elena Palavecino, MD (Argentina)**  
**Consejo Argentino de Oftalmología**

**PAAO Leadership Course 2012-2013**  
**Project Abstract**

**Title of Project: Cataract Surgery Simulator Program**

**Purpose:** Develop the first sustainable cataract surgery simulation training program in Argentina, by helping beginner and experienced surgeons learn without risk as part of the ophthalmology residency program curriculum, at the Argentinean Council of Ophthalmology (CAO) office.

**Methods:**

- 1) Acquire necessary funding from the Argentinean Government and other sources through the Argentinean Council of Ophthalmology.
- 2) Negotiate the purchase and import the necessary equipment to start the Eyesi program.
- 3) Create a “working group”.
- 4) Hire and train Staff.
- 5) Schedule practice sessions for the trainees.
- 6) Connect the simulation service to every training program in Argentina and develop a formal curriculum that all trainees will follow.
- 7) Develop an orientation session for the trainees to receive instruction on the various steps of cataract surgery prior to beginning their formal simulation course. Upload the orientation session to the society’s web site, to make it available to the program participants.

**Results:** The project has been approved by the Argentinean Council of Ophthalmology (Consejo Argentino de Oftalmología). A committee is working on getting the funds and the ANMAT (Food, medicine and medical technology national administration) approval to import the Eyesi courseware 2.0 Cataract/Vitreoretinal surgical simulator. The simulator will be located at the CAO main office.

**Conclusions:** Proper assessment of surgical competency is becoming an important focus of training programs. The use of surgical data forms is assisting in standardizing objective assessments. Virtual reality, cognitive curriculum, and animation video programs, are all helpful in improving residents surgical performance. The Eyesi 2.0 will mainly help preserve the patient’s morbidity and prevent side effects caused by surgeon’s learning curve. By reducing the number of patient complications, the government and health insurance companies will indirectly benefit with cost reductions as a result of improving the training quality of their professionals. In addition, the program will assist in reducing malpractice incidents. Most importantly, the people of Argentina will be the greatest beneficiaries.



**Rodrigo Antonio Quesada Larez, MD (El Salvador)**  
**Asociación Salvadoreña de Oftalmología**

**PAAO Leadership Course 2012-2013**  
**Project Abstract**

**Title of Project: Queratocono, un problema real y frecuente, mejorando el diagnóstico y tratamiento (Title of Project: Keratoconus, a real problem, improving the diagnosis and treatment)**

**Introducción:** En El Salvador el queratocono representa una causa frecuente de limitación visual (por definición una visión menor a 20/70). La mayoría de campañas preventivas hasta la fecha han estado dirigidas hacia glaucoma, cataratas y retinopatía diabética, que son usualmente enfermedades que afectan la edad adulta, pero el queratocono afecta a niños, adolescentes y jóvenes y en nuestra área geográfica usualmente se presenta de una forma rápida y progresiva.

La donación de tejidos en El Salvador es un problema complejo debido a la falta de un banco de ojos lo cual complica grandemente el pronóstico de los pacientes con enfermedad avanzada.

El diagnóstico a nivel institucional (Seguro Social y Ministerio de Salud), se hace en una forma tardía ya que no cuentan con los instrumentos adecuados para realizarlo de forma temprana, y son referidos en fases tardías donde el crosslinking corneal y los anillos intracorneales ya no son una opción.

**Propósito:** Crear conciencia por medio de EDUCACION, a oftalmólogos y residentes que el queratocono es una enfermedad frecuente y progresiva, altamente subdiagnosticada y que en fases iniciales se puede detener y mantener una buena visión durante toda la vida.

