

THE LIGHT PIPE

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Editor-in-chief: Paul Walia, MD

The Newsletter of

GEORGIA  **RETINA**

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FROM THE EDITOR'S DESK



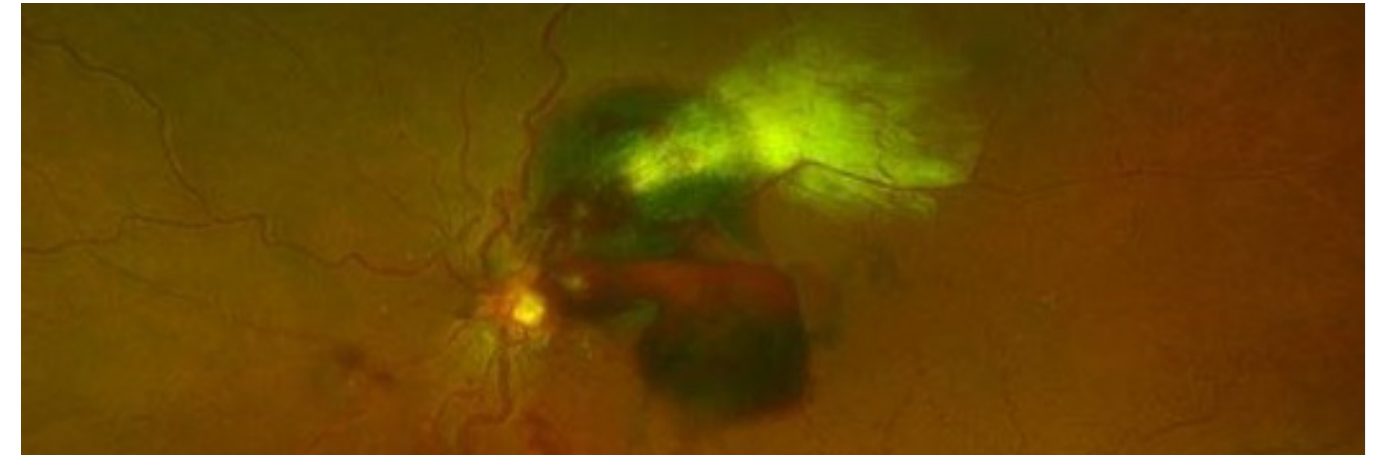
Greetings to our loyal readers and a warm welcome to our new readers! The Georgia Retina Lightpipe is excited to reach a larger audience as our practice continues to expand. Since the last edition, we have experienced significant growth with the additions of Dr. Arpan Bachhawat, Dr. Steve Allee, Dr. Norman Nelson and Dr. Aditya Rali. This issue serves as a brief introduction and they each look forward to meeting you in person soon.

Wishing you a very Happy Holidays! We hope 2025 brings good health and happiness to all. Thank you for entrusting Georgia Retina with the opportunity to provide retinal care to your patients.

