

CME Courses

Milos Clinic - Eye Hospital, Belgrade

What can vitrectomy do for your patient?

Summary

Pars plana vitrectomy, even though it is a subspecialty only about three decades old, has become a “miracle” weapon in the treatment of many, previously untreatable conditions ranging from the simple (for instance vitreous hemorrhage) to the complex (for instance proliferative diabetic vitreoretinopathy with retinal detachment).

While the techniques and technologies involved in vitreoretinal surgery are crucial for the surgeon, the indications and postoperative care for all conditions amenable to treatment via surgery are important for all practicing ophthalmologists. Understanding the basics of vitreoretinal surgery is essential for the practicing ophthalmologist to be able to examine the anterior and posterior segment structures of the eye if surgery is to be considered, and also helps determine the optimal timing for referral to a center where the entire spectrum of vitreoretinal surgery is available.

Vitrectomy can reasonably offer improvement to the patient - often as the sole alternative - in common pathologies ranging from diabetic retino- and maculopathy to various macular diseases. In addition, vitrectomy is a viable option for many conditions in which other treatment modalities are also available, such as retinal detachment; it also offers the best possible outcome for complications of previous intraocular surgeries such as endophthalmitis following cataract extraction. Vitrectomy is often able to help patients with diseases involving the anterior segment of the eye such as certain types of glaucoma or cataract. Finally, vitrectomy is commonly the only intervention that can restore the anatomy of the injured eye and thus pave the way for functional improvement.

Patients undergoing vitreoretinal surgery are often sent back to the referring ophthalmologist for further care. For this reason all practicing ophthalmologists must be able to recognize complications following vitreoretinal surgery and determine whether these require vitreoretinal consultation or can be treated locally.

The course will utilize slides, case presentations, and intraoperative videotapes to aid in the skill transfer.

Future courses are also planned to deepen the participants' knowledge in the field.

Educational Objectives

At the conclusion of this course, participants should be able to determine whether the patient presents with an ocular condition in which vitrectomy can be considered as a treatment option. Participants should also have a good understanding of the urgency of various conditions as well as those where observation or delayed seeking of vitreoretinal consultation is acceptable. Participants will gain sufficient knowledge about the postvitrectomy care of their patients, including recognition and treatment of complications related to surgery.

Target Audience

This course is designed for all practicing ophthalmologists, whether in general practice or in any of the subspecialties related to the eyeball itself. Residents are not only welcome but highly encouraged to attend.

At the conclusion of this intense one-day course, a written test will be administered and all those who qualify will receive CME credit from the Milos Clinic, Belgrade.

Course Directors

Ferenc Kuhn, MD. PhD

-President,

American Society of Ocular Trauma (ASOT)

-Associate Professor of Ophthalmology

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-Director of Clinical Research

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Milos Clinic

Tentative Course Schedule

- 09:00 Welcome reception / Introduction
- 09:15-11:00 Scientific Session A
The concepts of vitreoretinal surgery
- 11:00-12:00 Scientific Session B
Indications for vitrectomy in ocular and systemic conditions I
- 12:00-12:45 Lunch break
- 12:45-14:00 Scientific Session C
Indications for vitrectomy in ocular and systemic conditions II
- 14:00 -15:00 Questions and answers
- 16:00 -17.00 Postoperative care
- 17:00-18:00 Test
- 18:00-19:00 Group meeting / Test results assessment