**Metodología:**

Parte I

- a) Se realizó un programa de educación médica continua con todos los oftalmólogos del Seguro Social, incluyendo el tema en sus sesiones académicas, y familiarizándolos más con el diagnóstico
- b) Se realizaron 2 jornadas médico científico una en Santa Ana y otra en San Miguel las dos principales ciudades de provincia contando con la participación del 80% de los oftalmólogos
- c) Realizamos un curso completo en Corneoplastia, el 20 de Agosto, para lo cual trajimos de profesor invitado al Dr. Francisco Sánchez León, donde contamos con el 60% de asistencia de los inscritos en Asociación Salvadoreña de Oftalmología.
- d) Se fundó la Asociación Salvadoreña de cornea y cirugía refractiva, fundando junta directiva para 2 años y realizando reuniones mensuales las cuales ya están programadas hasta el mes de diciembre de 2013
- e) Participación directa con los departamentos de Cornea de los 3 programas de residencia que hay en el país reforzando la actividad científica. Me incorpore nuevamente como catedrático de la Universidad de El Salvador reforzando la cátedra con un programa completo de diagnóstico y tratamiento en queratocono. Los residentes realizan una rotación electiva en nuestro Centro Quirúrgico.
- f) Se creó el club del "Queratocono" donde durante 3 sábados se realizaron publicaciones en los periódicos de mayor circulación invitando a pacientes ya diagnosticados y sus familiares, concientizándolos y haciendo tamizaje entre los familiares.

**Diagnóstico:** Creamos una alianza estratégica entre Oftalmodiagnóstico y los sistemas de Salud Pública, donde se realizan topografías de elevación a un precio simbólico, y estamos en las gestiones para la donación por parte de Rotary International para la donación de un topógrafo para un Hospital de tercer nivel.

**Resultados:**

La Asociación salvadoreña de Cornea se ha convertido en una filial de la Asociación Salvadoreña de Oftalmología, se ha logrado reunir a 22 colegas que nos dedicamos a esta área, la educación médica se ha realizado en todos los niveles y la concientización de un problema real se ha llevado desde los oftalmólogos en formación hasta los que tienen años de ejercicio.

Cubrimos todo el territorio nacional, haciendo llegar nuestro mensaje a más del 80% de los colegas asociados. La referencia para tratamiento temprano ha aumentado y el subdiagnóstico es cada vez menor.

**Conclusiones:** La educación sigue siendo uno de los bastiones más importantes en lograr un objetivo, y fue determinante tanto visitar a los oftalmólogos en provincia, así como incluir al grupo familiar de los pacientes en las charlas de concientización.

**Rodrigo Antonio Quesada Larez, MD (El Salvador)**  
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**PAAO Leadership Course 2012-2013**  
**Project Abstract (TRANSLATION)**

**Title of Project: Queratocono, un problema real y frecuente, mejorando el diagnóstico y tratamiento (Title of Project: Keratoconus, a real problem, improving the diagnosis and treatment)**

**Introduction:** In El Salvador keratoconus represents a common cause of visual impairment (by definition a vision less than 20/70). Most preventive campaigns to date have been directed towards glaucoma, cataracts and diabetic retinopathy, which are usually diseases that affect adults, but the keratoconus affects children and adolescents, and in our geographic area is usually very aggressive.

Tissue donation in El Salvador is a complex problem due to the lack of an eye bank which greatly complicates the prognosis of patients with advanced disease.

The diagnosis at the institutional level (Social Security and Ministry of Health) , is done in a very late stages of the disease, because they do not have the right tools to do it in early ones, and are referred when corneal crosslinking and intracorneal rings no longer are an option.

**Purpose:** Create awareness through EDUCATION, ophthalmologists and residents that keratoconus is a common, progressive, highly under diagnosed and that in early stages can be stop and maintain good vision throughout life.

**Methodology:**

Part I

- a) We performed a continuing medical education program to all ophthalmologists working in the Social Security system, including the issue in their academic sessions, so they can familiarize more with the diagnosis.
- b) We performed 2 days scientific medical sessions, one in Santa Ana and another in San Miguel the two main provincial towns with the participation of 80 % of ophthalmologists.
- c) We conducted a full course of Corneoplasty, August 20, for which we brought guest lecturer Dr. Francisco Sanchez Leon, from Mexico DF, where we have 60 % attendance of those enrolled in Salvadoran Association of Ophthalmology.
- d ) With this project we started the “Salvadorian Association of Cornea and Refractive Surgery”, founding a board of directors for two years and holding monthly meetings which are already scheduled through the month of December 2013.
- e) We are giving support to the Departments of Cornea of the 3 residency programs in the country by strengthening the scientific activity. I incorporate again as a professor at the University of El Salvador reinforcing the chair with a comprehensive program of diagnosis and treatment of keratoconus. Residents perform an elective rotation in our Surgery Center.
- f) A Club was created for “Keratoconus patients” where for 3 Saturdays documents were published in the major newspapers inviting patients already diagnosed and their families, making them aware and screening among relatives.



