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For Your Eyes

Spring, 2004

A Newsletter For Our Local Community

Cataract Patients Should Stay On Anticoagulants



A recent study concluded that patients undergoing cataract surgery can remain on the anticoagulants (coumadin) and anti-platelets (aspirin) they use for cardiac conditions without an increased risk of ocular bleeding. Years of studies have shown that aspirin, among other drugs, is extremely effective in reducing the risk of heart attack.

In addition, many patients experienced coronary events within one week of aspirin withdrawal. With this in mind, physicians have had to carefully balance the risk of potential heart attacks against the risk of ocular hemorrhage during surgery. The new study shows that statistically, the risk of hemorrhage is similar whether on anticoagulants or not. That's great news for you and your doctor. ✂

New Year, New Rules

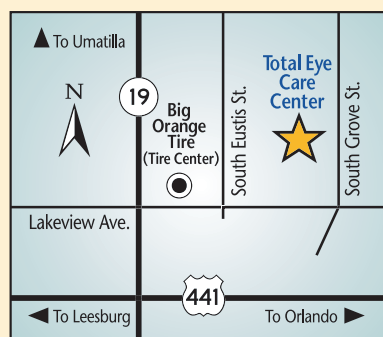
For those of you who have been away - and even if you are a local resident - you may not be aware of a recent change in driver license renewal. If you are over the age of 79 and need to renew your Florida driver license, you will now be required to submit to a vision test. Effective January 1, 2004, those licensees over 79 years of age who appear in person at the DMV will have their vision test administered at the driver license office. Those renewing by mail or electronic means will need to simply submit the results of a vision exam administered by their licensed ophthalmologist or optometrist. The eye doctor must submit the results of the exam on a departmentally approved form, signed by the health care practitioner, and the results must meet the standards for passing the department vision test.

In support of our senior population, the physicians at Total Eye Care Center will provide free DMV vision testing for those over 79 years of age whose birthdays fall within the current month. Call 728-1717 for more information.

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3 Convenient Locations



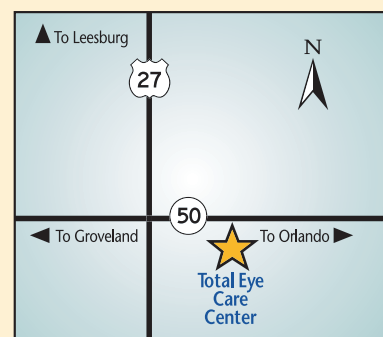
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Call us for Glaucoma and Cataract examinations or visit www.totaleyecarecenter.com

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Glaucoma - The Silent Thief

According to the National Eye Institute, nearly 3 million Americans have glaucoma. Unfortunately, more than half of them are unaware they have the potentially blinding disease because they have no symptoms. As the disease progresses, any of the following symptoms may appear:

- Loss of peripheral vision
- Difficulty focusing on objects
- Presence of haloes around lights
- Blurred vision

Although anyone can develop glaucoma, it tends to be more prevalent among African Americans and Hispanics. The risk also increases with age. The American Academy of Ophthalmology recommends eye examinations at least every one to two years for:

- African Americans over age 40
- Anyone over age 65
- People with a family history of glaucoma
- Individuals who have experienced a serious eye injury
- People with diabetes (yearly exams are recommended)

Total Eye Care Center's Dr. Sheridan says, "Although glaucoma cannot be cured, it can be controlled and vision preserved when the patient is treated with eye drops, oral medications or outpatient laser surgery, but the key is early detection. And that is why it is very important for people at risk to be tested regularly."

What Is Glaucoma?

Glaucoma is a group of eye diseases that gradually steals sight without warning and often without symptoms. It was once believed that high intraocular pressure (IOP) was the main cause of this optic nerve damage. However, now we know that other factors are involved because even people with "normal" IOP can experience vision loss from glaucoma.

There Are Two Main Types Of Glaucoma:

Primary Open Angle Glaucoma

This is the most common form of glaucoma, affecting about three million Americans. It is the result of poorly functioning drainage canals in the eye; and as a result the inner eye pressure rises because the correct amount of fluid can't drain out of the eye

properly. Over time this pressure damages the optic nerve and causes gradual loss of vision.

Unfortunately, most people have no symptoms and no early warning signs. The good news is this form of glaucoma responds well to medication, especially if caught early and treated.

Angle Closure Glaucoma

This type of glaucoma is also known as acute glaucoma or narrow angle glaucoma. It is less common and is very different from open angle glaucoma in that the eye pressure usually goes up very quickly. This happens when the drainage canals get blocked or covered over. In this case, the iris and cornea is not as wide and open as it should be.

The outer edge of the iris bunches up over the drainage canals when the pupil enlarges too much or too quickly.

A simple test can be used to see if your angle is normal and wide or abnormal and narrow. Treatment of angle closure glaucoma usually involves surgery to remove a small portion of the outer edge of the iris. This helps unblock the drainage canals so that the extra fluid can drain. Usually surgery is successful and long lasting. However, you should still receive regular

check-ups. Symptoms of angle closure glaucoma may include headaches, eye pain, nausea, rainbows around lights at night, and very blurred vision. ✖



Here Comes The Sun

Soon the mild temperatures and cloudy conditions will give way to the bright, sunny fun of Florida summer, and protecting your eyes should be an important part of your healthcare regimen.

If you haven't recently evaluated your eyeglasses needs, it may be time for a trip to Total Eye Care Center's optical shop.

Whether it's keeping up with the latest fashion or choosing from a selection of sports lenses and options on prescription UV protection, you'll find all of

your optical needs can be met in one of our three convenient locations.



Wrap lenses. Scratch resistant lenses. Flexibility. Anti-reflective coatings. Wide ranging color choices and assorted frame styles. These are just a few of the options from which you may choose at Total Eye Care Center.

Call the office nearest you today for an eye test or to update your frames. ✖

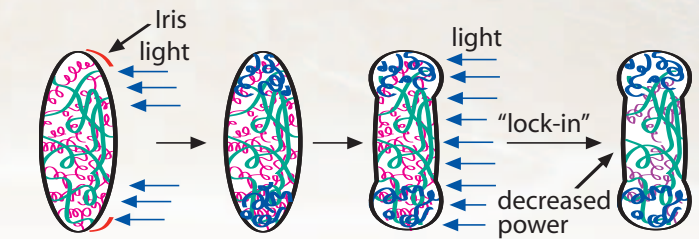
On The Horizon - Adjustable IOL

The number one reason that intraocular Lenses are removed is due to incorrect refractive power. Now imagine a lens which could be modified or corrected without surgery or eye glasses. That would be big news.

The key behind this great medical leap is the development of a new silicon polymer combined with macromers - molecules that have reactive end-groups. When exposed to UV light, they bind together into polymers, at the same time, the remaining macromers migrate toward the irradiated area, changing the shape of the lens and its refractive power. To thicken the lens, pulses of UV light are aimed at the center, causing macromers to migrate there and making the center bulge slightly. To flatten the IOL, light is radiated at periphery of the lens. These adjustments

would normally be accomplished one to two weeks after the cataract patient's eye had healed from the surgery. Later, if the patient is happy with the fine-tuning, a wash of UV light would be applied to the IOL, sealing the final focusing power into place.

Absolutely incredible. Stay tuned for more. ✖



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