



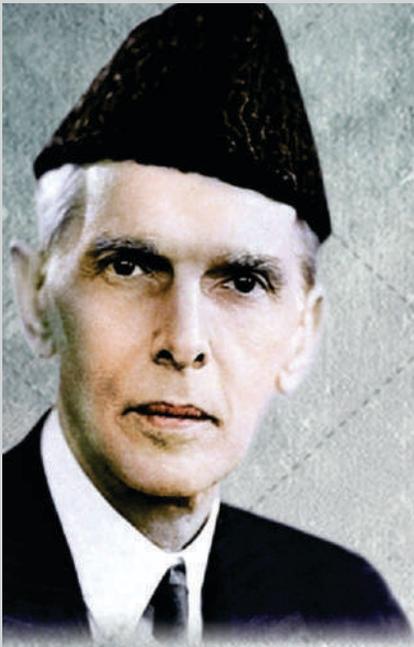
AACO 2022

**20th CONGRESS OF AFRO ASIAN
Council of Ophthalmology**

40th LAHORE OPHTHALMO

**7th - 11th December 2022
Lahore - Pakistan**





QUAID-E-AZAM

MUHAMMAD ALI JINNAH

FATHER OF THE NATION

We have to build up the character of our future generations which means highest sense of honour integrity, selfless service to the nation and sense of responsibility and we have to see that they are fully qualified or equipped to play their part in the various branches of economic life in a manner which will do honour to Pakistan.

Also I must emphasize that greater attention should be paid to technical and vocational education.



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Introductory Message by

Chairperson Publication Committee AACO 2022



Dr. Qamar-ul-Islam Lodhi

On behalf of the Organizing Committee it is the matter of great privilege and honor for me to welcome the distinguished guests from all over the world participating in this AACO 2022.

Medical science in general and ophthalmology in particular is moving fast with innovative upcoming subspecialties. It is imperative that we update our-selves with ongoing developments in ophthalmology and inculcate changing concepts in our clinical practice.

We are lucky that the top leadership of ophthalmic world has gathered around and we have a grand opportunity to learn latest developments from their expertise and share our shortcomings with them.

During these five days conference we will get ample opportunities to make new friends and have firm social contacts with the old ones.

I promise that you will enjoy the traditional hospitality of Lahorees and we will ensure your stay comfortable and enjoyable in the cultural capital of Pakistan.

May Allah Bless us all!

Pakistan Zindabad!



Message

Prof. Abdul Jalil Daula

Chief Guest



I am immensely pleased to learn that Joint Meeting of 20th Afro Asian Congress of Ophthalmology and 40th Lahore Ophthalmology is being held in second week of December this year in Lahore.

To organize a meeting of such a high magnitude is not an easy task. It requires concerted efforts of so many who have wide experience of holding social, cultural and academic events.

The organizers deserve particular appreciation for tremendous hard work which they have put in looking after various aspects and different dimensions of this very important meeting.

I hope our foreign and local delegates enjoy a comfortable stay here and introduce us to new and ever expanding horizons of modern Ophthalmology.

May Allah Bless You All!



Message

Dr. Muhammad Yaqin

Guest of Honour



It is indeed a great pleasure to be invited as Guest of Honour to this conference. I would like to congratulate all the organizers for bringing this conference back to Lahore after 38 years. In 1984, I was the organizing secretary of the Afro Asian Council of Ophthalmology conference held in Lahore along with Chairman organizing committee, Dr. Jamshed Wania. The meeting was held in Hilton Hotel, Lahore and the chief guest was the President of Pakistan at that time.

A lot of international speakers attended the conference and there was tremendous transfer of technology to the local faculty in Pakistan. The meeting was a great success and the transactions of the meeting were published. Long lasting international linkages were developed after the meeting and OSP, Lahore was later able to host the Asia Pacific Academy of Ophthalmology conference in 2007 under the leadership of Prof. Muhammad Lateef Chaudhry. On this occasion I must remember my teacher, Prof. Raja Mumtaz and colleagues, Dr. Dil Muhammad Mirza and Prof. Wasif Qadri who have left this world. They played an instrumental role in organization of this meeting.

I am very pleased to see the diverse and extensive scientific program of current AACO conference. I pray to Almighty Allah for the success of this international conference.

Long Live OSP



Message

M. Lateef Chaudhry

Patron, OSP Lahore Branch



A heartiest welcome to all the delegates attending the 20th Congress of Afro Asian Council of Ophthalmology.

We humans have evolved over time so did our technological skills which is a never ending journey. Our seniors realized these developments and with the intent that our new generation wasn't left behind started small discussion groups , workshops, local meetings which soon developed into national well organized meetings imparting skills to the keen and yearning young ophthalmologists by local and foreign invited faculty. Pretty soon we were not left behind the advanced Congresses in the world and this ACCO congress is a testament of our ophthalmic journey so far.

I have always advocated to learn the new and practice the latest and to remain with it all along.

I wish you best of luck and progress.

Bless you.



Message

Prof. Lezheng Wu

President, AACO
China



After 62 years the AACO will hold its 20th Congress this year 2022, which coincides with the beginning of the 20s of 21 century. The aim of AACO is to promote the progress of prevention and treatment of ocular diseases in African and Asian countries through extensive academic exchanges, and to continuously achieve new successes.

This 20th AACO is bound to be a grand gathering for African and Asian ophthalmologists. With the advancement of current ophthalmology, we also have to exchange warmly the valuable experience in the prevention of blindness as well as new technologies and new therapies.

In 1984, the Ophthalmological Society of Pakistan (OSP) hosted 8th AACO. We believe that the OSP will contribute to the success of 20th AACO with rich experience in organizing conference and academic exchanges.

Thanks to Prof Butt and colleagues of the Organizing Committee of the Congress for their efforts to successfully preparation of the conference.

Let's get together again in Lahore, Pakistan - Land of Civilizations on 7-11 December, 2022.

"Uniting-Sharing-Progress"

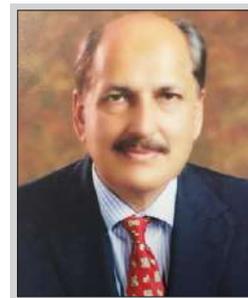


Message

Prof. Maj. Gen. Mazhar Ishaq HI(M)

Congress President, AACO 2022

President, Ophthalmological Society of Pakistan



I, as Congress President of 20th Congress of Afro Asian Council of Ophthalmology and 40th Lahore Ophthalmology, being held at the historic city of Lahore from 7-11 Dec 2022, welcome the esteemed delegates and speakers from all over the world. I am privileged to be a part of this international academic event in my humble capacity. It is an honour for Pakistan to be hosting this prestigious international congress especially in challenges faced in post-COVID era. I take this opportunity to commend all my team members especially Chairman Organizing Committee Prof M Moin, Co-Chairman Organizing Committee Prof Chaudhry Javed Iqbal, Secretary Organizing Committee Prof Hussain Ahmed Khaqan and all chairmen and members of committees who's untiring efforts have made possible the holding of an international event of this magnitude.

I am obliged to all the international and national speakers for their valuable contribution to the scientific program which will benefit all delegates attending the congress. Our international guests will surely feel the warmth of Pakistani Hospitality during their stay here. I also thank all the sponsors of the event who assisted in holding this mega event.

I am sure this international congress will open the door to more international academic events in Pakistan in future. Credit goes to every individual who in their capacity contributed in making this event a reality. Ophthalmological Society of Pakistan has always been at the forefront of promoting knowledge and expertise to all levels of Ophthalmologists in the country and this congress will be a jewel in the academic history of OSP.

Ophthalmological Society of Pakistan ; Zindabad

Pakistan; Painsdabad



Message

Prof. Muhammad Moin

Chairman Organizing Committee AACO 2022
President, Ophthalmological Society of Pakistan, Lahore



It gives me immense pleasure to welcome you to the 20th Afro Asian Council of Ophthalmology and 40th Lahore Ophthalmology. It is an honor for OSP, Lahore to be holding this International Conference after 38 years. At that time Prof. Jamshed Wania was the President and Dr. Muhammad Yaqin was the organizing society. It was the first International Ophthalmology Conference held in Lahore which was a great success. Asia Pacific Academy of Ophthalmology meeting was the next International conference in Lahore in 2007 organized by Prof. Muhammad Lateef Chaudhry.

After a delay of 3 years the conference is finally being held this year. This mega International conference is being held under the visionary Leadership of Prof. Lezheng Wu, President AACO, Prof. Mustafa Nabi, Vice President AACO, Prof. Rajvardan Azad, Vice President AACO and Prof Tarek Mamoon, General Secretary of the Afro Asian Council of Ophthalmology. They have guided us in all steps of planning the conference.

Education and Research remains one of the prime focus of OSP Lahore and we have invited more than 70 international speakers from 30 countries around the World. This diverse faculty will disseminate the latest knowledge in all subspecialties of Ophthalmology. I would like to acknowledge the contributions of Prof. Nadeem Hafeez Butt in bringing this international conference to Lahore which was planned to be held in 2019.

I am delighted to be the host of this meeting along with the congress President Gen. Prof Mazhar Ishaq and co-chairperson Prof. Javed Chaudhry. Organizing the meeting was a tremendous job and I must appreciate the structured planning and execution of all the tasks by our dynamic team President Elect Prof. Ch. Javed Iqbal, General Secretary, Prof. Hussain Ahmed Khaqan, Joint Secretary Khawaja Khalid Shoaib and Treasurer Dr. Javid Malik.

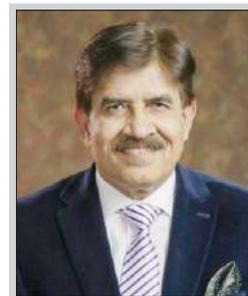
Looking forward to welcoming you to the vibrant city of Lahore.



Message

Prof. Ch. Javed Iqbal

Co-Chairman Organizing Committee AACO 2022
President Elect, Ophthalmological Society of Pakistan, Lahore



I would like to extend a very warm welcome to you at the joint 20th Congress of Afro Asian Council of Ophthalmology (AACO) and 40th Lahore Ophthalmology being held in vibrant metropolis of Lahore this year.

AACO has become more exposed to the international stage, bringing together ophthalmologists from around the world to explore and share the latest clinical, scientific and research discoveries and developments in ophthalmology. This exchange is of utmost importance as it creates collaborative opportunities that foster continuous development of ophthalmology.

With so many renowned speakers, the congress will be a perfect environment to teach, to gain and most importantly to identify the ways to support our developing countries in the region. I hope you will find the congress rewarding and not to miss the chance to meet your old friends and make new ones. Lahore is Pakistan's most energetic city, being famous for its mixture of old and new architecture and cultural flavors. It is a major tourist attraction and has a very pleasant weather in the month of December. I wish you a wonderful time at AACO 2020 and I look forward to seeing you all.



Message

Prof. Hussain Ahmad Khaqan

Secretary General, Organizing Committee AACO 2022
General Secretary, Ophthalmological Society of Pakistan, Lahore



Dear Friends and Colleagues It is both my honor and pleasure to welcome you to the 20th Congress of Afro Asian Council of Ophthalmology (AACO) & 40th Lahore Ophthalmo in Lahore. The AACO congress is certainly an outstanding platform to promote, foster and disseminate our research in collegial and friendly environment. It is where local meets global, as one of the key ophthalmology conference in region, AACO congress has served as an excellent platform to address the emergence of certain ophthalmology conditions.

Lahore has so much to offer our visitors, including friendly people, international fine dining, diverse night life, shopping and a rich closeness with our beautiful natural environment. We sincerely encourage to take part in this prestigious event and look forward to welcoming you to our wonderful Lahore.

Kind regards



Message

Prof. Qasim Lateef Chaudhry

Chairman Scientific Committee AACO 2022



A warm welcome to our esteemed delegates attending 20th Congress of Afro Asian Council of Ophthalmology from 7-11 December from across the world and Pakistan. The scientific programme has been thoughtfully planned by inputs from all the sub sociality societies. It will offer main symposia, instructional courses, wetlab courses, Ophthalmic quiz, video sessions and oral presentations as well as a variety of other special interest days and sessions to cater general ophthalmologists, ophthalmic ancillary staff and ocular sub specialists alike.

Our industry partners will also add zest to our scientific programme with new technology and resources through the exhibition and symposia throughout the congress.

I am greatly thankful to Prof M Moin and Prof H A Khaqan who helped the scientific team to arrange and invite the star studded international speakers with much needed financial support.

We are sure that you will leave this congress refreshed with current international ophthalmic practices but will also get a glimpse of future ophthalmic treatment modalities.

Kind Regards



Message

Dr. Muhammad Javid Malik

Finance Secretary, AACO 2022
Treasurer OSP, Lahore



Dear Friends and Colleagues

I would like to extend a very warm welcome to you to the 40th Lahore Ophthalmo 2022, AACO 2022, held in conjunction with 4th PVRS Annual Conference in the beautiful city of Lahore this year at Pearl Continental Hotel, Lahore.

As the OSP Lahore branch continues to reach the new heights, the conference has become more and more international, enabling the ophthalmologists from all over the Pakistan and world to meet and network.

I must take opportunity to thank chairman organizing committee president OSP Lahore Prof. Muhammad Moin and Secretary General Prof. Hussain Ahmad Khaqan and their team for dedicated effort and hard work in organizing in such a wonderful meeting, providing platform for academic exchange and clinical updates and for meeting the friends.

At this moment we must not forget that Lahore is a vibrant and fabulous city that is waiting to be explored. Do take some time to enjoy yourself here. I personally look forward to seeing you in Lahore. I am confident you will return home with added knowledge, many new friends and good memories.

Kind Regards



Message

Dr. Khawaja Khalid Shoaib

Joint Secretary OSP Lahore



Dear OSP colleagues, it is a matter of honour for me to welcome you to 40th Lahore Ophthalmology 2022, AACO2022. Lahore ophthalmology is the most attended academic activity in the entire country and this time participation of galaxy of foreign speakers has added to its charm. The first word taught to Prophet Muhammad (PBUH) was "Iqra" meaning "Read". Our religion tells us to go to any extreme to seek knowledge. I hope you will spare your precious time for the holy task of seeking knowledge and educating others. Let me know if I could be of any help to you as Joint Secretary OSP Lahore and kindly give me your feedback verbally or preferably in writing. Your opinions matter a lot to us. Wishing you a fruitful and safe trip to PC Lahore.



AACO Office Bearers

OSP Lahore Office Bearers

Members Executive Committee

Organizing Committees

OSP Awards

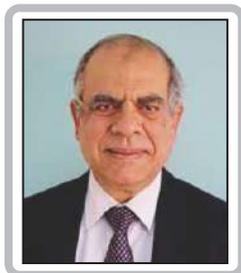
Life Members



AACO Office Bearers



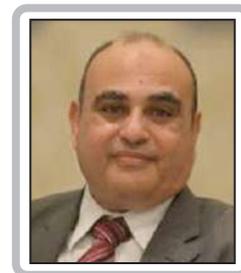
Prof. Lezheng Wu
President AACO (China)



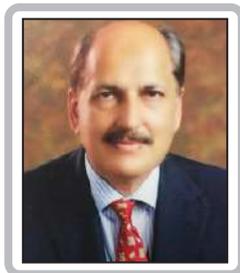
Prof. Mostafa Nabih
Vice President AACO (Egypt)



Prof. Rajvardhan Azad
Vice President AACO (India)



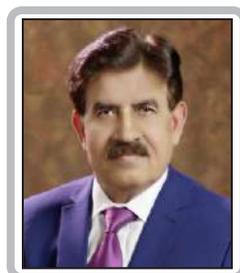
Prof. Tarek Mamoun
General Secretary AACO (Egypt)



Prof. Maj. Gen. Mazhar Ishaq HI(M)
Congress President,
AACO 2022



Prof. Muhammad Moin
Chairman Organizing
Committee AACO 2022



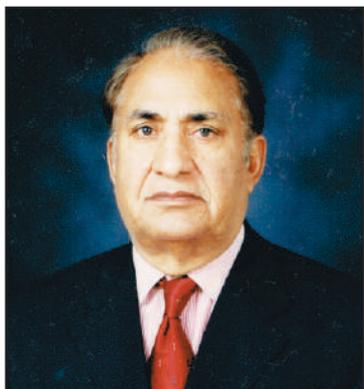
Prof. Ch. Javed Iqbal
Co-Chairman Organizing
Committee AACO 2022



Prof. Hussain Ahmad Khaqan
Secretary General Organizing
Committee AACO 2022



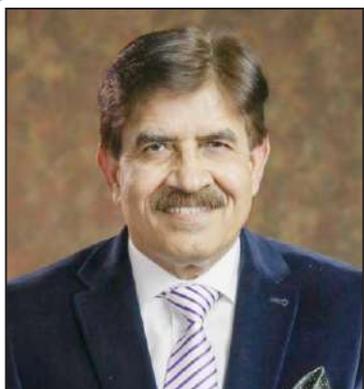
OSP Lahore Office Bearers



Prof. M. Latif Chaudhry
Patron OSP Lahore



Prof. Muhammad Moin
President, OSP Lahore



Prof. Ch. Javed Iqbal
President Elect, OSP Lahore



Prof. Hussain Ahmad Khaqan
General Secretary



Dr. Khawaja Khalid Shoaib
Joint Secretary



Dr. M. Javid Iqbal Malik
Treasurer



Members Executive Committee



Prof. Brig. Abdul Majeed Malik



Dr. Ashhal Kaiser Pal



Dr. Ch. Nasir Ahmed



Dr. Fahd Kamal Akhtar



Dr. Farooq Ahmad



Prof. Imran Akram Sahaf



Dr. Kashif Iqbal



Dr. Kashif Jahangir



Prof. M. Arshad Mahmood



Prof. M. Hammad Ayub



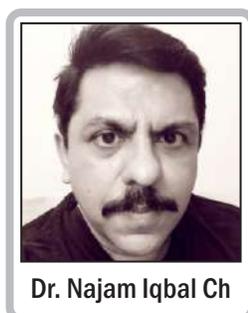
Dr. M. Irfan Karamat



Prof. M. Suhail Sarwar



Prof. M. Tariq Khan



Dr. Najam Iqbal Ch



Dr. Qamar Ul Islam Lodhi



Prof. Qasim Lateef Ch



Prof. Seema Qayyum



Dr. Shahzad Saeed



Prof. Tariq Shakoor



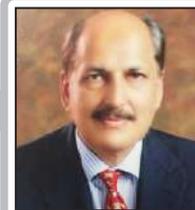
Dr. Tehseen Mahmood Mahju



Organizing Committees AACO 2022

Prof. Maj. Gen. Mazhar Ishaq

Congress President AACO 2022
President OSP Centre



Prof. Muhammad Moin

Chairman Organizing Committee
AACO 2022, President OSP, Lahore



Prof. Ch. Javed Iqbal

Co-Chairman Organizing Committee
AACO 2022, President Elect, OSP Lahore



Prof. Hussain Ahmad Khaqan

Secretary General Organizing Committee
AACO 2022, General Secretary OSP Lahore



Dr. Khawaja Khalid Shoab

Joint Secretary OSP Lahore



Dr. M. Javid Iqbal Malik

Treasurer OSP Lahore





Organizing Committees AACO 2022

Prof. Qasim Lateef Chaudhary

Chairperson Scientific
Committee



Prof. Muhammad Moin

Chairperson Exhibition
Committee



Dr. Qamar Ul Islam Lodhi

Chairperson Publication
Committee



Prof. Mian M Shafique

Chairperson Registration
Committee



Dr. Muhammad Tayyab

Chairperson Audio Visual
Committee



Prof. M. Hammad Ayub

Chairperson Accommodation
Committee





Organizing Committees AACO 2022

Dr. M. Javid Iqbal Malik

Chairperson Cultural Program
Committee



Dr. Kashif Jahangir

Chairperson Entertainment &
Refreshment Committee



Prof. M. Arshad Mahmood

Chairperson Hospitality
Committee



Prof. M. Suhail Sarwar

Chairperson IT Committee



Dr. M. Sohail Shahzad

Chairperson Media Management
Committee



Prof. Aamir Ahmad

Chairperson Quiz Competition
Committee





Organizing Committees AACO 2022

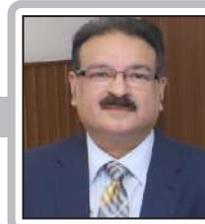
Dr. Tariq Shakoor

Chairperson Resident Free Paper
Committee



Dr. Shahzad Saeed

Chairperson Transport
Committee



Prof. Seema Qayyum

Chairperson WIOP
Committee



Dr. Muhammad Tayyab

Chairperson Video Competition
Committee



Prof. Hussain Ahmad Khaqan

Chairperson Young Ophthalmologists
Committee



Organizing Committees AACO 2022



Scientific Committee



Exhibition Committee



Publication Committee



Registration Committee



Audio Visual Committee



Organizing Committees AACO 2022



Accommodation Committee



Cultural Programme Committee



Entertainment & Refreshment Committee



Hospitality Committee



IT Committee



Organizing Committees AACO 2022



Media Committee



Quiz Committee



Residents Free Paper Committee



Transport Committee



Video Competition Committee



Organizing Committees AACO 2022



WIOP Programme Committee



Young Ophthalmologists Committee



Oculoplastics Committee



Pediatrics Committee



Residents Committee



OSP Life Time Achievement Award

Prof. Nazir Ahmad Aasi



Prof. Nazeer Ahmad Aasi was born on 10th Nov, 1943, in Jalandhar, India. Migrated to Pakistan in 1947. After FSC from S.E College Bahawalpur got admission in MBBS, Nishtar Medical College, Multan in 1963, and Passed Final Professional in September 1968.

He did one year house job in Ophthalmology in Nishtar Hospital, Multan. Then after selection by Punjab Public Services Commission worked as M.O. Eye Department Victoria Hospital, Bahawalpur. In September, 1971 left for UK. Worked there in Wolverhampton Eye Infirmary and Manchester Royal Eye Hospital. From October 1975 to April 1978, Joined St. George's Hospital, London as Registrar Eye Department and worked with Sir. Mr. Holmes Sellers, Consultant to Her Majesty the Queen Elizabeth.

Appeared in D.O. (London) in March 1976 and not only topped the list but missed the Gold Medal by one mark.

On 5th July, 1977 Passed FRCS Edinburgh. In April 1978 came back to Pakistan and worked as Assistant Prof. Nishtar Medical College, Multan upto August 1981. From August 1981 to October 1987 worked as Associate Prof. Quaid-e-Azam Medical College, Bahawalpur, from October 1987 to June 1996 worked as Professor and Head of Department Quaid-e-Azam Medical College, Bahawalpur. During his 15 years stay at Quaid-e-Azam Medical College Bahawalpur, he did four free eye camps of one week duration each, every Year. Total 60 free eye camps. From June 1996 to May 1998 worked as Professor and Head of Department of Lahore General Hospital. From May 1998 to November 2003, worked as Professor and Head of Eye Department and director Institute of Ophthalmology King Edward Medical University, Lahore and also worked as supervisor of Punjab Medical Colleges entry test.

He also worked as Principal King Edward Medical College Lahore from September 2003 to November 2003. From June 2007 to April 2013 worked as Principal, University College of Medicine, University of Lahore.



OSP Lahore Distinguished Services Award

Prof. Dr. Muhammad Sultan



It's a great pleasure to read and endorse the citation of highly suitable Ophthalmologist, Prof. Dr. Muhammad Sultan as the nominee of "Distinguished Services Award, 2022". His knowledge, skills, contributions and accomplishments in the field of Ophthalmology complement precisely the stellar community of past recipients and makes him highly deserving for this honour and award. I would be pleased to introduce him in detail.

Prof. Dr. Muhammad Sultan was born in 1958 in Gojra, District Faisalabad, did his Matriculation and Intermediate from Gojra and was awarded Gold Medal in Middle Vernacular Final Exam in 1972, Silver Medal in Matric in 1974 and "National Talent Scholar Award" in 1976 from Sargodha board. He passed MBBS from King Edward Medical College Lahore in 1983, did house job in Mayo Hospital Lahore in 1984 and started his career in 1985 as a Demonstrator in Anatomy and later on in the Department of Pathology at Punjab Medical College from 1985 to 1988. He passed his FCPS part-I in 1988 and did his FCPS part-II training at the Institute of Ophthalmology K.E Medical College, Mayo hospital Lahore from 1988 to 1991. He passed his FCPS Ophthalmology and started his teaching career as an Assistant Professor in the Eye Department, PMC, Faisalabad in 1992. He became the Head of Department and Professor of Ophthalmology at PMC in 2003 where he served in that capacity till his retirement in 2018. Then he joined Independent Medical College Faisalabad.

In 2006, he upgraded the Department of Ophthalmology, Allied hospital Faisalabad to the state of the art unit and started DOMS course in 2010, FCPS Pediatric Ophthalmology and Vitreoretina in 2012. As a Supervisor and Co-supervisor, he trained 40 FCPS and FRCS, 35 MCPS and DOMS, and one PhD. He has 25 research publications and participated in numerous national and International Ophthalmological Conferences.

From 2014 to 2018, he served as a member Board of Studies, Sargodha Medical College and from 2017 to 2018, as Chairman, Post Graduate Advanced Medical Studies at Faisalabad Medical University. He also executed five year program of school children's eye health screening in all schools and madrasahs of the entire urban Faisalabad and did screening of all kids under 5 years of age for eye diseases in whole population of district Faisalabad. He has been an examiner and convener of MBBS, DOMS, MCPS, IMM, FCPS, MS and FCPS Vitreoretina from 1995 till the date. He also worked thrice as an examiner for FCPS in Bangladesh and was awarded FCPS from CPSP Bangladesh. He inspected most of the Ophthalmological institutions as an inspector from CPSP Pakistan for accreditation of post graduate training. He also served as a Counselor of Faculty of Ophthalmology CPSP Pakistan from 2010 to 2014 and then 2017 to 2019.

He was President of Medical Teachers Association Faisalabad and served as secretary and twice he served as President, OSP Faisalabad chapter. He started corneal transplant services in 2010 at Allied hospital Faisalabad. He established Lyallpur Eye Trust and Faisalabad Eye Bank under which more than six hundred corneal transplant have been performed till the date. He started Hospital Based Corneal Retrieval Program in 2016 which is the only exclusive program in the country to get the local corneal donation. Up till now, more than 300 corneas have been harvested from local people under this programme. Currently he is serving as the controller of examination CPSP Pakistan Faisalabad Center since 2006, as a trustee and vice Chairman Lyallpur Eye Trust since 2012 & as Head of Ophthalmology Department, Independent Medical College, Faisalabad since 2018.



Professional Excellence Award

Mahfooz Ahmad Qureshi

CEO - Optisurg



The year was 1997 when I (being founder) set my firm's footings in ophthalmic business by establishing a trifling yet progressive AOP firm namely "OPTISURG" in Multan. This little step in right track way led me to shape up the future of OPTISURG. Over the decades of a century OPTISURG has earned vital constituents of business like sales, after sale support, dealing in conviction, exactitude, business integrity, scientific image and customer satisfaction on the top, which will remain as the essential ingredients of business decisions in the time forth – of course!

In 1988 I started my career as Medical Sales Officer with a French pharmaceutical organization (May & Bakers) which was turned to "Rhone Poulenc Rorer" afterward and then "Aventis" and onward continued with Allegan Inc.(USA) based at Multan. I was awarded with the prides of "Star Representative", "Best Presenter", "Best in Customer Relations", "Best Opportunity Achiever" and "Best Manager of the year". My whole professional life is enriched with lots of prides and tremendous growth.

In the backdrop of this development I set a very clear Vision & Mission for the company and elongated my business towards a rapidly growing ophthalmic company. OPTIDURG is proud to be an exclusive distributor for Oertli Instruments AG (Switzerland), Moria Surgical (France), Hoya Surgical Optic (Japan), Medicontur Medical Engineering (Hungary), Optopol Technologies (Poland) and Excelsius Medical (Germany) for Pakistan.

I have the proud to lead and place "OPTISURG" amongst top three ophthalmic companies in Pakistan and even a market leader in few of the products.

LET ME ALSO PAY MY HIGHEST GRATITUDE TO AND THANKS TO MY YOUNGER BROTHER "MR. FAYYAZ A. QURESHI" WHO STRIVED HARDER TOGETHER WITH ME THROUGHOUT BEING THE MOST TRUSTED AND RELIABLE PARTNER.

The focal point of our vision is to provide high quality sight restoration and healthcare which is not possible without high quality essence of our products and activities. We have adopted an attitude of humility toward science & professional ethics and are striving to develop, manufacture or import, promote and distribute high-quality medical products with superlative performance, efficacy and safety.

Let me thank to ophthalmic community of Pakistan through OSP being part of this tremendous success of "OPTISURG" and would appreciate their continued support.



OSP LECTURE AWARDS 2022



Prof. Nadeem Hafeez Butt
Prof. Ramzan Ali Syed Lecture Award 2022



Prof. Muhammad Daud Khan
Prof. Raja Mumtaz Lecture Award 2022



Prof. Sami Mahmoud Alrabiah
Prof. M. Lateef Chaudhry Lecture Award 2022



Prof. Abdullah Alqahtani
Prof. Abdul Jalil Daula Lecture Award 2022



Prof. Mohammed Abdul Wahab Al-Amri
Prof. Wasif M. Qadri Memorial Lecture Award 2022



Prof. Ayman Madanat
Prof. Syed Ali Haider Memorial
Lecture Award 2022



List of Presidents OSP Lahore

1.	Prof. M. Lateef Chaudhary	1979 – 80
2.	Dr. Sultan Ahmed Cheema	1981 – 82
3.	Prof. M. Munir ul Haq	1984 – 85
4.	Prof. Wasif M. Qadri	1986 – 87
5.	Prof. M. Lateef Chaudhary	1988 – 89
6.	Prof. M. Khalil Rana	1990 – 91
7.	Prof. M. Yaqeen	1992 – 93
8.	Prof. Abdul Jalil Daula	1994 – 95
9.	Dr. Dil Muhammad Mirza	1996 – 97
10.	Prof. M. Afzal Ch	1998 – 99
11.	Dr Jehangir Durrani	2000
12.	Prof. M. Akram Riaz	2001 – 2003
13.	Prof. Nazir Ahmad Aasi	2004 – 2005
14.	Prof. Saleem Akhtar	2006 – 2007
15.	Prof. Asad Aslam Khan	2008 -2009
16.	Prof. M. Tayyib	2010 – 2011
17.	Dr. Qamar ul Islam Lodhi	2012 - 2013
18.	Prof. Nadeem Uddin Riaz	2014 - 2015
19.	Prof. Nadeem Hafeez Butt	2016 – 2017
20.	Dr. Muhammad Tariq Khan	2018 – 2019
21.	Prof. Mian M. Shafique	2020 – 2021
22.	Prof. Muhammad Moin	2021 – 2022

List of General Secretaries OSP Lahore

1.	Dr. Dil Muhammad Mirza	1979 – 80
2.	Prof. M. Akram Riaz	1981 – 82
3.	Prof. Khalil Rana	1984 – 85
4.	Dr. Iftikhar ul Haq Qureshi	1986 – 87
5.	Prof. Tehsin un Nabi Sahi	1988 – 89
6.	Dr. Dil Muhammad Mirza	1990 – 91
7.	Prof. Afzal Sheikh	1992 – 93
8.	Prof. M. Tayyib	1994 – 95
9.	Prof. Asad Aslam Khan	1996 – 97
10.	Prof. Asad Aslam Khan	1998 – 99
11.	Prof. Hamid Mehmood	2000 – 01
12.	Prof. Nadeem Hafeez Butt	2002 – 03
13.	Dr. Qamar ul Islam Lodhi	2004 – 05
14.	Prof. Syed Ali Haider	2006 – 07
15.	Dr. Zaheer ud Din Aqil Qazi	2008 – 09
16.	Dr. Zahid Kamal Saddique	2010 – 11
17.	Prof. Mian M. Shafique	2012 - 13
18.	Prof. Muhammad Moin	2014 - 2015
19.	Associate Prof. Qasim Lateef Ch	2016 – 2017
20.	Prof. Ch. Javed Iqbal	2018 – 2019
21.	Prof. Ch. Javed Iqbal	2020 – 2021
22.	Prof. Hussain Ahmad Khaqan	2021 – 2022



List of Presidents OSP Centre

1.	Lt. Gen. Wajid Ali Burki	1957 - 1960
2.	Prof. Ramzan Ali Syed	1960 - 1966
3.	Lt. Gen. S. M. Farooqi	1966 - 1968
4.	Dr. Sohrab D. Anklesaria (South Zone)	1969 - 1970
5.	Dr. M. Jaleel (Dacca)	1968 - 1970
6.	Prof. M. A. Farooqi (South Zone)	1970 - 1972
7.	Prof. Ramzan Ali Sayed (North Zone)	1968 - 1976
8.	Prof. Muhammad Nawaz (North Zone)	1976 - 1979
9.	Prof. Raja Mumtaz Quli Khan (Center)	1979 - 1981
10.	Prof. M. Lateef Chaudhary (North Zone)	1979 - 1980
11.	Dr. Jamshed H. Wania	1981 - 1983
12.	Prof. Sardar Ali Sheikh	1984 - 1985
13.	Dr. Jamshed H. Wania	1984 - 1986
14.	Dr. Prof. Murad Ali	1988 - 1990
15.	Dr. Muhammad Nasim Panezai	1990 - 1992
16.	Dr. Khawaja Sharif ul Hassan	1992 - 1994
17.	Prof. Munir Ul Haq	1994 - 1996
18.	Prof. Muhammad Daud Khan	1996 - 1998
19.	Prof. Lateef Chaudhary	1998 - 2000
20.	Prof. Yasin Durrani	2000 - 2002
21.	Prof. Naseem Panezai	2000 - 2004
22.	Prof. Nazeer Ashraf Laghari	2004 - 2006
23.	Prof. Shad Muhammad	2006 - 2008
24.	Prof. Tahseen un Nabi Sahi	2008 - 2009
25.	Dr. Mazhar Qayyum	2010 - 2011
26.	Dr. Akram Shahwani	2012 - 2013
27.	Prof. M. Idrees Idhi	2014 - 2015
28.	Prof. Zia ul Islam	2016 - 2017
29.	Prof. Nadeem Hafeez Butt	2018 - 2019
30.	Prof. Maj. Gen. Mazhar Ishaq	2020 - 2022



