



"We all walk in the dark, and each of us must learn to turn on his or her own light." - Earl Nightingale



Robert Louis Stevenson wrote about Point Pinos Lighthouse after visiting in 1879 as his family had designed and built lighthouses in Scotland.

Announcements

On April 21, Johnson & Johnson announced the launch of a new brand called Acuvue Abiliti. Each purchase of an Abiliti product will provide a free comprehensive eye health exam to a child in need through Sight for Kids.

On April 9, Essilor announced the two-year clinical trial results of its Stellest lens for myopia. The lenses slowed myopia progression by 67% when compared to single vision lenses when worn 12 hours per day.

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Employment Opportunity

Dr. Tram Le is taking over the Sand City Costco lease (which has an Optos) and is looking for (1) an optometrist to work 4 days a week (or more if interested) and (2) maternity leave coverage from August 2021 to October 2021. Guaranteed \$450 base pay or earn higher with percentage of total gross for the day. If interested, email trambleod@gmail.com

Calendar of Upcoming Optometry Events

May 23 – May 25: Virtual AOA on Capitol Hill – please register by Monday, May 10
<https://www.aoa.org/events/calendar-of-events/virtual-aoa-on-capitol-hill>
 June 13 – June 21: COA Virtual Legislative Day – registration open
<https://sites.google.com/coaboard.org/coace/more-events/legislative-day>

Contact us at MontereyBayOptometricSociety@gmail.com

FORWARD FOCUS: California State Board of Optometry

I initially had a fairly simplistic view of the California State Board of Optometry: COA were the “good guys” who fight to protect optometry, and the board were the “bad guys” to try to take away the license of any optometrist who makes any little mistake.

After learning more about the board, though, I realized they actually perform multiple roles, many of which help optometrists. Their purpose is to protect the health and safety of California consumers through licensing and regulation of the practices of optometry and opticianry, and the board is responsible for regulatory oversight of approximately 17,980 optometrists, opticians, and optical businesses.

The staff includes Shara Murphy, executive officer, Cheree Kimball, assistant executive officer, Natalia Leeper, lead licensing analyst, and Terri Villareal, lead enforcement analyst.

The board members includes both optometrists and non-optometrists. The current professional members are Dr. David Turetsky, Dr. Lillian Wang, Dr. Glenn Kawaguchi, Dr. Jeffrey Garcia, and Dr. Deborah McIntyre. The current public members are Cyd Brandvein, Mark Morodomi, JD, and Eunie Linden, JD.

These board members make up multiple committees, including Practice and Education, which approves CE, Consumer Protection and Public Relations and Outreach, which educates optometrists and consumers on laws, Legislation and Regulation, which interprets current laws and creates recommendations for new laws or amendments, and Dispensing Optician, which deals with optician issues, such as licensing, enforcement, and training.

In fact, the board is currently recruiting optometric assistants for surveys and paid workshops of how they fit into your practice. If any of your assistants / opticians are interested, please have them email their name, email, phone number, city, and number of years of experience to optometry@dca.ca.gov

ONLINE REFRACTIONS:
NOT A COMPREHENSIVE EYE EXAM

Understand the risks to your health

Clear vision does not necessarily mean healthy eyes. If you substitute an online refractive eye test for a comprehensive eye exam, key eye issues could be missed and you could be putting your eye health—and possibly your overall health—at serious risk.

What does a comprehensive eye exam cover that an online refractive test does not?

As opposed to an online refractive test, a tool used to only determine the appropriate lens power needed to improve your vision, a comprehensive eye exam entails an optometrist or ophthalmologist evaluating the overall health of your eyes by:

- Understanding your case history
- Completing a thorough exam, which will determine the internal and external health of your eyes.
- Conducting an evaluation of your refractive status (how your eyes focus and coordinate) and determining a prescription accordingly.

During 2020, the board worked on some regulations to assist optometrists, including allowing online CE to count as live, which is now permanent for California, and the COVID-19 waiver to allow TPA-certified optometrists to administer COVID-19 vaccines once requirements are met. They have also provided information to educate patients on online refraction.

Also, while the board does handle patient complaints, most never result in disciplinary action. In 2020, there were 273 consumer complaints, and out of those, only 86 resulted in licensee disciplinary actions. In addition, complaints are not public information.

Common violations include insurance fraud, drug and/or alcohol abuse, failure to refer, hiring an unlicensed person to practice optometry (including new graduates without licenses yet), practicing optometry without a valid license, disciplinary action taken by another state, and unprofessional conduct.

