CRFA Honored as IBJ Health Care Hero

On March 6th, Cornea Research Foundation staff and some members of the Board of Directors gathered at the Conrad in downtown Indianapolis awaiting the announcement of the recipient of a distinguished award given by the Indianapolis Business Journal (IBJ). The annual Health Care Hero Awards honors a company or individual primarily responsible for a scientific discovery or for the development of a new procedure, device or service that can save lives or improve quality of life for a large number of people.

The Foundation was nominated for DMEK cornea transplants in the Advancements in Health Care category. Greg Morris, IBJ publisher, provided an overview of the finalists. Our staff and board members were excited to be announced as the winner! The Foundation was chosen for its efforts to make the surgery widely available and for training doctors elsewhere how to perform it.

Marianne Price, our executive director was invited to say a few words. “We feel honored to have been chosen as the winner in Advancements in Health Care. It has been through the voluntary assistance of cornea transplant recipients participating in our studies to track longitudinal data of transplant outcomes, the generous support of our donors who fund this research and the dedicated work of the doctors at Price Vision Group that have led us to such a revolutionary cornea transplant procedure.”

Dr. Price explained, “We see it every day in clinic—the difference DMEK has on healing, recovery times and visual outcomes. It’s far better than even 10 years ago. The quality of life and ability to return to normal activities is motivating to patients who travel for surgery. Surprisingly, 44 percent of DMEK transplant recipients at Price Vision Group travel from out of state or internationally.”

We appreciate our generous supporters who donate to make this work possible. We plan to continue researching ways to improve visual outcomes through treatments and surgeries and lessen side effects of medications through studies with Fuchs’ dystrophy, glaucoma, dry eye, cataracts and more, so “that all who look may see.”

New Cornea.org is Launched

We are pleased to share the new Cornea.org site is live! The website has been in development since late last year and thanks to several key donors we were able to wrap up the project this month!

Be sure to visit soon at Cornea.org! The site features:

- New and improved Learning Center including vision conditions and treatment options and cornea transplant techniques
- Research and Findings and patient stories shared through Videos
- Comprehensive information About Us including Annual reports, Visionary newsletter archives, Awards and Publications
- News blog to share educational topics and Forum to connect people
- Information on How to Travel to Indianapolis for Surgery
**Happenings**

**CORNEA.ORG**

Launched

Months in the making, the new Cornea.org site is now ready for visitors! Share your story on the new integrated forum.

**GOLF OUTING**

June 5, 2015

Cornea Classic Golf Outing—Please mark your calendar! Call us now at 317-814-2993 to reserve your spot or receive information. Many levels of sponsorship opportunities available!

**EDUCATION EVENT**

September 20, 2015

The Foundation will host an open house event on a Sunday in September in Indianapolis.

**OPTOMETRIST SEMINAR**

October 28, 2015

The Focus on Education seminar will be held at the Ritz Charles in Carmel, Indiana on a Wednesday. Offering 7 hours of CE to attending optometrists with presentations from contemporary experts on today’s topics.

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**Cornea Classic Golf Outing Registration Open**

Spring is here and we are gearing up for our annual Cornea Golf Classic on **Friday, June 5th at Wood Wind Golf Club** in Westfield, Indiana. A volunteer-run event led by Golf Chairman Harry Scheid and Vern Rensing, our dedicated committee has set a **goal to raise $50,000** to fund vision research in 2015. We fell just short of our goal last year and our volunteers are hard at work securing players, sponsors and silent auction items to hit our target this year!

If you would like participate as a foursome or hole sponsor or even an individual player, please let us know. If you aren’t a golfer but want to help, we are looking for silent auction items. Tax-deductible donations are welcome and appreciated. All donors are recognized as **Foundation Friends** at the event and on the brochure. Call us at 317-814-2993, email Jessica@cornea.org or visit Cornea.org for more details.

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**Dry Eye Studies Currently Enrolling**

Do you or someone you know suffer from irritating dry eyes? CRFA is currently enrolling patients in several sponsored dry eye studies.

Study participants may be compensated for time and travel. To learn more and see if you qualify, contact Clorissa Quillin at 17-814-2996 or email clorissaquillin@cornea.org.
How We’re Making an Impact with your Support

Breaking Research News by Marianne O. Price, Ph.D.