LIST OF LIFE MEMBERS OSP LAHORE BRANCH

Sr #	Title	Name	Year
1	Prof.	Aamir Ahmad	2002
2	Dr.	Adeel Chaudhry	2017
3	Dr.	Arslan Ahmed	2018
4	Dr.	Aamna Jabran	2017
5	Dr.	Abdullah Mazhar	2018
6	Dr.	Arooj Amjad	2017
7	Dr.	Amber Batool	2018
8	Dr.	Abdul Ghani	2004
9	Dr.	Abdul Hamid Awan	2002
10	Dr.	Abdul Hameed	2015
11	Prof.	Abdul Hye	2003
12	Prof.	Abdul Jalil Daula	1990
13	Dr.	Abdul Rauf	2017
14	Dr.	Abdul Rashid Qamar	2002
15	Prof.	Abdul Majeed Malik	2003
16	Dr.	Brig. Abdul Rafe	2019
17	Dr.	Ahsan Waqar	2017
18	Dr.	Adnan Azeem	2014
19	Prof.	Afzal Naz Brig	2003
20	Dr.	Afzal Hussain	2017
21	Dr.	Ahmed Raza	2015
22	Dr.	Ahmad Hussain	2002
23	Dr.	Aisha Azam	2017
24	Dr.	Akhtar Shaheen	2007
25	Dr.	Akhtar Hussain Abbasi	2008
26	Dr.	Akhwand A. Majeed Jawwad	2019
27	Dr.	Altaf Nadeem	2017
28	Dr.	Ali Zain-ul-Abadin	2014
29	Dr.	Ali Akbar Ahsan	2017
30	Dr.	Sardar M. Ali Ayaz Sadiq	2015
31	Dr.	Amber Zahid	2011

Sr #	Title	Name	Year
32	Dr.	Amina Adil	2011
33	Dr.	Amjad Saleem Sahi	2002
34	Dr.	Amjad Ali	1992
35	Dr.	Amtul Mussawar Sami	2005
36	Dr.	Andaleeb Zahra	2012
37	Dr.	Anwaar-ul-Haq Hashmi	2006
38	Dr.	Arif Hussain	2008
39	Dr.	Arshad Farooq	2008
40	Dr.	Assad Zaman Khan	2017
41	Prof.	Asad Aslam Khan	1992
42	Dr.	Asad Ahmad	2017
43	Dr.	Asif Mehmood Khokhar	2010
44	Dr.	Asif Manzoor	2017
45	Dr.	Asim Wasim	2007
46	Dr.	Asma Mushtaq	2016
47	Dr.	Atta-ur-Rasool	2011
48	Dr.	Athar Tauseef	2007
49	Dr.	Ather Rashid	2006
50	Prof.	Atif Mansoor Ahmed	2008
51	Dr.	Atiq Ahmad	2012
52	Dr.	Awais Shabbir	2010
53	Dr.	Babar Riaz Khawaja	2015
54	Dr.	Badar-uz-Zaman Khan	2012
55	Dr.	Abrar Ahmed Bhatti	2009
56	Assoc. Prof.	Nasir Ahmed Ch	2008
57	Dr.	Hassan Raza Ch	2019
58	Dr.	Hasnain Muhammad Buksh	2019
59	Dr.	Irfan Ullah Khan	2006
60	Dr.	Irfan Muslim	2016
61	Dr.	Muhammad Irfan Karamat	2015



LIST OF LIFE MEMBERS OSP LAHORE BRANCH

Sr #	Title	Name	Year
62	Dr.	Irfan Ul Aziz Ch	2015
63	Dr.	Dil Muhammad Mirza	1980
64	Dr.	Muhammad Arshad Hussain	2018
65	Dr.	Muhammad Javaid	2018
66	Dr.	Muhammad Asif	2016
67	Dr.	Durdana Masood	1987
68	Dr.	Durraiz Rehman	2005
69	Dr.	Faiza Rasheed Ch	2017
70	Dr.	Farrukh Ashfaq	2017
71	Dr.	Farrukh Jameel	2017
72	Dr.	Faizan Tahir	2017
73	Dr.	Fakhar Humayun	2016
74	Dr.	Fahd Kamal Akhtar	2014
75	Dr.	Faheem Sarwar	2016
76	Dr.	Fawad Ur Rehman	2016
77	Dr.	Faisal Mehmood	2017
78	Dr.	Faisal Anwar	2019
79	Dr.	Faiza Yasmeen	2007
80	Dr.	Farooq Anwar Khawaja	2007
81	Dr.	Farooq Ahmad	2015
82	Dr.	Fayyaz Ahmad	1990
83	Dr.	Fiyyaz Ahmad Khan	2015
84	Dr.	Ghulam Hussain Asif	2014
85	Dr.	Ghulam Hussain	2018
86	Dr.	Girdhari Lal Akash	2009
87	Prof.	Habib Ahmed	1991
88	Dr.	Hina Adeel	2016
89	Prof.	Hamid Mahmood Butt	1995
90	Prof.	Huma Kayani	2004
91	Dr.	Humera Zafar	2012
92	Dr.	Haroon Tayyab	2017

Sr #	Title	Name	Year
93	Prof.	Hussain Ahmad Khaqan	2011
94	Dr.	Ijaz Ahmad	1984
95	Dr.	Ijaz Hussain Siddiqui	2016
96	Dr.	Ijaz Akbar Khawaj	1985
97	Dr.	Ijaz Sheikh	1990
98	Dr.	Ijaz Sindhu	1980
99	Dr.	Imran Ahmad	2006
100	Prof.	Imran Akram Sahaf	2002
101	Dr.	Imran Basit	2014
102	Prof.	Intzar Hussain Butt	2005
103	Dr.	Irum Abbas	2016
104	Dr.	Irum Raza	2016
105	Prof.	Jahangir Durrani	1988
106	Prof.	Jamshed Nasir	2006
107	Prof.	Javed Iqbal Chaudhary	1990
108	Dr.	Javed ul Hassan Chatta	1990
109	Dr.	Javed Khaliq	2011
110	Dr.	Junaid Afzal Sheikh	2007
111	Dr.	Jawad Bin Yamin Butt	2015
112	Dr.	Jawaid Nasir	2015
113	Dr.	Kashif Jahangir	2012
114	Dr.	Kashif Raza Khan	2016
115	Dr.	Kashif Iqbal	2006
116	Dr.	Khalid Anwar	2003
117	Dr.	Khalid Bashir	2002
118	Prof.	Khalid Mahmood	2002
119	Prof.	Khalid Mahmood Najmi	2006
120	Dr.	Kaleem Shafi	2017
121	Dr.	Khalid Riaz	2017
122	Prof.	Khalid Waheed	2005
123	Prof.	Khawaja Mohsin Ihsan	2007



LIST OF LIFE MEMBERS OSP LAHORE BRANCH

Sr #	Title	Name	Year
124	Dr.	Khawaja Khalid Shoaib	2011
125	Dr.	Khurram Azam Mirza	2004
126	Dr.	Khurram Nafees	2015
127	Dr.	Khurram Chauhan	2017
128	Dr.	Khursheed Kazmi	1991
129	Dr.	Lubna Siddiq	2017
130	Dr.	Lutafullah Ghaznavi	2017
131	Prof.	Mahmood Saeed	2006
132	Dr.	Mahmood Jaffari	1994
133	Dr.	Maimoona Tahir	2017
134	Dr.	Mehreen Sohail	2016
135	Dr.	Mariam Zakia Ch	2017
136	Dr.	Muhammad Shahid Naeem	2002
137	Dr.	Manzoor Hussain	1994
138	Prof.	Maqbool Ashraf	2004
139	Dr.	Masood Iqbal Sajid	2006
140	Dr.	Madiha Tariq	2019
141	Dr.	Mazhar Abbas Naqvi	2006
142	Prof.	Mian M. Shafique	1995
143	Dr.	Muhammad Hassaan Ali	2019
144	Dr.	Mirza Jamil ud Din Baig	2007
145	Dr.	Muhammad Yasir Arfat	2011
146	Dr.	Muhammad Uzair Hafeez	2019
147	Dr.	Waqas Asghar	2019
148	Dr.	Munib-ur-Rehman	2016
149	Dr.	Muhammad Aslam Ch	2008
150	Dr.	Muhammad Ayoub	2008
151	Prof.	Muhammad	1999
152	Dr.	M. Hashim Paracha	2008
153	Dr.	Muhammad Afzal Mian	2006
154	Prof.	M. Afzal Sheikh	1989

Sr #	Title	Name	Year
155	Dr.	Muhammad Akram	2004
156	Dr.	Mujahid Raza	2017
157	Prof.	M. Akram Riaz	1999
158	Dr.	Muhammad Anwaar	1990
159	Dr.	Muhammad Anwar Bhatti	2015
160	Dr.	Muhammad Yahya Farooq	2015
161	Dr.	Muhammad Abid Butt	2008
162	Dr.	Muhammad Abid Javed	2019
163	Dr.	Muhammad Ali Haider	2017
164	Prof.	Muhammad Manzoor Brig	2016
165	Dr.	Muhammad Rashid Iqbal	2016
166	Dr.	Muhammad Aslam Ch	2008
167	Dr.	Muhammad Aslam Rai	1988
168	Prof.	Muhammad Afzal Ch	1980
169	Dr.	M Javid Iqbal Malik	2013
170	Dr.	Muhammad Suhail Sarwar	1998
171	Dr.	Muhammad Shakil Ahmad	2006
172	Dr.	Muhammad Shaheer	2015
173	Dr.	Muhammad Rizwan Ullah	2006
174	Dr.	M Naeem Rustam	2011
175	Prof.	M Arshad Mahmood	2011
176	Dr.	M Ashhal Kaiser Pal	2006
177	Prof.	Muhammad Khalil Rana	1976
178	Dr.	M Aftab Naseem Azhar	1995
179	Dr.	M Jamshed Alam Shah	1995
180	Dr.	M Salman Hamza	2012
181	Prof.	Muhammad Tariq Khan	2002
182	Prof.	Muhammad Hammad Ayub	2005
183	Dr.	Muhammad Tayyab	2006
184	Prof.	Muhammad Tayyib	1990
185	Dr.	Muhammad Yaqin	1970



LIST OF LIFE MEMBERS OSP LAHORE BRANCH

Sr #	Title	Name	Year
186	Dr.	Muhammad Sohail Shahzad	2002
187	Dr.	Muhammad Javed Iqbal	2010
188	Dr.	Muhammad Tahir	2004
189	Dr.	Muhammad Owais Sharif	2019
190	Dr.	Mohammad Mansha	2017
191	Dr.	Muhammad Moeen Bhatti	2012
192	Dr.	Muhammad Mohsan Khan	2016
193	Dr.	Muhammad Ajaz Butt	2011
194	Dr.	M Awais Mahmood	2015
195	Prof.	Muhammad Khalil	2012
196	Prof.	Muhammad Iqbal H Butt	2012
197	Dr.	Muhammad Iqbal Javaid	2017
198	Dr.	Muhammad Iqbal Rajput	2002
199	Dr.	Muhammad Zubair	1988
200	Dr.	Mohammad Hasan Bokhari	2019
201	Prof.	Muhammad Munir-ul-Haq	1980
202	Dr.	Munir Ahmad Col.	2017
203	Dr.	M. Sufyan A. Ansari	2015
204	Prof.	M Lateef Chaudhary	1963
205	Dr.	Muhammad Inamullah	2004
206	Dr.	Muhammad Imran	2010
207	Dr.	Muhammad Imran	2017
208	Dr.	Muhammad Ibrar Khalid	2005
209	Dr.	M Saleem Hamdard	1990
210	Dr.	Muhammad Saleem ud Din	-
211	Dr.	Muhammad Zakir	2017
212	Dr.	Muhammad Muzaffar Iqbal	2008
213	Prof.	Muhammad Mateen Aamir	2016
214	Dr.	Muhammad Naeem	2011
215	Prof.	Muhammad Ramzan	2002
216	Dr.	Muhammad Saeed	2007

Sr #	Title	Name	Year
217	Dr.	Muhammad Hannan Jamil	2009
218	Prof.	Maj. Muhammad Saeed	2011
219	Dr.	M. Tahir Ghaffar	2019
220	Prof.	M. Saleem Akhtar	1989
221	Dr.	Mukhtar Ahmed Mian	2011
222	Prof.	Mumtaz Hussain	1994
223	Dr.	Mushtaque Qurashi	2004
224	Prof.	Nadeem ud Din Riaz	1994
225	Prof.	Nadeem Hafeez Butt	1990
226	Dr.	Nadeem Ahmad Malik	2002
227	Prof.	Naeem Ullah	1990
228	Dr.	Naeem Khalid	2016
229	Dr.	Najam Iqbal Ahmed	2009
230	Dr.	Naseem Ahmad Qureshi	2000
231	Dr.	Nasim Ahmad Chaudhary	2006
232	Prof.	Nasira Inayat	2009
233	Dr.	Naureen Khalid Mian	2004
234	Dr.	Nazam Hussain Nayyer	2006
235	Dr.	Nida Usman	2017
236	Dr.	Nesr Farooq	2016
237	Prof.	Nazir Ahmad Aasi	1980
238	Dr.	Nisar Ahmed Sheikh	2012
239	Dr.	Norin Iftikhar Bano	2007
240	Dr.	Noman Jamshed	2016
241	Dr.	Omara Arshad	2016
242	Prof.	Parveen Munawar	1987
243	Dr.	Qudsia Anwar Dar	2015
244	Dr.	Qundeel Zahra	2015
245	Dr.	Qamar ul Islam Lodhi	1988
246	Dr.	Qumber Abbas	2009
247	Dr.	Qasim Lateef Chaudhary	2006



LIST OF LIFE MEMBERS OSP LAHORE BRANCH

Sr #	Title	Name	Year
248	Dr.	Rana Fahad Ibraheem	2016
249	Dr.	Rana Naveed Iqbal	2017
250	Dr.	Rameeza Javaid	2016
251	Dr.	Rana Riaz Ahmad	2011
252	Dr.	Rana M. Mohsin Javaid	2019
253	Dr.	Riaz Ahmad	2011
254	Dr.	Rizwan Ahmad Cheema	1990
255	Dr.	Rehan Moin-ud-Din Shaikh	2017
256	Dr.	Rizwan Ahmad Ch.	2016
257	Dr.	Rizwan Saeed	2011
258	Dr.	Saad Dil Mirza	2009
259	Dr.	Sohail Ahmed Siddiqui	2019
260	Dr.	Sohaib Abbas	2018
261	Dr.	Saeed-ur-Reham Awan	2008
262	Dr.	Saeed Niazi	2009
263	Dr.	Sania Munawar	2019
264	Dr.	Saman Babree	2015
265	Dr.	Saman Ali	2019
266	Dr.	Saleem Akhtar	2007
267	Dr.	Sameera Irfan	2011
268	Dr.	Samreen Jamal	2019
269	Dr.	Samina Rashid	2007
270	Prof.	Samina Jahangir	1987
271	Dr.	Salik Shehbaz Butt	2015
272	Dr.	Sara Riaz	2016
273	Dr.	Sana Jahangir	2014
274	Dr.	Saqib Siddiq	2008
275	Prof.	Seema Qayyum	2004
276	Dr.	Sehar Akbar Amanat	2016
277	Dr.	Shabana Chaudhary	2007
278	Dr.	Shahid Aziz Sheikh	2005

Sr #	Title	Name	Year
279	Dr.	Shahid Fayyaz Ali	2016
280	Dr.	Shahid Nazeer	2018
281	Dr.	Hizb-ur-Rahman	2017
282	Dr.	Shahzad Saeed	2007
283	Dr.	Shahzad Shafqat	1992
284	Dr.	Shams-ud-Din Mohd Tahir	2007
285	Dr.	Shamshad Ali	2017
286	Prof.	Shaukat Ali Khan	2006
287	Dr.	Sheikh Muhammad Anwar	2001
288	Dr.	Sheikh M. Shahbaz Ali	2007
289	Dr.	Shuja-ud-Din Khan	2009
290	Dr.	Saher Khalid	2017
291	Dr.	Sadaf Humayun Khan	2015
292	Dr.	Sidrah Riaz	2009
293	Dr.	Sofia Lateef Ch	2014
294	Dr.	Suhail Mushtaq Boobak	2006
295	Dr.	Sumera Nisar	2008
296	Dr.	Syed Muhammad Jahangir	2002
297	Dr.	Syed Basharat Hussain	2017
298	Dr.	Syed Raza Ali Shah	2002
299	Dr.	Tahir Farooq	2007
300	Dr.	Tahir Mahmood Khan	2016
301	Dr.	Tariq Mahmood	2010
302	Dr.	Tariq Mehmood Qureshi	2009
303	Dr.	Tanveer Abbas	2016
304	Dr.	Tariq Pervaiz Khan	2017
305	Dr.	Tariq Shakoor	2011
306	Dr.	Tayyaba Gul Malik	2012
307	Prof.	Tehmina Jahangir	2014
308	Dr.	Tehseen Mahmood Mahju	2006
309	Dr.	Usman Imtiaz	2017



LIST OF LIFE MEMBERS OSP LAHORE BRANCH

Sr #	Title	Name	Year
310	Dr.	Ume Salma	2016
311	Dr.	Uzma Hamza	2008
312	Dr.	Usman Mahmood	2007
313	Dr.	Waqar Ahmad	2015
314	Dr.	Waqar Hussain	2012
315	Dr.	Waseem Iqbal	2016
316	Dr.	Yasir Afzal	2015
317	Dr.	Zafar Iqbal	1999
318	Dr.	Zafar Iqbal Zafar	2011
319	Dr.	Zaheer Akhtar	2015
320	Dr.	Zaheer ud Din Aqil Qazi	1990
321	Dr.	Zahid Ali Ch	2016
322	Dr.	Zahid Hussain Chaudhry	2014
323	Prof.	Zahid Kamal Siddiqui	1994
324	Dr.	Zahid Dogar	2007
325	Dr.	Zeeshan Mirza	1989
326	Dr.	Zia ur Rehman Khan	2006
327	Prof.	Zia-ul-Mazhry	2006
328	Dr.	Zaib un Nisa	2017
329	Dr.	Zubair Saleem	2011
330	Dr.	Zubair Chawla	2007
331	Dr.	Zulfiqar Ali	1989
332	Dr.	Zahid Mahmood	2015
333	Prof.	Iftikhar Ahmed	2020
334	Dr.	Mehr-un-Nisah Hanif	2020
335	Dr.	Hafiz Muhammad Abdullah	2020
336	Dr.	Qumber Abbas	2020
337	Dr.	Sidra Anwar Rana	2020
338	Dr.	Ghazanfar Ullah Mahmood	2020
339	Dr.	Muhammad Khizar Bashir	2020
340	Dr.	Fatima Afzal	2021

Sr #	Title	Name	Year
341	Dr.	Asima Rafique	2021
342	Dr.	M. Nausherwan Adil	2021
343	Dr.	M. Saleem Bajwa	2021
344	Dr.	Amash Aqil	2021
345	Dr.	Yasir Qayyum	2021
346	Dr.	Seemab Akbar	2021
347	Dr.	Malik Arslan Shahid Jahangir	2021
348	Dr.	Fatima Mehmood	2021
349	Dr.	Zahra Ghazanfar	2021
350	Dr.	M. Hamza Shahid	2021
351	Dr.	Muhammad Tahir	2021
352	Dr.	Saba Ali	2021
353	Dr.	Anum Hanif	2021
354	Dr.	Mashal Tayyab	2021
355	Dr.	Maham Javed	2021
356	Dr.	Wahaj Ahmad	2021
357	Dr.	Bilal Inayat	2021
358	Dr.	Amna Mehmud	2021
359	Dr.	Umer Farooq	2021
360	Dr.	M. Abrar Ahmad	2021
361	Dr.	Saira Kazmi	2021
362	Dr.	M. Sajjad Ahmad Khan	2021
363	Dr.	Brig. Junaid Afsar Khan	2021
364	Dr.	Faisal Iqbal	2021
365	Dr.	Hafiz Waqar Ahmad Ghauri	2021
366	Dr.	Muhammad Munir	2021
367	Dr.	Hafiz Ateeq Ur Rehman	2021
368	Dr.	Moneeb Tariq	2021
369	Dr.	Abdul Basit	2021
370	Dr.	Umra Imran	2021
371	Dr.	Omair Azeem	2021



LIST OF LIFE MEMBERS OSP LAHORE BRANCH

Sr #	Title	Name	Year
372	Dr.	Sidrah Latif	2021
373	Dr.	Farhan Ali	2021
374	Dr.	Amna Rizwan	2021
375	Dr.	Muhammad Saif Ur Rehman	2021
376	Dr.	Muhammad Umer Farooq	2021
377	Dr.	Muhammad Awais Asghar	2021
378	Dr.	Asif Khan	2021
379	Dr.	Manzoor Ahmed Bajwa	2021
380	Dr.	Rizwan Saeed	2021
381	Dr.	Asma Azhar	2021
382	Dr.	Naseer Ahmed Tahir	2021
383	Dr.	Sobia Usman Shah	2021
384	Dr.	Ishrat Ali	2021
385	Dr.	Ahmad Saeed Iqbal	2021
386	Dr.	Iftikhar Ahmed Sahito	2021

Sr #	Title	Name	Year
387	Dr.	Rizwana Tehseen	2021
388	Dr.	Rashid Nawaz	2021
389	Dr.	Muhammad Shoaib Alam Shah	2021
390	Dr.	Naeem Munir	2021
391	Dr.	Mansoor Ali	2021
392	Dr.	Muhammad Usama Rahim	2021
393	Dr.	M. Zeeshan Asghar	2021
394	Dr.	M. Nabeel Khalid	2021
395	Dr.	Saad Muhammad Iqbal	2021
396	Dr.	Nasrullah Khan	2021
397	Dr.	Sumaira Akhtar	2022
398	Dr.	Zunaira Mubarik	2022
399	Dr.	FizaAzhar	2022
400	Dr.	Khizar Hayat Sargana	2022



List of Exhibitors 2022

1. Medzntech Pvt. Ltd (Alcon)
2. Barrett Hodgson (Allergan)
3. Optisurg
4. Jasani Scientific
5. AA Enterprizers
6. Schazoo Pharmaceutical
7. Novartis Pharma
8. Sorab Jee Patel (Rayner)
9. Sante (Pvt) Ltd
10. Hudson Pharma
11. Latif Brothers
12. Mubarak Vision
13. Maxitech Pharma / SIFI
14. Haji S. Ameer Din & Sons
15. Ocusurg
16. Opti Med
17. Sights
18. Bayer Pakistan
19. Ophth Pharma
20. Vega Pharma
21. Saiffee Lab
22. Opticare
23. Medoptics
24. Optimus Pharma
25. Shaigan Pharma
26. Links Communication
27. Zomex Instruments
28. Accu Sight
29. Doctor's Enterprises
30. Farmista Surgical
31. Bless International
32. Retinor Industries
33. Mian Enterprises
34. JS Surgical
35. Ocusight
36. Gear Surgicals
37. Akash Traders
38. Lens Eye Surgical
39. Helix Pharma
40. KB Brothers



PLATINUM SPONSOR

Medzntech Pvt. Ltd (Alcon)

Optisurg

Barrett Hodgson (Allergan)

Jasani Scientifics

GOLD SPONSOR

A.A Enterprizes

Schazoo Pharma

SILVER SPONSOR

Novartis Pharma

Sorab Jee Patel (Rayner)

Latif Brothers

Hudson Pharma

Sante (Pvt) Ltd

Maxitech Pharma / SIFI

Mubarak Vision

BRONZE SPONSOR

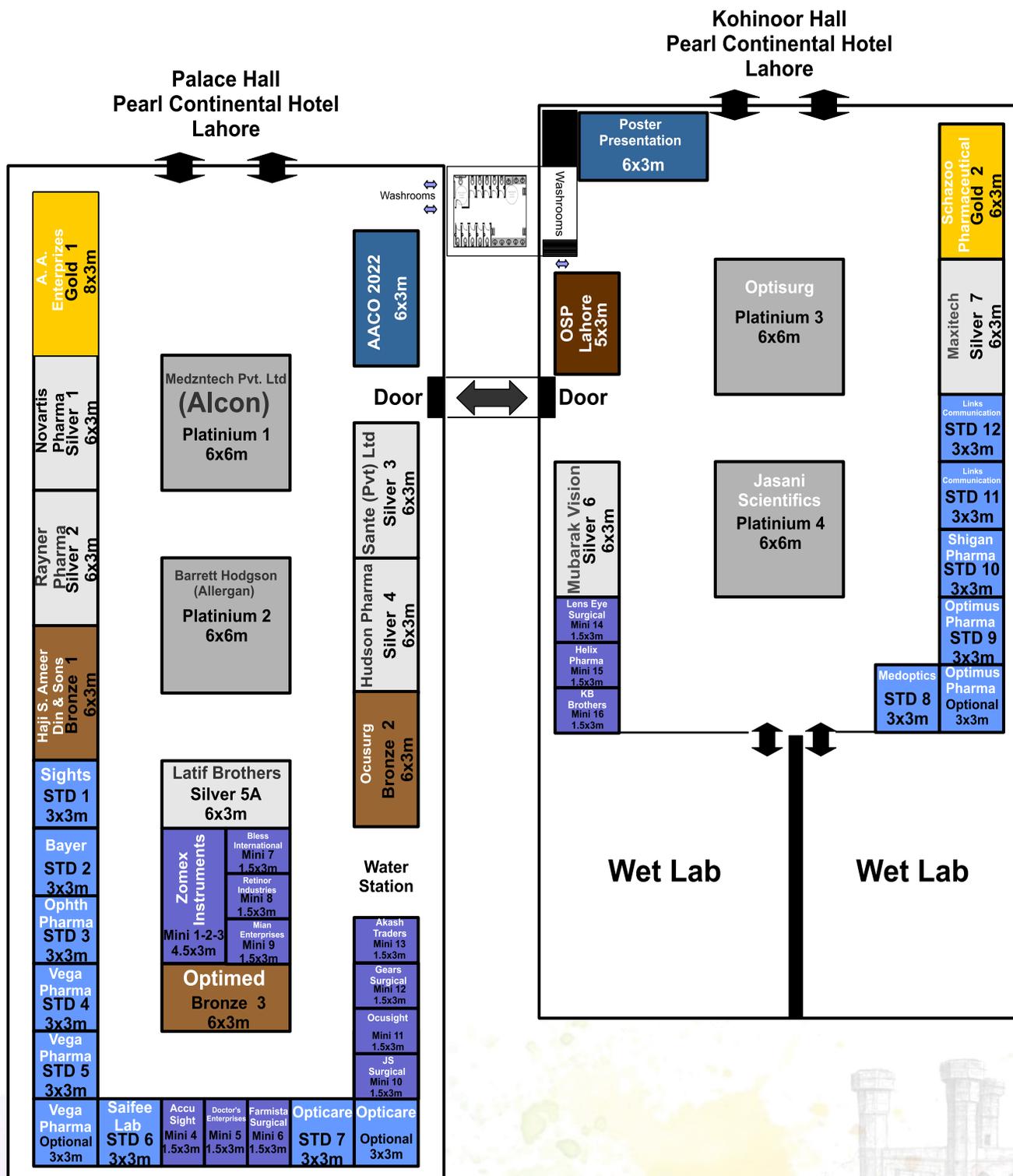
Haji S. Ameer Din & Sons

Ocusurg

Opti Med



AACO 2022 Exhibition Layout





SOCIAL PROGRAM

Wednesday 7th December 2022

Presidential Dinner 7:00pm

Grand Ball Room, Pearl Continental Hotel, Lahore
(By Invitation Only)

Thursday 8th December 2022

Inauguration of Exhibition 12:30pm

Palace & Koh-i-Noor Hall, Pearl Continental Hotel, Lahore

Friday 9th December 2022

Inauguration Ceremony of Conference 7:00pm

Grand Ball Room, Pearl Continental Hotel, Lahore

Saturday 10th December 2022

Gala Dinner & Cultural Evening 7:00pm

Grand Ball Room, Pearl Continental Hotel, Lahore
(By Invitation Only)

Sunday 11th December 2022

Closing Ceremony 01:00 pm - 02:00 pm

Grand Ball Room, Pearl Continental Hotel, Lahore



INTERNATIONAL GUEST SPEAKERS



Lezheng Wu
(China)



Giampaolo Gini
(UK)



Jorge Rocha
(Brazil)



Abdullah Alqahtani
(Saudi Arabia)



Saad Abdullah Waheeb
(Saudi Arabia)



Miguel Rechichi
(Italy)



Mario Saravia
(Argentina)



Tural Galbinur
(Azerbaijan)



Mahmoud Sami Alrabiah
(Kuwait)



Daniel Moreno-Paramo
(Mexico)



Mohamed Fehmy Nafaa
(Tunisia)



Igor Solomatn, MD
(Latvia)



Remzi AVCI
(Turkey)



Mahmoud M Soliman
(Egypt)



Nikoloz Labauri
(Georgia)



Ali Alsheikheh
(Oman)



Nassim Abreu
(Dominican Republic)



Tengku Ain Kamalden
(Malaysia)



Nesrine Abroug
(Tunisia)



Shahzad Shafquat
(UK)





INTERNATIONAL GUEST SPEAKERS



Ayman Madanat
(Jordan)



Susana Teixeira
(Portugal)



Tatyana Avanesova
(Russia)



Sami Mahmoud Al-Rabiah
(Kuwait)



Karl Golnik
(USA)



Nur Acar Göçgil
(Turkey)



Amila Alikadic Husovic
(Bosnia and Herzegovina)



Merieme Harouch
(Morocco)



M. Abdulwahab Al Amri
(UAE)



Mohamed Tawfik
(Egypt)



Monia Cheour
(Tunisia)



Huda K Radhi
(UAE)



Eiman Abd El-Latif
(Egypt)



Ramez Tawashi
(Syria)



Roua Abd Alrahman
(Syria)



José Gerardo García Aguirre
(Maxico)



Ihab Saad Othman
(Egypt)



Manzar Saeed
(UK)



Muhammad Samir Alhadad
(Egypt)



Usman Mahmood
(UK)





INTERNATIONAL GUEST SPEAKERS



Tarek Mamoun
(Egypt)



Ameen Marashi
(Syria)



Ashraf Shaaban Shaarawy
(Egypt)



Gangadhara SUNDAR
(Singapore)



Yehia Salaheldin Mostafa
(Egypt)



Yasser Khan MD
(Canada)



Usman Mahmood
(UAE)



Ahmed Roshdy Alagorie
(Egypt)



Ijaz Sheikh
(UK)



Ahmed M. Osman
(Egypt)



Dr. Rashid Zia
(UK)



Farzad Pakdel
(Iran)



Babiker Haga Abukheir Abushara
(Sudan)





Scientific Program



20TH AACO 2022 & 40TH LAHORE OPHTHALMO

Scientific Session Day One, Thursday 8th Dec 2022

Time	IC (Shalimar B)	IC (Shalimar C)	IC (Emerald A) Speaker Ready Room	Time	Symp (Emerald B)	Symp (Emerald C)	Symp (Crystal A)	Symp (Crystal B)	
09:00 - 10:00	(01)	(02) Resident Free Paper 1	(03) Optometry IC Vertical Squint	09:00 - 10:30	(04) Optometry Free Paper 1	(05) Cornea Symp 1 Corneal Ulcer	(06) Live Cataract Surgery - Lahore Medicare	(07) Vitreoretinal Surgery Workshop	
Tea Break (Grand Ball Room) 10:00 - 10:30									
10:30 - 11:30	(08)	(09) Resident Free Paper 2	(10) Optometry IC Low Vision	11:00 - 12:30	(11) Optometry Free Paper 2	(12) Cornea Symp 2 Cornea Cocktail	(13) Refractive Surgery Workshop	(14) Surgical Retina Symp 1 Surgical Retina Cocktail	
11:30 - 12:30	(15) Research IC 1 Basic Research Methodology Skills	(16) Resident Free Paper 3	(17) Optometry IC Contact Lens	Inauguration of Exhibition - 12:30					
Lunch Break (Grand Ball Room) 12:30 to 14:00									
14:00 - 15:00	(18) Glaucoma IC End Stage Glaucoma management	(19) Surgical Retina Free Paper 1	(20) Teach The Trainer 1	14:00 - 15:30	(21) Pediatrics Panel Discussion Pediatric glaucoma	(22) Oculoplastics Symp 1 Eyelid 1	(23) Glaucoma Symp 1 (PGA) Panel Discussion-Medical Management in Primary Open Angle Glaucoma	(24) Surgical Retina Symp 2 Retinal Detachment (1)	
15:30 - 16:30	(25) Free Paper 1	(26) Refractive IC-1 Basics of Laser/Refractive Surgery	(27) Teach The Trainer 2	16:00 - 18:00	(28) Pediatrics Symp 1 Pediatric Surgery	(29) Oculoplastics Symp 2 Orbit 1	(30) Glaucoma Symp 2 (PGA) OCT Basic Principles and Clinical Scenarios	(31) Surgical Retina Symp 3 Retinal detachment (Scleral Buckling & PNR)	
17:00 - 18:00	(32) Research IC 2 How to Write a Scientific Paper	(33) Medical Retina IC 1 Uveitis	(34) Teach The Trainer 3	Symposium (Symp) - 90 Minutes					
Instruction Courses (IC) - 60 Minutes									
Exhibition: Palace & Koh-i-Noor Halls									

Oculoplastics, Cornea, Glaucoma, Cataract & Refractive, Vitreoretina, Pediatrics, Free Papers, Education, Allied Vision