There are some easy violations to avoid. Do not practice without a renewed license, do not use the prefix Dr without the suffix optometrist, optometric doctor, or OD (BPC 3098), and do not claim expertise in any area of optometry (BPC 3100). Furthermore, Fictitious Name Permits must be used in their entirety with no abbreviations or nicknames (BPC 3078) and are required if you are doing business under a name other than the name on your license.

There might soon be some vacancies on the board for optometrists, public members, and opticians, so if you or your staff are interested in possibly joining the board or for more information on the board, you can visit their website at <https://www.optometry.ca.gov>

MBOS would like to thank Shara Murphy, executive officer of the California State Board of Optometry, for her presentation about the board at our April CE meeting.

If you are contacted about a complaint...

- Don't panic!
- Do not discuss the complaint with anyone.
- Do not try to argue or explain your side.

Disciplinary Actions

- Revoke or suspend a license
- Revoke or suspend a permit
- Revoke or suspend a certificate
- Revoke or suspend a registration
- Revoke or suspend a license or registration
- Revoke or suspend a license or registration
- Revoke or suspend a license or registration

EDUCATION EMANATION: Dr. Anna Shi



Dr. Anna Shi discussed Botox injections at the April MBOS virtual CE. Ophthalmologically, it is most useful for blepharospasm and strabismus, although there are a great number of other on- and off-label uses, including for wrinkles around the eyes.

Thanks to Merz Pharmaceuticals for donating 100 units of Xeomin, to Dr. Prisbe, Dr. Solomon, and Dr. Rosenblum for being volunteers, to Dr. Nakajima for obtaining video of the volunteer injections, and to Dr. Shi for performing the injections.

"The face is a picture of the mind with the eyes as its interpreter." - Marcus Tullius Cicero

LEGISLATION LAMP: President's Council

President's Council Q1 was held in January, with Dr. Jonovan Ottenbacher, president of MBOS, and Dr. Kasey Nakajima, president-elect, attending. Thirty other society presidents and presidents-elect attended, as well as Sarah, Jodi, and Kristine from COA and Rachelle Lin, COA Trustee.

One proposal was to build relationships with local health care plans, focusing on how to get on local plans, and discovering any problems doctors in the area are having with any specific health plans, such as billing issues. If you are interested in becoming a liaison for this issue, please let us know.

Another concern was vision screenings, as they often don't connect to optometrist afterwards. There is a need to increase follow-up and also focus on eye exams in addition to vision screenings.

Then there was a Q&A with AOA liaisons Dr. Curtis Ono and Dr. Lori Grover. They discussed what AOA is working on legislatively that California could help with. This includes vision plans, including lab choice and member benefits, the FDA contact lens requirement, and performing vaccinations.

Finally, there was, as always, a long discussion on increasing membership. Some thought it was simply a cost issue, and lowering membership fees would greatly increase the numbers of doctors who would join. Others thought it was more an issue of non-members not understanding or feeling they benefited from the benefits of membership. So, if you're a non-member, we would greatly appreciate it if you would let us know what we could do to convince you to become a member.

LEGISLATION LAMP: House of Delegates

House of Delegates was held in February/March and was attended by Dr. Jonovan Ottenbacher, Dr. Robert Theaker, Dr. Trevor Fogg, and Dr. Kasey Nakajima.

The president's address by Dr. Jason Tu covered 2020, and he discussed how COA had waived dues for two months, that COA created many webinars and online CE to help educate optometrists about COVID-19 news and resources, and how COA had improved technology to increase member engagement. One in three members participated in every virtual COA event in 2020, a much higher percentage than at previous live events. He said there was still a need for more technology, to flatten the organizational structure, and to make COA more modern and agile.

COA Executive Director Kristine Schultz covered COA's new website, advocacy wins, Leg Day, and 2021 issues: AOA interaction, membership, and advocacy.



Secretary-Treasurer Dr. Amanda Dexter mentioned that in 2020, revenue was down 23%, over \$800,000, due to membership being waived for 2 months and less registration income from events, but that expenses had been reduced 37%, nearly \$1.5 million, via reduced contract rates, personnel cuts, and technology implementation. The 2020 COA net revenue was \$450,000, versus \$250,000 in 2019. The 2021 budget is revenue: 55% membership, 27% events, 17% other, 1% coms, and expenses: 26% government affairs, 18% events, 18% membership, 17% admin, 18% governance, 3% coms.