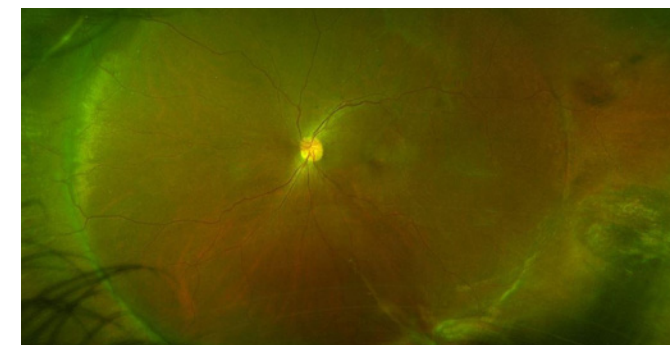


Dr. Paul S. Walia

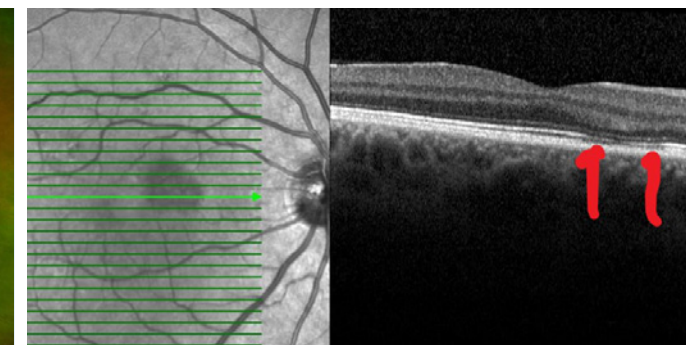
IMAGING CORNER



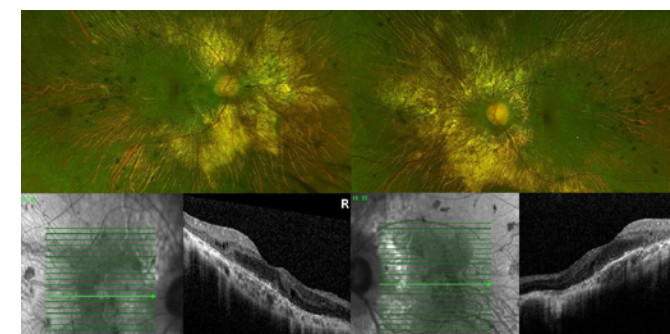
Fundus Photograph displaying subretinal, intraretinal, subhyaloid and vitreous hemorrhage with an adjacent cotton wool patch.



Fundus photograph of a scleral buckle showing retinal incarceration inferotemporal. This can occur after drainage of subretinal fluid during the operation.



OCT of PAMM (paracentral acute middle maculopathy). The near infra-red en face photo shows a well demarcated hyporeflective area superonasal to the fovea and this corresponds to thinning and atrophy of the affected inner retinal layers (demarcated by the red lines).



Fundus photograph and OCT image of choroideremia.



Bscan Ultrasound of a funnel retinal detachment and a mature cataract.

Dr Vanderveldt honored as 2024 Person of Vision

We are extremely proud to report that Dr Stephanie Vanderveldt was honored as the 2024 Person of Vision by Prevent Blindness Georgia (PBGA). Prevent Blindness Georgia is the state's leading eye health organization dedicated to preserving sight and preventing blindness. Since its inception in 1965, PBGA's mission has focused on ensuring that every individual has access to essential eye care and vision-saving treatments. Each year PBGA honors an invaluable individual who emulates excellence in the eye care community. This past year, PBGA held their 8th annual Night for Sight Gala on October 26, 2024 where Dr Vanderveldt was recognized for her dedication to eyecare.



Dr. Vanderveldt is a true leader in ophthalmology in Georgia. After receiving her undergraduate degree from Princeton, she graduated from Duke University Medical School where she received a merit-based Senior Scholarship for Excellence in Research and Academics, was elected to the Alpha Omega Alpha Honor Society, and was Valedictorian of her class. She served as a Teaching Fellow at Harvard University and completed her Ophthalmology Residency and Retina Fellowship at the prestigious Bascom Palmer Eye Institute, where she was selected as Chief Resident, which is one of the most prestigious retina fellowships available to ophthalmologists in the United States. We are fortunate that she chose to practice at Georgia Retina.

Dr Vanderveldt has a passion for making a difference in people's lives by restoring sight.

"I am incredibly honored to be named Prevent Blindness Georgia's Person of Vision 2024. The work that Prevent Blindness Georgia does to provide access to vision care for underserved and vulnerable communities throughout Georgia is vitally important. Providing early access to vision screening for children can change the entire trajectory of their lives," said Dr. Stephanie Vanderveldt, 2024 Prevent Blindness Person of Vision and Ophthalmologist at Georgia Retina. "I am humbled to have been given the opportunity to spread the word about this fantastic organization and its very important mission."



PRACTICE NEWS

Georgia Retina partners with Retina Associates of Middle Georgia

Georgia Retina is proud to announce that Retina Associates of Middle Georgia has officially joined the group. This reinforces Georgia Retina's status as the largest retina practice in the state and one of the largest retina-only practices in the southeastern United States. This unification reflects over sixty years of combined excellence in medical and surgical retina care

The addition of Dr. Norman Nelson, Dr. Steven Allee and Dr. Arpan Bachhawat brings Georgia Retina to 24 providers over 17 convenient locations throughout the state. Georgia Retina's goal has always been to provide exceptional, patient-centered retina care, and joining with Retina Associates of Middle Georgia allows this on a larger scale. By joining forces, Georgia Retina can provide the highest quality of retina care with a level of convenience and accessibility that best serves communities throughout Georgia

Through this unification, Retina Associates of Middle Georgia patients will have access to the latest advancements in retinal care and an expanded team of retina specialists. Local surgical options will remain available, and patients can expect a seamless transition with no disruption to their current treatment plans. The partnership means expanded appointment availability and scheduling flexibility for patients.