20TH AACO 2022 & 40TH LAHORE OPHTHALMO

Scientific Session Day Two, Friday 9th Dec 2022

Time	IC (Shalimar B)	IC (Shalimar C)	IC (Emerald A)	Time	Symp (Emerald B)	Symp (Emerald C)	Symp (Crystal A)	Symp (Crystal B)	
09:00 - 10:00	(35) Cataract Innovations & Advancements in Haptic Fixation	(36) WIOP IC 1 All about Lasers	(37) Leadership Development Program - 1	09:00 - 10:30	(38) Medical Retina Symp 1 Diabetic Retinopathy and Age Related Macular Degeneration	(39) Oculoplastics Symp 3 Eyelid 2	(40) Cataract Symp 1 Advanced IOL Technology & Premium IOL implants.	(41) Surgical Retina Symp 4 PVR	
Tea Break (Grand Ball Room) 10:00 - 10:30									
10:30 - 11:30	(42) Oculoplastics IC Ocular Surface Diseases	(43) Pediatrics IC 2 Myth buster	(44) Leadership Development Program - 2	11:00 - 12:30	(45) Medical Retina Symp 2 Diagnostic Ophthalmology	(46) Cornea Symp 2 Lamellar Keratoplasty	(47) Glaucoma Symp 3 Surgery in Glaucoma - Trabeculectomy	(48) Surgical Retina Symp 5 Macular Surgery (1)	
11:30 - 12:30	(49) Free Paper 2	(50) Community Ophth IC - 1 Disability-Inclusive Health System	(51) Leadership Development Program - 3	Lunch Break (Grand Ball Room) 12:30 to 14:00					
Lunch Break (Grand Ball Room) 12:30 to 14:00									
14:00 - 15:00	(52) Ethics IC Best Ethical Practice	(53) Cataract IC-1 Phaco Basics	(54) Glaucoma IC 1 Visual Fields Interpretation in Glaucoma	14:00 - 15:30	(55) Pediatrics Symp 2 Mystery of Strabismus	(56) Oculoplastics Symp 4 Nasolacrimal Duct	(57) Refractive Symp-1 Handling difficult cases & Complications	(58) Surgical Retina Symp 6 Diabetic Vitrectomy (1)	
15:30 - 16:30	(59) Glaucoma IC 2 Phacoemulsification in small eyes	(60) Ocular Surface IC 1 Meibomian Gland Dysfunction	(61) Medical Retina Panel Discussion	16:00 - 18:00	(62) Medical Retina Symp 3 Lasers and Steroid Therapy	(63) Pediatric Symp 3 Retinopathy of Prematurity	(64) Surgical Retina Panel Discussion	(65) AACO Plenary Session (Named Lectures)	
17:00 - 18:00	(66) Surgical Retina Free Paper 2	(67) Cataract IC-2 Phaco in Posterior Polar Cataract	(68) Community Ophthalmology Symp 1	Koh-e-Noor Hall Grand Ball Room					
Poster presentations Inauguration & Dinner									
9:00 - 17:30 19:00 - 21:00									

Oculoplastics, Cornea, Glaucoma, Cataract & Refractive, Vitreoretina, Pediatrics, Free Papers, Education, Allied Vision



20TH AACO 2022 & 40TH LAHORE OPHTHALMO

Scientific Session Day Three, Saturday 10th Dec 2022

Time	IC (Shalimar B)	IC (Shalimar C)	IC (Emerald A)	Time	Symp (Emerald B)	Symp (Emerald C)	Symp (Crystal A)	Symp (Crystal B)	
09:00 - 10:00	(69) Glaucoma IC 3 Trabeculectomy for advance learners	(70) Free Paper 3	(71) Oculoplastics Symp 5 Orbit 2	09:00 - 10:30	(72) Medical Retina Symp 4 Recent Innovation 1	(73) WTOP Symp Myopia	(74) Refractive Symp-2 Excimerless Laser/Refractive Surgery	(75) Surgical Retina Symp 7 Endophthalmitis & Intra Ocular Foreign Body	
Tea Break (Grand Ball Room) 10:00 - 10:30									
10:30 - 11:30	(76) Retina IC Mystery in Dystrophy	(77) Cornea Symp 4 Keratoconus	(78) Pediatrics Symp 4 Retinoblastoma	11:00 - 12:30	(79) Video Competition	(80) Industry Symp 1 (Medztech)	(81) Glaucoma Symp 4 Secondary Glaucoma	(82) Surgical Retina Symp 8 Macular Surgery (2)	
11:30 - 12:30	(83) Oculoplastics IC 2 Aesthetic Procedures in Oculoplastic Surgery	(84) Cataract IC-3: Handling Cataracts with Sub-luxated Lens & IOI implantation with poor or no capsular support	(85) Industry Symp 2 (SIFI/Maxitech)	Tea Break (Grand Ball Room) 12:30 to 14:00					
Lunch Break (Grand Ball Room) 12:30 to 14:00 / (Central Council Meeting, 12:30 to 14:00 Bukhara Restaurant)									
14:00 - 15:00	(86) Cornea IC Innovation in Corneal Grafting IC	(87) Pediatrics IC 4 Squint assessment: Sahaf triangle	(88) Research IC 3 Research Publication for PJO	14:00 - 15:30	(89) Medical Retina Symp 5 Recent Innovation 2	(90) Glaucoma Symp 5 Management of Glaucoma/Valves	(91) Cataract Symp 2 Handling Challenging Cataracts	(92) Surgical Retina Symp 9 Macular Hole Surgery	
15:30 - 16:30	(93) Pediatrics IC 3 Amblyopia	(94) Medical Retina IC 2 Ocular Oncology	(95) Industry Symp 3 Anti VEGF (Bayer)	16:00 - 18:00	(96) Pediatrics Symp Pediatric VR	(97) APOT Trauma Symp	(98) Refractive Symp-3 Refractive/Laser Cataract Surgery - Results & Statistics	(99) Surgical Retina Symp 10 Vitreo Retina Trauma	
17:00 - 18:00	(100) Oculoplastics IC Fundamental Techniques of Oculoplastic Surgery	(101) Medical Retina Symp 6 Uveitis	(102) Community Ophthalmology 2	Gala Dinner					19:00 - 22:00
Grand Ball Room									

Oculoplastics, Cornea, Glaucoma, Cataract & Refractive, Vitreoretina, Pediatrics, Free Papers, Education, Allied Vision



20TH AACO 2022 & 40TH LAHORE OPHTHALMO

Scientific Session Day Four, Sunday 11th Dec 2022

Time	IC (Shalimar B)	IC (Shalimar C)	IC (Emerald A)	Time	Symp (Emerald B)	Symp (Emerald C)	Symp (Crystal A)	Symp (Crystal B)	
09:00 - 10:00	(103) Retina IC Artificial Intelligence	(104) Grand Clinical Meeting	(105) WIOP Video Session	09:00 - 10:30	(106) Glaucoma Symp 6 Pediatric Glaucoma	(107) Oculoplastics Symp 6 Ocular Surface Disorders and Orbit II	(108) Cataract Symp 3 Great debate - Handling Phaco complications - Step by step (Video based)	(109) Surgical Retina Symp 11 Diabetic Vitrectomy	
Tea Break (Grand Ball Room) 10:00 - 10:30									
10:30 - 11:30	(110) Pediatrics IC.1 Difficult Squints made easy	(111) Resident Free Paper 4	(112) Young Ophthalmology (YO) Symposium	11:00 - 12:30	(113) Surgical Retina Free Paper 3	(114) Oculoplastics Symp 7 Orbit & Lacrimal	(115) Cataract Symp 4 Video Cataract Symp	(116) Quiz Competition	
11:30 - 12:30	(117) Diagnostics IC Ultrasound Biomicroscopy	(118) Resident Free Paper 5	(119) Research IC 4 Stem cell therapy in Ophthalmology	(120) Closing Ceremony Grand Ball Room					
12:30 - 13:30	Lunch (Grand Ball Room)								
13:30 - 14:00	Lunch (Grand Ball Room)								

Oculoplastics, Cornea, Glaucoma, Cataract & Refractive, Vitreoretina, Pediatrics, Free Papers, Education, Allied Vision



Day 1, Thursday 8th December, 2022

Session Summary

1 Session Code

2 Session Code Resident Free Paper 1

Chairman	Tariq Shakoor	Shalimar C			
Co-Chair	Arshad Mahmood	08-Dec-22	Start	9:00 AM	
Moderator	Raza Ali Shah	Thursday	End	10:00 AM	
Tariq Shakoor	Resident Free Paper 1	9:00 AM	10:00 AM	60 mins	
Arshad Mahmood	Resident Free Paper 1	9:00 AM	10:00 AM	60 mins	
Raza Ali Shah	Resident Free Paper 1	9:00 AM	10:00 AM	60 mins	
Ahmad Mustafa	Incidence of muscle sequelae post-orbitotomy	9:00 AM	9:06 AM	6 mins	
Bahadur Iftikhar	Sleep and mood disorders in dry eye disease and other allied irritating ocular diseases	9:06 AM	9:12 AM	6 mins	
Shuja-ur-Rehman	Comparison of clear corneal incision versus limbal incision in terms of postoperative striate keratopathy and astigmatism	9:12 AM	9:18 AM	6 mins	
Muhammad Qasim Yazar	Efficacy of topical 0.1% dexamethasone for 3 weeks versus 6 weeks after uncomplicated low risk cataract extraction in controlling post-operative inflammation	9:18 AM	9:24 AM	6 mins	
Saima Khalid	Management of ocular pyogenic granuloma	9:24 AM	9:30 AM	6 mins	
Iqra Shamim Ahmed	Evaluation of change in Pterygium induced astigmatism in patients after pterygium excision with autologous conjunctival graft	9:30 AM	9:36 AM	6 mins	
Iqra Aslam	Outcomes of group D and group E better eyes in patients with bilateral retinoblastoma treated with systemic chemotherapy and IAC	9:36 AM	9:42 AM	6 mins	
Mehreen Akram	Outcomes of all nasal ports 25G PPV versus conventional 25G PPV for Stage 4 Retinopathy of Prematurity	9:42 AM	9:48 AM	6 mins	
Raza Ali Shah	Q&A: Resident Free Paper 1	9:48 AM	10:00 AM	12 mins	



Day 1, Thursday 8th December, 2022

3 Session Code Optometry IC Vertical Squint

Chairman	Zahid Kamal Siddiqui	Emerald A			
Co-Chair	08-Dec-22	Start	9:00 AM		
Moderator	Ashal Pal	Thursday	End	10:00 AM	
Syeda Rushda Zaidi	Optometry IC Vertical Squint	9:00 AM	9:10 AM	10 mins	
Ayesha Sarfaraz	Visual assessment & amblyopia detection	9:10 AM	9:20 AM	10 mins	
Tayyaba Burhan	Sensory assessment	9:20 AM	9:30 AM	10 mins	
Ashal Pal	Motor assessment	9:30 AM	9:40 AM	10 mins	
Ashal Pal	Management of vertical squint	9:40 AM	9:50 AM	10 mins	
Ashal Pal	Q&A: Optometry IC Vertical Squint	9:50 AM	10:00 AM	10 mins	

4 Session Code Optometry Free Paper 1

Chairman	Tehseen Mahmood Mahju	Emerald B			
Co-Chair	Irfan Karamat	08-Dec-22	Start	9:00 AM	
Moderator	Arif Hussain	Thursday	End	10:30 AM	
Faisal Rashid	Effect of change in iris color on myopia	9:00 AM	9:07 AM	7 mins	
Sehrish Shahid	Change in refractive error in pseudophakic versus aphakic eyes after cataract surgery in children	9:07 AM	9:14 AM	7 mins	
Agha Saad	Correlation of Interpupillary distance (IPD) with Range of Convergence	9:14 AM	9:21 AM	7 mins	
Rida Khalid	The association between type of astigmatism and type of congenital ptosis	9:21 AM	9:28 AM	7 mins	
Rooma Farman	Occurrence of Allergic conjunctivitis in medical students using visual display units	9:28 AM	9:35 AM	7 mins	
Sahibzada Hakim	Adjustment To Disability in Persons with	9:35 AM	9:42 AM	7 mins	
Anjum Nadeem	Acquired Visual Impairment				
Zarsha Rahman	Awareness of Patient Dealing Ethics among Optometrists of Pakistan	9:42 AM	9:49 AM	7 mins	
Hafiz Shahbaz Anwar	Low vision management of legally blind degenerative myopia to improve quality of life: a case study	9:49 AM	9:56 AM	7 mins	
Sabeen Manzoor	Prevalence and severity of extra-ocular motility disorders with Grave's disease.	9:56 AM	10:03 AM	7 mins	
Pariza Jamil	Is LogMar replaceable? A comparison of LogMar and Velorum Visual Acuity chart	10:03 AM	10:10 AM	7 mins	
Khadija Tufail	Prevalence of convergence insufficiency in 16-35 years old patients using RAF rule	10:10 AM	10:17 AM	7 mins	
Syeda Rushda Zaidi	Association between refractive error and heterotropia	10:17 AM	10:24 AM	7 mins	
Arif Hussain	Q&A: Optometry Free Paper 1	10:24 AM	10:30 AM	6 mins	



Day 1, Thursday 8th December, 2022

5 Session Code Cornea Symp 1 – Corneal Ulcer

Chairman	Huda K Radhi	Emerald C			
Co-Chair	Tanveer Chaudhary	08-Dec-22	Start	9:00 AM	
Moderator	Sidrah Latif	Thursday	End	10:30 AM	
Tanveer Chaudhary	Diagnosis Of Bacterial Keratitis	9:00 AM	9:10 AM	10 mins	
Tanveer Chaudhary	Management Of Bacterial Keratitis	9:10 AM	9:20 AM	10 mins	
Sameera Irfan	Corneal Healing	9:20 AM	9:30 AM	10 mins	
M. Numan Sarfraz	Advancements in corneal endothelial transplant	9:30 AM	9:40 AM	10 mins	
Huda K Radhi	Pyogenic granuloma post pterygium Excision; medical or surgical management	9:40 AM	9:50 AM	10 mins	
Sidrah Latif	Corneal visualization through Scheimpflug Tomography	9:50 AM	10:00 AM	10 mins	
Miguel Rechichi	Crosslinking and excimer laser: Boost or Taboo?	10:00 AM	10:10 AM	10 mins	
Sidrah Latif	Q&A: Cornea Symp 1 - Corneal Ulcer	10:10 AM	10:30 AM	20 mins	

6 Session Code Live Cataract Surgery – Lahore Medicare

Chairman	Muhammad Moin	Crystal A			
Co-Chair	Yehia Salaheldin	08-Dec-22	Start	9:00 AM	
Moderator	Majeed Malik	Thursday	End	10:30 AM	
Majeed Malik	Premium IOLs - Selection criteria & Counselling	9:00 AM	9:10 AM	10 mins	
Sharif Hashmani	Phaco in small pupil	9:10 AM	9:20 AM	10 mins	
Khalid Mahmood	HOYA VIVNEX, IOL implantation (Live Surgery)	9:20 AM	9:40 AM	20 mins	
Zia Ul Mazhary	How to make phaco surgery safer & more predictable?	9:40 AM	9:50 AM	10 mins	
Khalid Mahmood	Medicontur Trifocal Liberty IOL implantation (Live surgery)	9:50 AM	10:10 AM	20 mins	
Majeed Malik	Q&A: Live Cataract Surgery – Lahore Medicare	10:10 AM	10:30 AM	20 mins	

7 Session Code Vitreoretinal Surgery Workshop

Chairman	M Tariq Khan	Crystal B			
Co-Chair	Kashif Iqbal	08-Dec-22	Start	9:00 AM	
Moderator	Hussain A. Khaqan	Thursday	End	10:30 AM	
Mazhar Ishaq	Vitreoretinal Surgery Workshop	9:00 AM	10:30 AM	90 mins	
Chaudhary Javed Iqbal	Vitreoretinal Surgery Workshop	9:00 AM	10:30 AM	90 mins	
Khalid Waheed	Vitreoretinal Surgery Workshop	9:00 AM	10:30 AM	90 mins	
Muhammad Tayyab	Vitreoretinal Surgery Workshop	9:00 AM	10:30 AM	90 mins	
Syed Fawad Rizvi	Vitreoretinal Surgery Workshop	9:00 AM	10:30 AM	90 mins	
Tariq Khan Marwat	Vitreoretinal Surgery Workshop	9:00 AM	10:30 AM	90 mins	



Day 1, Thursday 8th December, 2022

Sanaullah Jan	Vitreoretinal Surgery Workshop	9:00 AM	10:30 AM	90 mins
Nadeem Qureshi	Vitreoretinal Surgery Workshop	9:00 AM	10:30 AM	90 mins
M Tariq Khan	Surgical management of diabatic retinopathy (Video presentation followed by panel discussion)	9:00 AM	9:30 AM	30 mins
Kashif Iqbal	Surgical management of macular hole	9:30 AM	10:00 AM	30 mins

8 Session Code

9 Session Code Resident Free Paper 2

Chairman:	Tariq Shakoor	Shalimar C		
Co-Chair:	Arshad Mahmood	08-Dec-22	Start	10:30 AM
Moderator:	Raza Ali Shah	Thursday	End	11:30 AM
Tariq Shakoor	Resident Free Paper 2	10:30 AM	11:30 AM	60 mins
Arshad Mahmood	Resident Free Paper 2	10:30 AM	11:30 AM	60 mins
Raza Ali Shah	Resident Free Paper 2	10:30 AM	11:30 AM	60 mins
Hafsa Latif	Change in time for anti-glaucoma therapy in the Holy Month of Ramadan during fasting	10:30 AM	10:36 AM	6 mins
Jaweria Asghar	Management of case of severe orbital trauma with iron rod	10:36 AM	10:42 AM	6 mins
Sidra Ahsan Shah	Efficacy of sub-conjunctival anti-VEGF versus fine needle diathermy in corneal neo vascularization	10:42 AM	10:48 AM	6 mins
Fauzan Ayub	Comparison between the incidence of posterior capsular opacity in post-op patients of ECCE with hydro-dissection and ECCE without hydro-dissection	10:48 AM	10:54 AM	6 mins
Zukhruf Ijaz	Endolaser v/s Transcanalicular DCR	10:54 AM	11:00 AM	6 mins
Iqra Qureshi	ision preservation and globe salvage in eyes with intra-ocular retinoblastoma	11:00 AM	11:06 AM	6 mins
Sana Chaudhry	Comparison of Efficacy of Laser Photocoagulation with Intravitreal Ranibizumab in Zone II Retinopathy of Prematurity	11:06 AM	11:12 AM	6 mins
Raza Ali Shah	Q&A: Resident Free Paper	2 11:12 AM	11:30 AM	12 mins



Day 1, Thursday 8th December, 2022

10 Session Code Optometry IC Low Vision

Chairman	Zahid Kamal Siddiqui	Emerald A		
Co-Chair	08-Dec-22	Start	10:30 AM	
Moderator	Madiha Nazly	Thursday	End	11:30 AM
Madiha Nazly	Introduction to low vision	10:30 AM	10:40 AM	10 mins
Madiha Nazly	Journey from patient to person	10:40 AM	10:50 AM	10 mins
Madiha Nazly	Low vision assessment & management	10:50 AM	11:00 AM	10 mins
Madiha Nazly	Rehabilitation to develop eccentric fixation	11:00 AM	11:10 AM	10 mins
Madiha Nazly	Hands on Practice	11:10 AM	11:20 AM	10 mins
Madiha Nazly	Q&A: Optometry IC Low Vision	11:20 AM	11:30 AM	10 mins

11 Session Code Optometry Free Paper 2

Chairman	Najam Iqbal	Emerald B		
Co-Chair	Irfan Karamat	08-Dec-22	Start	11:00 AM
Moderator	Farooq Ahmed	Thursday	End	12:30 PM
Ayesha Saleem	Developing a disability inclusive model for low vision services	11:00 AM	11:06 AM	6 mins
Tayyaba Burhan	Where we are wrong in diagnosis paralytic squint	11:06 AM	11:12 AM	6 mins
Ayesha Saleem	Practical Trainings of optometry students in community outreach	11:12 AM	11:18 AM	6 mins
Sahibzada Hakim	Investigation of Rule Similarity of Astigmatic Axes of Fellow Eyes	11:18 AM	11:24 AM	6 mins
Anjum Nadeem	Association of refractive errors with central corneal thickness, lens thickness and axial length in young adults	11:24 AM	11:30 AM	6 mins
Sehrish Shahid	Pattern of optometry practice and range of services in Pakistan	11:30 AM	11:36 AM	6 mins
Ruhullah	Factors influencing the onset of full cycloplegia by cyclopentolate 1% in children	11:36 AM	11:42 AM	6 mins
Kiran Shahzadi	Effective Role of Orthoptic Clinic in eye examination in Paeds Ophthalmology	11:42 AM	11:48 AM	6 mins
Tayyaba Burhan	Evaluation of Post-Operative Refractive Outcomes in Phacoemulsification with posterior Chamber IOL implantation at Mayo Hospital Lahore.	11:48 AM	11:54 AM	6 mins
Mudassir Fatima	The pattern of visual impairment and refractive errors among patients presenting with diabetes	11:54 AM	12:00 PM	6 mins
Muhammad Iqbal Javaid	Optometric management of post Keratoplasty astigmatism	12:00 PM	12:06 PM	6 mins
Hafiz Shahbaz Anwar				



Day 1, Thursday 8th December, 2022

Sana Sagheer	Comparison of contrast sensitivity in different amount of deviation in alternating exotropia	12:06 PM	12:12 PM	6 mins
Madiha Nazly	Developing a disability inclusive model for low vision services	12:12 PM	12:18 PM	6 mins
Kiran Aman	The understanding of B. scan	12:18 PM	12:24 PM	6 mins
Farooq Ahmed	Q&A: Optometry Free Paper 2	12:24 PM	12:30 PM	6 mins

12 Session Code Cornea Symposium 2 - Cornea Cocktail

Chairman	Merieme Harouch	Emerald C		
Co-Chair	Soufia Farrukh	08-Dec-22	Start	11:00 AM
Moderator	Ali Zain	Thursday	End	12:30 PM
Ali Zain	Rotational Graft	11:00 AM	11:07 AM	7 mins
Merieme Harouch	Biological stimulation: New therapeutic alternative in ocular surface disease	11:07 AM	11:14 AM	7 mins
Monia Cheour	Contribution of AS-OCT in corneal graft	11:14 AM	11:21 AM	7 mins
Soufia Farrukh	Tectonic Pen Graft	11:21 AM	11:28 AM	7 mins
Luqman Bahoo	Toxic Endothelial Syndrome	11:28 AM	11:35 AM	7 mins
Merieme Harouch	How to make my keratoconic patients happy with the Evo Visian ICL phakic implant	11:35 AM	11:42 AM	7 mins
Saad Waheeb	Yamane 2ndry IOL tips & tricks	11:42 AM	11:49 AM	7 mins
Ahmed M. Osman	Corneal Endothelial cells changes in different stages of keratoconus: a multi-center clinical study	11:49 AM	11:56 AM	7 mins
Ali Zain	To see the role of Toric IOL in terms of visual improvement in cases of Keratoconus	11:56 AM	12:03 PM	7 mins
Xi Chen	Effects of Obesity on Risk of Kc – A Mandelian Randomized Study	12:03 PM	12:10 PM	7 mins
Ren Liu	Melatonin Attenuate Lps-Induced Pro-Inflammatory Cytokinin Response And Li[Ogenesis In Human Meibomian Gland Epi. Cells	12:10 PM	12:17 PM	7 mins
Shuai Ouyang	Single Cell Transcriptome Profiling Of Human Corneas Reveals The Palligram Of Keratoconus	12:17 PM	12:24 PM	7 mins
Ali Zain	Q&A: Cornea Symposium 2 - Cornea Cocktail	12:24 PM	12:30 PM	60 mins

13 Session Code Refractive Surgery Workshop

Chairman:	Sharif Hashmani	Crystal A		
Co-Chair:	Col Shahzad Saeed	08-Dec-22	Start	11:00 AM
Moderator:	Munira Shakir	Thursday	End	12:30 PM



Day 1, Thursday 8th December, 2022

Sadia Humayun	Stream Light – The next Generation of surface Ablation	11:00 AM	11:15 AM	15 mins
Munira Shakir	Basic of Femto Laser and pearls for the millennials	11:15 AM	11:25 AM	10 mins
Col Shahzad Saeed	Systane Ultra an Advance Lubricant for Refractive Surgery associated with Dry Eye	11:25 AM	11:35 AM	10 mins
M. Zeeshan Azhar	Early diagnosis and management of flap and interface-related complications	11:35 AM	11:45 AM	10 mins
Sharif Hashmani	Femto Lasik Procedure with Contoura Vision	11:45 AM	12:15 PM	30 mins
Munira Shakir	Q&A: Refractive Surgery Workshop	12:15 PM	12:30 PM	15 mins

14 Session Code Surgical Retina Symp 1, Surgical Retina Cocktail

Chairman	Lezheng Wu	Crystal B		
Co-Chair	Tarek Mamoun	08-Dec-22	Start	11:00 AM
Moderator	Muhammad Tayyab	Thursday	End	12:30 PM
Mohamed A. Tawfik	Working Under PFC	11:00 AM	11:08 AM	8 mins
Ashraf Shaarawy	Evaluation of 27 gauge system in diabetic vitrectomy	11:08 AM	11:16 AM	8 mins
Mahmoud M Soliman	Post- vitrectomy Macular Folds	11:16 AM	11:24 AM	8 mins
Manzar Saeed	Regrets of a Phaco Vity - Confession of a VR Surgeon	11:24 AM	11:32 AM	8 mins
Nesrine Abroug	Management of retained lens fragment or dropped nucleus	11:32 AM	11:40 AM	8 mins
Ihab Saad Othman	Double rectangular scleral mesh(DRSM) for severely subluxated/dislocated IOLs: a closed vitrectomy approach	11:40 AM	11:48 AM	8 mins
Haroon Tayyab	Management of optic disc pit maculopathy with pars plana vitrectomy and internal limiting membrane flap tuck in optic disc pit	11:48 AM	11:56 AM	8 mins
Amer Awan	Outcome of Autologous Inner Limiting Membrane transplant in failed and recurrent macular hole	11:56 AM	12:04 PM	8 mins
M Tariq Khan	Artificial intelligence in retina	12:04 PM	12:12 PM	8 mins
Mir Ali Shah	treatment of Kissing Choroidals	12:12 PM	12:20 PM	8 mins
Muhammad Tayyab	Q&A: Surgical Retina Symp 1, Surgical Retina Cocktail	12:20 PM	12:30 PM	10 mins

15 Session Code Research IC 1, Basic Research Methodology Skills

Chairman	Hammad Ayub	Shalimar B		
Co-Chair	Kashif Jahangir	08-Dec-22	Start	11:30 AM
Moderator	Muhammad Hassaan Ali	Thursday	End	12:30 PM
Muhammad Hassaan Ali	How to Choose Research Topic	11:30 AM	11:39 AM	9 mins
Muhammad Hassaan Ali	Effective Literature Search	11:39 AM	11:48 AM	9 mins
Muhammad Hassaan Ali	Beyond Original Article	11:48 AM	11:57 AM	9 mins



Day 1, Thursday 8th December, 2022

Muhammad Hassaan Ali	How to Write a Case Report	11:57 AM	12:06 PM	9 mins
Muhammad Hassaan Ali	Introduction to Bibliometrics and Meta-Analysis	12:06 PM	12:15 PM	9 mins
Muhammad Hassaan Ali	How to Avoid Plagiarism	12:15 PM	12:24 PM	9 mins
Muhammad Hassaan Ali	Q&A: Research IC 1, Basic Research Methodology Skills	12:24 PM	12:30 PM	6 mins

16	Session Code	Resident Free Paper 3			
Chairman	Tariq Shakoor	Shalimar C			
Co-Chair	Arshad Mahmood	08-Dec-22	Start	11:30 AM	
Moderator	Raza Ali Shah	Thursday	End	12:30 PM	
Tariq Shakoor	Resident Free Paper 3	11:30 AM	12:30 PM	60 mins	
Arshad Mahmood	Resident Free Paper 3	11:30 AM	12:30 PM	60 mins	
Raza Ali Shah	Resident Free Paper 3	11:30 AM	12:30 PM	60 mins	
Sajeela Luqman	To study the effect of phacoemulsification on measurement of Ganglion cell Complex changes and optic nerve head parameters using spectral domain optical coherence tomography	11:30 AM	11:36 AM	6 mins	
Mahtab Haider	Comparison of post operative inflammation in patients undergoing surgery for traumatic cataract with and without heparin in irrigating solution	11:36 AM	11:42 AM	6 mins	
Iqra Khalid	The Systemic Effect of Intravitreal injection Avastin on coagulation profile	11:42 AM	11:48 AM	6 mins	
Faraz Munir	Comparison of Ocular Trauma Score (OTS) and Penetrating Ocular Trauma Score (POTS) in Predicting Visual Outcome in Children	11:48 AM	11:54 AM	6 mins	
Fatima Khalid	White in the eye of a patient with fits!	11:54 AM	12:00 PM	6 mins	
Ramsha Jehangir	Post Traumatic Cicatricial Ectropion Correction With Skin Graft	12:00 PM	12:06 PM	6 mins	
Maryam Shahid	Comparison of Changes In Retinal Nerve Fiber Layer Thickness by Spectral Domain Optical Coherence Tomography In Glaucoma And Non-Glaucoma Patients After Phacoemulsification	12:06 PM	12:12 PM	6 mins	
Jawaria Tariq Farooqi	Macular Thickness In Unilateral Amblyopic Population Assessed By Spectral Domain Optical Coherence Tomography	12:12 PM	12:18 PM	6 mins	
Farah Zafar	Variability In Central Macular Thickness After Phacoemulsification In Non-Insulin Dependent Diabetics With and Without Retinopathy	12:18 PM	12:24 PM	6 mins	
Raza Ali Shah	Q&A: Resident Free Paper 3	12:24 PM	12:30 PM	6 mins	



Day 1, Thursday 8th December, 2022

17 Session Code Optometry IC - Contact Lens

Chairman	Zahid Kamal Siddiqui	Emerald A		
Co-Chair	08-Dec-22	Start	11:30 AM	
Moderator	Ayesha Saleem	Thursday	End	12:30 PM
Beenish Latif	Introduction & types of contact lens	11:30 AM	11:39 AM	9 mins
Ayesha Saleem	Contact lens materials	11:39 AM	11:48 AM	9 mins
Anwar Awan	Preliminary examination	11:48 AM	11:57 AM	9 mins
Ayesha Saleem	Insertion & removal of contact lens	11:57 AM	12:06 PM	9 mins
Anwar Awan	Special purpose contact lens (keratoconus & aphakia)	12:06 PM	12:15 PM	9 mins
Beenish Latif	Contact lens indications, contra indications & care	12:15 PM	12:24 PM	9 mins
Ayesha Saleem	Q&A: Optometry IC - Contact Lens	12:24 PM	12:30 PM	6 mins

18 Session Code Glaucoma IC, End Stage Glaucoma Management

Chairman	Shalimar B			
Co-Chair	08-Dec-22	Start	2:00 PM	
Moderator	Zia Ul Mazhary	Thursday	End	3:00 PM
Zia Ul Mazhary	Introduction of End Stage Glaucoma Management	2:00 PM	2:12 PM	12 mins
Zia Ul Mazhary	Treatment Options of End Stage Glaucoma Management	2:12 PM	2:24 PM	12 mins
Zia Ul Mazhary	Non-Medical Treatment of End Stage Glaucoma Management	2:24 PM	2:36 PM	12 mins
Zia Ul Mazhary	Surgical Treatment of End Stage Glaucoma Management	2:36 PM	2:48 PM	12 mins
Zia Ul Mazhary	Q&A: Glaucoma IC, End Stage Glaucoma management	2:48 PM	3:00 PM	12 mins

19 Session Code Surgical Retina Free Paper 1

Chairman	Muhammad Tayyab	Shalimar C		
Co-Chair	Faisal Murtaza	08-Dec-22	Start	2:00 PM
Moderator	Ali Zain	Thursday	End	3:00 PM
Amna Rizwan	Comparison Of Residual Silicone Oil Index After Removal of Silicone Oil with Fluid-Air Versus Oil-Fluid Exchange	2:00 PM	2:07 PM	7 mins
Haroon Tayyab	Post-operative visual outcomes based on morphological staging of idiopathic epiretinal membranes on OCT	2:07 PM	2:14 PM	7 mins
Faisal Murtaza	Management of different types of macular hemorrhage	2:14 PM	2:21 PM	7 mins



Day 1, Thursday 8th December, 2022

Sidra Shakeel	Goals of diabetic vitrectomy	2:21 PM	2:28 PM	7 mins
Asfandiyar Khan	Management of diabetic tractional retinal detachment – New horizons	2:28 PM	2:35 PM	7 mins
Aamna Jabran	Scleral buckle audit	2:35 PM	2:42 PM	7 mins
Hafiz Ateeq ur Rehman	Outcomes of aflibercept in Macular Edema	2:42 PM	2:49 PM	7 mins
Ali Zain	Q&A: Surgical Retina Free Paper 1	2:49 PM	3:00 PM	11 mins

20 Session Code Teach The Trainer 1

Chairman	Muhammad Daud Khan	Emerald A		
Co-Chair	Hamid Mahmood Butt	08-Dec-22	Start	2:00 PM
Moderator	Khawaja Khalid Shoaib	Thursday	End	3:00 PM
Khawaja Khalid Shoaib	Adult Learning Principles	2:00 PM	2:10 PM	10 mins
Mir Ali Shah	Lecture skills	2:10 PM	2:20 PM	10 mins
Karl Golnik	Teaching in the clinic	2:20 PM	2:30 PM	10 mins
Hamid Mahmood Butt	Teaching in the operation room	2:30 PM	2:40 PM	10 mins
Karl Golnik	Teaching and Assessing Professionalism	2:40 PM	2:50 PM	10 mins
Khawaja Khalid Shoaib	Q&A: Teach The Trainer 1	2:50 PM	3:00 PM	10 mins