An advocacy report by Dr. Dave Redman and Dr. Mark Nakano covered 2020 achievements, including immunizations (optometrists were vaccinated early under Phase 1A), online live CE, COVID vaccine administration by optometrists, adult eyeglasses coverage, telehealth payment parity, AG approval of practice sales, a mobile clinics bill, and the defeat of PPE stockpiling requirement legislation.

Awards were next, and included student leadership: Dr. Ryan Runai, education: Dr. Naida Jakirlic, society bulletin: MBOS, society website: SCCOS, society program: ACCCOS, young OD: Dr. Nicole Kohan, Dr. Sarah Lopez, Dr. Christine Ng, Dr. Millie Liu, and Dr. Amanda Havens, society of the year: ACCCOS, optometrist of the year: Dr. Fred Dubick.

Shara Murphy, executive officer of the California State Board of Optometry, gave a report, SCCO students Caroline Quan and Christopher Quan mentioned there would be more Eye-to-Eye webinars, and the Public Vision League's annual meeting was discussed by Dr. John Rosten.

Finally, election results were presented by Dr. Suma Tiriveedhi and were as follows:

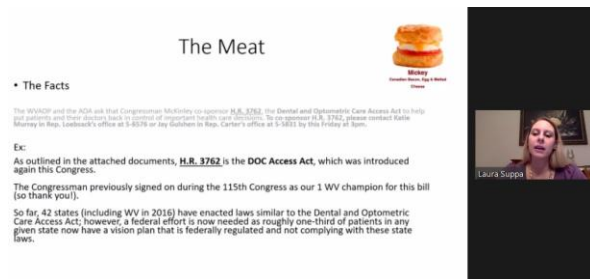
- President: Dr. Ida Chung
- President-elect: Dr. Amanda Dexter
- Secretary-treasurer: Dr. Kandi Kimura
- Trustee: Dr. Richard Hom
- Trustee: Dr. Mika Moy
- Trustee: Dr. Brian Park

LEGISLATION LAMP: AOA Virtual Advocacy Webinar

In February, the AOA hosted a webinar on how to advocate your positions to elected officials, both in person and virtually.

Amy Pfeiffer, chief of staff for Congressman Andy Kim, recommended reminding them you are a constituent of their district and creating a personal bond through shared issues. Also, always have an ask, from joining a caucus to supporting a bill.

Dr. Laura Suppa from the AOA Federal Relations Committee discussed how to create an effective email with a compliment sandwich. You want to the subject line to be an attention grabber and easily searchable as well. In the body, include general pleasantries, an ask, facts, and a closure. Always include your contact information, and a handwritten thank-you note is an easy way to make yourself memorable.



Ari Kanner, customer success team lead at Quorum, covered the four best practices for advocacy, which are sign up for and leverage texting, personalize your advocacy messages, log your relationships with legislators and staff, and leverage social media to amplify your message and recruit colleagues.

Dr. David McBride, grassroots advocacy chair of the Oregon Optometric Physicians Association, said to sign up on your legislators' Facebook pages and websites so you know when they are having virtual town halls, and have a keyperson engaged with all important legislators. Oregon's successes included a 2016 managed vision bill and a 2019 telehealth bill, and they are currently working on a scope bill for SLT, YAG, and to clean up glaucoma language.

Niki Terzieff, president of Leading Edge Public Affairs (an Oregon lobbyist), said to leave room for them to tell you what they need from you.

Vicki Farmer, executive director of Arkansas Optometric Association, recommended paying attention to their social media and having real relationships to create personal contacts.



Mike Panetta, partner at BeeKeeper Group, said you need to focus on three questions: Who are you trying to reach? What do you need them to do? What message will move them to action? Visual content is more powerful than written, so create graphics, memes, pictures, and videos with compelling visuals which create thumb-stopping moments, such as quote pictures and infographics. He also mentioned stories change minds, not facts and science, especially personalized stories from constituents about how an issue affects them. Find stories to support your message and use social media to tell that story.



Matt Linden, client director at FiscalNote, said to frame your request as a member benefit or resource, not an ask, and Dr. Robert Layman, OD, president-elect of AOA, stressed the importance of maintaining personal relationships.

ILLUMINATING INSTANCES: Solar Retinopathy

Solar retinopathy is retinal damage from solar radiation. In theory, it can also be caused by tanning beds, laser pointers, certain microscopes, and arc welders, although in practice, I have never seen it caused by any of those. Certain illicit drugs, especially LSD, and some mental health issues seem to increase a person’s sun-staring preferences, although another common cause is watching a solar eclipse without appropriate ISO-approved tinted glasses.