**Diagnosis:** We created an alliance between Oftalmodiagnostico and Public Health systems where elevation topographies were performed at a nominal price, and we are in negotiations for the grant from Rotary International for the donation of a Pentacam for a tertiary hospital.

**Results:** The Cornea Salvadorian Association has become a subsidiary of the Salvadorian Association of Ophthalmology , it has brought together 22 colleagues who are dedicated to this area , medical education has been conducted at all levels and awareness of this problem has been done from ophthalmologists in training to those with years of practice.

We cover the entire national territory , sending our message to more than 80 % of the fellow associates . The reference for early treatment has increased and under diagnosis is declining.

**Conclusions:** Education continues to be one of the most important strongholds in achieving a goal. And with early diagnose we can save a lot of patients from corneal transplant.

**Matilde Ruiz Cruz, MD (Mexico)**  
**SPEIO (Sociedad Panamericana de Enfermedades Inflammatorias Oftalmológicas)**

**PAAO Leadership Course 2012-2013**  
**Project Abstract**

**Title of Project: Unification of the Ocular Inflammatory Diseases and Uveitis Program at different teaching hospitals in Mexico**

**Purpose:** To create a single, national-level program that is taught in the same way in different parts of Mexico, with the purpose of standardizing the residents' ability to diagnose and manage the different ocular inflammatory pathologies. The aim is to provide residents with the tools needed to identify difficult cases that required to be referred to subspecialists.

**Methods:** First phase: surveying physicians who teach ophthalmology residents on issues that should be included in the program. Second phase: selecting the topics to be included in a single national program. Third stage: implementing the uveitis education program nationwide.

**Results:** We are currently surveying various uveitis experts in the country who are responsible for teaching ophthalmology residents in order to identify which items should be included in the education program. Subsequently, homogenized topics in the study program will be distributed nationwide to be applied at different centers of Mexico where the course of uveitis is taught.

**Conclusion:** It's important to have a nationwide homogeneous study program on ocular inflammatory disease and uveitis with the purpose of creating a consensus for the diagnosis and treatment within the ophthalmology residents.



**Humberto Ruiz García, MD (Mexico)**  
**Sociedad Mexicana de Oftalmología**

**PAAO Leadership Course 2012-2013**  
**Project Abstract**

**Title of Project: The Mexican OCT Training and Screening Project - MEXOCT**

**Background:** Optical coherence tomography (OCT) has long been used as a diagnostic tool in the field of ophthalmology. The ability to observe microstructural changes in the tissues of the eye has proved very effective in diagnosing ocular disease. However, this technology has yet to be introduced into the primary care office, where indications of disease are first encountered.

**Purpose:** To promote the use of optical coherence tomography as a tool to optimize ophthalmic care. We intend to increase awareness among general ophthalmologists of the importance of the acquisition of timely and adequate ocular imaging. We also intend to promote the use of OCT technology in the primary care setting as a means to screen vulnerable populations for retinal diseases and glaucoma.

**Methods:** A three-pronged approach to achieve our goals has been proposed. The first consists on promoting the importance of OCT among general ophthalmologists, this is done by including OCT training and workshops within the programs of local, regional and national ophthalmology meetings. An expert panel appointed by the Mexican Ophthalmological Society and the Mexican Retina Association would supervise the curricula of the aforementioned activities. Different levels of certification can be achieved depending on the specialty area. This program is complemented by an online course and evaluation, which will enable us to reach ophthalmologists in the whole country. The second part of the program would be focused on creating a task force that will visit the pertinent health care authorities, policy makers and private parties interested in furthering the quality of ophthalmic care. The intention of such visits is to lobby in favor of investment in the widespread use of OCT. The third part of our program would create an OCT reading center as the backbone that sustains the information obtained from the images acquired. The need for a reading center is based on the need for a standardized set of criteria on which to base the care of patients. The combination of the efforts of ophthalmologists on the field and the reading center data will enable us to create treatment protocols to meet the needs of the population.