21 Session Code Pediatrics Panel Discussion Pediatric glaucoma

Chairman	Emerald B			
Co-Chair	08-Dec-22	Start	2:00 PM	
Moderator	Seema Qayyum	Thursday	End	3:30 PM
Imran Akram Sahaf	Pediatrics Panel Discussion Pediatric glaucoma	2:00 PM	3:30 PM	90 mins
Zia Muhammad	Pediatrics Panel Discussion Pediatric glaucoma	2:00 PM	3:30 PM	90 mins
Khawaja Khalid Shoaib	Pediatrics Panel Discussion Pediatric glaucoma	2:00 PM	3:30 PM	90 mins
Saima Amin	Pediatrics Panel Discussion Pediatric glaucoma	2:00 PM	3:30 PM	90 mins
Ashal Pal	Pediatrics Panel Discussion Pediatric glaucoma	2:00 PM	3:30 PM	90 mins
Ali Ayaz Sadiq	Pediatrics Panel Discussion Pediatric glaucoma	2:00 PM	3:30 PM	90 mins
Ahmed Raza	Pediatrics Panel Discussion Pediatric glaucoma	2:00 PM	3:30 PM	90 mins
Mariya Nazish Memon	Pediatrics Panel Discussion Pediatric glaucoma	2:00 PM	3:30 PM	90 mins

22 Session Code Oculoplastics Symp 1, Eyelid 1

Chairman	Gangadhara Sundar	Emerald C		
Co-Chair	Ibrar Hussain	08-Dec-22	Start	2:00 PM
Moderator	Zubair Saleem	Thursday	End	3:30 PM
Ibrar Hussain	Art of Ptosis Surgery	2:00 PM	2:08 PM	8 mins



Day 1, Thursday 8th December, 2022

Imran Akram Sahaf	Challenges in Congenital coloboma	2:08 PM	2:16 PM	8 mins
Zubair Saleem	Cryptophthalmos: Surgical treatment of the congenital symblephron variant	2:16 PM	2:24 PM	8 mins
Amer Yaqub	Upper Eye Lid Reconstruction	2:24 PM	2:32 PM	8 mins
Sameera Irfan	Ocular myasthenia Management	2:32 PM	2:40 PM	8 mins
Khawaja Khalid Shoaib	Cicatricial Entropion	2:40 PM	2:48 PM	8 mins
Ashok Grover	Our experience in the management of jaw winking ptosis	2:48 PM	2:56 PM	8 mins
Yasser Khan	Small incision brow lift for facial palsy	2:56 PM	3:04 PM	8 mins
Farzad Pakdel	Management of brow ptosis	3:04 PM	3:12 PM	8 mins
Gangadhara Sundar	Lower Eyelid Reconstruction	3:12 PM	3:20 PM	8 mins
Khawaja Khalid Shoaib	Q&A: Oculoplastics Symp 1, Eyelid 1	3:20 PM	3:30 PM	10 mins

23 Session Code Glaucoma Symp 1 (PGA), Panel Discussion-Medical Management in Primary Open

Chairman	Crystal A			
Co-Chair	08-Dec-22	Start	2:00 PM	
Moderator	Nadeem Hafeez Butt	Thursday	End	3:30 PM
Syed Imtiaz Ali	Glaucoma Symp 1 (PGA), Panel Discussion-Medical Management in Primary Open Angle Glaucoma	2:00 PM	3:30 PM	90 mins
P S Mahar	Glaucoma Symp 1 (PGA), Panel Discussion-Medical Management in Primary Open Angle Glaucoma	2:00 PM	3:30 PM	90 mins
Karim F. Damji	Glaucoma Symp 1 (PGA), Panel Discussion-Medical Management in Primary Open Angle Glaucoma	2:00 PM	3:30 PM	90 mins
Afzal Bodla	Glaucoma Symp 1 (PGA), Panel Discussion-Medical Management in Primary Open Angle Glaucoma	2:00 PM	3:30 PM	90 mins
Nazir Ashraf Laghari	Glaucoma Symp 1 (PGA), Panel Discussion-Medical Management in Primary Open Angle Glaucoma	2:00 PM	3:30 PM	90 mins

24 Session Code Surgical Retina Symp 2, Retinal Detachment (1)

Chairman	Mahmoud Alrabiah	Crystal B		
Co-Chair	Babiker Haga Abukheir Abushara	08-Dec-22	Start	2:00 PM
Moderator	Usman Mahmood	Thursday	End	3:30 PM
Usman Mahmood	Vitrectomy for retinal detachment and tamponade: an update	2:00 PM	2:10 PM	10 mins
Manzar Saeed	Densiron tamponade for inferior retinal detachments - results of UK multi-centre study	2:10 PM	2:20 PM	10 mins



Day 1, Thursday 8th December, 2022

Hasnain Muhammad Baksh	Removal of dropped IOL and scleral fixation of the same IOL	2:20 PM	2:30 PM	10 mins
Muhammad Ali Haider	Challenges in Treating Diabetic Retinopathy	2:30 PM	2:40 PM	10 mins
M. Asim Mehboob	Safety and efficacy of combined Silicon oil and Densiron 68 tamponade in management of Retinal detachment	2:40 PM	2:50 PM	10 mins
Ali Zain	Efficacy and safety of PFCL as temporary tamponade in cases of inferior retinal detachment	2:50 PM	3:00 PM	10 mins
Kashif Iqbal	Intra Operative OCT	3:00 PM	3:10 PM	10 mins
Usman Mahmood	Q&A: Surgical Retina Symp 2, Retinal Detachment (1)	3:10 PM	3:30 PM	20 mins

25 Session Code Free Paper 1

Chairman	Atif Mansoor Ahmed	Shalimar B		
Co-Chair	Irfan Qayyum	08-Dec-22	Start	3:30 PM
Moderator	Sidrah Latif	Thursday	End	4:30 PM
Sidrah Latif	Effectiveness of Stepwise surgical training program in Ophthalmic surgery	3:30 PM	3:36 PM	6 mins
Zahid Kamal Siddiqui	Effect of mock drill for management of expulsive hamorrhage on OT staff preparedness	3:36 PM	3:42 PM	6 mins
Saman Ali	What we have learned about micro-pulse diode laser after a follow up of one year	3:42 PM	3:48 PM	6 mins
Imran Manzoor	Effect on visual field parameters with different retinal spot sizes during panretinal photocoagulation in patients with macula sparing RD	3:48 PM	3:54 PM	6 mins
Junaid Afzal	Variety of Eye trauma repair presenting at Mayo Hospital Ophthalmic Emergency	3:54 PM	4:00 PM	6 mins
Zaib-un-Nisa	Conjunctival cystic lesion in 14 years old	4:00 PM	4:06 PM	6 mins
Mahar Safdar Ali Qasim	Effect Of Phacoemulsification Surgery On Central Maclar Thickness	4:06 PM	4:12 PM	6 mins
Adnan Abdul Majeed	Ocular involvement in porphyria cutanea tarda	4:12 PM	4:18 PM	6 mins
Muhammad Arif KPK	Retinoblastoma in underdeveloped world: Dilemma of Risk factors	4:18 PM	4:24 PM	6 mins
Zaib-un-Nisa	Q&A: Free Paper 1	4:24 PM	4:30 PM	6 mins

26 Session Code Refractive IC-1, Basics of Laser/Refractive Surgery

Chairman	Mazhar Ishaq	Shalimar C		
Co-Chair	Tanveer Chaudhary	08-Dec-22	Start	3:30 PM
Moderator	Sadia Humayun	Thursday	End	4:30 PM



Day 1, Thursday 8th December, 2022

Asad Aslam Khan	When to avoid Femto Lasik	3:30 PM	3:39 PM	9 mins
Sadia Humayun	Corneal Tomography made easy	3:39 PM	3:48 PM	9 mins
Sadia Humayun	Parameters for assessment and final calculation	3:48 PM	3:57 PM	9 mins
Mazhar Ishaq	Interpretation & planning of customized ablation	3:57 PM	4:06 PM	9 mins
Zafar Ul Islam	ReLEx SMILE (CLEAR): Step by step for beginners	4:06 PM	4:15 PM	9 mins
Tanveer Chaudhary	Lasik & Dry eye. Why & how?	4:15 PM	4:24 PM	9 mins
Sadia Humayun	Q&A: Refractive IC-1, Basics of Laser/Refractive Surgery	4:24 PM	4:30 PM	6 mins

27 Session Code Teach The Trainer 2

Chairman	Karl Golnik	Emerald A		
Co-Chair	Mian M. Shafique	08-Dec-22	Start	3:30 PM
Moderator	Soufia Farrukh	Thursday	End	4:30 PM
Muhammad Moin	Teaching online	3:30 PM	3:40 PM	10 mins
Zahid Kamal Siddiqui	Teaching residents how to teach	3:40 PM	3:50 PM	10 mins
Karl Golnik	Teaching ICS	3:50 PM	4:00 PM	10 mins
Mian M. Shafique	Introduction to mentoring	4:00 PM	4:10 PM	10 mins
Soufia Farrukh	Paradigm Shift in Undergraduate Medical Education: Need of the Hour	4:10 PM	4:20 PM	10 mins
Soufia Farrukh	Q&A: Teach The Trainer 2	4:20 PM	4:30 PM	10 mins

28 Session Code Pediatrics Symp 1, Pediatric Surgery

Chairman	Muhammad Khalil Rana	Emerald B		
Co-Chair	Sana Jahangir	08-Dec-22	Start	4:00 PM
Moderator	Ashal Pal	Thursday	End	6:00 PM
Khawaja Khalid Shoaib	Clinical presentation of primary congenital glaucoma	4:00 PM	4:10 PM	10 mins
Imran Akram Sahaf	Anterior trabeculectomy in congenital glaucoma	4:10 PM	4:20 PM	10 mins
Ashal Pal	Complex glaucoma	4:20 PM	4:30 PM	10 mins
Zia Muhammad	Glaucoma?	4:30 PM	4:40 PM	10 mins
Seema Qayyum	Congenital cataract-multiple fronts to conquer	4:40 PM	4:50 PM	10 mins
Mian M. Shafique	Consensus Guidelines for Management of Congenital Cataract in Pakistan	4:50 PM	5:00 PM	10 mins
Shabana Chaudhry	Anisocoria-A pitfall to be aware of	5:00 PM	5:10 PM	10 mins
Usman Mahmood, UK	CT in papilloedema	5:10 PM	5:20 PM	10 mins
Ajmal Chaudhary	Biometry & choice of IOL in pediatric cataract surgery	5:20 PM	5:30 PM	10 mins
Saima Amin	Glaucoma after Pediatric cataract surgery	5:30 PM	5:40 PM	10 mins



Day 1, Thursday 8th December, 2022

Ali Alsheikheh	Coexisting Congenital Glaucoma and CHED; a source of confusion	5:40 PM	5:50 PM	10 mins
Ashal Pal	Q&A: Pediatrics Symp 1, Pediatric Surgery	5:50 PM	6:00 PM	10 mins

29 Session Code Oculoplastics Symp 2, Orbit 1

Chairman	Gangadhara Sundar	Emerald C		
Co-Chair	Asad Aslam Khan	08-Dec-22	Start	4:00 PM
Moderator	Fahd Kamal Akhtar	Thursday	End	6:00 PM
Asad Aslam Khan	Management of Intraconal lesions of the Orbit	4:00 PM	4:08 PM	8 mins
Farzad Pakdel	Optic Nerve Sheath Fenestration	4:08 PM	4:16 PM	8 mins
Fahd Kamal Akhtar	Endovascular treatment of proliferative and non-proliferative low flow vascular orbital lesions	4:16 PM	4:24 PM	8 mins
Zahid Kamal Siddiqui	Management of Challenging cases of Thyroid eye Diseases	4:24 PM	4:32 PM	8 mins
Mohammad Idris	Atypical presentation of dermoid cyst and surgical outcome	4:32 PM	4:40 PM	8 mins
Amer Yaqub	Repair of orbital floor fracture	4:40 PM	4:48 PM	8 mins
Yasser Khan	Use of hard palate graft for socket reconstruction	4:48 PM	4:56 PM	8 mins
Imran Akram Sahaf	Sahaf pear shape Orbital Implant	4:56 PM	5:04 PM	8 mins
Gangadhara Sundar	Orbital Compartment Syndrome	5:04 PM	5:12 PM	8 mins
Ashok Grover	3D reconstruction and patient specific implants in management of Orbital fractures and defects	5:12 PM	5:20 PM	8 mins
Imran Akram Sahaf	Anophthalmic socket-Sahaf orbit implant with dermis fat graft	5:20 PM	5:28 PM	8 mins
Gangadhara Sundar	Orbitofacial Fractures : 10 tips	5:28 PM	5:36 PM	8 mins
Fahd Kamal Akhtar	Q&A: Oculoplastics Symp 2, Orbit 1	5:36 PM	6:00 PM	24 mins

30 Session Code Glaucoma Symp 2 (PGA), OCT Basic Principles and Clinical Scenarios

Chairman	Afzal Bodla	Crystal A		
Co-Chair	Karim F. Damji	08-Dec-22	Start	4:00 PM
Moderator	Saadia Farooq	Thursday	End	6:00 PM
Karim F. Damji	OCT Interpretation in Glaucoma	4:00 PM	4:45 PM	45 mins
P S Mahar	Clinical Scenario with OCT interpretation	4:45 PM	5:00 PM	15 mins
Afzal Bodla	Clinical Scenario with OCT interpretation	5:00 PM	5:15 PM	15 mins
Saadia Farooq	Q&A: Glaucoma Symp 2 (PGA), OCT Basic Principles and Clinical Scenarios	5:15 PM	6:00 PM	45 mins



Day 1, Thursday 8th December, 2022

31	Session Code	Surgical Retina Symp 3, Retinal detachment (Scleral Buckling & PNR)			
Chairman	Ashraf Shaarawy	Crystal B			
Co-Chair	Nassim Abreu	08-Dec-22	Start	4:00 PM	
Moderator	Khalid Waheed	Thursday	End	6:00 PM	
Giampaolo Gini	Does Episcleral Surgery still have a role in the age of small Gauge Vitrectomy	4:00 PM	4:10 PM	10 mins	
Tatyana Avanesova	Clinical characteristics, outcomes of retinal detachment repair in young patients.	4:10 PM	4:20 PM	10 mins	
Nesrine Abroug	Diagnosis and management of uveal effusion	4:20 PM	4:30 PM	10 mins	
Ashraf Shaarawy	A study of Chandelier assisted buckling in Rhegmatogenous Retinal Detachment	4:30 PM	4:40 PM	10 mins	
Nur Acar Göçgil	Chandelier assisted scleral buckling -retinopexy with lighted endolaser	4:40 PM	4:50 PM	10 mins	
Mahmoud Alrabiah	Pneumatic Retinopexy Tips and Tricks	4:50 PM	5:00 PM	10 mins	
Babiker Haga Abukheir Abushara	Scleral buckling the forgotten tool in RD	5:00 PM	5:10 PM	10 mins	
Jorge Rocha	New Insights in PVR	5:10 PM	5:20 PM	10 mins	
Khalid Waheed	Q&A: Surgical Retina Symp 3, Retinal detachment (Scleral Buckling & PNR)	5:20 PM	6:00 PM	40 mins	

32	Session Code	Research IC 2 - How to Write A Scientific Paper			
Chairman	Nadeem Hafeez Butt	Shalimar B			
Co-Chair	Kashif Jahangir	08-Dec-22	Start	5:00 PM	
Moderator	Muhammad Hassaan Ali	Thursday	End	6:00 PM	
Muhammad Hassaan Ali	Basic components of a research paper	5:00 PM	5:09 PM	9 mins	
Muhammad Hassaan Ali	How to Write Introduction and Methodology	5:09 PM	5:18 PM	9 mins	
Muhammad Hassaan Ali	Interpreting results	5:18 PM	5:27 PM	9 mins	
Muhammad Hassaan Ali	Writing effective discussion	5:27 PM	5:36 PM	9 mins	
Muhammad Hassaan Ali	Electronic reference management softwares:	5:36 PM	5:45 PM	9 mins	
Muhammad Hassaan Ali	Target journals for publication	5:45 PM	5:54 PM	9 mins	
Muhammad Hassaan Ali	Q&A: Research IC 2 - How to Write A Scientific Paper	5:54 PM	6:00 PM	6 mins	

33	Session Code	Medical Retina IC 1, Uveitis			
Chairman	Mohammed Al-Amri	Shalimar C			
Co-Chair	Eiman Mahmoud Abd El-Latif Dessouki	08-Dec-22	Start	5:00 PM	
Moderator	Muhammad Amjad	Thursday	End	6:00 PM	



Day 1, Thursday 8th December, 2022

Eiman Mahmoud	Retinal vasculitis made easy	5:00 PM	5:12 PM	12 mins
Abd El-Latif Dessouki				
Eiman Mahmoud Abd El-Latif Dessouki	Basic uveitis labs	5:12 PM	5:24 PM	12 mins
Muhammad Amjad	Vogt Koyanagi Harada Disease Diagnosis	5:24 PM	5:36 PM	12 mins
Muhammad Amjad	Vogt Koyanagi Harada Disease Treatment	5:36 PM	5:48 PM	12 mins
Muhammad Amjad	Q&A: Medical Retina IC 1, Uveitis	5:48 PM	6:00 PM	12 mins

34 Session Code Teach The Trainer 3

Chairman	Nadeem Hafeez Butt	Emerald A		
Co-Chair	Soufia Farrukh	08-Dec-22	Start	5:00 PM
Moderator	Shakaib Anwar	Thursday	End	6:00 PM
Nadeem Hafeez Butt	Principles of assessment	5:00 PM	5:09 PM	9 mins
Shakaib Anwar	Observed Clinical DOPS	5:09 PM	5:18 PM	9 mins
Karl Golnik	Observed Clinical OCEX	5:18 PM	5:27 PM	9 mins
Karl Golnik	Surgical Rubrics	5:27 PM	5:36 PM	9 mins
Soufia Farrukh	Virtual Assessments: A guide for Medical Faculty	5:36 PM	5:45 PM	9 mins
Mian M. Shafique	Quality Assurance Team	5:45 PM	5:54 PM	9 mins
Shakaib Anwar	Q&A: Teach The Trainer 3	5:54 PM	6:00 PM	6 mins

35 Session Code Cataract IC, Innovations & Advancements in Haptic Fixation

Chairman	Shalimar B			
Co-Chair	09-Dec-22	Start	9:00 AM	
Moderator	Zia Ul Mazhary	Friday	End	10:00 AM
Zia Ul Mazhary	Introduction to scleral fixation IOL	9:00 AM	9:15 AM	15 mins
Zia Ul Mazhary	Scleral fixation of rigid IOL	9:15 AM	9:30 AM	15 mins
Zia Ul Mazhary	Scleral fixation of foldable IOL	9:30 AM	9:45 AM	15 mins
Zia Ul Mazhary	Q&A: Cataract IC, Innovations & Advancements in Haptic Fixation	9:45 AM	10:00 AM	15 mins

36 Session Code All about Lasers (WIOP)

Chairman	Huma Kayani	Shalimar C		
Co-Chair	Munira Shakir	09-Dec-22	Start	9:00 AM
Moderator	Tehmina Jahangir	Friday	End	10:00 AM
Tehmina Jahangir	Overview of laser and applications in Ophthalmology	9:00 AM	9:10 AM	10 mins
Munira Shakir	Refractive lasers and its applications	9:10 AM	9:26 AM	16 mins



Day 2, Friday 9th December, 2022

Mariya Nazish Memon	YAG laser and its application	9:26 AM	9:38 AM	12 mins
Irum Raza	Argon /diode laser and its application	9:38 AM	9:48 AM	10 mins
Tehmina Jahangir	Q&A: All about Lasers (WIOP)	9:48 AM	10:00 AM	12 mins

37 Session Code Leadership Development Program – 1

Chairman	Karim Baksh	Emerald A		
Co-Chair	Tariq Khan Marwat	09-Dec-22	Start	9:00 AM
Moderator	Nadeem Hafeez Butt	Friday	End	10:00 AM
Hamid Mahmood Butt	Introductions	9:00 AM	9:12 AM	12 mins
Nadeem Hafeez Butt	Sponsorship Deal	9:12 AM	9:24 AM	12 mins
Tariq Khan Marwat	Negotiation 101	9:24 AM	9:36 AM	12 mins
Muhammad Moin	SWOT Analysis Activity	9:36 AM	9:48 AM	12 mins
Nadeem Hafeez Butt	Q&A: Leadership Development Program – 1	9:48 AM	10:00 AM	12 mins

38 Session Code Medical Retina Symp 1, Diabetic Retinopathy and Age Related Macular

Chairman	Jorge Rocha	Emerald B		
Co-Chair	Ijaz Sheikh	09-Dec-22	Start	9:00 AM
Moderator	Chaudhary Javed Iqbal	Friday	End	10:30 AM
Jorge Rocha	Update in DME treatment	9:00 AM	9:12 AM	12 mins
Mohammed Al-Amri	Role of fluid in DME	9:12 AM	9:24 AM	12 mins
Ambreen Gul	Safety and clinical efficacy of suprachoroidal triamcinolone in refractory diabetic macular edema	9:24 AM	9:36 AM	12 mins
Shahzad Shafquat	Role of Brolucizumab in wet AMD and DME	9:36 AM	9:48 AM	12 mins
Mohammed Al-Amri	Role of Anti VEGF in Management of diabetic retinopathy	9:48 AM	10:00 AM	12 mins
Lezheng Wu	Anti-inflammation and Age-related Macular Degeneration (AMD)	10:00 AM	10:12 AM	12 mins
Chaudhary Javed Iqbal	Q&A: Medical Retina Symp 1, Diabetic Retinopathy and Age Related Macular Degeneration	10:12 AM	10:30 AM	18 mins

39 Session Code Oculoplastics Symp 3, Eyelid 2

Chairman	Yasser Khan	Emerald C		
Co-Chair	Mahmood Saeed	09-Dec-22	Start	9:00 AM
Moderator	M Salman Hamza	Friday	End	10:30 AM
Zubair Saleem	Surgical Excision with median forehead flap for basal cell carcinoma involving central face	9:00 AM	9:08 AM	8 mins



Day 2, Friday 9th December, 2022

Mohammad Idris	Outcome of V-Y plasty for Blepharophimosis	9:08 AM	9:16 AM	8 mins
M Salman Hamza	Management of Cicatricial ectropion	9:16 AM	9:24 AM	8 mins
Muhammad Sharjeel	Botox v/s surgery for Blepharospasm	9:24 AM	9:32 AM	8 mins
Syeda Aisha Bokhari	Surgical Management of Marcus Gunn Jaw winking Synkinesis	9:32 AM	9:40 AM	8 mins
Yasser Khan	Ptosis Repair through small incision	9:40 AM	9:48 AM	8 mins
Ashok Grover	Tackling Blepharophimosis syndrome	9:48 AM	9:56 AM	8 mins
Ashok Grover	Management of periocular deformities due to trauma	9:56 AM	10:04 AM	8 mins
Mahmood Saeed	Parotid Conjunctival link surgery for severe dry eyes	10:04 AM	10:12 AM	8 mins
Rizwan Rasheed	Surgical management of lid tumour	10:12 AM	10:20 AM	8 mins
M Salman Hamza	Q&A: Oculoplastics Symp 3, Eyelid 2	10:20 AM	10:30 AM	10 mins

40 Session Code Cataract Symp 1, Advanced IOL Technology & Premium IOL implants

Chairman	Igor Solomatin, MD	Crystal A		
Co-Chair	Saeed Iqbal	09-Dec-22	Start	9:00 AM
Moderator	Majeed Malik	Friday	End	10:30 AM
Saeed Iqbal	IOL power calculation in normal & post-Lasik eyes	9:00 AM	9:08 AM	8 mins
Mazhar Ishaq	FLACS & Premium IOL – The complete solution	9:08 AM	9:16 AM	8 mins
Igor Solomatin, MD	IOL evolution & achievements of Premium IOLs (Cataract surgery turning into Refractive surgery)	9:16 AM	9:24 AM	8 mins
Aamir Asrar	Management of Astigmatism & FLACS	9:24 AM	9:32 AM	8 mins
Amer Awan	Outcome of Verion-guided Phaco with Toric & Trifocal IOLs – 04 year results	9:32 AM	9:40 AM	8 mins
Muhammad Ali Haider	Tips for success with Trifocal IOLs	9:40 AM	9:48 AM	8 mins
Khalid Iqbal Talpur	Present and Future of Refractive IOLs	9:48 AM	9:56 AM	8 mins
Azam Ali	Experience with new monofocal IOLs	9:56 AM	10:04 AM	8 mins
Majeed Malik	IOL removal & replacement	10:04 AM	10:12 AM	8 mins
Zia Ul Mazhary	Understanding EDOF & its role in attaining multifocality in premium IOL practice	10:12 AM	10:20 AM	8 mins
Majeed Malik	Q&A: Cataract Symp 1, Advanced IOL Technology & Premium IOL implants.	10:20 AM	10:30 AM	10 mins

41 Session Code Surgical Retina Symp 4, PVR

Chairman	Remzi Avci	Crystal B		
Co-Chair	Tural Galbinur	09-Dec-22	Start	9:00 AM
Moderator	Nadeem Qureshi	Friday	End	10:30 AM
Mahmoud M Soliman	On the Management of PVR	9:00 AM	9:11 AM	11 mins



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Nur Acar Göçgil	The surgical management of PVR-Tips and pearls	9:11 AM	9:22 AM	11 mins
Hussain A. Khaqan	PVR Peel-The Solution	9:22 AM	9:33 AM	11 mins
Tural Galbinur	Management of Recurrent Retinal Detachment	9:33 AM	9:44 AM	11 mins
Mohamed A. Tawfik	Retinotomy OR retinectomy	9:44 AM	9:55 AM	11 mins
Giampaolo Gini	Pressure Dependent Optic Neuropathy and Vitreo-Retinal Surgery	9:55 AM	10:06 AM	11 mins
Remzi Avci	Treatment of complex retinal detachments	10:06 AM	10:17 AM	11 mins
Nadeem Qureshi	Q&A: Surgical Retina Symp 4, PVR	10:17 AM	10:30 AM	13 mins

42 Session Code Oculoplastics IC, Ocular Surface Diseases

Chairman	Tayyab Afghani	Shalimar B		
Co-Chair	Shahid Tarar Col.	09-Dec-22	Start	10:30 AM
Moderator	Syeda Aisha Bokhari	Friday	End	11:30 AM
Imran Akram Sahaf	Management of ocular manifestation in Shabir Syndrome	10:30 AM	10:40 AM	10 mins
Ibrar Hussain	Ocular Surface Squamous Neoplasia	10:40 AM	10:50 AM	10 mins
Tayyab Afghani	Adjuvant therapies for cancer of the eye-Review	10:50 AM	11:00 AM	10 mins
Shabana Chaudhry	Ocular Surface disorder in Children- A myth or a reality	11:00 AM	11:10 AM	10 mins
Shahid Tarar Col.	Mitomycin in Ocular Surface Disorder	11:10 AM	11:20 AM	10 mins
Syeda Aisha Bokhari	Q&A: Oculoplastics IC, Ocular Surface Diseases	11:20 AM	11:30 AM	10 mins

43 Session Code Pediatrics IC 2, Myth buster

Chairman	Munira Shakir	Shalimar C		
Co-Chair	Ayesha Sarfaraz	09-Dec-22	Start	10:30 AM
Moderator	Andaleeb Zahra	Friday	End	11:30 AM
Andaleeb Zahra	Retinoblastoma	10:30 AM	10:45 AM	15 mins
Ayesha Sarfaraz	Squint	10:45 AM	11:00 AM	15 mins
Madiha Nazly	Low Vision Assessment	11:00 AM	11:15 AM	15 mins
Andaleeb Zahra	Q&A: Pediatrics IC 2, Myth buster	11:15 AM	11:30 AM	15 mins

44 Session Code Leadership Development Program – 2

Chairman	Hamid Mahmood Butt	Emerald A		
Co-Chair	Tariq Khan Marwat	09-Dec-22	Start	10:30 AM
Moderator	Muhammad Moin	Friday	End	11:30 AM
Karl Golnik	Communicating with Confidence	10:30 AM	10:38 AM	8 mins
Muhammad Moin	Art of Influence	10:38 AM	10:46 AM	8 mins



Day 2, Friday 9th December, 2022

Hussain A. Khaqan	Work Life Balance	10:46 AM	10:54 AM	8 mins
Muhammad Moin	Presentations by Participants	10:54 AM	11:02 AM	8 mins
Karl Golnik	Presentations by Participants	11:02 AM	11:10 AM	8 mins
Hamid Mahmood Butt	Presentations by Participants	11:10 AM	11:18 AM	8 mins
Muhammad Moin	Q&A: Leadership Development Program – 2	11:18 AM	11:30 AM	12 mins

45 Session Code Medical Retina Symp 2, Diagnostic Ophthalmology

Chairman	Ayman Madanat	Emerald B		
Co-Chair	Amila Alikadic Husovic	09-Dec-22	Start	11:00 AM
Moderator	Mohammed Al-Amri	Friday	End	12:30 PM
Ayman Madanat	Polypoidal Choroidal Vasculopathy, Imaging & Diagnosis	11:00 AM	11:12 AM	12 mins
Ameen Marashi	Structural Enface OCT - the lost art	11:12 AM	11:24 AM	12 mins
José Gerardo García Aguirre	Visualization and grading of vitreous opacities using dynamic ultra-widefield infrared SLO	11:24 AM	11:36 AM	12 mins
Susana Teixeira	The role of fluorescein angiography in ROP	11:36 AM	11:48 AM	12 mins
Nesrine Abroug	Multimodal imaging findings and management of vitreoretinal lymphoma	11:48 AM	12:00 PM	12 mins
Aamir Arain	Quantifying retinal vessel density in posterior uveitis using spectral domain optical coherence tomography angiography	12:00 PM	12:12 PM	12 mins
Mohammed Al-Amri	Q&A: Medical Retina Symp 2, Diagnostic Ophthalmology	12:12 PM	12:30 PM	18 mins

46 Session Code Cornea Symp 3, Lamellar Keratoplasty

Chairman	Sami Alrabiah	Emerald C		
Co-Chair	Abdul Hye	09-Dec-22	Start	11:00 AM
Moderator	Mahfooz Hussain	Friday	End	12:30 PM
Abdul Hye	Femto Assisted Dalk	11:00 AM	11:10 AM	10 mins
Khalid Mahmood	DMEK	11:10 AM	11:20 AM	10 mins
Khalid Mahmood	Complex Keratoplasty	11:20 AM	11:30 AM	10 mins
Sami Alrabiah	Exact Corneal Centration For Corneal inlays	11:30 AM	11:40 AM	10 mins
Merieme Harouch	The art of corneal remodeling in Keratoconus	11:40 AM	11:50 AM	10 mins
M Numan Sarfraz	Refractive surprise in triple DMEK	11:50 AM	12:00 PM	10 mins
Mahfooz Hussain	Corneal centration in keratoplasty	12:00 PM	12:10 PM	10 mins
Shahid A Mirza	Tips/Steps for Successful karatoplasty	12:10 PM	12:20 PM	10 mins
Mahfooz Hussain	Q&A: Cornea Symp 3, Lamellar Keratoplasty	12:20 PM	12:30 PM	10 mins



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47 Session Code Glaucoma Symp 3, Surgery in Glaucoma - Trabeculectomy

Chairman	P S Mahar	Crystal A			
Co-Chair	Ali Alsheikheh	09-Dec-22	Start	11:00 AM	
Moderator	Syed Imtiaz Ali	Friday	End	12:30 PM	
Nadeem Hafeez Butt	How to Perform Trabeculectomy	11:00 AM	11:11 AM	11 mins	
Noreen Iftikhar Bano	Early Post op Complications in Cases of Trabeculectomy and Phaco-trabeculectomy	11:11 AM	11:22 AM	11 mins	
Khalid Mahmood	Trabeculectomy with Modified Extended Subtenon Application of MMC in POAG	11:22 AM	11:33 AM	11 mins	
P S Mahar	Causes & Management of Failed Drainage Bleb	11:33 AM	11:44 AM	11 mins	
Syed Imtiaz Ali	Wound Modulation in Glaucoma Surgery	11:44 AM	11:55 AM	11 mins	
Ali Alsheikheh	Is it Finally Time for Trabeculectomy to Retire	11:55 AM	12:06 PM	11 mins	
Tarek Mamoun	Late postoperative complications of glaucoma filtering surgery	12:06 PM	12:17 PM	11 mins	
Syed Imtiaz Ali	Q&A: Glaucoma Symp 3, Surgery in Glaucoma - Trabeculectomy	12:17 PM	12:30 PM	13 mins	

48 Session Code Surgical Retina Symp 5, Macular Surgery (1)

Chairman	Abdullah Alqahtani	Crystal B			
Co-Chair	Usman Mahmood	09-Dec-22	Start	11:00 AM	
Moderator	Syed Fawad Rizvi	Friday	End	12:30 PM	
Muhammad Samir Alhadad	Innovation in treatment myopic macular hole retinal detachment	11:00 AM	11:13 AM	13 mins	
Nassim Abreu	ART in the management of traumatic macular hole	11:13 AM	11:26 AM	13 mins	
Usman Mahmood	Vitreo macular traction and management	11:26 AM	11:39 AM	13 mins	
Hussain A. Khaqan	Optic Disc Pit and Secondary Macular Hole	11:39 AM	11:52 AM	13 mins	
Ahmed Roshdy Alagorie	Management of Submacular Hemorrhage	11:52 AM	12:05 PM	13 mins	
Remzi Avci	The Influence of Crescent-Shaped Selective Internal Limiting Membrane Staining on Vital Dye Toxicity in Temporal Inverted Flap Technique	12:05 PM	12:18 PM	13 mins	
Syed Fawad Rizvi	Q&A: Surgical Retina Symp 5, Macular Surgery (1)	12:18 PM	12:30 PM	12 mins	