Some people about to watch the 2012 solar eclipse without any special glasses. Thankfully I had some extras and was able to share.

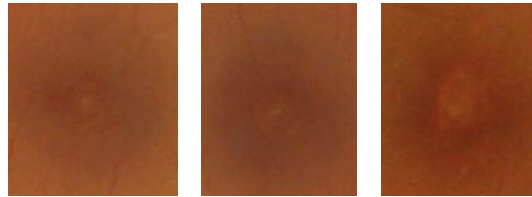


The eclipse and my picture of it above a building in Los Angeles, along with another picture in 2014 demonstrating sunspots.

During the 2017 eclipse, Amazon recalled certain solar eclipse glasses sold on its site as they were unable to confirm the manufacturer of the glasses, with some sellers even faking test results and placing fake ISO logos on their websites. Because of this, ensure any solar eclipse glasses you purchase or recommend are from the American Astronomical Society’s list of reputable vendors of solar filters.

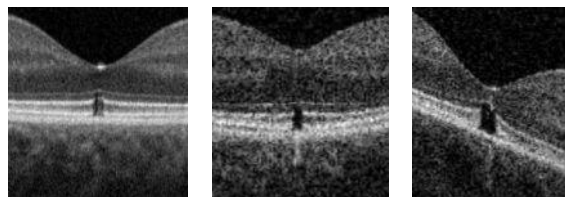
Solar retinopathy damage is not caused by the retina being burned by thermal energy, but instead by photochemical oxidation via creation of oxygen free radicals which cause oxidative damage to RPE and photoreceptor cells. There is no treatment, and while the eye can sometimes heal itself to some extent over the course of a few months, there is often permanent photoreceptor damage and vision loss.

On examination, patients will often have slight eccentric viewing and mild to moderate visual acuity loss, with a BCVA of approximately 20/20 to 20/40. The patient will sometimes but not always recall an instance of staring at the sun or a solar eclipse. A reddish-yellowish spot or ring in the macula can usually be seen via biomicroscopy, although its appearance can vary from barely noticeable to extremely obvious.



Macular pigment changes observable on slit lamp examination.

I’ve found the most definitive test is OCT, which will show a loss of photoreceptors directly below the macula and will often demonstrate reverse shadowing. However, as the damage can be in a quite small area, if one type of scan appears normal, consider repeating the test with another scan mode. I’ve found damage with a high-resolution line scan which was missed with a low-resolution wide scan and vice versa, likely due to eccentric viewing.



Smaller areas of photoreceptor loss on OCT in various patients.



Large areas. Note also the reverse shadowing effect in the choroidal area under the missing photoreceptor layers.

"I shut my eyes and all the world drops dead; I lift my eyes and all is born again." - Sylvia Plath

REFLECTIVE RESEARCH: Second Sight

My recent research into this company came about in a quite different way. In addition to our normal “safe” investments, my wife and I have a competition where we each invest a couple thousand dollars in whatever we want, and then see who wins after a year. In 2021, she went with Tesla, Apple, and other big tech, so I figured I’d have to get creative to win.

I came across penny stocks, which, at least on most internet forums, are largely marijuana, drone delivery, marijuana drone delivery, crypto mining, and other random stocks. Since they are so cheap, I could buy 1,000 to 50,000 shares in multiple companies. Then, if any really took off (like Gamestop, which, while not a penny stock, went from \$20 to \$450 in one week), I might best my wife in our contest.

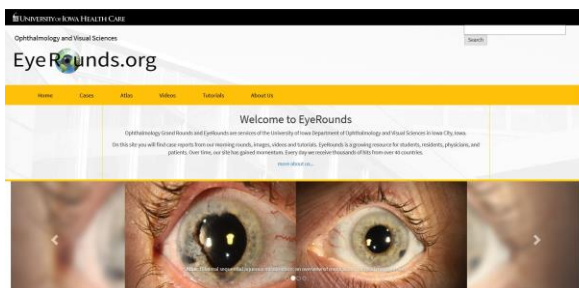
However, I noticed there were also various ophthalmic penny stocks, including Ocugen, Aerpio, AGTC, Outlook, and Second Sight. That last one caught my attention because I remembered hearing about the company 20 years ago. In 2002, they had developed the Argus I, a 16-electrode retinal implant which received signals from a glasses-mounted camera to stimulate the retina, which sent the information to the brain via the optic nerve. The Argus II, in 2007, greatly increased the number of electrodes to 60, but the resolution was still quite poor. I would mention to blind patients that perhaps the company would continue to improve their device enough to be practical, but it seemed that the resolution was still too poor, and the company didn’t seem to be making any further progress.