PRACTICE NEWS

Dr Rali joins GA Retina

Dr. Rali was raised in Chattanooga, TN. He began his educational career at Emory University earning a Bachelor of Science degree in Biology, with a minor in Religion. He subsequently obtained his medical degree from Emory University School of Medicine and continued his residency at the Emory Eye Center. Soon after, Dr. Rali completed his Vitreoretinal Surgery Fellowship at The Retina Group of Washington/Georgetown University.

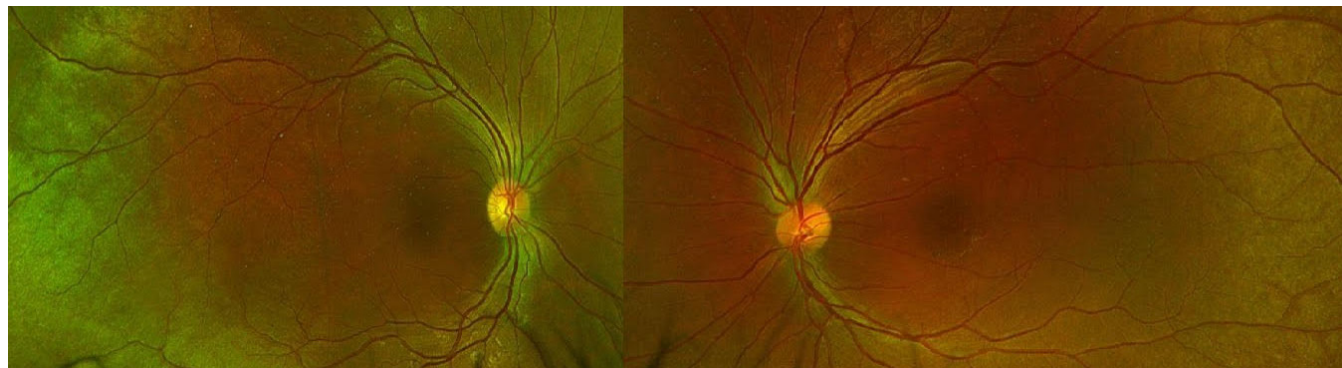
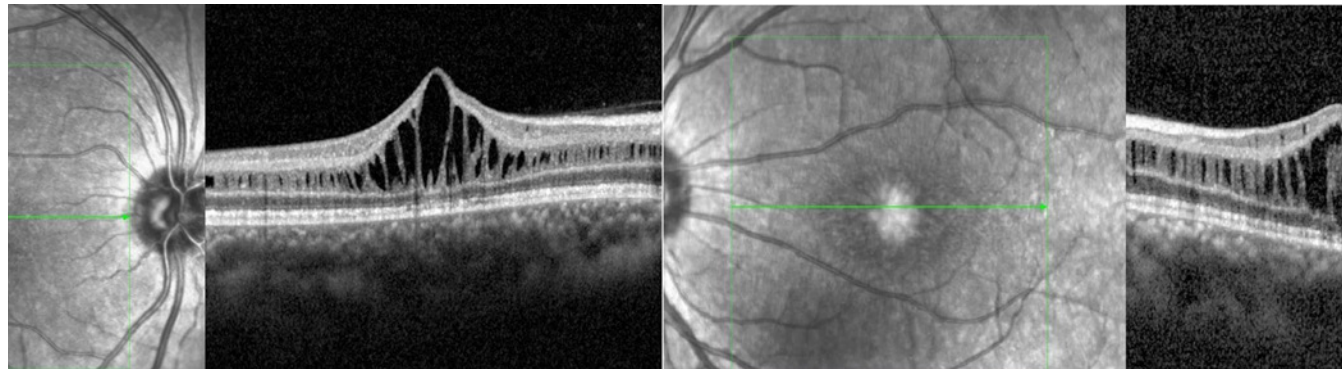
Dr. Rali has a passion for education and has served as a teacher and mentor throughout his academic and professional journey. During medical school, he held the position of president of the Pipeline Initiative, a mentoring program involving multiple Emory graduate schools and inner-city Atlanta high schools. He has conducted research in ophthalmology on a variety of topics including evaluating cataract surgery training, assessing stress levels for young surgical trainees, and better understanding the surgical learning curve. Dr. Rali's work has been published in prestigious journals and he has presented his findings at international and national medical association meetings. He is an active member of the American Academy of Ophthalmology and the American Society of Retina Specialists. Dr. Rali brings a wealth of clinical experience and research expertise to his role at Georgia Retina, where he is thrilled to return to Atlanta. His unwavering dedication, coupled with his compassionate approach, ensures that every patient receives the comprehensive care and attention they deserve. When he's not in the clinic, you'll often find him exploring new destinations, embarking on hiking adventures, or cheering for his favorite sports teams.