49 Session Code Free Paper 2

Chairman	Ashok Kumar Nasrani	Shalimar B			
Co-Chair	Najam Iqbal	09-Dec-22	Start	11:30 AM	
Moderator	Saba Alkhairy	Friday	End	12:30 PM	



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Rabia Chaudhary	A Retrospective Study on final Visual Outcome of Ocular Trauma in Department of Pediatric Ophthalmology in a Tertiary Care Hospital	11:30 AM	11:36 AM	6 mins
Saba Alkhairy	Blepharophimosis: Surgery simplified	11:36 AM	11:42 AM	6 mins
M. Asim Mehboob	Elephant in the room	11:42 AM	11:48 AM	6 mins
Sidra Malik	Microsporidial Keratitis - An Emergent Pathogen in the wake of recent Flood-disaster in Pakistan	11:48 AM	11:54 AM	6 mins
Adnan Ahmad	Diabetic Macular Edema	11:54 AM	12:00 PM	6 mins
Adnan Ahmad	Evaluating the therapeutic response of intra-vitreous moxifloxacin in acute postoperative (cataract) endophthalmitis	12:00 PM	12:06 PM	6 mins
Ashok Kumar Nasrani	Mutational analysis of CYP1B1 (rs56010818) variant in primary open angle glaucoma (POAG) affected patients of Pakistan	12:06 PM	12:12 PM	6 mins
Xi Chen	Integrated Bioinformatics Analysis Combined with Machine Learning Reveal Commonality in Mechanisms of Myopia	12:12 PM	12:18 PM	6 mins
Lixue Liu	Deep Fundus: A flow cytometry-like image quality classifier for boosting the whole lifecycle of medical artificial intelligence	12:18 PM	12:24 PM	6 mins
Saba Alkhairy	Q&A: Free Paper 2	12:24 PM	12:30 PM	6 mins

50 Session Code Community Ophthalmology IC, Disability-Inclusive Health System

Chairman	Intizar Hussain Butt	Shalimar C		
Co-Chair	Hammad Ayub	09-Dec-22	Start	11:30 AM
Moderator	Sara Ikram	Friday	End	12:30 PM
Sara Ikram	Developing disability-inclusive health system under WHO guideline	11:30 AM	11:50 AM	20 mins
Zahid Kamal Siddiqui	Etiquettes and clinical techniques in managing persons with disability	11:50 AM	12:20 PM	30 mins
Sara Ikram	Q&A: Community Ophthalmology IC, Disability-Inclusive Health System	12:20 PM	12:30 PM	10 mins

51 Session Code Leadership Development Program – 3

Chairman	Muhammad Daud Khan	Emerald A		
Co-Chair	Muhammad Moin	09-Dec-22	Start	11:30 AM
Moderator	Mian M. Shafique	Friday	End	12:30 PM



Day 2, Friday 9th December, 2022

Mian M. Shafique	Managing Meetings Effectively	11:30 AM	11:42 AM	12 mins
Karl Golnik	International Networking	11:42 AM	11:54 AM	12 mins
Hamid Mahmood Butt	Advocacy	11:54 AM	12:06 PM	12 mins
Muhammad Moin	Fish Bone Analysis Activity	12:06 PM	12:18 PM	12 mins
Mian M. Shafique	Q&A: Leadership Development Program – 3	12:18 PM	12:30 PM	12 mins

52 Session Code Ethics IC, Best Ethical Practice

Chairman	Shahid Wahab	Shalimar B		
Co-Chair	Sanauallah Jan	09-Dec-22	Start	2:00 PM
Moderator	Tayyaba Gul Malik	Friday	End	3:00 PM
Tayyaba Gul Malik	Islamic perspective of medical ethics	2:00 PM	2:15 PM	15 mins
Zia Ul Islam	Ethics in patient care	2:15 PM	2:30 PM	15 mins
Sanauallah Jan	Ethics in research	2:30 PM	2:45 PM	15 mins
Tayyaba Gul Malik	Q&A: Ethics IC, Best Ethical Practice	2:45 PM	3:00 PM	15 mins

53 Session Code Cataract IC-1, Phaco Basics

Chairman	Nadeem Riaz	Shalimar C		
Co-Chair	Ahmed M. Osman	09-Dec-22	Start	2:00 PM
Moderator	Zia Ul Mazhary	Friday	End	3:00 PM
Ahmed M. Osman	Dry eye & cataract surgery	2:00 PM	2:08 PM	8 mins
Majeed Malik	Phaco wound construction & its closure - 10 tips	2:08 PM	2:16 PM	8 mins
Nadeem Riaz	Capsulorrhexis & Hydrodissection	2:16 PM	2:24 PM	8 mins
Ejaz Latif	Handling the Nucleus	2:24 PM	2:32 PM	8 mins
Zia Ul Mazhary	IOL implantation Techniques	2:32 PM	2:40 PM	8 mins
Shahid A Mirza	Intumescent pseudophakic implant	2:40 PM	2:48 PM	8 mins
Zia Ul Mazhary	Q&A: Cataract IC-1, Phaco Basics	2:48 PM	3:00 PM	12 mins

54 Session Code Glaucoma IC 1, Visual Fields Interpretation in Glaucoma

Chairman	Emerald A			
Co-Chair	09-Dec-22	Start	2:00 PM	
Moderator	Umair Qidwai	Friday	End	3:00 PM
Karim F. Damji	Visual Fields Interpretation in Glaucoma	2:00 PM	2:50 PM	50 mins
Umair Qidwai	Q&A: Glaucoma IC 1, Visual Fields Interpretation in Glaucoma	2:50 PM	3:00 PM	10 mins



Day 2, Friday 9th December, 2022

55	Session Code	Pediatrics Symp 2, Mystery of Strabismus			
Chairman	Qamar I. Lodhi	Emerald B			
Co-Chair	Seema Qayyum	09-Dec-22	Start	2:00 PM	
Moderator	Ajmal Chaudhary	Friday	End	3:30 PM	
Seema Qayyum	Ocular muscle actions -made easy	2:00 PM	2:08 PM	8 mins	
Mian M. Shafique	Importance of cover test in diagnosing the type of strabismus	2:08 PM	2:16 PM	8 mins	
Nazli Gul	How squint works in my hands	2:16 PM	2:24 PM	8 mins	
Usman Mahmood, UK	Congenital Nystagmus in session	2:24 PM	2:32 PM	8 mins	
Shabana Chaudhry	Targeted dose calculation in re-do squint surgeries	2:32 PM	2:40 PM	8 mins	
Irfan Qayyum	Usefulness of Hang-Back Technique versus conventional Recession in Squint Surgery	2:40 PM	2:48 PM	8 mins	
Imran Akram Sahaf	Management of difficult squint	2:48 PM	2:56 PM	8 mins	
Zafar Iqbal	Myopia, The Growing Eye Epidemic and its Prevention	2:56 PM	3:04 PM	8 mins	
Ajmal Chaudhary	LASIK in Pediatric age group with Anisometropia	3:04 PM	3:12 PM	8 mins	
Khawaja Khalid Shoab	Management of inferior oblique overaction	3:12 PM	3:20 PM	8 mins	
Ajmal Chaudhary	Q&A: Pediatrics Symp 2, Mystery of Strabismus	3:20 PM	3:30 PM	10 mins	

56	Session Code	Oculoplastics Symp 4, Nasolacrimal Duct			
Chairman	Amer Yaqub	Emerald C			
Co-Chair	Farzad Pakdel	09-Dec-22	Start	2:00 PM	
Moderator	M Salman Hamza	Friday	End	3:30 PM	
Imran Aram Sahaf	External DCR- Sahaf method	2:00 PM	2:08 PM	8 mins	
Khawaja Khalid Shoab	Endoscopic DCR	2:08 PM	2:16 PM	8 mins	
Muhammad Moin	Transcanalicular endolaser endoscopic DCR with intubation	2:16 PM	2:24 PM	8 mins	
Farzad Pakdel	Early Endoscopic DCR in acute Dacryocystitis: Time for shift	2:24 PM	2:32 PM	8 mins	
Gangadhara Sundar	Dacryoendoscopy and Endoluminal Lacrimal Duct Recanalization	2:32 PM	2:40 PM	8 mins	
Amer Yaqub	Management of punctal stenosis	2:40 PM	2:48 PM	8 mins	
M Salman Hamza	Causes and management of failed DCR	2:48 PM	2:56 PM	8 mins	
Syeda Aisha Bokhari	How to deal with severe acute on chronic Dacryocystitis	2:56 PM	3:04 PM	8 mins	
Zahid Kamal Siddiqui	Canaliculitis	3:04 PM	3:12 PM	8 mins	
Fariha Sher Wali	Canalicular Tear Repair	3:12 PM	3:20 PM	8 mins	
M Salman Hamza	Q&A: Oculoplastics Symp 4, Nasolacrimal Duct	3:20 PM	3:30 PM	10 mins	



Day 2, Friday 9th December, 2022

Session Code	57	Refractive Symp-1, Handling difficult cases & Complications			
Chairman	Sami Alrabiah	Crystal A			
Co-Chair	Miguel Rechichi	09-Dec-22	Start	2:00 PM	
Moderator	Sharif Hashmani	Friday	End	3:30 PM	
Sadia Humayun	Epithelial sloughing during docking	2:00 PM	2:07 PM	7 mins	
Sami Alrabiah	Wave front guided treatment Topology v/s Tomography guided	.2:07 PM	2:14 PM	7 mins	
Sami Alrabiah	PRK Post-Lasik	2:14 PM	2:21 PM	7 mins	
Miguel Rechichi	Complex cases in Laser refractive surgery	2:21 PM	2:28 PM	7 mins	
Aamir Asra	Refractive surgery-difficult cases	2:28 PM	2:35 PM	7 mins	
Sharif Hashmani	Beyond Spheres & Cylinders	2:35 PM	2:42 PM	7 mins	
Sharmeen Akram	PTK platform for refractive PRK	2:42 PM	2:49 PM	7 mins	
Igor Solomatin, MD	The small epithelial problems of a large refractive surgery	2:49 PM	2:56 PM	7 mins	
Saeed Iqbal	Refractive outcomes of Contoura Lasik	2:56 PM	3:03 PM	7 mins	
Majeed Malik	Excimer Laser in hypermetropic patients: Selection criteria & outcomes	3:03 PM	3:10 PM	7 mins	
Zia Ul Mazhar	Pros & Cons of FemtoLasik	3:10 PM	3:17 PM	7 mins	
Saeed Niazi	Managing nightmares in refractive surgery	3:17 PM	3:24 PM	7 mins	
Sharif Hashmani	Q&A: Refractive Symp-1, Handling difficult cases & Complications	3:24 PM	3:30 PM	6 mins	

58	Session Code	Surgical Retina Symp 6, Diabetic Vitrectomy (1)			
Chairman	Tarek Mamoun	Crystal B			
Co-Chair	Remzi Avci	09-Dec-22	Start	2:00 PM	
Moderator	Mazhar Ishaq	Friday	End	3:30 PM	
Ashraf Shaarawy	Evaluation of ILM peeling during vitrectomy in vdiabetic macular edema	2:00 PM	2:09 PM	9 mins	
Mohamed Fehmy Nafaa	PPV for Diabetic Macular Oedema	2:09 PM	2:18 PM	9 mins	
Muhammad Samir Alhadad	Diabetic macular traction, all weapons	2:18 PM	2:27 PM	9 mins	
Nassim Abreu	Peripheral hyaloidectomy for "outside-in" approach to TRD	2:27 PM	2:36 PM	9 mins	
Saad Waheeb	Manual surgery for Diabetic membrane (advantages of the new cutters)	2:36 PM	2:45 PM	9 mins	
Ashraf Shaarawy	Bimanual surgery in diabetic vitrectomy	2:45 PM	2:54 PM	9 mins	
Tarek Mamoun	Surgery for advanced diabetic eye disease	2:54 PM	3:03 PM	9 mins	
Hussain A. Khaqan	Segmentation in Tractional Retinal Detachment and ART	3:03 PM	3:12 PM	9 mins	



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Mohamed Fehmy Nafaa	Chandelier Light in Diabetic Retinopathy Surgery	3:12 PM	3:21 PM	9 mins
Mazhar Ishaq	Q&A: Surgical Retina Symp 6, Diabetic Vitrectomy (1)	3:21 PM	3:30 PM	9 mins

59 Session Code Glaucoma IC 2, Phacoemulsification in small eyes

Chairman	Shalimar B			
Co-Chair	09-Dec-22	Start	3:30 PM	
Moderator	Rashid Zia	Friday	End	4:30 PM
Rashid Zia	Phacoemulsification in small eyes, Dr. Rashid Zia (BPOS)	3:30 PM	4:20 PM	50 mins
Rashid Zia	Q&A: Glaucoma IC 2, Phacoemulsification in small eyes	4:20 PM	4:30 PM	10 mins

60 Session Code Ocular Surface IC 1 Meibomian Gland Dysfunction

Chairman	Shalimar C			
Co-Chair	09-Dec-22	Start	3:30 PM	
Moderator	Sameera Irfan	Friday	End	4:30 PM
Sameera Irfan	Ocular Surface IC 1 Meibomian Gland Dysfunction	3:30 PM	4:30 PM	60 mins

61 Session Code Medical Retina, Panel Discussion

Chairman	Emerald A			
Co-Chair	09-Dec-22	Start	3:30 PM	
Moderator	Ameen Marashi	Friday	End	4:30 PM
Shakaib Anwar	Medical Retina, Panel Discussion	3:30 PM	4:30 PM	60 mins
Shahzad Shafquat	Medical Retina, Panel Discussion	3:30 PM	4:30 PM	60 mins
Jorge Rocha	Medical Retina, Panel Discussion	3:30 PM	4:30 PM	60 mins
Mohammed Al-Amri	Medical Retina, Panel Discussion	3:30 PM	4:30 PM	60 mins
Lezheng Wu	Medical Retina, Panel Discussion	3:30 PM	4:30 PM	60 mins
Tarek Mamoun	Medical Retina, Panel Discussion	3:30 PM	4:30 PM	60 mins
Mario Saravia	Medical Retina, Panel Discussion	3:30 PM	4:30 PM	60 mins
Nassim Abreu	Medical Retina, Panel Discussion	3:30 PM	4:30 PM	60 mins
Tural Galbinur	Medical Retina, Panel Discussion	3:30 PM	4:30 PM	60 mins
Manzar Saeed	Medical Retina, Panel Discussion	3:30 PM	4:30 PM	60 mins
Usman Mahmood	Medical Retina, Panel Discussion	3:30 PM	4:30 PM	60 mins
Chaudhary Javed Iqbal	Medical Retina, Panel Discussion	3:30 PM	4:30 PM	60 mins
Kashif Iqbal	Medical Retina, Panel Discussion	3:30 PM	4:30 PM	60 mins
Sanaullah Jan	Medical Retina, Panel Discussion	3:30 PM	4:30 PM	60 mins
Mir Ali Shah	Medical Retina, Panel Discussion	3:30 PM	4:30 PM	60 mins
Nadeem Qureshi	Medical Retina, Panel Discussion	3:30 PM	4:30 PM	60 mins
Amila Alikadic Husovic	Medical Retina, Panel Discussion	3:30 PM	4:30 PM	60 mins



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Babiker Haga Abukheir Abushara	Medical Retina, Panel Discussion	3:30 PM	4:30 PM	60 mins
Mohamed A. Tawfik	Medical Retina, Panel Discussion	3:30 PM	4:30 PM	60 mins
Waqar Muzaffar	Medical Retina, Panel Discussion	3:30 PM	4:30 PM	60 mins

62	Session Code	Medical Retina Symp 3, Lasers and Steroid Therapy			
Chairman	Remzi Avci	Emerald B			
Co-Chair	Tengku Ain Kamalden	09-Dec-22	Start	4:00 PM	
Moderator	Irfan Karamat	Friday	End	6:00 PM	
José Gerardo García Aguirre	Effects on the ocular surface of 5% vs 1% povidone iodine for intravitreal injections	4:00 PM	4:11 PM	11 mins	
Remzi Avci	Current medical treatment in diabetic retinopathy, What is the gold standard; Laser or anti VEGF?	4:11 PM	4:22 PM	11 mins	
Muhammad Ali Haider	Role of Suprachoroidal triamcinolone acetonide in refractory diabetic macular edema	4:22 PM	4:33 PM	11 mins	
Rehman Siddiqui	Machine learning in Diabetic Retinopathy Screening	4:33 PM	4:44 PM	11 mins	
Mariam Shamim	Subthreshold laser for CSCR: A non-damaging treatment option	4:44 PM	4:55 PM	11 mins	
Rana Fahad	Management of Chronic CSR with laser	4:55 PM	5:06 PM	11 mins	
Irfan Karamat	AK Kit For Supra-Choroidal Injection	5:06 PM	5:17 PM	11 mins	
Muhammad Hasnain	Safety profile of new technique of Suprachoroidal injection of Triamcinolone without cannula sleeve	5:17 PM	5:28 PM	11 mins	
Ameen Marashi	New applications for Microsecond laser	5:28 PM	5:39 PM	11 mins	
Abdul Hannan	Suprachoroidal Injection Review	5:39 PM	5:50 PM	11 mins	
Irfan Karamat	Q&A: Medical Retina Symp 3, Lasers and Steroid Therapy	5:50 PM	6:00 PM	10 mins	

63	Session Code	Pediatric Symp 3, Retinopathy of Prematurity			
Chairman	Ahmed Roshdy Alagorie	Emerald C			
Co-Chair	Khurram Azam Mirza	09-Dec-22	Start	4:00 PM	
Moderator	Lubna Siddiq Mian	Friday	End	6:00 PM	
Susana Teixeira	Tips and tricks in ROP surgery & Surgical videos - Stage IV and V surgeries	4:00 PM	4:10 PM	10 mins	
Fatima Mehmood	Outcome of screening of ROP	4:10 PM	4:20 PM	10 mins	
Muhammad Amjad	ROP- Surgical management	4:20 PM	4:30 PM	10 mins	
Muhammad Moin	ROP National Taskforce; opportunities ahead	4:30 PM	4:40 PM	10 mins	
Asma Mushtaq	ROP- A dilemma in developing countries	4:40 PM	4:50 PM	10 mins	



Day 2, Friday 9th December, 2022

Khurram Chohan	Laser application in ROP	4:50 PM	5:00 PM	10 mins
Khurram Azam Mirza	Anti VEGF in ROP	5:00 PM	5:10 PM	10 mins
Saima Amin	Update on ICROP 3 classification of ROP	5:10 PM	5:20 PM	10 mins
Lubna Siddiq Mian	Who did actually get worrisome ROP? Birth Weight Characteristics	5:20 PM	5:30 PM	10 mins
Arefa Farooq	Anti VEGF in ROP management	5:30 PM	5:40 PM	10 mins
Arooj Amjad	Situational Analysis of ROP Screening Centers in Pakistan	5:40 PM	5:50 PM	10 mins
Lubna Siddiq Mian	Q&A: Pediatric Symp 3, Retinopathy of Prematurity	5:50 PM	6:00 PM	10 mins

64	Session Code	Surgical Retina, Panel Discussion			
Chairman	Crystal A				
Co-Chair	09-Dec-22	Start	4:00 PM		
Moderator	Hussain A. Khaqan	Friday	End	6:00 PM	
Ayman Madanat	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	
Ashraf Shaarawy	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	
Giampaolo Gini	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	
Nur Acar Göçgil	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	
Susana Teixeira	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	
Saad Waheeb	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	
Abdullah Alqahtani	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	
Mahmoud Alrabiah	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	
Tatyana Avanesova	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	
Jorge Rocha	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	
José Gerardo García Aguirre	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	
Nassim Abreu	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	
Daniel Moreno-Paramo	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	
M Tariq Khan	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	
Khalid Waheed	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	
Syed Fawad Rizvi	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	
Mazhar Ishaq	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	
Qasim Lateef	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	
Mahmoud M Soliman	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	
Tariq Khan Marwat	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	
Muhammad Samir Alhadad	Surgical Retina, Panel Discussion	4:00 PM	6:00 PM	120 mins	



Day 2, Friday 9th December, 2022

65 Session Code AACO Plenary Session, (Named Lectures)

Chairman	Saleem Akhtar	Crystal B			
Co-Chair	Sami Alrabiah	09-Dec-22	Start	4:00 PM	
Moderator	Chaudhary Javed Iqbal	Friday	End	6:00 PM	
Muhammad Daud Khan	Raja Mumtaz Award Lecture	4:00 PM	4:20 PM	20 mins	
Nadeem Hafeez Butt	Ramzan Ali Syed Award Lecture	4:20 PM	4:40 PM	20 mins	
Sami Alrabiah	Measuring and treating selective high order visual aberration	4:40 PM	4:55 PM	15 mins	
Abdullah Alqahtani	Application of Vitrectomy in ocular oncology	4:55 PM	5:10 PM	15 mins	
Mohammed Al-Amri	Real life experience with Iluvien in management of DME	5:10 PM	5:25 PM	15 mins	
Ayman Madanat	Vitrectomy for advanced PDR	5:25 PM	5:40 PM	15 mins	

66 Session Code Surgical Retina Free Paper 2

Chairman	Rao Rashad Qamar	Shalimar B			
Co-Chair	Khawaja Mohsin Ihsan	09-Dec-22	Start	5:00 PM	
Moderator	Sidrah Riaz	Friday	End	6:00 PM	
Haroon Tayyab	Smartphone-based fundus imaging for evaluation of Retinopathy of Prematurity in a low- income country: A pilot study	5:00 PM	5:07 PM	7 mins	
Muhammad Amjad	Multimodal imaging for ERM in adult patients	5:07 PM	5:14 PM	7 mins	
Hasnain Muhammad Baksh	Temporal ILM flap for macular hole with the help of stained vision gel	5:14 PM	5:21 PM	7 mins	
Aamna Jabran	Giant retinal tear	5:21 PM	5:28 PM	7 mins	
Muhammad Tahir	Change in refractive error in rhegmatogenous retinal detachment patients with 360 degree scleral buckling with tire	5:28 PM	5:35 PM	7 mins	
Faisal Murtaza	ADED management with bimanual techniques	5:35 PM	5:42 PM	7 mins	
Hafiz Ateeq ur Rehman	Anterior Vitrectomy through pars plana	5:42 PM	5:49 PM	7 mins	
Muhammad Ali Haider	Challenges in Treating Diabetic Retinopathy	5:49 PM	5:56 PM	7 mins	
Sidrah Riaz	Q&A: Surgical Retina Free Paper 2	5:56 PM	6:00 PM	4 mins	

67 Session Code Cataract IC-2, Phaco in Posterior Polar Cataract

Chairman	Yehia Salaheldin	Shalimar C			
Co-Chair	Amer Awan	09-Dec-22	Start	5:00 PM	
Moderator	Ejaz Latif	Friday	End	6:00 PM	



Day 2, Friday 9th December, 2022

Muhammad Tayyab	Management of Posterior Polar Cataract & PCR	5:00 PM	5:10 PM	10 mins
Amer Awan	Management of Posterior Polar Cataract	5:10 PM	5:20 PM	10 mins
Ejaz Latif	Management of Posterior Polar Cataract – Tips & tricks	5:20 PM	5:30 PM	10 mins
Majeed Malik	Posterior Polar Cataract & posterior capsulorrhexis – How to achieve a successful outcome?	5:30 PM	5:40 PM	10 mins
Yehia Salaheldin	Posterior Capsulorrhexis- A needed skill	5:40 PM	5:50 PM	10 mins
Ejaz Latif	Q&A: Cataract IC-2, Phaco in Posterior Polar Cataract	5:50 PM	6:00 PM	10 mins

68 Session Code Community Ophthalmology Symp 1

Chairman	Asad Aslam Khan	Emerald A		
Co-Chair	Khalid Iqbal Talpur	09-Dec-22	Start	5:00 PM
Moderator	Arif Hussain	Friday	End	6:00 PM
Ayesha Hanif	Effect of COVID-19 pandemic on postgraduate resident training in ophthalmology: An aspect to be pondered	5:00 PM	5:07 PM	7 mins
Lubna Adeeb	Frequency of Ocular Diseases in patients presenting at Eye Department Fauji Foundation Hospital Peshawar	5:07 PM	5:14 PM	7 mins
Arif Hussain	Eye Examination by Optometrist at Rural Health Centers – Results of the pilot in Chakwal & Layyah	5:14 PM	5:21 PM	7 mins
Junaid Faisal Wazir	Success Story of Pakistan Trachoma Elimination Project (PTEP) 2019-2022	5:21 PM	5:28 PM	7 mins
Farooq Awan	Lessons Learnt from the Provincial Eye Health Plan of AJ &K	5:28 PM	5:35 PM	7 mins
Khalid Iqbal Talpur	Why Preventive Ophthalmology is Necessary	5:35 PM	5:42 PM	7 mins
Asad Aslam Khan	Evolution of eye care in Pakistan	5:42 PM	5:49 PM	7 mins
Arif Hussain	Q&A: Community Ophthalmology 1	5:49 PM	6:00 PM	11 mins

69 Session Code Glaucoma IC 3, Trabeculectomy for advance learners

Chairman	Shalimar B			
Co-Chair	10-Dec-22	Start	9:00 AM	
Moderator	Yousaf Jamal Mahsood	Saturday	End	10:00 AM
Rashid Zia	Trabeculectomy for Advance Learners and Experienced Surgeons	9:00 AM	9:50 AM	50 mins
Yousaf Jamal Mahsood	Q&A: Glaucoma IC 3, Trabeculectomy for advance learners	9:50 AM	10:00 AM	10 mins



Day 3, Saturday 10th December, 2022

70	Session Code	Free Paper 3			
Chairman		Athar Touseef	Shalimar C		
Co-Chair		Khizar Niazi	10-Dec-22	Start	9:00 AM
Moderator		Arooj Amjad	Saturday	End	10:00 AM
Mehtab Mengal		No End in Sight; A Case of Pencil Injury to the Eye	9:00 AM	9:06 AM	6 mins
Mahmood Ali		Comparison of outcomes of 1st and 2nd generation cyclo G6 probe for micropulse diode laser	9:06 AM	9:12 AM	6 mins
Najia Uzair		Paediatric Epiretinal membrane presenting with neuro-ophthalmological manifestations	9:12 AM	9:18 AM	6 mins
Tanveer Chaudhary		Phthiriasis pelpabrarum. A case report	9:18 AM	9:24 AM	6 mins
Imran Khan Bazai		Dispensing multiple doses of Bevacizumab injection (0.025 mg) from a single vial (4 mg) in a bio safety cabinet; A cost effective and safe procedure	9:24 AM	9:30 AM	6 mins
Syeda Aisha Bokhari		Efficacy of Atropine 0.01% Eye Drops for Myopia Control in Pakistan	9:30 AM	9:36 AM	6 mins
Afshan Ali		Scleral perforation following trans scleral diode laser cycloablation	9:36 AM	9:42 AM	6 mins
Khizar Niazi		Unique Case of Angle Closure	9:42 AM	9:48 AM	6 mins
Irshad Hussain		Phaco capsulotomy in intumescent cataract	9:48 AM	9:54 AM	6 mins
Warda Ali		Long term outcome of tacrolimus skin ointment 0.03% in treatment of advance Vernal keratoconjunctivitis	9:54 AM	10:00 AM	6 mins
Arooj Amjad		Q&A: Free Paper 3	10:00 AM	10:06 AM	6 mins
71	Session Code	Oculoplastics Symp 5, Orbit 2			
Chairman		Aftab Naseem Azhar	Emerald A		
Co-Chair		Zeeshan Kamil	10-Dec-22	Start	9:00 AM
Moderator		Kashif Jahangir	Saturday	End	10:00 AM
Tayyab Afghani		Congenital tumors of the orbit – case series	9:00 AM	9:08 AM	8 mins
Zahid Kamal Siddiqui		Management of Maggots infestation in Orbital Tumors	9:08 AM	9:16 AM	8 mins
Zeeshan Kamil		Ocular Mobility in Dermis fat graft	9:16 AM	9:24 AM	8 mins
Nasar Qamar		Fornix reconstruction Using Amniotic Membrane	9:24 AM	9:32 AM	8 mins
Ibrar Hussain		Orbital Hamartoma/Rhabdomyosarcoma	9:32 AM	9:40 AM	8 mins
Zeeshan Kamil		Surgical approach to Orbit	9:40 AM	9:48 AM	8 mins
Farzad Pakdel		Effect of Orbital Injection of Amphotericin B in Mucormycosis	9:48 AM	9:56 AM	8 mins
Kashif Jahangir		Q&A: Oculoplastics Symp 5, Orbit 2	9:56 AM	10:00 AM	4 mins



Day 3, Saturday 10th December, 2022

72	Session Code	Medical Retina Symp 4, Recent Innovation 1			
Chairman		Nesrine Abroug	Emerald B		
Co-Chair		Ameen Marashi	10-Dec-22	Start	9:00 AM
Moderator		Mohammed Al-Amri	Saturday	End	10:30 AM
Jorge Rocha		Biomarkers & DME	9:00 AM	9:12 AM	12 mins
Jorge Rocha		Retina 4.0- The Future and Beyond	9:12 AM	9:24 AM	12 mins
Ameen Marashi		Suprachoroidal injection noval indications	9:24 AM	9:36 AM	12 mins
Mohammed Al-Amri		5 years of real life experience with Iluvien	9:36 AM	9:48 AM	12 mins
Eiman Mahmoud		The eye and the body: Bridging the gap	9:48 AM	10:00 AM	12 mins
Abd El-Latif Dessouki					
Mario Saravia		Update on Geographic Atrophy treatment with Pegcetacoplan (APL-2). Last releases on Derby and Oaks studies	10:00 AM	10:12 AM	12 mins
Mohammed Al-Amri		Q&A: Medical Retina Symp 4, Recent Innovation 1	10:12 AM	10:30 AM	18 mins

73	Session Code	WIOP Symp, MYOPIA			
Chairman		Huma Kayani	Emerald C		
Co-Chair		Nasira Inayat	10-Dec-22	Start	9:00 AM
Moderator		Soufia Farrukh	Saturday	End	10:30 AM
Mehtab Mengal		Prevalence and Epidemiology	9:00 AM	9:10 AM	10 mins
Seema Qayyum		Myopia : Are our infants at risk	9:10 AM	9:20 AM	10 mins
Nazli Gul		Myopia progression. What doesn't work?? and what works?	9:20 AM	9:30 AM	10 mins
Sara Riaz		Pathological Myopia and Role of Lasers	9:30 AM	9:40 AM	10 mins
Hina Khan		Retinal Imaging in Myopia	9:40 AM	9:50 AM	10 mins
Sofia Iqbal		Role of Excimer laser in myopia management PRK/ femtolasik and SMILE	9:50 AM	10:00 AM	10 mins
Sadia Humayun		Phakic IOL in Myopia	10:00 AM	10:10 AM	10 mins
Sharmeen Akram		RLE and the Role of Premium IOL in Myopics	10:10 AM	10:20 AM	10 mins
Soufia Farrukh		Q&A: WIOP Symp, MYOPIA	10:20 AM	10:30 AM	10 mins

74	Session Code	Refractive Symp-2, Excimerless Laser/Refractive Surgery			
Chairman		Merieme Harouch	Crystal A		
Co-Chair		Monia Cheour	10-Dec-22	Start	9:00 AM
Moderator		Aamir Asrar	Saturday	End	10:30 AM



Day 3, Saturday 10th December, 2022

Igor Solomatin, MD	Evolution of the Phakic IOL	9:00 AM	9:07 AM	7 mins
Merieme Harouch	Evo Vision ICL Phakic implants from A to Z	9:07 AM	9:14 AM	7 mins
Merieme Harouch	The SMILE technique for the correction of Myopia	9:14 AM	9:21 AM	7 mins
Sharif Hashmani	Phakic IOLs – My experience (Antiflex or ICL)	9:21 AM	9:28 AM	7 mins
Monia Cheour	Implantable Collamar Lens: Pros & Con	9:28 AM	9:35 AM	7 mins
Qasim Lateef	Initial results of CLEAR (Corneal Lenticular Extraction for Advanced Refractive Correction) with Zeimer Z8 Neo Femto Laser	9:35 AM	9:42 AM	7 mins
Ahmed M. Osman	Management of malpositioned ICL	9:42 AM	9:49 AM	7 mins
Aamir Asrar	SMILE Complications	9:49 AM	9:56 AM	7 mins
Igor Solomatin, MD	Main complications of SMILE-Relex methods of refractive surgery	9:56 AM	10:03 AM	7 mins
Asad Azeem Mirza	Managing Intraoperative, Early & Late Post-Op Complications of Lasik & PRK	10:03 AM	10:10 AM	7 mins
Mazhar Ishaq	Per-op complications of Femto Lasik	10:10 AM	10:17 AM	7 mins
Asad Aslam Khan	Challenges during Femto Laser flap formation	10:17 AM	10:24 AM	7 mins
Ajmal Chaudhary	Analysis of first 25 cases of SMILE - Ajmal Chaudhary	10:24 AM	10:31 AM	7 mins