We have some exciting findings to share from our recent studies to advance cornea transplant methods and identify the best medications for patients to ensure their graft survival while minimizing side effects. Many of you who had a cornea transplant at Price Vision Group within the past few years have participated in these studies and for that we thank you!

By way of background, cornea transplant recipients have traditionally used corticosteroid eye drops long-term to prevent transplant rejection, a leading cause of transplant failure. These eye drops have some undesirable side effects. We have found that about 30% of patients experience an increase in eye pressure when using these eye drops for a year or longer. Often this can be controlled with pressure medication. However, sometimes this is not the case and unfortunately pressure fluctuations can lead to glaucoma and cause irreversible vision loss. We wanted to find a way to minimize this risk for patients.

Fortunately, our Cornea Transplant Database showed us that DMEK transplants had a remarkably low risk of being rejected (less than 1%). Based on this finding, we conducted a series of studies over the past 3 years to determine if we could safely reduce the strength of the steroid eye drops for DMEK recipients. First, we compared our standard steroid eye drop regimen (Pred Forte®) with two lower concentration steroids, fluorometholone (FML®) and Lotemax Gel®.

No DMEK study patients experienced a rejection episode while using Pred Forte or Lotemax gel for the first year after surgery. Only 2 out of 163 eyes had a rejection episode while using FML, and both rejection episodes were treated successfully by increasing the steroid dosing and strength.

Increased eye pressure, the principal side effect, was 2 to 3 times more likely with Pred Forte than it was with the lower strength steroids. As a result of these studies, we now start DMEK patients out on Pred Forte and at 2 months we reduce the steroid strength to minimize the risk of glaucoma.

Next we wanted to investigate whether DMEK recipients can safely discontinue steroid eye drops after about a year. You can read more about these landmark studies at Cornea.org. In addition to reporting findings online, we also present them at eye meetings around the world and leading eye journals publish our results, so that doctors and patients worldwide can benefit.

If you are a DMEK recipient and would like to consider reducing the strength of your steroids please contact us to see if you are a candidate. If you have had your DMEK transplant for a year or longer and would like to learn more about going off of the eye drops, contact us and we will discuss the details with you.

Please direct questions to 317-814-2994. We are happy to speak with you about your options.

Longitudinal Data: Why It’s Important

Since 1988, our primary function has been to track long-term patient outcomes in our Cornea Transplant Database where we currently house data on more than 8,000 transplants. This database has assisted in making discoveries by allowing us to see trends—what's working well and what's not working as well so we continually refine surgical techniques, treatments and patient care resulting in better outcomes.

Here are just a few benefits to tracking data that our data has proven:

1. Newer methods (DSEK & DMEK) are safer and provide much faster visual recovery than previous methods.

2. Cataract surgery can be safely combined with DSEK or DMEK thereby allowing patients to have both problems treated at the same time. A single surgery is much safer, easier and cost-effective.

3. The second eye can be treated with DMEK just one week after the first to allow faster recovery.

4. DMEK has a far lower risk of being rejected than early methods.

You can help by continuing to allow us to see how you are doing at the 1, 5 and 10 year marks and beyond!
How did you first know you wanted to start researching ways to improve cornea transplants? How is your research funded?

Q: 

A: After being in practice for 4 years and doing an increasing number of transplants, I realized no one in the U.S. was really tracking corneal transplants—even though corneal transplants were the most frequent form of transplants done in the country. All studies from universities were on small groups of patients with only about a year of follow up. If we were going to improve transplant outcomes, we needed to follow patients for extended periods and track what the real results were.

The Cornea Research Foundation started the Cornea Transplant Database in 1988. We have now grown and conduct at least 15 research studies each year. Half of our $550,000 budget (not including in-kind support) comes from individual and patient contributions and our golf outing fundraiser. Our supporters “pay it forward” as those who gave to research in the past have brought us to where we are today while current donors are helping to fund the next breakthrough. The other half of our income is earned through hosting our educational activities like our Optometry seminar and participating in industry-sponsored research where we receive funding to enroll patients.

Proportionate to our funding sources, half of our studies are of our own design and initiated to help solve problems we identify with our patients with the oversight of the Independent Review Board (IRB) for safety, while the other half are designed by our collaborating partners but are geared to solve problems we see frequently in our patient population. We appreciate the support of all who believe in our mission.

Thank you for your continued interest and support! All donations to the Foundation are tax-deductible and support our sight-restoring research.