**Results:** 1) Program committees for two local meetings (Jalisco, Western Mexico) have included our training in their meetings; reception by general ophthalmologist has been very favorable. 2) I have met with authorities of a major training hospital (Hospital Civil de Guadalajara) to promote the use of OCT, activities included scanning the authorities themselves, highlighting the user friendly nature, non-invasive nature and high yield of OCT scanning. 3) The general guidelines for the reading center have been established, including oversight by regulatory and academic authorities, training programs and basic operative procedures.

**Conclusion:** The use of OCT technology will be a fundamental part in the ophthalmic evaluation and the screening for ocular diseases. Initial reception by ophthalmologists has been good. It seems that OCT is a technology that can be feasibly brought to primary care.



**Luis Orlando Silva Alvarez, MD (Venezuela)**  
**Sociedad Venezolana de Oftalmología**

**PAAO Leadership Course 2012-2013**  
**Project Abstract**

**Title of Project: Blog for glaucoma patients and relatives: Lean on Glaucoma Venezuela**

**Purpose:** To increase awareness about glaucoma in Venezuela, by creating a blog in internet where patients and relatives can find useful friendly information from the Venezuelan Society of Ophthalmology and the Venezuelan Glaucoma Group, inviting to make questions and share experiences with other patients.

**Methods:** Facebook<sup>®</sup> was used as the platform to create the blog, including links with relevant web pages related to glaucoma, posting questions to invite people to participate and share experiences and doubts about the disease. Members of the Venezuelan Glaucoma Group invited patients to take part in the blog. Two glaucoma specialists were selected to answer the questions made by the patients or their relatives. Finally, we measured the impact of the web page based on people's participation.

**Results:** Starting from January 2013, we have reached 112 "likes" from the participants. Posts made by the Venezuelan Glaucoma Group by the blog have been reached by a mean of 32.5% to people from 35 to 44 years-old, 26% from 25 to 34 years-old, 15.6% from 45 to 54 years-old, and 15.6% from 18 to 24 years-old. In the past 28 days before presenting these results, 299 persons (262 from Venezuela) saw at least one of our posts.

**Conclusions:** Facebook<sup>®</sup> is an easy, accessible, free of charge way to increase awareness about glaucoma in the community. As middle-aged persons are the main participants, it could be an useful tool to educate people when their risk of having glaucoma start to raise (from 40 years-old). Elderly people do not participate in a significant way, but their relatives can be the target in those cases, to help them know their risks, and to try to convince them that family support is important to increase the success of treatment. We believe we could enhance participation of the community by involving a specialist in public relations in the maintenance of the blog, working together with the support of glaucoma specialists.



Fitha María Vásquez García, MD (Ecuador)  
SOPLA (Sociedad Oftalmopediatria de Latinoamerica)

PAAO Leadership Course 2012-2013  
Project Abstract

**Title of Project: Medical Brigades for Eye Health in Children by Young Ophthalmologist and Ophthalmic Residents**

**Purpose:** A medical group of ophthalmologist and ophthalmic residents will focus on the education and dissemination of medical information for the patients. Through a series of activities, procedures and interventions aimed at early detection of visual disturbances; we will provide suitable intervention through a comprehensive pediatric eye examination.

**Methods:** Utilizing an information campaign through various outlets and with the cooperation and support of the Ecuadorean Society of Ophthalmology; we called on the assistance of medical residents in ophthalmology from the Central University of Ecuador to participate in a comprehensive pediatric eye examination held in the month of July.

**Results:** There was a total of 1 ophthalmic specialists present alongside 6 residents during the brigade held between the 19<sup>th</sup> and 20<sup>th</sup> of July in the Social Security Hospital “Carlos Andrade Marin”. There were a total of 65 patients which received an ophthalmic examination: 5% (n=3) under one year of age, 35% (n=23) from 1 to 5 years of age and 60% (n=39) from 5 to 14 years of age. There was a 36% (n=24) incidence of un-corrective refractive error in the population studied; 29.1% (n=7) with hyperopia, 58.3% (n=14) with astigmatism, 12.5% (n=3) with myopia. Amblyopia was diagnosed in 2 patients (3%). Among the population we encountered 35.3% (n=23) whom suffered from signs and symptoms of allergic conjunctivitis.