CLINICAL UPDATE

A 15-year-old Hispanic male and his older brother were sent in for evaluation in the retina clinic when their optometrist found they could not be refracted to 20/20.

The patient has no complaints and an unremarkable medical history. The visual acuity was 20/40 OD and 20/70 OS. The IOPs were normal. The OCT and fundus photos are shown below. The patient's brother had similar findings.



Juvenile X-Linked Retinoschisis

Juvenile X-linked Retinoschisis (XLRS) is a rare genetic retinal disorder that predominantly affects males, resulting in progressive vision impairment.

XLRS is caused by mutations in the RS1 gene located on the X chromosome. This gene encodes retinoschisin, a protein crucial for the structural integrity and cellular organization of the retina. The absence or malfunction of retinoschisin leads to splitting (schisis) within the layers of the retina, particularly in the macular region. This structural defect disrupts normal retinal function, leading to visual symptoms.

Patients with XLRS typically present in childhood, often between 5 to 10 years of age, with

symptoms of reduced visual acuity. Key clinical features include:

- **Decreased Central Vision:** The primary complaint, often first noticed, as difficulty in reading or recognizing faces.
- **Foveal Schisis:** Retinal splitting in the macula seen on fundoscopy as spoke-wheel patterns.
- **Peripheral Retinal Changes:** May include peripheral schisis and atrophic changes, which can predispose to retinal detachment.

- **Strabismus:** Misalignment of the eyes, sometimes observed in younger patients.

Vitreous Hemorrhage: Less common but can occur, leading to sudden visual impairment.

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- **Vitreous Hemorrhage:** Less common but can occur, leading to sudden visual impairment.

Diagnosis

The diagnosis of XLRS involves a combination of clinical examination and advanced imaging techniques:

- **Fundus Examination:** Reveals the characteristic spoke-wheel pattern of foveal schisis.
- **Optical Coherence Tomography (OCT):** Provides detailed cross-sectional images of the retina, confirming the schisis and assessing the extent of retinal layer separation.
- **Electroretinography (ERG):** Typically shows reduced b-wave amplitude with a relatively preserved a-wave, indicating dysfunction at the level of the inner retina.
- **Genetic Testing:** Confirms the diagnosis by identifying mutations in the RS1 gene, facilitating genetic counseling and family planning.

Management and Treatment

- While there is no cure for XLRS, management focuses on monitoring and treating complications to preserve vision:
- **Regular Monitoring:** Routine ophthalmic examinations to detect changes early and manage complications like retinal detachment or vitreous hemorrhage promptly.
- **Low Vision Aids:** Tools such as magnifiers and specialized glasses can help patients

CLINICAL TRIAL UPDATE

Georgia Retina has a long tradition of commitment to and participation in clinical trials to provide our patients access to new, state-of-the-art preventative, or therapeutic treatments. We partner with the National Eye Institute, some of the nation's top pharmaceutical companies, and other clinical practices to explore the causes and cures for many retinal conditions. Georgia Retina has a dedicated Clinical Research division with an experienced staff that assist patients in enrollment and participation of clinical trials. Through our participation, Georgia Retina has helped pave the way for many new therapies to make it to clinical practice and advance treatment strategies for blinding retinal conditions.

We take special care to ensure that our study patients experience the best medical care possible. This past year we have continued to be active in clinical trials for wet age-related macular degeneration, geographic atrophy secondary to dry age-related macular degeneration, retinal vein occlusion, diabetic macular edema, and non-proliferative diabetic retinopathy.

We hope that as you consider where to refer your patients for retinal care, you will keep in mind that Georgia Retina not only provides exceptional care but can also offer your patients the opportunity to enroll in clinical trials thereby offering them new vision saving treatments. If you have any questions about whether your patient might be eligible to participate in one of our ongoing clinical trials, please call an one of our doctors or contact our Clinical Research Director, Blair Symington (bsymington@garetina.com).

Current Recruiting Clinical Trials:

Diabetic Macular Edema:

Eclipse Life Sciences EC-104 BETTIS
Oculis Operations Sàrl DX221 DIAMOND 2

Wet AMD:

RegenXbio RGX-314-2104 ATMOSPHERE
RegenXbio RGX-314-3101 ASCENT
Eyepoint EYP-1901-201 LUGANO

Geographic Atrophy:

Annexon ANX007-GA-02 ARCHER II
Regeneron R3918-AMD-2326 SIENNA

maximize their remaining vision.