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Session Code

Surgical Retina Symp 7, Endophthalmitis & Intra Ocular Foreign Body

Chairman	Saad Waheeb	Crystal B		
Co-Chair	José Gerardo García Aguirre	10-Dec-22	Start	9:00 AM
Moderator	M Tariq Khan	Saturday	End	10:30 AM
José Gerardo García Aguirre	0.025% povidone iodine infusion during vitrectomy for infectious endophthalmitis	9:00 AM	9:06 AM	6 mins
Ayman Madanat	Post Intravitreal inj, Endophthalmitis	9:06 AM	9:12 AM	6 mins
Giampaolo Gini	A Rational Approach to Post-Interventional Endophthalmitis	9:12 AM	9:18 AM	6 mins
Hussain A. Khaqan	PPV for endophthalmitis All or None	9:18 AM	9:24 AM	6 mins
Mahmoud M Soliman	Role of Vitrectomy in Uveitis Management	9:24 AM	9:30 AM	6 mins
Saad Waheeb	Early vitrectomy for post-op Endophthalmitis (EVS May be too old!)	9:30 AM	9:36 AM	6 mins
Mahmoud M Soliman	Endophthalmitis update	9:36 AM	9:42 AM	6 mins
Mahmoud M Soliman	Intraocular Foreign Bodies; difficulties in management	9:42 AM	9:48 AM	6 mins
Nur Acar Göçgil	Posterior segment trauma with IOFB	9:48 AM	9:54 AM	6 mins
Mohamed A. Tawfik	IOFB new approach	9:54 AM	10:00 AM	6 mins
Hussain A. Khaqan	Intra Ocular Foreign Body Size Does Matter	10:00 AM	10:06 AM	6 mins
Tengku Ain Kamalden	IGS –Assisted intrascleral foreign body removal	10:06 AM	10:12 AM	6 mins
Ahmed Roshdy Alagorie	Never give up!! Light might be at the end of the tunnel	10:12 AM	10:18 AM	6 mins
Nesrine Abroug	Post-traumatic endophthalmitis with retained	10:18 AM	10:24 AM	6 mins



Day 3, Saturday 10th December, 2022

M Tariq Khan	intraocular foreign body Q&A: Surgical Retina Symp 7, Endophthalmitis & Intra Ocular Foreign Body	10:24 AM	10:30 AM	6 mins
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76 Session Code Retina IC, Mystery in Dystrophy

Chairman	Shalimar B			
Co-Chair	10-Dec-22	Start	10:30 AM	
Moderator	Rehman Siddiqui	Saturday	End	11:30 AM
Rehman Siddiqui	Mystery in Dystrophy	10:30 AM	11:20 AM	50 mins
Rehman Siddiqui	Q&A: Retina IC, Mystery in Dystrophy	11:20 AM	11:30 AM	10 mins

77 Session Code Cornea Symp 4, Keratoconus

Chairman	Sami Alrabiah	Shalimar C		
Co-Chair	Miguel Rechichi	10-Dec-22	Start	10:30 AM
Moderator	Mahfooz Hussain	Saturday	End	11:30 AM
Merieme Harouch	Keratoconus in children: Clinical and therapeutic particularities	10:30 AM	10:37 AM	7 mins
Mustafa Kamal Akbar	CXL- Outcome of Topo Guided CXL	10:37 AM	10:44 AM	7 mins
Sami Alrabiah	PTK For Managing Keratoconus	10:44 AM	10:51 AM	7 mins
Mahfooz Hussain	One Colour Corneal Drawing System	10:51 AM	10:58 AM	7 mins
Huda K Radhi	Accelerated pulsed light corneal crosslinking in children	10:58 AM	11:05 AM	7 mins
Merieme Harouch	Visual rehabilitation in severe keratoconus without recourse to corneal grafting	11:05 AM	11:12 AM	7 mins
Mahfooz Hussain	Pakistani Innovations In Keratoplasty	11:12 AM	11:19 AM	7 mins
Miguel Rechichi	New techniques and trends in surgical management of keratoconus	11:19 AM	11:26 AM	7 mins
Mahfooz Hussain	Q&A: Cornea Symp 4, Keratoconus	11:26 AM	11:30 AM	4 mins

78 Session Code Pediatrics Symp 4 Retinoblastoma

Chairman	Zia Ul Islam	Emerald A		
Co-Chair	Zafar Iqbal	10-Dec-22	Start	10:30 AM
Moderator	Rabia Chaudhary	Saturday	End	11:30 AM
Saima Amin	Adjuncts in the treatment of retinoblastoma	10:30 AM	10:39 AM	9 mins
Rabia Chaudhary	Retinoblastoma mimickers-pseudo retinoblastomas	10:39 AM	10:48 AM	9 mins
Shabana Chaudhry	Don't give up.... Miracles Happen!	10:48 AM	10:57 AM	9 mins



Day 3, Saturday 10th December, 2022

Lubna Siddiq Mian	Saveable or not Savable, retinoblastoma outcomes- Recent highlights	10:57 AM	11:06 AM	9 mins
Zafar Iqbal	Retinoblastoma in the North West Frontier, PAKISTAN	11:06 AM	11:15 AM	9 mins
Zia Ul Islam	Retinoblastoma a Challenge for developing countries	11:15 AM	11:24 AM	9 mins
Rabia Chaudhary	Q&A: Pediatrics Symp 4 Retinoblastoma	11:24 AM	11:30 AM	6 mins

79 Session Code Video Competition

Chairman	Hamid Mahmood Butt	Emerald B		
Co-Chair	Muhammad Tayyab	10-Dec-22	Start	11:00 AM
Moderator	Saturday	End	12:30 PM	
Hamid Mahmood Butt	Video Competition	11:00 AM	12:30 PM	90 mins
Muhammad Tayyab	Video Competition	11:00 AM	12:30 PM	90 mins
Majeed Malik	Phaco in > 50% capsular dehiscence using CTR with island sutured to ciliary sulcus	11:00 AM	11:05 AM	5 mins
Zia Ul Mazhary	Opaque IOL exchange	11:06 AM	11:11 AM	5 mins
Zia Ul Mazhary	Innovative plug assisted haptic tucking	11:12 AM	11:17 AM	5 mins
Hamza Ali Tayyab	Phacoemulsification in subluxated lens	11:18 AM	11:23 AM	5 mins
Amer Awan	Complex RD	11:24 AM	11:29 AM	5 mins
Irum Raza	Surgical surprises and difficulties during congenital cataract surgery	11:30 AM	11:35 AM	5 mins
M Salman Hamza	Descemet tear repair	11:36 AM	11:41 AM	5 mins
Sehrish Momin	Late multifocal IOL exchange in a dissatisfied patient	11:42 AM	11:47 AM	5 mins
Abdul Hannan	Complicated cataract surgery	11:48 AM	11:53 AM	5 mins
Muhammad Amjad	Retinectomy under oil	11:54 AM	11:59 AM	5 mins
Khawaja Khalid Shoaib	Operations in superior oblique palsy	12:00 PM	12:05 PM	5 mins
Khawaja Khalid Shoaib	Frontalis suspension with proline suture	12:06 PM	12:11 PM	5 mins
Abdul Hannan	Complicated phaco case	12:12 PM	12:17 PM	5 mins
Sidra Shakeel	Goals of diabetic vitrectomy	12:18 PM	12:23 PM	5 mins
Mashal Tayyab	Surgical approach to vitreomacular traction syndrome	12:24 PM	12:29 PM	5 mins

80 Session Code Industry Symp 1, (Medzntech)

Chairman	Mazhar Ishaq	Emerald C		
Co-Chair	Nadeem Ishaq	10-Dec-22	Start	11:00 AM
Moderator	Tanveer Chaudhary	Saturday	End	12:30 PM
Mazhar Ishaq	Chairperson, Industry Symp 1, (Medzntech)	11:00 AM	12:30 PM	90 mins
Nadeem Riaz	Chairperson, Industry Symp 1, (Medzntech)	11:00 AM	12:30 PM	90 mins
Aqil Qazi	Chairperson, Industry Symp 1, (Medzntech)	11:00 AM	12:30 PM	90 mins



Day 3, Saturday 10th December, 2022

Tanveer Chaudhary	Moderator, Industry Symp 1, (Medzntech) Cataract + Refractive + Dry Eye	11:00 AM	12:30 PM	90 mins
Sharif Hashmani	Why Contoura is a Superior Procedure	11:00 AM	11:12 AM	12 mins
Muhammad Moin	Experiencing an advanced lubricant in moderate to severe dry eye	11:12 AM	11:24 AM	12 mins
Aamir Asrar	Clareon AutoMe The future of clear vision is within reach of your eyes	11:24 AM	11:36 AM	12 mins
Jamshed Nasir	Identify the Toric IOL Patient in your Practice to manage Astigmatism	11:36 AM	11:48 AM	12 mins
Sohail Shahzad	Unmatched and highly predictable outcomes with LEGION - New advance Phaco system	11:48 AM	12:00 PM	12 mins
Khalid Waheed	Chairperson, Industry Symp 1, (Medzntech) VR	12:00 PM	12:30 PM	30 mins
Rehman Siddiqui	Chairperson, Industry Symp 1, (Medzntech) VR	12:00 PM	12:30 PM	30 mins
Khurram Azam Mirza	Chairperson, Industry Symp 1, (Medzntech) VR	12:00 PM	12:30 PM	30 mins
M Tariq Khan	Moderator, Industry Symp 1, (Medzntech) VR	12:00 PM	12:30 PM	30 mins
Syed Fawad Rizvi	Surgical Options & Advancements in Diabetic Eye Disease	12:00 PM	12:15 PM	15 mins
Qasim Lateef	Experience the Potential of NEW Surgical approaches in Vitreoretinal Surgery	12:15 PM	12:30 PM	15 mins

81	Session Code	Glaucoma Symp 4, Secondary Glaucoma			
Chairman	Nazir Ashraf Laghari	Crystal A			
Co-Chair	Khan Muhammad Nangrejo	10-Dec-22	Start	11:00 AM	
Moderator	Syed Imtiaz Ali	Saturday	End	12:30 PM	
Karim F. Damji	Pseudoexfoliation Glaucoma	11:00 AM	11:10 AM	10 mins	
Umair Qidwai	Uveitic Glaucoma	11:10 AM	11:20 AM	10 mins	
Mahmood Ali	Neovascular Glaucoma	11:20 AM	11:30 AM	10 mins	
P S Mahar	Angle Recesson Glaucoma	11:30 AM	11:40 AM	10 mins	
Yousaf Jamal Mahsood	Silicon Oil Induced Glaucoma	11:40 AM	11:50 AM	10 mins	
Saadia Farooq	Pigment Dispersion Syndrome and Glaucoma	11:50 AM	12:00 PM	10 mins	
Hira Muazzam	Malignant Glaucoma / Aqueous Misdirection	12:00 PM	12:10 PM	10 mins	
Syed Imtiaz Ali	Cataract Surgery and Pseudoexfoliation	12:10 PM	12:20 PM	10 mins	
Ali Alsheikheh	Deal with a short eye as a timed bomb!	12:20 PM	12:30 PM	10 mins	
Syed Imtiaz Ali	Q&A: Glaucoma Symp 4, Secondary Glaucoma	12:30 PM	12:40 PM	10 mins	



Day 3, Saturday 10th December, 2022

82 Session Code Surgical Retina Symp 8, Macular Surgery (2)

Chairman	Mahmoud M Soliman	Crystal B			
Co-Chair	Daniel Moreno-Paramo	10-Dec-22	Start	11:00 AM	
Moderator	Qasim Lateef	Saturday	End	12:30 PM	
Tatyana Avanesova	Surgical management of submacular hemorrhage	11:00 AM	11:10 AM	10 mins	
Mohamed A. Tawfik	TPA for Sub Retinal HE	11:10 AM	11:20 AM	10 mins	
Nassim Abreu	Hydropneumatic displacement for sub macular hemorrhage	11:20 AM	11:30 AM	10 mins	
Abdullah Alqahtani	Management of sub-ILM hemorrhage in leukemia	11:30 AM	11:40 AM	10 mins	
Mahmoud M Soliman	Submacular Hematoma Management	11:40 AM	11:50 AM	10 mins	
Mario Saravia	Surgical topic: LAM patch: Lyophilized Amniotic Membrane patch for Retinal Detachment Surgery	11:50 AM	12:00 PM	10 mins	
Mahmoud Alrabiah	Drain Study	12:00 PM	12:10 PM	10 mins	
Ayman Madanat	Surgical outcome of Idiopathic Macular Pucker & Management of Lamellar Macular Hole	12:10 PM	12:20 PM	10 mins	
Qasim Lateef	Q&A: Surgical Retina Symp 8, Macular Surgery (2)	12:20 PM	12:30 PM	10 mins	

83 Session Code Oculoplastics IC 2, Aesthetic Procedures in Oculoplastic Surgery

Chairman	Azeem Jahangir Khan	Shalimar B			
Co-Chair	Yasser Khan	10-Dec-22	Start	11:30 AM	
Moderator	Arshad Mahmood	Saturday	End	12:30 PM	
Zahid Kamal Siddiqui	Upper lid Blepharoplasty	11:30 AM	11:40 AM	10 mins	
Zafar UI Islam	Eyelash Transplantation	11:40 AM	11:50 AM	10 mins	
Azeem Jahangir Khan	Cosmetic facial Filler / PRP in Oculoplasty	11:50 AM	12:00 PM	10 mins	
Yasser Khan	Lower lid blepharoplasty	12:00 PM	12:10 PM	10 mins	
Yasser Khan	Fillers	12:10 PM	12:20 PM	10 mins	
Arshad Mahmood	Q&A: Oculoplastics IC 2, Aesthetic Procedures in Oculoplastic Surgery	12:20 PM	12:30 PM	10 mins	

84 Session Code Cataract IC-3: Handling Cataracts with Sub-luxated Lens & IOL implantation

Chairman	Ejaz Latif	Shalimar C			
Co-Chair	Yehia Salaheldin	10-Dec-22	Start	11:30 AM	
Moderator	Zia UI Mazhary	Saturday	End	12:30 PM	
Ejaz Latif	Managing subluxated cataracts with CTR – A two step safer technique	11:30 AM	11:38 AM	8 mins	



Day 3, Saturday 10th December, 2022

Majeed Malik	Phaco-CTR sutured to ciliary sulcus in 50% zonular dehiscence	11:38 AM	11:46 AM	8 mins
Yehia Salaheldin	Subluxation & Phacoemulsification: All scenerios (Video based)	11:46 AM	11:54 AM	8 mins
Hamza Ali Tayyab	Management of subluxated lens using hybrid approach	11:54 AM	12:02 PM	8 mins
Amer Awan	Scleral IOL implantation using 27 G needle	12:02 PM	12:10 PM	8 mins
Zia Ul Mazhary	Secondary IOL implantation – types & pearls for better outcome	12:10 PM	12:18 PM	8 mins
Zia Ul Mazhary	Q&A: Cataract IC-3: Handling Cataracts with Sub-luxated Lens & IOL implantation	12:18 PM	12:30 PM	12 mins

85 Session Code Industry Symp 2, Well Fusion.. Vision uninterrupted, (SIFI/Maxitech)

Chairman	Mazhar Ishaq	Emerald A		
Co-Chair	Azam Ali	10-Dec-22	Start	11:30 AM
Moderator	Saeed Iqbal	Saturday	End	12:30 PM
Azam Ali	My personal experience with Well Fusion	11:30 AM	11:47 AM	17 mins
Saeed Iqbal	Well Fusion.. a step forward in EDOF progressive IOLs	11:47 AM	12:04 PM	17 mins
Mushtaq Ahmed	My personal experience with Mini Toric and well fusion	12:04 PM	12:21 PM	17 mins
Saeed Iqbal	Q&A: Industry Symp 2, Well Fusion.. Vision uninterrupted, (SIFI/Maxitech)	12:21 PM	12:30 PM	9 mins

86 Session Code Cornea IC, Innovation in Corneal Grafting IC

Chairman	Shalimar B			
Co-Chair	10-Dec-22	Start	2:00 PM	
Moderator	Zaman Shah	Saturday	End	3:00 PM
Zaman Shah	Bowmans Layer Grafts	2:00 PM	2:25 PM	25 mins
Teyyeb Janjua	Endothelial Transplant	2:25 PM	2:50 PM	25 mins
Zaman Shah	Q&A: Cornea IC, Innovation in Corneal Grafting IC	2:50 PM	3:00 PM	10 mins

87 Session Code Pediatrics IC 4, Squint assessment: Sahaf triangle

Chairman	Shalimar C			
Co-Chair	10-Dec-22	Start	2:00 PM	
Moderator	M Salman Hamza	Saturday	End	3:00 PM
Imran Akram Sahaf	Squint assessment: Sahaf triangle	2:00 PM	2:30 PM	30 mins
M Salman Hamza	Squint assessment: Sahaf triangle	2:30 PM	2:50 PM	20 mins
M Salman Hamza	Q&A: Pediatrics IC 4, Squint assessment: Sahaf triangle	2:50 PM	3:00 PM	10 mins



Day 3, Saturday 10th December, 2022

88 Session Code Research IC 3, Research Publication for Pak J. Ophth

Chairman	Sanallah Jan	Emerald A			
Co-Chair	Tayyaba Gul Malik	10-Dec-22	Start	2:00 PM	
Moderator	Muhammad Shaheer	Saturday	End	3:00 PM	
Muhammad Moin	What is peer review and Why peer review?	2:00 PM	2:10 PM	10 mins	
Tayyaba Gul Malik	Peer review models	2:10 PM	2:20 PM	10 mins	
Muhammad Shaheer	Writing a Peer review report	2:20 PM	2:30 PM	10 mins	
Sanallah Jan	Ethical issues in peer review	2:30 PM	2:40 PM	10 mins	
Hargun Lakhani	Academic Creditability	2:40 PM	2:50 PM	10 mins	
Muhammad Shaheer	Q&A: Research IC 3, Research Publication for Pak J. Ophth	2:50 PM	3:00 PM	10 mins	

89 Session Code Medical Retina Symp 5, Recent Innovation 2

Chairman	Mario Saravia	Emerald B			
Co-Chair	Shahzad Shafquat	10-Dec-22	Start	2:00 PM	
Moderator	Waqar Muzaffar	Saturday	End	3:30 PM	
Mario Saravia	Medical topic: Update on Faricimab Studies	2:00 PM	2:09 PM	9 mins	
Mohammed Al-Amri	Brolucizumab in naïve patients	2:09 PM	2:18 PM	9 mins	
Mohammed Al-Amri	Unmet need in management of DME	2:18 PM	2:27 PM	9 mins	
Ahmed Roshdy Alagorie	Post COVID-19 BRAO in a 14 years old child	2:27 PM	2:36 PM	9 mins	
Jorge Rocha	Covid-19 and Retina	2:36 PM	2:45 PM	9 mins	
Shahzad Shafquat	Role of Faricimab in wet AMD and DME	2:45 PM	2:54 PM	9 mins	
Naveed Quereshi	Initial experience with intra Vitreal Combercept (Lumitin) for DME and AMD	2:54 PM	3:03 PM	9 mins	
Ijaz Sheikh	Diabetic retinopathy and pregnancy	3:03 PM	3:12 PM	9 mins	
Shakaib Anwar	Nipping ARMD in the bud	3:12 PM	3:21 PM	9 mins	
Waqar Muzaffar	Q&A: Medical Retina Symp 5, Recent Innovation 2	3:21 PM	3:30 PM	9 mins	

90 Session Code Glaucoma Symp 5, Management of Glaucoma/Valves

Chairman	Muhammad Daud Khan	Emerald C			
Co-Chair	Ali Alsheikheh	10-Dec-22	Start	2:00 PM	
Moderator	Syed Imtiaz Ali	Saturday	End	3:30 PM	
Ali Alsheikheh	Mastering AGV Implantation	2:00 PM	2:11 PM	11 mins	
Khalid Mahmood	Ahmed Glaucoma Valve Implant in Atypical Glaucoma	2:11 PM	2:22 PM	11 mins	
Umair Qidwai	Paul Glaucoma Implant	2:22 PM	2:33 PM	11 mins	
Ayisha Shakeel	Baerveldt Glaucoma Drainage Device implant	2:33 PM	2:44 PM	11 mins	



Day 3, Saturday 10th December, 2022

Nasir Saeed Pakistani Population	Results and Complications of AGV implant in	2:44 PM	2:55 PM	11 mins
Aneeq Mirza	Results of Ahmed Glaucoma Valve for Neovascular and other secondary glaucomas	2:55 PM	3:06 PM	11 mins
Ali Zain	Efficacy of Zain Glaucoma Stent in Cases of Refractory End Stage Glaucoma	3:06 PM	3:17 PM	11 mins
Ali Alsheikheh	Our experience in Micropulse CPC	3:17 PM	3:28 PM	11 mins
Syed Imtiaz Ali	Q&A: Glaucoma Symp 5, Management of Glaucoma/ Valves	3:28 PM	3:30 PM	2 mins

91 Session Code Cataract Symp 2, Handling Challenging Cataracts

Chairman	Yehia Salaheldin	Crystal A		
Co-Chair	Ejaz Latif	10-Dec-22	Start	2:00 PM
Moderator	Majeed Malik	Saturday	End	3:30 PM
Tarek Mamoun	Management of blow-out of the lens capsule during phacoemulsification	2:00 PM	2:08 PM	8 mins
Yehia Salaheldin	IOL bag fixation with iridoplasty	2:08 PM	2:16 PM	8 mins
Majeed Malik	Cataract surgery in PXF syndrome with weak zonules	2:16 PM	2:24 PM	8 mins
Muhammad Moin	Multi segment chop for hard cataracts	2:24 PM	2:32 PM	8 mins
Ejaz Latif	Hard Cataracts – How to go about	2:32 PM	2:40 PM	8 mins
Soufia Farrukh	Small pupil phaco surgery without mechanical expanders	2:40 PM	2:48 PM	8 mins
Zia Ul Mazhary	Phaco Accidents - Overview of Prevention & Management	2:48 PM	2:56 PM	8 mins
Abdul Hannan	Pupillary Circelage	2:56 PM	3:04 PM	8 mins
Umair Qidwai	Post-Trab leaking bleb during Phaco	3:04 PM	3:12 PM	8 mins
Hussain A. Khaqan	Removal & Refixation of Dropped IOL-Multiple ways	3:12 PM	3:20 PM	8 mins
Majeed Malik	Q&A: Cataract Symp 2, Handling Challenging Cataracts	3:20 PM	3:30 PM	10 mins

92 Session Code Surgical Retina Symp 9, Macular Hole Surgery

Chairman	Giampaolo Gini	Crystal B		
Co-Chair	Daniel Moreno-Paramo	10-Dec-22	Start	2:00 PM
Moderator	Hussain A. Khaqan	Saturday	End	3:30 PM
Manzar Saeed	ILM Graft for Persistent Macular Holes	2:00 PM	2:10 PM	10 mins
Daniel Moreno-Paramo	Amniotic Membrane for Macular Hole Surgery	2:10 PM	2:20 PM	10 mins
Remzi Avci	Inverted ILM Flap technique in macular hole surgery; What did it give us over conventional ILM peeling	2:20 PM	2:30 PM	10 mins



Day 3, Saturday 10th December, 2022

Saad Waheeb	Inverted flap for large macular holes	2:30 PM	2:40 PM	10 mins
Faisal Murtaza	Failed Macular hole Surgery managed by relaxing incision at hole margins with patients own FFP use	2:40 PM	2:50 PM	10 mins
Mohamed A. Tawfik	Temporal Flap for macular hole	2:50 PM	3:00 PM	10 mins
Hussain A. Khaqan	Amniotic Membrane for refractory macular Hole	3:00 PM	3:10 PM	10 mins
Mario Saravia	A review on Macular Hole Surgery Techniques	3:10 PM	3:20 PM	10 mins
Hussain A. Khaqan	Q&A: Surgical Retina Symp 9, Macular Hole Surgery	3:20 PM	3:30 PM	10 mins

93 Session Code Pediatrics IC 3, Amblyopia

Chairman	Shalimar B			
Co-Chair	10-Dec-22	Start	3:30 PM	
Moderator	Sameera Irfan	Saturday	End	4:30 PM
Sameera Irfan	Amblyopia: Diagnosis & Prevention in Common Clinical Conditions	3:30 PM	4:20 PM	50 mins
Sameera Irfan	Q&A: Pediatrics IC 3, Amblyopia	4:20 PM	4:30 PM	10 mins

94 Session Code Medical Retina IC 2, Ocular Oncology

Chairman	Shalimar C			
Co-Chair	10-Dec-22	Start	3:30 PM	
Moderator	Ihab Saad Othman	Saturday	End	4:30 PM
Ihab Saad Othman	Leucocoria in DD of retinoblastoma	3:30 PM	3:42 PM	12 mins
Ihab Saad Othman	Severe Ocular Surface Tumors: Is there a way to conserve	3:42 PM	3:54 PM	12 mins
Ihab Saad Othman	Unilateral Recurrent Hyphema In A Neonate Could This Be Truly An Anterior Segment Retinoblastoma?	3:54 PM	4:06 PM	12 mins
Ihab Saad Othman	Large Sized Uveal Melanoma with Extraocular Extension: How to Conserve	4:06 PM	4:18 PM	12 mins
Ihab Saad Othman	Q&A: Medical Retina IC 2, Ocular Oncology	4:18 PM	4:30 PM	12 mins

95 Session Code Industry Symp 3, Anti VEGF (Bayer)

Chairman	Emerald A			
Co-Chair	10-Dec-22	Start	3:30 PM	
Moderator	Hina Khan	Saturday	End	4:30 PM
Muhammad Tayyib	Expert, Industry Symp 3, Anti VEGF (Bayer)	3:30 PM	4:30 PM	60 mins
Nadeem Riaz	Expert, Industry Symp 3, Anti VEGF (Bayer)	3:30 PM	4:30 PM	60 mins
Khalid Waheed	Expert, Industry Symp 3, Anti VEGF (Bayer)	3:30 PM	4:30 PM	60 mins



Day 3, Saturday 10th December, 2022

Aqil Qazi	Expert, Industry Symp 3, Anti VEGF (Bayer)	3:30 PM	4:30 PM	60 mins
Khurram Azam Mirza	What have we learned from Real world data?	3:30 PM	3:40 PM	10 mins
Ali Afzal Bodla	Multi-Targeted Approach of Aflibercept	3:40 PM	3:50 PM	10 mins
Huma Kayani	What have we learned from Protocol-T?	3:50 PM	4:00 PM	10 mins
Amer Awan	T&E with aflibercept & Expanding the evidence	4:00 PM	4:10 PM	10 mins
Rehman Siddiqui	Importance of early intensive treatment with Aflibercept to treat DME	4:10 PM	4:20 PM	10 mins
Hina Khan	Q&A: Industry Symp 3, Anti VEGF (Bayer)	4:20 PM	4:30 PM	10 mins

96	Session Code	Pediatrics Symp, Pediatric VR		
Chairman	Susana Teixeira	Emerald B		
Co-Chair	Nur Acar Göçgil	10-Dec-22	Start	4:00 PM
Moderator	Khurram Azam Mirza	Saturday	End	6:00 PM
Muhammad Samir Alhadad	ROP related RD	4:00 PM	4:11 PM	11 mins
Nur Acar Göçgil	Pediatric rhegmatogenous RDS	4:11 PM	4:22 PM	11 mins
Susana Teixeira	Anti-VEGF Therapy in ROP	4:22 PM	4:33 PM	11 mins
Susana Teixeira	ROP long-term sequelae	4:33 PM	4:44 PM	11 mins
Remzi Avci	Advanced Coat's disease, how to treat	4:44 PM	4:55 PM	11 mins
Ihab Saad Othman	Stage 5 ROP, Do you dissect from inside out or from outside in??	4:55 PM	5:06 PM	11 mins
Susana Teixeira	Surgical videos - Stage IV and V surgeries	5:06 PM	5:17 PM	11 mins
Ahmed Roshdy Alagorie	The body might have the clue. Bilateral Coat's!!!	5:17 PM	5:28 PM	11 mins
Syed Fawad Rizvi	When to intervene surgically in cases of ROP	5:28 PM	5:39 PM	11 mins
Muhammad Amjad	Pediatric retinal detachments	5:39 PM	5:50 PM	11 mins
Khurram Azam Mirza	Q&A: Pediatrics Symp, Pediatric VR	5:50 PM	6:00 PM	10 mins

97	Session Code	APOT Trauma Symp		
Chairman	Gangadhara Sundar	Emerald C		
Co-Chair	Amer Awan	10-Dec-22	Start	4:00 PM
Moderator	Hussain A. Khaqan	Saturday	End	6:00 PM
Mohamed A. Tawfik	Intimate partner violence and ophthalmic trauma	4:00 PM	4:09 PM	9 mins
Farzad Pakdel	What went wrong & how I fixed it (Brow Ptosis)	4:09 PM	4:18 PM	9 mins
Giampaolo Gini	Lessons learnt from Ukraine	4:18 PM	4:27 PM	9 mins
Yasser Khan	Challenging post-traumatic dacryocystitis	4:27 PM	4:36 PM	9 mins
Mohammed Al-Amri	Challenging pediatric globe injuries	4:36 PM	4:45 PM	9 mins
Hussain A. Khaqan	Ophthalmic Trauma in Pakistan	4:45 PM	4:54 PM	9 mins
Ashok Grover	The OTSI Ophthalmic Trauma journey	4:54 PM	5:03 PM	9 mins



Day 3, Saturday 10th December, 2022

Gangadhara Sundar	Practical Classification of Orbital & Orbitofacial fractures	5:03 PM	5:12 PM	9 mins
Rajvardan Azad	Translational research in Globe injuries	5:12 PM	5:21 PM	9 mins
Amer Awan	Conflict injuries to the globe	5:21 PM	5:30 PM	9 mins
S Natarajan	APOTS & its global perspective	5:30 PM	5:39 PM	9 mins
Karl Golnik	Traumatic optic neuropathy – what has changed & what hasn't (including An Educator's perspective on Ophthalmic Trauma training)	5:39 PM	5:48 PM	9 mins
Hussain A. Khaqan	Q&A: APOT Trauma Symp	5:48 PM	6:00 PM	12 mins

98 Session Code Refractive Symp-3, Refractive/Laser Cataract Surgery - Results & Statistics

Chairman	Miguel Rechichi	Crystal A		
Co-Chair	Saeed Iqbal	10-Dec-22	Start	4:00 PM
Moderator	Aamir Asrar	Saturday	End	6:00 PM
Sami Alrabiah	Post-Lasik IOL calculations	4:00 PM	4:11 PM	11 mins
Aamir Asrar	FLACS – Start to finish	4:11 PM	4:22 PM	11 mins
Miguel Rechichi	FLACS: Still a novelty?	4:22 PM	4:33 PM	11 mins
Yehia Salaheldin	FLACS for challenging cases	4:33 PM	4:44 PM	11 mins
Muhammad Amjad	Effective advantages of Femto Phacoemulsification	4:44 PM	4:55 PM	11 mins
Sami Alrabiah	Unhappy post-Lasik cataract patients	4:55 PM	5:06 PM	11 mins
Monia Cheour	When cataract surgery becomes a refractive surgery	5:06 PM	5:17 PM	11 mins
Aamir Asrar	Surgical management of Presbyopia - Monovision/ Pres by Lasik	5:17 PM	5:28 PM	11 mins
Saeed Iqbal	Dry eye. It's importance in Lasik	5:28 PM	5:39 PM	11 mins
Merieme Harouch	AS OCT in refractive surgery	5:39 PM	5:50 PM	11 mins
Aamir Asrar	Q&A: Refractive Symp-3, Refractive/Laser Cataract Surgery - Results & Statistics	5:50 PM	6:00 PM	10 mins

99 Session Code Surgical Retina Symp 10, Vitreo Retina Trauma

Chairman	Tatyana Avanesova	Crystal B		
Co-Chair	Muhammad Samir Alhadad	10-Dec-22	Start	4:00 PM
Moderator	Tariq Khan Marwat	Saturday	End	6:00 PM
Tatyana Avanesova	Clinical case of traumatic retinal and choroidal giant tear	4:00 PM	4:11 PM	11 mins
Tural Galbinur	War-Related Eye injuries	4:11 PM	4:22 PM	11 mins
Usman Mahmood	Video presentations on GRT	4:22 PM	4:33 PM	11 mins
Abdullah Alqahtani	Trauma management cases	4:33 PM	4:44 PM	11 mins



Day 3, Saturday 10th December, 2022

Tengku Ain Kamalden	Visual outcome of open globe injuries with and without orbital fractures	4:44 PM	4:55 PM	11 mins
Abdullah Alqahtani	Application of vitrectomy in ocular oncology	4:55 PM	5:06 PM	11 mins
Tengku Ain Kamalden	Traumatic cyclodialysis cleft repair: (short surgical video), 5 mins	5:06 PM	5:17 PM	11 mins
Remzi Avci	Vitrectomy and large tumor resection for severe cases of retinal capillary hemangioblastoma	5:17 PM	5:28 PM	11 mins
Giampaolo Gini	The Timing for Reconstructive Surgery in Open Globe Trauma	5:28 PM	5:39 PM	11 mins
Ihab Saad Othman	Intraocular Tumor in opaque ocular media: can we conserve	5:39 PM	5:50 PM	11 mins
Tariq Khan Marwat	Q&A: Surgical Retina Symp 10, Vitreo Retina Trauma	5:50 PM	6:00 PM	10 mins

100 Session Code Oculoplastics IC, Fundamental Techniques of Oculoplastic Surgery

Chairman	Zafar UI Islam	Shalimar B		
Co-Chair	Brig. Abid Naqvi	10-Dec-22	Start	5:00 PM
Moderator	Fahd Kamal Akhtar	Saturday	End	6:00 PM
Zahid Kamal Siddiqui	Incision, hemostasis, and wound care	5:00 PM	5:10 PM	10 mins
Brig. Abid Naqvi	Stitch Craft	5:10 PM	5:20 PM	10 mins
Zafar UI Islam	Skin Grafts	5:20 PM	5:30 PM	10 mins
Zafar UI Islam	Flap	5:30 PM	5:40 PM	10 mins
Fahd Kamal Akhtar	Post operative care	5:40 PM	5:50 PM	10 mins
Fahd Kamal Akhtar	Q&A: Oculoplastics IC, Fundamental Techniques of Oculoplastic Surgery	5:50 PM	6:00 PM	10 mins