**Conclusions:** The importance of pediatric ophthalmic evaluation cannot be overstated. The early detection of refractive errors and cases of amblyopia shouldn't go undiagnosed and shouldn't go untreated. These conditions can severely affect the development and learning abilities of the children during their most critical years. The parents are part of a major part of solving said issues. With the proper programs guided to educate and bring awareness to them, we can better solve these issues.





**Alexandre Augusto Cabral Mello Ventura, MD PhD (Brazil)**  
**Conselho Brasileiro de Oftalmologia**

**PAAO Leadership Course 2012-2013**  
**Project Abstract**

**Title of Project: Curso de Desenvolvimento de Liderança do CBO**

**Introdução:** O Brasil é um país de tamanho continental, sua população é estimada em duzentos milhões de habitantes e possui a segunda maior delegação mundial de oftalmologistas, atrás apenas dos Estados Unidos da América. A associação que representa os oftalmologistas no Brasil é o Conselho Brasileiro de Oftalmologia – CBO. Devido ao seu tamanho e diversidade, o Brasil necessita de líderes e do seu desenvolvimento em todas as áreas, principalmente na área da saúde, e a oftalmologia não foge a regra.

**Objetivo:** Fornecer orientação e desenvolvimento de habilidades para que os futuros líderes tenham a capacidade de melhorar as ações do CBO, sociedades filiadas ao CBO de subespecialidades e nas sociedades estaduais de oftalmologia.

**Métodos:** Os candidatos do Curso de Lideranças do CBO somente poderão ser indicados pelas sociedades estaduais de oftalmologia e pelas sociedades filiadas ao CBO de subespecialidades. Apenas um candidato por sociedade por ano deve ser indicado. O curso ocorrerá anualmente com no máximo dezoito participantes escolhidos através dos melhores *Curriculum Vitae* e obedecendo distribuição geográfica igualitária.

**Resultados:** Os candidatos ideais são jovens oftalmologistas que demonstram uma vontade de trabalhar, capacidade de organização com um grande potencial para o desenvolvimento. O candidato deve ter dedicação, serviços prestados à comunidade e interesse em atividades de sua sociedade. É obrigatório o desenvolvimento de um projeto na área da oftalmologia e/ou prevenção da cegueira.

**Conclusão:** Ao identificar indivíduos com potencial para se tornarem líderes em oftalmologia, o CBO, através do seu curso de desenvolvimento de lideranças e o treinamento inicial necessário, permitirá líderes potenciais promover a oftalmologia em nível local, nacional e internacional.

**Alexandre Augusto Cabral Mello Ventura, MD PhD (Brazil)**  
**Conselho Brasileiro de Oftalmologia**

**PAAO Leadership Course 2012-2013**  
**Project Abstract (TRANSLATION)**

**Title of Project: CBO Leadership Development Course**

**Introduction:** Brazil is a continental size country, its population is estimated at two hundred million inhabitants, and possesses the second largest ophthalmologists delegation worldwide, behind only the United States of America. The association that represents the eye doctors in Brazil is the Brazilian Council of Ophthalmology - CBO. Due to its size and diversity, Brazil needs leaders and their development in all areas, especially in the health field; ophthalmology is no exception to the rule.

**Purpose:** To provide guidance and skills development to lead future leaders have the capacity to improve actions of CBO, CBO subspecialties affiliated societies and ophthalmology state societies.

**Methods:** The CBO Leadership Course candidates can only be appointed by the state ophthalmology societies and CBO subspecialties affiliated societies. Only one candidate per society per year must be shown. The course will take place annually with a maximum of eighteen participants chosen by the best *Curriculum Vitae* and obeying equitable geographical distribution.

**Results:** The ideal candidates are young ophthalmologists who demonstrate a willingness to work, organizational skills with a great potential for development. The candidate must have dedication, community service done and interest in activities of their society. It is required a project development in Ophthalmology and/or blindness prevention.

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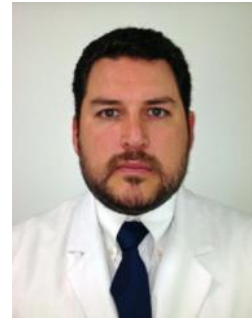
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