- Surgical Intervention: Necessary in cases of retinal detachment, with techniques like pars plana vitrectomy being employed.
- Gene Therapy: Currently under investigation, gene therapy aims to correct the underlying genetic defect and restore retinoschisin function.

Prognosis

- The progression of XLRS varies, but most patients experience a gradual decline in central vision, with peripheral vision often remaining intact. Early diagnosis and appropriate management can improve quality of life and functional vision outcomes.

Conclusion

- Juvenile X-linked retinoschisis represents a significant challenge due to its impact on vision during the formative years of life.

References

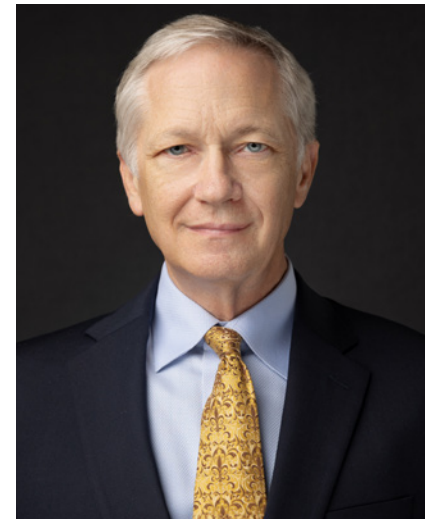
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2. Pimenides, D., George, N. D., Yates, J. R., Bradshaw, K., Roberts, S. A., Moore, A. T., & Trump, D. (2005). X-linked retinoschisis: Clinical phenotype and RS1 genotype in 86 UK patients. *Journal of Medical Genetics*, 42(7), e35.

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Warner Robins	478-757-8806

SPOTLIGHT WITH A GEORGIA RETINA DOCTOR:

In this edition of Spotlight, we get to know Dr. Norman Nelson. Dr Nelson founded Retina Associates of Macon in 1992 and is proud to provide care to Middle Georgia communities. He graduated from Tulane University in New Orleans and attended Louisiana State University School of Medicine. After completing an ophthalmology residency in University Medical Center, he returned to LSU for his retina fellowship training. Dr. Nelson is excited join forces with Georgia Retina.



What do you like most about being a vitreoretinal specialist?

My choice to specialize in the treatment of vitreo-retinal diseases can not be separated from my initial fascination with ophthalmology. For me ophthalmology more than any other specialty allowed me to draw from experiences and a knowledge base gained throughout my medical training and apply it to an organ system which is profoundly affected by a multitude of systemic disorders. In particular I found treatment of vitreo-retinal disorders to require varied approaches involving a stimulating mix of surgical and medical interventions. As a practitioner, being able to help another person maintain or regain a gift as precious as sight has given me great personal and professional fulfillment.

What do you like most about working at Georgia Retina?

This partnership means expanded appointment availability and scheduling flexibility for patients, while allowing us to implement cutting-edge technology and treatment options at an even higher standard.

What are your hobbies outside of work?

Outside of work I enjoy road cycling to maintain a modicum of physical fitness. My wife and I have for decades participated at multiple levels in historic preservation, primarily at maintaining and restoring historically significant dwellings. We also enjoy travel developing our own self guided itinerary and prefer exploring historic but less visited towns and cities.

Can you tell us about your favorite trips?

Southern Italy, Sicily and the hilltop towns in Tuscany are particularly interesting and have allowed us to engage and experience the local culture much more so than organized tours in larger cities. In our most recent trip we spent our entire week in Matera in southern Italy. I would describe Matera as similar to Venice but without the water and crowds. In my view it is equally enchanting and picturesque. The ancient and much more recent history of the area is fascinating. The cuisine is fairly simple but exquisite, and the people are engaging.



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Our Doctors



Sean S. Koh, M.D.



Alexander R. Bottini, M.D.



Aditya Rali, M.D.

Thank You for Reading Our Winter 2024 Edition Light Pipe Newsletter!

If you have time, please take a moment to answer a few questions about this year's publication. By doing so, you're helping Georgia Retina become an even better practice.

Click here to begin: <https://forms.gle/x8fjHud6SYotLZng6>

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 Norman C. Nelson, JR., M.D. | Aditya Rali, M.D.

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