101 Session Code Medical Retina Symp 6, Uveitis

Chairman	Eiman Mahmoud Abd El-Latif Dessouki	Shalimar C		
Co-Chair	Mohamed A. Tawfik	10-Dec-22	Start	5:00 PM
Moderator	Nasir Chaudhry	Saturday	End	6:00 PM
Eiman Mahmoud	White dot syndromes	5:00 PM	5:07 PM	7 mins
Abd El-Latif Dessouki				
Eiman Mahmoud	Uveitic glaucoma: Paradigm-shifting notes	5:07 PM	5:14 PM	7 mins
Abd El-Latif Dessouki				
Mahmoud M Soliman	Retinal Vasculitis; differential diagnosis	5:14 PM	5:21 PM	7 mins
Mario Saravia	Medical topic: Mystery cases	5:21 PM	5:28 PM	7 mins
Sohaib Abbas Malik	Role of Suprachoroidal Triamcinolone In Uveitis	5:28 PM	5:35 PM	7 mins
Amila Alikadic Husovic	Update on Uveitis	5:35 PM	5:42 PM	7 mins



Day 3, Saturday 10th December, 2022

Ali Zain	Stem cell therapy in end stage retinitis pigmentosa	5:42 PM	5:49 PM	7 mins
Nasir Chaudhry	Q&A: Medical Retina Symp 6, Uveitis	5:49 PM	6:00 PM	11 mins

102 Session Code Community Ophthalmology 2

Chairman	Zahid Kamal Siddiqui	Emerald A		
Co-Chair	Shahid Dayyal	10-Dec-22	Start	5:00 PM
Moderator	Muhammad Iqbal Javaid	Saturday	End	6:00 PM
Zahid Kamal Siddiqui	Inclusive Health Practices in Eyecare Pakistan	5:00 PM	5:08 PM	8 mins
Muhammad Iqbal Javaid	Frequency of diabetic retinopathy among known diabetic patients visiting eye department of tertiary care hospital	5:08 PM	5:16 PM	8 mins
Beenish Latif	Celebrating World Sight Day at departmental store in Lahore	5:16 PM	5:24 PM	8 mins
Zahid Kamal Siddiqui	Pilot of Advance Primary Eye Care at Rural areas in Punjab	5:24 PM	5:32 PM	8 mins
Munazza Gillani	Diabetic retinopathy service delivery and integration into the health system in Pakistan—Findings from a ulticentre qualitative study	5:32 PM	5:40 PM	8 mins
Yumna Tariq	The impact of low vision services on quality of life in subjects with Stargardt's disease	5:40 PM	5:48 PM	8 mins
Muhammad Iqbal Javaid	Q&A: Community Ophthalmology 2	5:48 PM	6:00 PM	12 mins

103 Session Code Retina IC, Artificial Intelligence

Chairman	Shalimar B			
Co-Chair	11-Dec-22	Start	9:00 AM	
Moderator	Rehman Siddiqui	Sunday	End	10:00 AM
Rehman Siddiqui	Artificial Intelligence	9:00 AM	9:50 AM	50 mins
Rehman Siddiqui	Q&A: Retina IC, Artificial Intelligence	9:50 AM	10:00 AM	10 mins

104 Session Code Grand Clinical Meeting

Chairman	Tariq Shakoor	Shalimar C		
Co-Chair	Arshad Mahmood	11-Dec-22	Start	9:00 AM
Moderator	Raza Ali Shah	Sunday	End	10:00 AM
Tariq Shakoor	Grand Clinical Meeting	9:00 AM	10:00 AM	60 mins
Arshad Mahmood	Grand Clinical Meeting	9:00 AM	10:00 AM	60 mins
Raza Ali Shah	Grand Clinical Meeting	9:00 AM	10:00 AM	60 mins



Day 4, Sunday 11th December, 2022

Afsah Farooq	Case Presentation: Dermolipoma	9:00 AM	9:06 AM	6 mins
Sara Haroon	The role of phacoemulsification in the management of angle closure glaucoma	9:06 AM	9:12 AM	6 mins
Abeer Fatima	A Journey of Tears, Fears, Hope and Faith	9:12 AM	9:18 AM	6 mins
Amna Latif	Granulomatous Polyangiitis And Its Ocular Complications	9:18 AM	9:24 AM	6 mins
Sana Chaudhry	Optic Disc Pit Maculopathy	9:24 AM	9:30 AM	6 mins
Komal Waris	A 1.6 year Old Child with A Red Mark on Her Face	9:30 AM	9:36 AM	6 mins
Usman Shabbir	Case of Sudden deterioration Of Vision	9:36 AM	9:42 AM	6 mins
Sana Ashraf	Squamous Cell Carcinoma of Eyelid	9:42 AM	9:48 AM	6 mins
Hira Tanveer	Orbital Cellulitis	9:48 AM	9:54 AM	6 mins

105 Session Code WIOP Video Session

Chairman	Seema Qayyum	Emerald A		
Co-Chair	Naureen Khalid Mian	11-Dec-22	Start	9:00 AM
Moderator	Sofia Iqbal	Sunday	End	10:00 AM
Aruba Zafar	Scleral Fixation Techniques	9:00 AM	9:06 AM	6 mins
Naz Jehangir	Orbital floor fracture repair using titanium mesh	9:06 AM	9:12 AM	6 mins
Khushbakht	Managing Iris and Vitreous Prolapse 1 month after Cataract Extraction	9:12 AM	9:18 AM	6 mins
Aamna Jabran	A challenging case of hard cataract	9:18 AM	9:24 AM	6 mins
Ambreen Gul	Botox for Blepharospasm from Preparation to Injection	9:24 AM	9:30 AM	6 mins
Nausheen Hayat	Gliding Mid-face lift, an innovation in Plastics	9:30 AM	9:36 AM	6 mins
Huma Kayani	Lensectomy and Intraocular foreign body removal	9:36 AM	9:42 AM	6 mins
Soufia Farrukh	Penetrating keratoplasty	9:42 AM	9:48 AM	6 mins
Madeeha Naeem	RRD with PVR: how to handle	9:48 AM	9:54 AM	6 mins
Sofia Iqbal	Q&A: WIOP Video Session	9:54 AM	10:00 AM	6 mins

106 Session Code Glaucoma Symp 6, Pediatric Glaucoma

Chairman	Nasir Saeed	Emerald B		
Co-Chair	Israr Ahmed	11-Dec-22	Start	9:00 AM
Moderator	Mian M. Shafique	Sunday	End	10:30 AM
Nasir Saeed	Management of Childhood Glaucomas	9:00 AM	9:10 AM	10 mins
Seema Qayyum	How to Approach a Child with Glaucoma	9:10 AM	9:20 AM	10 mins
Mian M. Shafique	Specialized Surgical Procedures for the Management of Paediatric Glaucoma	9:20 AM	9:30 AM	10 mins



Day 4, Sunday 11th December, 2022

Israr Ahmed	Combined Trabeculotomy with Trabeculectomy in Paediatric Glaucoma	9:30 AM	9:40 AM	10 mins
Saima Amin	Non-invasive Options in Paediatric Glaucoma	9:40 AM	9:50 AM	10 mins
Sumaira Altaf	Congenital Glaucoma: Looking for the Bright Side	9:50 AM	10:00 AM	10 mins
Lubna Siddiq Mian	Long term outcomes of AGV implantation in pediatric glaucoma	10:00 AM	10:10 AM	10 mins
Mian M. Shafique	Q&A: Glaucoma Symp 6, Pediatric Glaucoma	10:10 AM	10:30 AM	20 mins

107 Session Code Oculoplastics Symp 6, Ocular Surface Disorders and Orbit II

Chairman	Gangadhara Sundar	Emerald C		
Co-Chair	Ibrar Hussain	11-Dec-22	Start	9:00 AM
Moderator	Khawaja Khalid Shoaib	Sunday	End	10:30 AM
Zahid Kamal Siddiqui	Results of Interferon for conjunctival neoplasia	9:00 AM	9:08 AM	8 mins
Farzad Pakdel	Target therapy in thyroid eye disease	9:08 AM	9:16 AM	8 mins
Gangadhara Sundar	Thyroid Eye Disease - What's new	9:16 AM	9:24 AM	8 mins
Ibrar Hussain	Conjunctival Lymphangioma	9:24 AM	9:32 AM	8 mins
Khawaja Khalid Shoaib	Conjunctival Neoplasia	9:32 AM	9:40 AM	8 mins
M Salman Hamza	Emerging hope: Stem cell transplantation in Ocular Surface disorders	9:40 AM	9:48 AM	8 mins
Imran Akram Sahaf	Dry Eye-complications and management	9:48 AM	9:56 AM	8 mins
Ashok Grover	Covid associated Mucormycosis- the epidemic within a Pandemic	9:56 AM	10:04 AM	8 mins
Yasser Khan	Orbital fracture repair	10:04 AM	10:12 AM	8 mins
Khawaja Khalid Shoaib	Q&A: Oculoplastics Symp 6, Ocular Surface Disorders and Orbit II	10:12 AM	10:30 AM	18 mins

108 Session Code Cataract Symp 3, Great debate - Handling Phaco complications- Step by step

Chairman	Crystal A			
Co-Chair	11-Dec-22	Start	9:00 AM	
Moderator	Majeed Malik	Sunday	End	10:30 AM
Zia Ul Mazhary	Run away Capsulorrhhexis: Argentina flag sign	9:00 AM	9:05 AM	5 mins
Soufia Farrukh	Run away Capsulorrhhexis:	9:05 AM	9:10 AM	5 mins
Majeed Malik	Run away Capsulorrhhexis: Calcified capsule	9:10 AM	9:15 AM	5 mins
Yehia Salaheldin	Management of PCR: PCR Management at any stage	9:15 AM	9:20 AM	5 mins
Muhammad Tayyab	Management of PCR: Management of PCR during Nucleus sculpting	9:20 AM	9:25 AM	5 mins



Day 4, Sunday 11th December, 2022

Hussain A. Khaqan	Management of PCR: PCR & nucleus drop (per-op handling)	9:25 AM	9:30 AM	5 mins
Majeed Malik	Management of PCR: PCR during capsular cleaning	9:30 AM	9:35 AM	5 mins
Zia Ul Mazhary	Management of PCR: PCR during I/A	9:35 AM	9:40 AM	5 mins
Zia Ul Mazhary	Management of PCR: PCR during IOL insertion	9:40 AM	9:45 AM	5 mins
Umair Qidwai	Management of PCR: Managing complications at any stage	9:45 AM	9:50 AM	5 mins
M Tariq Khan	Suprachoroidal haemorrhage- How to save the eye/sight?	9:50 AM	9:55 AM	5 mins
Sharif Hashmani	Suprachoroidal haemorrhage- How to save the eye/sight?	9:55 AM	10:00 AM	5 mins
Majeed Malik	Q&A: Cataract Symp 3, Great debate - Handling Phaco Complications – Step by step (Video based)	10:00 AM	10:30 AM	30 mins

109 Session Code Surgical Retina Symp 11, Diabetic Vitrectomy

Chairman	Shahid Wahab	Crystal B		
Co-Chair	Mir Ali Shah	11-Dec-22	Start	9:00 AM
Moderator	Kashif Iqbal	Sunday	End	10:30 AM
Muhammad Samir Alhadad	Diabetic Maclar Traction, All Weapon	9:00 AM	9:12 AM	12 mins
Usman Mahmood	Vitreous haemorrhage management	9:12 AM	9:24 AM	12 mins
Amer Awan	Safety and outcomes of 27 gauge pars plana vitrectomy in diabetic tractional retinal detachment	9:24 AM	9:36 AM	12 mins
Huma Kayani	Diabetic vitrectomy and ILM peel	9:36 AM	9:48 AM	12 mins
Ali Afzal Bodla	Updates On ADED Surgical Management	9:48 AM	10:00 AM	12 mins
Syed Fazal Shah	Use of Intraoperative OCT personal experience	10:00 AM	10:12 AM	12 mins
Kashif Iqbal	Q&A: Surgical Retina Symp 11, Diabetic Vitrectomy	10:12 AM	10:30 AM	18 mins

110 Session Code Pediatrics IC 1, Difficult Squints made easy

Chairman	Shalimar B			
Co-Chair	11-Dec-22	Start	10:30 AM	
Moderator	Ali Ayaz Sadiq	Sunday	End	11:30 AM
Khawaja Khalid Shoab	Duane syndrome, Inf. oblique anterior recession & transposition, Knapp, DVD	10:30 AM	10:55 AM	25 mins
Ali Ayaz Sadiq	Browns, 3rd & 6th nerve palsy, slipped muscle, Restrictive muscle sequelae	10:55 AM	11:20 AM	25 mins
Ali Ayaz Sadiq	Q&A: Pediatrics IC 1, Difficult Squints made easy	11:20 AM	11:30 AM	10 mins



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111	Session Code	Resident Free Paper 4			
Chairman	Tariq Shakoor	Shalimar C			
Co-Chair	Arshad Mahmood	11-Dec-22	Start	10:30 AM	
Moderator	Raza Ali Shah	Sunday	End	11:30 AM	
Adnan Abdul Majeed	A rare case of Pachydermoperiostosis and its Ocular manifestations	10:30 AM	10:36 AM	6 mins	
Rehan Naqaish	Comparison of Two Hole Assisted Phaco Chop with Stop and Chop Technique for Nuclear Disassembly in Resident	10:36 AM	10:42 AM	6 mins	
Muhammad Nasir Khan	Unusual presentation of cavernous hemangioma of upper eye lid	10:42 AM	10:48 AM	6 mins	
Adnan Abdul Majeed	Von Hippel Lindau Syndrome (VHLS)	10:48 AM	10:54 AM	6 mins	
Faraz Munir	Evaluation and monitoring of phacoemulsification skills of post graduate residents by adopting a standardized tool – International Council of Ophthalmology – Ophthalmology Surgical Competency Assessment Rubrics (ICOOSCAR)	10:54 AM	11:00 AM	6 mins	
Ashvinah Qayyum	Ocular findings in children with Developmental delay	11:00 AM	11:06 AM	6 mins	
Memoona Rafique	Comparison of the intraoperative safety, efficacy and post surgical outcomes of coaxial and bimanual irrigation aspiration modalities in phacoemulsification surgery	11:06 AM	11:12 AM	6 mins	
Azam Mughal	Diagnostic accuracy of direct ophthalmoscopy and Non-Mydriatic Retinal Photography for screening of Diabetic Retinopathy	11:12 AM	11:18 AM	6 mins	
Nuan Zhang	High Prevalence of Demodex Infestation is Associated with Poor Blood Glucose Control in Type 2 Diabetes Mellitus: A Cross-Sectional Study in the Guangzhou Diabetic Eye Study	11:18 AM	11:24 AM	6 mins	
Raza Ali Shah	Q&A: Resident Free Paper 4	11:24 AM	11:30 AM	6 mins	

112	Session Code	Young Ophthalmology (YO) Symposium			
Chairman	Hussain A. Khaqan	Emerald A			
Co-Chair	Aamna Jabran	11-Dec-22	Start	10:30 AM	
Moderator	Anum Haneef	Sunday	End	11:30 AM	
Aamna Jabran	Transfers out of city; how life changes	10:30 AM	10:35 AM	5 mins	
Sidrah Riaz	Women in ophthalmology	10:35 AM	10:40 AM	5 mins	



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Anum Haneef	Art, Science and Human	10:40 AM	10:45 AM	5 mins
Fatima Mehmood	Working experience in private sector	10:45 AM	10:50 AM	5 mins
Fahd Kamal Akhtar	Working with cocktail of mentors	10:50 AM	10:55 AM	5 mins
Muhammad Ali Haider	Professional challenges faced by a young ophthalmologist	10:55 AM	11:00 AM	5 mins
Irfan Karamat	Making your own setup from baseline	11:00 AM	11:05 AM	5 mins
Adeel Randhawa	From resident to fellow, how things change suddenly	11:05 AM	11:10 AM	5 mins
Hafiz Ateeq ur Rehman	Working experience in periphery	11:10 AM	11:15 AM	5 mins
Arooj Amjad	Maintaining work life balance in medical field	11:15 AM	11:20 AM	5 mins
Muhammad Hassaan Ali	Research Journey of a Young Ophthalmologist	11:20 AM	11:25 AM	5 mins
Anum Haneef	Q&A: Young Ophthalmology (YO) Symposium	11:25 AM	11:30 AM	5 mins

113	Session Code	Surgical Retina Free Paper 3			
Chairman	Sohail Shahzad	Emerald B			
Co-Chair	Ahmad Zeeshan Jamil	11-Dec-22	Start	11:00 AM	
Moderator	Tariq Qureshi	Sunday	End	12:30 PM	
Mohammad Jawad	Correlating patient appointments and clinical outcome for management of WET AMD	11:00 AM	11:08 AM	8 mins	
Huma Ali Mirza	Incidence of Acute Endophthalmitis After Intravitreal Bevacizumab Injection at a Tertiary Care Hospital in Lahore	11:08 AM	11:16 AM	8 mins	
Salman Naveed Sadiq	A Multivariable Prognostic Prediction Model for Diabetic Retinopathy Progression for High-Risk Patients Under the Hospital Care	11:16 AM	11:24 AM	8 mins	
Sana Jahangir	Safety and efficacy of scleral buckling with 360 tire for management of rhegmatogenous retinal detachment	11:24 AM	11:32 AM	8 mins	
Tehseen Mahmood Mahju	Result of Macular Hole Surgery with ILM inverted flap	11:32 AM	11:40 AM	8 mins	
Muhammad Amjad	Clinical Presentation and Outcomes of Pediatric ERM surgery	11:40 AM	11:48 AM	8 mins	
Haroon Tayyab	In vitro comparison of various high speed vitrectomy machines using dual blade cutter	11:48 AM	11:56 AM	8 mins	
Abdul Sami Memon	Vitrectomy in Terson Syndrome	11:56 AM	12:04 PM	8 mins	
Ayesha Khan	Genetic association of vascular endothelial growth factor (VEGF) gene variants with the risk for diabetic retinopathy: a meta-analysis	12:04 PM	12:12 PM	8 mins	
Tariq Qureshi	Q&A: Surgical Retina Free Paper 3	12:12 PM	12:30 PM	18 mins	



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114	Session Code	Oculoplastics Symp 7 Orbit & Lacrimal			
Chairman		Imran Akram Sahaf	Emerald C		
Co-Chair		Irfan Qayyum	11-Dec-22	Start	11:00 AM
Moderator		Sidrah Latif	Sunday	End	12:30 PM
Syeda Aisha Bokhari		Congenital NLD block	11:00 AM	11:10 AM	10 mins
Muhammad Sharjeel		Management of congenial NLD block with viscoelastic	11:10 AM	11:20 AM	10 mins
Imran Akram Sahaf		Fornix formation -different techniques	11:20 AM	11:30 AM	10 mins
Zahid Kamal Siddiqui		Alternate methods for Laster Jhon intubation	11:30 AM	11:40 AM	10 mins
Ramsha Jehangir		Post Traumatic Cicatricial Ectropion correction with skin grafting	11:40 AM	11:50 AM	10 mins
Sidrah Latif		Optic nerve sheath fenestration in Idiopathic Intracranial hypertension	11:50 AM	12:00 PM	10 mins
Sadia Imtiaz, Hafiza		Anterior Lamellar repositioning with blephroplasty for upper lid entropion	12:00 PM	12:10 PM	10 mins
Sadia Imtiaz, Hafiza		Lateral trasal strip for involutinal entropion	12:10 PM	12:20 PM	10 mins
Sidrah Latif		Q&A: Oculoplastics Symp 7 Orbit & Lacrimal	12:20 PM	12:30 PM	10 mins

115	Session Code	Cataract Symp 4, Video Cataract Symp			
Chairman		Sharif Hashmani	Crystal A		
Co-Chair		Tariq Mahmood Arain	11-Dec-22	Start	11:00 AM
Moderator		Majeed Malik	Sunday	End	12:30 PM
Nadeem Riaz		Mastering Capsulorrhexis	11:00 AM	11:05 AM	5 mins
Majeed Malik		Capsulorrhexis in soft milky cataract & Hydro-IOL implantation	11:05 AM	11:10 AM	5 mins
Khalid Mahmood		Phaco in Post-PKP patients	11:10 AM	11:15 AM	5 mins
Hussain A. Khaqan		PC rent with dropped nucleus management	11:15 AM	11:20 AM	5 mins
Muhammad Tayyab		PC rent management in posterior polar cataract	11:20 AM	11:25 AM	5 mins
Muhammad Tayyab		Iridodialysis repair	11:25 AM	11:30 AM	5 mins
Zia Ul Mazhary		Plug assisted haptic tucking to manage aphakia with deficient capsule	11:30 AM	11:35 AM	5 mins
Ejaz Latif		Managing Soft Cataract	11:35 AM	11:40 AM	5 mins
Ejaz Latif		Handling difficult cataract with capsular dehiscence in two steps	11:40 AM	11:45 AM	5 mins
Hamza Ali Tayyab		Management of subluxated lens using hybrid approach	11:45 AM	11:50 AM	5 mins
Hamza Ali Tayyab		Management of subluxated bag/IOL complex-A novel approach	11:50 AM	11:55 AM	5 mins
Hamza Ali Tayyab		Phaco in Microspherophakia.	11:55 AM	12:00 PM	5 mins



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Huma Kayani	Removal of dropped lens & fixation with Yamani technique	12:00 PM	12:05 PM	5 mins
Huma Kayani	Opaque IOL: How to go about it	12:05 PM	12:10 PM	5 mins
Sharmeen Akram	Toric IOL implantation surgery	12:10 PM	12:15 PM	5 mins
Nasir Chaudhry	Phaco in Occlusio/Seclusio Pupillae	12:15 PM	12:20 PM	5 mins
M Tariq Khan	Phaco in Silicon oil filled eyes	12:20 PM	12:25 PM	5 mins
Zahid Kamal Siddiqui	Suprachoroidal Haemorrhage during Phaco	12:25 PM	12:30 PM	5 mins
Majeed Malik	Q&A: Cataract Symp 4, Video Cataract Symp	12:30 PM	12:30 PM	0 mins

116	Session Code	Quiz Competition			
Chairman	Aamir Ahmed	Crystal B			
Co-Chair	Khawaja Khalid Shoab	11-Dec-22	Start	11:00 AM	
Moderator	Sohail Shahzad	Sunday	End	12:30 PM	
Aamir Ahmed	Quiz Competition	11:00 AM	12:30 PM	90 mins	
Khawaja Khalid Shoab	Quiz Competition	11:00 AM	12:30 PM	90 mins	
Sohail Shahzad	Quiz Competition	11:00 AM	12:30 PM	90 mins	
Mehreen Akram	Quiz - Team, Unit 1, LGH	11:00 AM	12:30 PM	90 mins	
Iqra Qureshi	Quiz - Team, Unit 1, LGH	11:00 AM	12:30 PM	90 mins	
Muhammad Farqaleet	Quiz - Team, Unit 2, LGH	11:00 AM	12:30 PM	90 mins	
Fatima Khalid	Quiz - Team, Unit 2, LGH	11:00 AM	12:30 PM	90 mins	
Muhammad Usman Zia	Quiz - Team, Unit 3, LGH	11:00 AM	12:30 PM	90 mins	
Laraib Hassan	Quiz - Team, Unit 3, LGH	11:00 AM	12:30 PM	90 mins	
Attiya Yaseen	Quiz - Team, Sheikh Zayed Hospital	11:00 AM	12:30 PM	90 mins	
Mahpara Raza	Quiz - Team, Sheikh Zayed Hospital	11:00 AM	12:30 PM	90 mins	
Salman Ahmad Khan	Quiz - Team, SIMS Hospital	11:00 AM	12:30 PM	90 mins	
Noman Aleem	Quiz - Team, SIMS Hospital	11:00 AM	12:30 PM	90 mins	
Marium Khalid	Quiz - Team, LMDC Hospital Lahore	11:00 AM	12:30 PM	90 mins	
Asma Mehmood	Quiz - Team, LMDC Hospital Lahore	11:00 AM	12:30 PM	90 mins	
Sana Shafqat	Quiz - Team, Jinnah Hospital LHR	11:00 AM	12:30 PM	90 mins	
Marium Mumtaz	Quiz - Team, Jinnah Hospital LHR	11:00 AM	12:30 PM	90 mins	
Kouser	Quiz - Team, Quaid e Azam Medical College Bahawalpur	11:00 AM	12:30 PM	90 mins	
Maham Imran	Quiz - Team, Quaid e Azam Medical College Bahawalpur	11:00 AM	12:30 PM	90 mins	
Shahzaib Qureshi	Quiz - Team, Mayo Hospital Unit I	11:00 AM	12:30 PM	90 mins	
Jaweria Tariq	Quiz - Team, Mayo Hospital Unit I	11:00 AM	12:30 PM	90 mins	
Huma Ali Mirza	Quiz - Team, Mayo Hospital Unit II	11:00 AM	12:30 PM	90 mins	
Maria Khalid	Quiz - Team, Mayo Hospital Unit II	11:00 AM	12:30 PM	90 mins	
Saima Khalid	Quiz - Team, Mayo Hospital Unit III	11:00 AM	12:30 PM	90 mins	



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Bahadur Iftikhar	Quiz - Team, Mayo Hospital Unit III	11:00 AM	12:30 PM	90 mins
Muhammad Zeeshan	Quiz - Team, Sir Ganga Ram Hospital	11:00 AM	12:30 PM	90 mins
Tayyaba Shafqat	Quiz - Team, Sir Ganga Ram Hospital	11:00 AM	12:30 PM	90 mins

117 Session Code Diagnostics IC, Ultrasound Biomicroscopy

Chairman	Suhail Sarwar	Shalimar B		
Co-Chair	11-Dec-22	Start	11:30 AM	
Moderator	Saman Ali	Sunday	End	12:30 PM
Shaista Kanwal	Introduction to UBM	11:30 AM	11:40 AM	10 mins
Saman Ali	Difference between A-scan & B-scan	11:40 AM	11:50 AM	10 mins
Zia-ur-Rehman	Ocular structures seen in UBM	11:50 AM	12:00 PM	10 mins
Mudassir Fatima	Uses, indications & contraindications	12:00 PM	12:10 PM	10 mins
Suhail Sarwar	Differences from anterior segment OCT	12:10 PM	12:20 PM	10 mins
Saman Ali	Q&A: Diagnostics IC, Ultrasound Biomicroscopy	12:20 PM	12:30 PM	10 mins

118 Session Code Resident Free Paper 5

Chairman	Tariq Shakoor	Shalimar C		
Co-Chair	Arshad Mahmood	11-Dec-22	Start	11:30 AM
Moderator	Raza Ali Shah	Sunday	End	12:30 PM
Adnan Abdul Majeed	Role of social media In Ophthalmology Learning	11:30 AM	11:36 AM	6 mins
Sehrish Momin	Prevalence of hypovitaminosis D in patients with uveitis	11:36 AM	11:42 AM	6 mins
Usman Mumtaz	Role of intravitreal chemotherapy for persistent vitreous seeds	11:42 AM	11:48 AM	6 mins
Laraib Hassan	Outcomes of 23G vs 25G micro incision Vitrectomy for diabetic Tractional retinal detachment	11:48 AM	11:54 AM	6 mins
Nabeel Akram	Visual outcomes of Harada disease	11:54 AM	12:00 PM	6 mins
Muhammad Usman Zia	Comparison of treatment outcome of systemic chemotherapy versus intra-arterial chemotherapy for retinoblastoma	12:00 PM	12:06 PM	6 mins
Atia Nawaz	Diagnostic accuracy of Optical coherence tomography to diagnose cystoid macular edema in patients with diabetes mellitus taking Fundus fluorescein angiography as gold standard	12:06 PM	12:12 PM	6 mins
Ahmad Fauzan	Treatment outcomes of Group D & Group E Retinoblastoma	12:12 PM	12:18 PM	6 mins



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Hafiz Mubashir Farooqui	Comparison of the efficacy between an intravitreal and suprachoroidal injection of triamcinolone acetonide for the treatment of refractory macular edema	12:18 PM	12:24 PM	6 mins
Taimoor Ashraf Khan	A cost effective visual field monitoring	12:24 PM	12:30 PM	6 mins
Raza Ali Shah	Q&A: Resident Free Paper 5	12:30 PM	12:36 PM	6 mins

119 Session Code Research IC 4, Stem cell therapy in Ophthalmology

Chairman	Emerald A			
Co-Chair	11-Dec-22	Start	11:30 AM	
Moderator	Irfan Karamat	Sunday	End	12:30 PM
Irfan Karamat	Introduction to Stem Cell Therapy	11:30 AM	11:45 AM	15 mins
Irfan Karamat	Techniques of harvesting of stem cells	11:45 AM	12:00 PM	15 mins
Irfan Karamat	Indications of stem cells therapy in ophthalmology	12:00 PM	12:15 PM	15 mins
Irfan Karamat	Q&A: Research IC 4, Stem cell therapy in Ophthalmology	12:15 PM	12:30 PM	15 mins

120 Session Code Closing Ceremony

Chairman	Grand Ball Room B			
Co-Chair	11-Dec-22	Start	12:30 PM	
Moderator	Sunday	End	1:30 PM	

121 Session Code Inauguration Ceremony AACO 2022

Chairman	Grand Ball Room B			
Co-Chair	09-Dec-22	Start	7:00 PM	
Moderator	Friday	End	8:30 PM	
Lezheng Wu	Inauguration Ceremony AACO 2022	7:00 PM	8:30 PM	90 mins
Mazhar Ishaq	Inauguration Ceremony AACO 2022	7:00 PM	8:30 PM	90 mins
Muhammad Moin	Inauguration Ceremony AACO 2022	7:00 PM	8:30 PM	90 mins
Chaudhary Javed Iqbal	Inauguration Ceremony AACO 2022	7:00 PM	8:30 PM	90 mins
Tarek Mamoun	Inauguration Ceremony AACO 2022	7:00 PM	8:30 PM	90 mins
Hussain A. Khaqan	Inauguration Ceremony AACO 2022	7:00 PM	8:30 PM	90 mins
Muhammad Moin	Welcome Address	7:00 PM	7:05 PM	5 mins
Hussain A. Khaqan	Annual Report OSP Lahore 2022	7:05 PM	7:10 PM	5 mins
Mazhar Ishaq	Address by Congress President, AACO 2022	7:10 PM	7:20 PM	10 mins
Lezheng Wu	Facing the Challenges in the New Times for AACO – Celebration on the 64th Anniversary of AACO	7:20 PM	7:30 PM	10 mins



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Muhammad Yaqin	Address by Guest of Honour	7:30 PM	7:35 PM	5 mins
M Lateef Ch	Address by Patron OSP Lahore	7:35 PM	7:40 PM	5 mins
Hussain A. Khaqan	Souvenirs to Dignitaries & Guest Speakers	7:40 PM	7:55 PM	15 mins
Hussain A. Khaqan	OSP Lahore Awards 2022	7:55 PM	8:10 PM	15 mins
Abdul Jalil Daula	Address by Chief Guest	8:10 PM	8:20 PM	10 mins
Chaudhary Javed Iqbal	Vote of Thanks	8:20 PM	8:30 PM	10 mins





Abstracts





Type of Presentation: Free papers (06 minutes)

Specialty: Cataract

Evaluating the therapeutic response of intra-vitrear moxifloxacin in acute postoperative (cataract) endophthalmitis

Author: Dr. Adnan Ahmad
Institution: Nowshera Medical College, Nowshera

Purpose: To assess the effectiveness and side effects of injecting intra-vitrear moxifloxacin (IV-M) in the treatment of acute post-operative (cataract) endophthalmitis having visual acuity \geq hand movements.

Study Design: Interventional case series study.

Material & Methods: Thirty (30) patients with post-op endophthalmitis who presented within 4 weeks with visual acuity (VA) \geq hand movements (HM) received two IV-M injection at 24 hr. interval at an Eye department. Patients with prior history of ocular diseases or intra-vitrear injections were excluded. Patients were followed up to 12 weeks either for improvement or deterioration of endophthalmitis. No. of patients who attained VA \geq 6/12 and 6/60 at the 12th week visit were compared with the no. of patients at presentation, by performing statistical analysis. In addition, pre-therapy VA converted into logarithm of minimum angle of resolution (Log MAR) at the time of presentation was compared with post-therapy VA at end of 12th week by using repeated measure ANOVA test.

Result/Conclusion: Twenty five (83.3%) patients completely resolved while two patients underwent core vitrectomy. 14 (46.66%) and 22 (73.34%) patients achieved VA \geq 6/12 and 6/60, respectively at 12th week visit as compared to 04 (13.33%) and 08 (26.66%) patients respectively at the time of presentation ($p = 0.043$). In the same way, mean Log MAR VA pre-intervention was 0.811 which improved to 0.344 at the 12th week ($P < 0.05$). We didn't observe any toxicity to IV-M.

Type of Presentation: Free papers (06 minutes)

Specialty: Cataract

Original research

Author: Irshad Hussain
Institution: CMH Peshawar

Purpose: To compare the prevalence of capsulorrhexis extension with cystitome needle and phacocapsulotomy in intumescent cataract.



Study Design: Prospective interventional study.

Material & Methods: After approval of institutional ethical review committee, all the patient having intumescent cataract planned for surgery were included in the study. Each patient underwent complete outpatient ophthalmological work up. Congenital, developmental and traumatic cataract were excluded. The patients were randomly assigned to two groups. After standard temporal 2.75 mm phaco incision, Group A underwent two stage capsulorrhexis with needle 23 G microcapsulorrhexis forceps and aspiration of lens cortex with Simcoecannula after initial mini-rhexis. Group B underwent puncturing of anterior capsule with phaco needle and aspiration of soft lens matter with phaco needle followed by completion of the surgery in the standard manner.

Result/Conclusion: A total of 83 patients were included in the study. Group A included 41 patients while Group B had 42 patients. 4 (9.75%) patients from Group A and 1 (2.38%) patients from Group B had peripheral extension of the rhexis which was retrieved with Little's maneuver in all the 5 patients. Phacocapsulotomy was about 4 times safer technique in ensuring an intact CCC when compared with 2-staged microcapsulorrhexis forceps.