I then didn’t hear much more about the company until I saw it in the penny stock listing early this year. A little more investigation yielded that in June of 2020, they sold all of their manufacturing equipment, laboratory assets and even office furniture, so I assumed they were done for, another company succumbing to COVID-19, and in October of 2020, Nasdaq was about to delist them.

However, in January of 2021, they combined with Pixium Vision, a bioelectronics company, so I thought they might survive, and I decided to buy a few shares (at \$2, they were far above my normal penny stock range, so I couldn’t buy too many), and then on March 5, 2021, their Argus 2s was FDA approved, which shot their stock up to \$15. It has since moved back down to around \$7. Perhaps I should have sold right after the FDA announcement, but I realized I’m way too lazy for this day-trading stuff, which most penny stock buyers seem to be, and am more of a buy-and-hold investor, so I’m still hanging onto it.

This is not financial advice, and overall, I’m down on my penny stocks, as while a few of them like Second Sight happen to have appreciated since I purchased them, most of my picks are down. So far, my wife is winning in our competition this year. But, regardless of my small investment, I hope Second Sight succeeds long-term because I genuinely believe it could truly benefit patients who have lost nearly all vision, and I’ll be watching the company for future advances.

INTERNET INCANDESCENCE: EyeRounds



EyeRounds, from the University of Iowa Department of Ophthalmology, has a wide variety of resources, from case reports, a searchable database of images, videos of conditions and surgeries, and tutorials. The huge amount of text, pictures, and videos is worth spending some time exploring, especially videos of disorders I had only previously read about. The website can be found at <http://eyerounds.org/>

VESPERTINE VENERATION: Dr. Francis Kuo



I arrived to San Francisco by boat with my family when I was 5 years old, from Hong Kong. I went to grade school in Berkeley and we moved to Santa Cruz in 1969 when I was 13 years old. Our house was a block away from Branciforte Junior High which I attended, and then on to Harbor High School. With a major in Biological Sciences from UC Davis, I went on to graduate from UHCO in 1986.

It was hard to find a full-time position when I graduated, so I had two part time positions, one with John and Scott Daly, ODs and another with William Adams, MD. Eventually I moved on and started my own practice in 1993. Starting a practice cold was definitely a struggle and I worked part time with Dr. Craig Blackwell to help make ends meet. The practice slowly grew and I have never regretted making the leap. I've moved my location several times and have been at my current location on the west side of Santa Cruz for the past 23 years.

I remember attending the MBOS society meetings after I had just graduated, and meeting all the established ODs in the area. There were a few of us that had graduated in the mid 80's and we definitely felt like we were the new kids on the block. Now, (actually pre-COVID) looking around at the meetings and seeing all the new faces, we've become the established (old) ODs. It's hard to believe that over 30 years have flown by.

In the late 80's, MBOS was looking for a new Bulletin Editor, so I stepped up and started producing the bulletin, typing, editing, literally cutting and pasting, and stapling it together, and mailing it out every other month to over 50 ODs. There was no email and computers were in their infancy. I had to go to Kinko's to make copies because we didn't have personal printers back then. I moved up the ranks in the society to Secretary/Treasurer, Vice President and then became President for the MBOS in the year 2000. All those years, I was still doing the bulletin.

Optometry has been and still is a very rewarding profession for me. It has allowed enough flexibility in scheduling so that I was able to spend time with my four kids when they were growing up. I was able to help out with Little League and youth soccer, and attend all their games. I was also involved with the Santa Cruz Junior Golf program for over 10 years and was President for several years while my boys were participating. Our family has been on over 20 mission trips to the hilly neighborhoods of Rosarito, Mexico, to build homes and do outreach.

We are blessed to be living and working in the Monterey Bay area. The mountains, the ocean, the wonderful climate, and the views; it's so hard to beat. I like to ride my road bike throughout the Monterey Bay region and also enjoy biking on a tandem with my wife. Training for triathlons is something I continue to do, even though all events have been cancelled for the past year. Now, as we are hopefully approaching the end of COVID-19, we should be all the more grateful living in this area, so go out and enjoy safely!



"The question is not what you look at, but what you see." - Henry David Thoreau

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