Specialty: Cataract

Deep Fundus: A flow cytometry-like image quality classifier for boosting the whole lifecycle of medical artificial intelligence

Author Lixue Liu

Institution: Zhongshan Ophthalmic Center, Sun Yat-sen University

Purpose: Medical artificial intelligence (AI) has moved from research phase to clinical implementation, with retinal imaging-based diagnostics being one of the frontiers. However, these authorized AI diagnostics have encountered multiple socio-environmental hurdles in real-world studies, which can significantly impact data quality and downstream analysis and currently require already overburdened medical specialists to address. Therefore, we aimed to engineer deep learning models to facilitate acquisition of high-quality data and thus improve real-world application of medical AI.

Study Design: Prospective study.

Material & Methods: We developed and validated Deep Fundus, a deep learning-based fundus image monitor for real-time quality assessment and interpretable instructions of fundus photography, using 33,852 images derived from 8 real-world settings. All images were labelled regarding three clinically established aspects (clarity, illumination, and position) and the affected areas (macula, optic disc, or the rest retinal areas). For images with poor clarity, slit-lamp photographs of the corresponding eyes were inspected to determine whether the blurredness is



caused by refractive media opacity. To further evaluate the effectiveness of Deep Fundus in real-world application of AI diagnostics, we conducted a clinical trial to compare the performance of an authorized AI diagnostic system for multiple retinopathies (Diabetic retinopathy, age-related degeneration, and optic disc oedema) in different quality groups. This study was registered with ClinicalTrials.gov, NCT04289064, and is currently closed.

Result/Conclusion: The area under the receiver operating characteristic curve (AUC) of Deep Fundus to identify various image quality defects in different retinal areas was 0.909-0.985 in the internal test set and 0.945-0.989 in the external test set. Deep Fundus also showed an AUC of 0.955 for distinguishing refractive media opacity from the rest of the blurred images when externally tested. After Deep Fundus filtration, an authorized AI diagnostic system achieved significantly higher accuracies for detection of age-related macular degeneration. Deep Fundus exhibited robust performance in interpretable quality assessment and real-time instructions for retinal photography. When integrated into AI diagnostics, Deep Fundus can contribute to enhanced overall quality of retinal images, accurate detection of multiple retinopathies and improved real-world application of AI diagnostics.

Type of Presentation: Free papers (06 minutes)

Specialty: Community Ophthalmology

Frequency of Ocular Diseases in patients presenting at Eye Department Fauji Foundation Hospital Peshawar

Author: Dr. Lubna Adeeb
Institution: Fauji Foundation Hospital Peshawar

Purpose: To find out the frequency of ocular diseases, gender distribution among patients visiting Eye OPD Fauji Foundation Hospital (FFH) Peshawar for planning of awareness, prevention and management of eye diseases in multi-disciplinary Hospital.

Study Design: Cross-sectional, observational study.

Material & Methods: Study was conducted at Eye Department FFH Peshawar, from 15 Jan 2022 to 15 Jul 2022. Complete eye examination was carried out in each patient and diagnosis was entered in Hospital Management System (HMS) Software. At the end of Study the data was taken from HMS and entered in SPSS to calculate Male to Female Ratio and frequencies of diseases. A total of 2576 patients were enrolled in study.

Result/Conclusion: Male to Female ratio was 1: 9. Frequencies of ocular diseases were Blepharitis (17%), Allergic Conjunctivitis (14 %), Cataract (13%), Dry Eyes (8%), Diabetic Retinopathy (4%), corneal disorders (4%), other diseases (40%) which will be highlighted in presentation.



Type of Presentation: Free papers (06 minutes)

Specialty: Community Ophthalmology

Effect of covid-19 pandemic on postgraduate resident training in ophthalmology: An aspect to be pondered

Author Ayesha Hanif

Institution: GMC/DHQ Teaching Hospital

Purpose: In this study we aim to find out the impacts of the pandemic on postgraduate training of ophthalmology residents.

Study Design: Cross-sectional study.

Material & Methods: A cross-sectional study was conducted on 42 post graduate residents of ophthalmology department of tertiary care hospitals in Punjab, with a mean age of 27.9 years using an online 19-point questionnaire. The questionnaire included four sections that are clinical work skills, online classes, exams and mental health.

Result/Conclusion: Of all the residents, 40 (95.3%) stated that their surgical hands-on duration 36 (85.7%) responded that clinical exposure was adversely affected by the pandemic. As for online classes, only 14 (35%) trainees favored online teaching. Among all the subjects, 34 (80.9%) were concerned about their exam preparation and delay. 90% residents were depressed over their training effects.

Type of Presentation: Free papers (06 minutes)

Specialty: Cornea

Single-Cell Transcriptome Profiling of Human Corneas Reveals the Pathogenesis of Keratoconus

Author Shuai Ouyang

Institution: Zhongshan Ophthalmic Centre, Sun Yat-sen University

Purpose: The aim of this study was to elucidate the cellular heterogeneity and underlying pathogenesis of keratoconus (KC) by single-cell RNA sequencing (scRNA-seq).

Study Design: Single-Cell Transcriptome Profiling of Human Corneas and Keratoconus

Material & Methods: Single cells isolated from central mature corneas of healthy donor (HD) and KC patients were used for scRNA-seq via the 10x Genomics platform. Functional changes of cell types were analyzed by enrichment analysis. Pseudo time analysis as well as cell communication analysis were performed to reveal the cellular heterogeneity of KC. Immunofluorescence was used to validate target protein.



Result/Conclusion: Here, we performed single-cell RNA-seq sequencing to construct a transcriptomic atlas of 64,239 cells in KC and HD corneas. Among 11 cell types we identified, we revealed a decrease in the proportion of basal cells and an increase in the proportion of wing cells and superficial cells in KC. In addition, we characterized cell subtype-specific molecular changes in the epithelium in detail and demonstrated the upregulation of interferon signaling specifically involved in KC epithelium. Furthermore, we showed a shift in the cell status of epithelial subtypes in KC and blockade of the immune interferon factor IFI27 might delay its development. Finally, we uncovered that extracellular matrix degradation signals occur mainly in keratocytes and aberrant interactions between the subtypes of epithelial and stromal cells underlie pathological manifestations in KC. Our study provides new insights into the pathogenesis of KC and clues about potential molecular targets for nonsurgical treatment.

Type of Presentation: Free papers (06 minutes)

Specialty: Cornea

Tectonic Penetrating Keratoplasty in Perforated Infectious Corneal Ulcer

Author Prof Soufia Farrukh

Institution: Quaide Azam Medical College, Bahawalpur

Purpose: To determine the effectiveness of a tectonic graft in patients with perforated corneal ulcers.

Study Design: Interventional.

Material & Methods: Data of patients undergoing tectonic graft for perforated corneal ulcers from Jan 21 to Jun 22. Outcomes and complications.

Result/Conclusion: Tectonic grafting performed for perforated corneal ulcers successfully restored the globe integrity in 94.4% of cases. The rate of graft transparency was 83.3% at 1 year irrespective of the etiological agent or perforation size.

Type of Presentation: Free papers (06 minutes)

Specialty: Cornea

To see the role of Toric IOL in terms of visual improvement in cases of Keratoconus

Author Ali Zain Ul Abidin

Institution: King Edward medical university /Ali retina eye hospital



Purpose: To evaluate the Toric IOL in terms of visual improvement in cases of Keratoconus.

Study Design: Case control series.

Material & Methods: After approval from ethical review board and with patients consent Case Control study was performed in Ali Retina care. A detailed history and slit lamp examination was performed. A total of 35 patients were included. Inclusion criteria were patients with all ages, patients with advanced keratoconus with no hydrops, patients having no visual improvement with refractive glasses Exclusion criteria was patients with hydrops and corneal opacities. All surgeries were done by single Consultant surgeon at Ali Retina Care. After complete pre evaluation, limbal markings were done in supine position at 0 and 180 degrees. Toric IOL calculator was used to evaluate the exact marking and placement of the IOL. Clear lens extractions were done and IOLs were placed along the decided markings. Follow ups were conducted at 3 days and then 3 months. Data on Visual acuity, IOP, complications, interventions and glaucoma medication was collected. This procedure was performed in Keratoconus cases. Toric IOLs were transplanted intraocularly after clear lens extraction. Primary outcome is to measure the role of toric IOL in Keratoconus patients in terms of improvement in astigmatism and visual acuity.

Result/Conclusion: Significant visual improvement was seen in all cases.

Type of Presentation: Free papers (06 minutes)

Specialty: Cornea

Melatonin attenuates LPS-induced proinflammatory cytokine response and lipogenesis in human meibomian gland epithelial cells

Author Ren Liu

Institution: State Key Laboratory of Ophthalmology, Zhongshan Ophthalmic Center, Sun Yatsen University, Guangzhou, People's Republic of China

Purpose: We examined whether lipopolysaccharide (LPS) induced a proinflammatory cytokine response and lipogenesis in differentiated human meibomian gland epithelial cells (HMGECS) and whether melatonin (MLT), a powerful anti-inflammatory reagent in the eyes, could protect against LPS-induced abnormalities.

Study Design: Cellular research in vitro.

Material & Methods: Human meibomian gland (MG) tissues and immortalized HMGECS were stained to identify Toll-like receptor (TLR) 4 and MLT receptors (MT1 and MT2). HMGECS were pretreated with or without MLT and then stimulated with LPS. Then, TLR4 activation, cytokine levels, lipid synthesis, apoptosis, autophagy, and MAPK/NF- κ B factor phosphorylation in



HMGECs were analyzed.

Result/Conclusion: TLR4, MT1, and MT2 were expressed in human MG acini and HMGECs. Pretreatment with MLT inhibited the TLR4/MyD88 signaling and attenuated Pro-inflammatory cytokine response and lipogenesis in LPS-stimulated HMGECs, which manifested as decreased production of cytokines (IL-1 β , IL-6, IL-8, and TNF- α), reduced lipid droplet formation, and down regulated expression of meibumlipogenic proteins (ADFP, ELOVL4, and SREBP-1). Lysosome accumulation and cytoplasmic cleaved caspase 3/LC3B-II staining were increased in LPS-stimulated HMGECs, indicating enhanced cell death mediated by poptosis and autophagy during LPS-induced lipogenesis. MLT downregulated cleaved caspase 3 levels and the Bax/Bcl-2 ratio to alleviate apoptosis and ameliorated the expression of Beclin 1 and LC3B-II to inhibit autophagy. The protective mechanisms of MLT include the inhibition of MAPK and NF- κ B phosphorylation. Conclusion: MLT attenuated lipogenesis, apoptosis, and autophagy in HMGECs induced by pro-inflammatory stimuli, indicating the protective potential of MLT in MGD.

Type of Presentation: Free papers (06 minutes)

Specialty: Cornea

Long term outcome of tacrolimus skin ointment 0.03% in treatment of advance Vernal keratoconjunctivitis

Author Dr. Warda Ali
Institution: Al Shifa Trust Eye Hospital Rawalpindi

Purpose: To evaluate the efficacy and safety of tacrolimus skin ointment 0.03 in treatment of VKC.

Study Design: Prospective nonrandomized interventional study.

Material & Methods: A two year follow up based studywas conducted on moderate to severe VKC patients and they were prescribed tacrolimus skin ointment. The 5-5-5 exacerbation scale was used for monitoring and grading severity of disease. ANOVA and intergroup comparisons were conducted on exacerbation scale scores among follow ups.

Result/Conclusion: A significant reduction was observed in the total score of severity from baseline (203.17 \pm 102.05) to three months follow up (69.94 \pm 70.54) and it kept reducing for 18 months post therapy. Similar results with statistically significant reduction were observed for all grades of the scale. The relapse rate was 5.71% within a month after therapy cessation and none of the other patients showed relapse afterwards. Any ocular or systemic complication was not observed during study.

Conclusion: Tacrolimus is effective in long term management of VKC without the complications of conventional steroid based therapy.



Type of Presentation: Free papers (06 minutes)

Specialty: Cornea

The Causal Effect of Obesity on the Risk of Keratoconus: A Mendelian Randomization Study

Author Xi Chen

Institution: Zhongshan Ophthalmic Center, China

Purpose: Keratoconus (KCN) is characterized by reduced rigidity of the cornea with distortion and focal thinning that causes blurred vision. Several observational studies have demonstrated an association between obesity and the risk of KCN. However, it can still not provide firm conclusions about the correlation.

Study Design: Observational Study (Mendelian Randomization Study).

Material & Methods: We performed Mendelian randomization (MR) study, a novel method, to evaluate whether genetically obesity influences the risk of KCN. Using genome-wide association study (GWAS) summary statistics from GIANT, MRC-IEU UK Biobank, and FinnGen, we examined the causality and directionality of the association between obesity and KCN. Baseline measurements of BMI and waist-to-hip ratio (WHR) were used to estimate general obesity and central obesity, respectively. Two-sample MR evaluated the causal effects of obesity on the risk of KCN. Inverse-variance-weighted (IVW) method was the primary MR analysis, whereas Cochran's Q test, weighted-median, MR Pleiotropy Residual Sum and Outlier (PRESSO) test, and MR-Egger regression were utilized to detect pleiotropy or heterogeneity.

Result/Conclusion: Genetically predicted higher BMI was significantly associated with a higher risk of KCN (odds ratio [OR] = 2.003, 95% CI = 1.203–3.335, P = 0.008). The weighted median, MR-Egger, and MR-PRESSO provided consistent associations. However, we failed to detect a causal effect of WHR on KCN (OR = 0.578, 95% CI = 0.196–1.705, P = 0.321). Sensitivity analyses confirmed that the findings were robust to possible pleiotropy. Moreover, there is no evidence for the direct causal effect of multiple obesity-related chronic diseases on KCN (all P >0.05). General obesity, rather than central obesity, could serve as a strong, independent, and causal contributor to KCN. Our findings provide new insights into potential association between keratoconus and obesity.



Type of Presentation: Free papers (06 minutes)

Specialty: General Ophthalmology

Mutational analysis of CYP1B1 (rs56010818) variant in Primary open angle glaucoma (POAG) affected patients of Pakistan

Author Professor Dr Ashok Kumar Narsani

Institution: Liaquat University of Medical & Health Sciences Jamshoro Sindh

Purpose: To reveal the homozygous and heterozygous patterns of CYP1B1 c.1169 G > A variant (rs56010818) in POAG patients of Pakistan.

Study Design: It is a descriptive study.

Material & Methods: After consent, total n = 88 POAG patients underwent standard ophthalmological investigations before their recruitment in this study. The blood samples were utilized for DNA isolation. The genotyping of CYP1B1 c.1169 G > A variant was carried out by Sanger sequencing. The mutational pattern and its association with clinical variables was demonstrated by statistical and bioinformatics tools.

Results: It was evident that the frequencies of heterozygous G/A and homozygous mutant's A/A genotypes were higher in males (36.5%, 7.7%) than females (30.6%, 2.8%) of POAG population. Furthermore, the juvenile patients exhibit high manifestation of carrier genotype (66.6%) in comparison to adult patients (31.7%). The results also indicated the significant relationship of intraocular pressure with homozygous mutant A/A genotype of CYP1B1 variant in POAG patients ($p < 0.05$).

Conclusions: Our study provided the mutational data of CYP1B1 R390H variant and The patterns of homozygosity and heterozygosity along with clinical associations. Overall, this study revealed the genetic predisposition of CYP1B1 c.1169 G > A variant in the patients of POAG in Pakistan. The findings could be helpful for genetic screening and in-depth understanding of underlying causes in the pathogenesis of POAG.

Type of Presentation: Free papers (06 minutes)

Specialty: General Ophthalmology

Integrated Bioinformatics Analysis Combined with Machine Learning Reveal Commonality in Mechanisms of Myopia

Author Xi Chen

Institution: Zhongshan

Purpose: Myopia could arise from various factors, including environmental factors and genetic



factors. If we can determine these molecular sharing mechanisms of myopia arising from different reasons, we might provide novel treating targets for various kinds of myopia, which could eventually benefit millions of myopiapaitents. Two types of induction, form-deprived myopia (FDM) and lens-induced myopia (LIM), have been performed in several animals; an in-depth comparison of gene patterns of various myopic models could be a breakthrough point to the common and novel treating targets of various kinds of myopia.

Study Design: Animal Research Studies.

Material & Methods: The self-developed Python web information collection tool Spider Article v3.0 was utilized to obtain all articles related to FDM and LIM from MEDLINE and OLDMEDLINE after 1950. The image-type articles were converted into text using optical character recognition (OCR) technology, and all text-type articles were cut into words after eliminating all irrelevant symbols that were not letters and numbers. The cut words were compared with Uniports and Gene Cards databases to obtain FDM and LIM-related gene sets. The genism and jieba modules in Python were used to analyze the gene word frequency situation and text correlation of FDM and LIM, respectively. We combined the natural language processing technology and statistical method to obtain critical genes of the two experimental models. After the overlap analysis, the overlapping genes were further annotated to KEGG, egg NOG, CAZy, and Reactome databases for pathway analysis using the self-developed Python module pyEnrich v2.1.0. Moreover, the underlying drugs were predicted by drug-gene interaction analysis.

Result/Conclusion: After data collection, data pre-processing, database matching, and text correlation filtering, 2703 FDM-related genes and 625 LIM-related genes were obtained, and Experimental Myopia-Gene Knowledge Graph was successfully established. After multiple artificial intelligence strategies and overlap analysis, 108 critical genes of myopic commonalities were obtained, and various databases suggested that the key genes might be involved in gliogenesis, visual learning, and histone deacetylase binding. Moreover, we found new evidence that atropine exerts a therapeutic effect on myopia. Data mining and artificial intelligence could obtain more comprehensive and key gene clusters, improving the efficiency and depth of screening; meanwhile, the use of Python to complete network information collection, text mining, and bioinformatics analysis could help further explore the pathogenesis of myopia and provide new clues for early treatment of myopia. Moreover, finding commonalities in the onset and progression of various models of myopia would facilitate the generalizability of treatment.



Type of Presentation: Free papers (06 minutes)

Specialty: General Ophthalmology

Single-Cell Transcriptome Analysis Reveals Immune Cells Heterogeneity of Vogt-Koyanagi-Harada (VKH) Disease.

Author Shuai Ouyang

Institution: Zhongshan Ophthalmic Centre, Sun Yat-sen University

Purpose: Vogt-Koyanagi-Harada (VKH) disease is one of the most common forms of pan uveitis in China, yet the pathogenesis remains largely unexplored. We mainly performed single cell transcriptome analysis to reveal immune cell heterogeneity and cell-cell interaction signals in immune microenvironment in the pathogenesis of acute VKH.

Study Design: Single-Cell Transcriptome Analysis Reveals Immune Cells Heterogeneity of Vogt-Koyanagi-Harada (VKH) Disease.

Material & Methods: The single cell transcriptome sequencing (scRNA-seq) public datasets GSE148020 of VKH was downloaded from the Gene Expression Omnibus (GEO) database. We utilized single cell transcriptome analysis using the R package Seurat v4. Moreover, functional enrichment analyses, cell communication analysis and transcription factor regulation analysis were performed to explore immune cell heterogeneity.

Result/Conclusion: We constructed a single cell atlas comprising of 47853 PBMC of VKH, and identified 12 cell types according to marker genes. Differential expression gene (DEGs) analysis showed that in VKH, major antigen-presenting cells CD14+ Monocytes and mDC cells function enriched in antigen-presenting, T, NK and NKT cells mainly involved in acute immune responses and immune activation functions, upregulated function of plasma cells and mast cell related to increased protein translation, synthesis and processing. Moreover, we uncovered VKH involves multiple immune cell-cell interactions increased and cell communication signals were dysfunctional in VKH. In addition, we revealed that pro-immunity and inflammation transcription factors like USF2, IRF8, POU2F2 and JUN were activated while anti-immunity and inflammation transcription factors such as ETS2 and MXD4 were suppressed in the majority of cell types of VKH. We firstly revealed cell heterogeneity and cell-cell interaction signals dysregulation in peripheral blood immune cell based on scRNA-seq approach. These findings deepened our understanding of the pathogenesis of VKH and provided potential target cell population or target genes for immunotherapy and anti-inflammation treatments.



Type of Presentation: Free papers (06 minutes)

Specialty: General Ophthalmology

Results and complications of Ahmed glaucoma valve between neovascular and other secondary glaucomas; a one year follow-up.

Author Dr. Aneeq Mirza

Institution: Islamic International Medical College/Riphah International University, Islamabad

Purpose: To document and compare the visual and tonometric results between neovascular and other secondary glaucomas one year after Ahmed glaucoma valve implantation and to record their complications.

Study Design: Prospective observational study.

Material & Methods: 26 neovascular and 28 other secondary glaucomas underwent implantation of Ahmed glaucoma valve (model FP7). The valve plate was implanted 8-10 mm behind the limbus in suprotemporal quadrant, in all the cases. Cases of neovascular glaucoma were given intravitreal Avastin 5-7 days before surgery. The preoperative vision and IOP were compared with the one year postoperative vision and IOP. Complications (if any) were recorded in all the cases. Success criteria was defined as IOP of 5- 21 mmHg without topical therapy (complete success), IOP of 5- 21 mm Hg with topical therapy (qualified success), no loss of light perception and not requiring subsequent glaucoma surgery or tube removal.

Result/Conclusion: The male: female ratio was 20:6 in neovascular group and 17:11 in other secondary glaucomas group. The age range was 49-73 years in neovascular and 30-70 years in the second group. In neovascular group, the one year postoperative vision improved in 12 cases, decreased in 6 and remained stable in 8 cases. In the second group, one-year postoperative vision improved in 12, decreased in 7 and remained stable in 9 cases. Similarly, the IOP in neovascular group decreased in 25 and remained stable (within 3 mmHg) in one case. In other secondary glaucomas group, the IOP decreased in 26, increased in one and remained stable in one case. In the neovascular group the mean preoperative IOP was 40.42 which reduced to mean postoperative IOP of 15.88 mmHg. In the second group, the mean preoperative IOP was 33.78 which reduced to 14.53 mmHg one year postoperatively. In the neovascular group, hypertensive phase was encountered in 17, hyphema in 4, tube-cornea touch in one and cystic bleb in one case. In the second group, hypertensive phase was seen in 18, diplopia in one and ptosis/diplopia in one case. Neovascular group showed complete success in 7, qualified success in 17 and failure in 2 cases. In the second group, complete success was seen in 7, qualified success in 19 and failure in 2 cases. Cases of secondary glaucoma not controlled with topical therapy carry a poor prognosis. Without aggressive surgical intervention, they are prone to



complete visual loss. The most notorious among them is neovascular glaucoma. Ahmed glaucoma valve implantation is effective in saving useful vision and controlling IOP in majority of these cases and the results are comparable between neovascular and othertypes of glaucoma.

Type of Presentation: Free papers (06 minutes)

Specialty: General Ophthalmology

Optic nerve sheath fenestration for salvaging acutely threatened vision in Idiopathic Intracranial Hypertension- a two-year completed follow up

Author Sidrah Latif
Institution: Mayo Hospital Lahore

Purpose: To determine the efficacy and safety of Optic Nerve Sheath Fenestration (ONSF) for salvaging acutely threatened vision in patients of Idiopathic Intracranial Hypertension (IIH).

Study Design: Prospective, interventional case series.

Material & Methods: This prospective, interventional case series included nine patients diagnosed with Idiopathic Intracranial Hypertension as per Modified Dandy Criteria, and underwent medial trans-conjunctival ONSF. Pre-operative and 1st day, 1st week, 1st month, 1st year, and 2nd year postoperative best-corrected logMAR visual acuities (BCVA) were recorded. Mean BCVA was calculated and compared using paired t-test. P-value <0.05 was taken as significant.

Result/Conclusion: All nine patients were females with a mean age of 24 years. The average best-corrected pre-operative logMAR visual acuity (BCVA) in the better eye was 0.5 ± 0.28 and in the worse eye was 1.0 ± 0.57 . After the worse eye ONSF, at 1st week mean BCVA in better eyes was 0.27 ± 0.32 (p-value=0.001), while it was 0.43 ± 0.63 (p-value=0.006) in the worse eyes. At 2nd year follow-up after optic nerve sheath fenestration mean BCVA in better eye was 0.30 ± 0.30 (p-value = 0.002) and in worse eye was 0.44 ± 0.63 (p-value = 0.007). Four patients (44.4%) had a subconjunctival hemorrhage, two patients (22.2%) had binocular diplopia, one patient (11.1%) pre-septal cellulitis, and one patient (11.1%) had no improvement in vision because of pre-operative secondary optic atrophy. All patients had unilateral fenestration and bilateral improvement, 6 patients (66.67%) reported improvement in headache and successful tapering of medical therapy. Optic nerve sheath fenestration is effective as well as a safe surgical procedure to salvage acutely threatened vision in patients of Idiopathic Intracranial Hypertension on maximal medical treatment.



Type of Presentation: Free papers (06 minutes)

Specialty: Glaucoma

Scleral perforation following transscleral diode laser cycloablation

Author Afshan Ali
Institution: LRBT Korangi Karachi

Purpose: Transscleral Diode laser cycloablation (DLCA) is one of the cycloablative procedures usually used for treating cases of refractory glaucoma. We report here a case of 92 years old man, who underwent DLCA in his left painful blind eye. He presented with scleral perforation two weeks after the procedure in the same area where laser was applied. Patient had to undergo tectonic and conjunctival graft procedure on emergency basis to avoid phthisis, pain and infection. His post op intraocular pressure (IOP) is 10 with graft in place. To author's knowledge, this is first reported case of scleral perforation following DLCA.

Study Design: Case report.

Material & Method: Transscleral Diode laser cycloablation.

Result/Conclusion: Late Perforation is a possible complication of this procedure.

Type of Presentation: Free papers (06 minutes)

Specialty: Glaucoma

Comparison of outcomes of 1st and 2nd generation cyclo G6 probe for micro pulse diode laser

Author Mahmood Ali
Institution: Al-Shifa Trust Eye Hospital, Rawalpindi, Pakistan

Purpose: To Compare outcomes of 1st and 2nd generation cyclo G6 probe for micro pulse diode laser in terms of efficacy and safety.

Study Design: Retrospective analysis of patient records.

Material & Methods: A total of 53 eyes were included in the study out of which 29 eyes (group 1) were treated with first generation MP probe while rest of 24 eyes (group 2) received micro pulse diode laser with the second generation MP probe (Iridex). A standard protocol of laser delivery was followed in all cases with power of 2000mW, time of 180 seconds with a duty cycle of 31.3%. Pre and post-operative intraocular pressures in both groups were compared along with any complications reported during early and late post-operative period. Success was defined as an IOP between 6 and 18 mm of Hg at 6 months follow-up.

Result/Conclusion: Mean pre-operative IOPs were similar in both groups while mean



post-operative IOPs were 14.38 mm of Hg (Group 1) and 12.69 mm of Hg (Group 2). Although mean IOP at 6 months post operatively was lesser in group 2 the difference was not statistically significant ($p = 0.17$).

Type of Presentation: Free papers (06 minutes)

Specialty: Medical Retina

Incidence of Acute Endophthalmitis After Intravitreal Bevacizumab Injection at a Tertiary Care Hospital in Lahore

Author Huma Ali Mirza

Institution: Department of Ophthalmology, Mayo Hospital, Lahore

Purpose: We aimed to assess the incidence, management and visual outcome of acute endophthalmitis in patients following intravitreal bevacizumab injection in a tertiary care setup.

Study Design: Prospective. Single-center database study.

Material & Methods: Patients receiving intravitreal bevacizumab injections for various retinal vascular diseases from January 2019 to September 2020. The study was carried out at the Institute of Ophthalmology, Mayo hospital, Lahore over a period of 21 months. Preformed bevacizumab injections were administered intravitreally to patients of various retinal vascular diseases under strict aseptic measures and by following the standard guidelines. Patients were examined over a follow up period of 4 weeks to see any signs of endophthalmitis.

Result/Conclusion: A total of 3051 injections were administered in 1104 eyes of 743 patients during the above mentioned study period. The incidence of endophthalmitis was found to be 0.0328% (1/3051). The patient who developed endophthalmitis was treated with topical and intravitreal antibiotics followed by vitrectomy that resulted in clinically significant improvement in vision.

Type of Presentation: Free papers (06 minutes)

Specialty: Medical Retina

Stem cell therapy in ophthalmology, future is knocking

Author Dr. Muhammad Irfan Karamat

Institution: Ibrahim Eye Center/Iffat Anwar Hospital

Purpose: The purpose is to study the safety and efficacy of peripheral blood derived stem cells/growth factors in different retinal /optic nerve diseases.

Study Design: Interventional case series.



Material & Methods: A pilot study was designed in order to determine safety and efficacy of peripheral blood derived autologous stem cells/growth factors in patients of Retinitis Pigmentosa/Stargardt/primary open angle glaucoma etc. 40 patients including both male and female included in the study. Base line Visual acuity, OCT for RNFL thickness and ERG were performed. Patients were given two growth factor sessions at specific stimulating points (Acupuncture points) on the superficial skin with a gap of 15 days and then peripheral blood derived stem cells were injected in sub-tenon space. A follow up of 6 weeks, 12 weeks and 24 weeks.

Result: Initial results are encouraging. There is improvement in Visual Acuity and Visual Fields. No adverse effects were seen, Short term complications or adverse patients' symptoms were documented during the procedure. We are still collecting data and will comprise the final results in few months.

Conclusion: Stem cell therapy is safe and its short term effects are encouraging, however we should further plan trials in order to prove its efficacy in retinal degenerative conditions.

Type of Presentation: Free papers (06 minutes)

Specialty: Medical Retina

Savable or not Savable retinoblastoma outcomes- Recent highlights

Author: Lubna Siddiq Mian
Institution: Lahore General Hospital, Ameer ud Din Medical College and Post Graduate Medical Institute

Purpose: To review the ocular and systemic outcomes of cases presenting with retinoblastoma.

Study Design: Prospective interventional case series.

Material & Methods: Pre-treatment retinoblastoma was classified according to ICRB (International Classification of Retinoblastoma) into groups from A to E for intraocular tumors and into stage 2 to 4 for extra ocular tumors. The need for advanced local chemotherapy in the form of IAC or Intra vit Chemotherapy was noted. Ocular outcomes were studied in terms of eye salvage and vision preservation. Systemic outcomes were studied in terms of hematogenous metastasis, intra cranial metastasis and mortality.

Result/Conclusion: Fifty eyes of 30 patients were included in the study, of which 12 eyes needed IAC while 8 eyes needed Intra vit Chemotherapy, 29 out of 30 patients received systemic chemotherapy and one was treated with IAC alone. 21 out of 50 eyes were saved, while 29 eyes had more advanced disease, of them 27 had enucleation, one had exenteration and one received palliative therapy due to hematogenous and intracranial metastasis. Of the 21 saved



eyes 17 had good vision, 3 had dense amblyopia due to macular tumor and better other eye, and one lost vision to CRAO after intra arterial chemotherapy.

Type of Presentation: Free papers (06 minutes)

Specialty: Medical Retina

Who did actually get worrisome ROP? Birth Weight Characteristics

Author Lubna Siddiq Mian

Institution: Lahore General Hospital, Ameer ud Din Medical College, Post Graduate Medical Institute

Purpose: To study the birth weight characteristics of infants who actually got ROP needing treatment.

Study Design: Cross sectional study.

Material & Methods: This is a retrospective descriptive case series that includes babies screened for ROP at Lahore General Hospital (LGH) over seven years from 2015 to 2021. These infants were either recruited from LGH NICU or referred from other hospitals for screening or treatment purpose. The study aims at identifying babies who developed type1 or worse ROP; including stage 3 with plus, APROP, stage4 and stage 5 ROP. Birth weight and gestational age characteristics were studied in those infants.

Result/Conclusion: 3646 premature infants was enrolled in ROP program from NICU of LGH having birth weight of 2 kg or less and/or gestational age of 35 weeks or less, of these 3646 infants 2104 (55.24%) survived to discharge and were provided with ROP screening schedule and informed about the possibility of irreversible blindness in case ROP progresses untreated. Of the 2014 surviving infants 1534 were screened (76.16%), while 570 lost to follow up with the majority (255 infants) born in the year 2020 coinciding with the pandemic of COVID-19 (44.7%). Of the 1534 infants who were screened, 155 needed treatment (10.10%), 153 for type 1 ROP and 2 for bilateral stage 4 ROP. This study also included 112 infants referred from other hospitals. Most of these patients presented with bilateral advanced stage 5 ROP 72/110 (65.45%), 25 had type 1 ROP in both eyes, and 26 eyes of fifteen patients were operated for stage 4 ROP, of them 11 patients had bilateral stage 4 ROP, 2 infants had stage 4 in one eye and stage 3 in the other eye. 2 infants had stage 4 in one eye and stage 5 in the other eye.



Type of Presentation: Free papers (06 minutes)

Specialty: Medical Retina

A Multivariable Prognostic Prediction Model for Diabetic Retinopathy Progression for High-Risk Patients Under the Hospital Care

Author: Salman Naveed Sadiq
Institution: Royal Victoria Infirmary, Newcastle, UK

Purpose: We aim to develop a multivariable prognostic prediction model to predict DR progression and identify patients at high risk of treatment or vision loss. We propose this model will optimize follow up intervals, allow better communication of prognosis to patients and judicious use of resources.

Study Design: Mixed methods – systematic review, Nominal group technique and evidence review, Development and Internal Validation of prediction model.

Material & Methods: Initially, a systematic review was performed to identify existing modelling studies and data was extracted on model characteristics, predictive ability and validation, and were assessed for quality using criteria specified by PROBAST and CHARMS checklists. Subsequently, a set of 19 clinically meaningful predictors were identified using NGT and evidence reviewed. These predictors and anonymized patient database from primary care routine practice were then used to develop a prediction model and its goodness of fit, calibration and discrimination were examined. Model was then internally validated using bootstrapping and C-statistics calculated.

Result/Conclusion: We have developed and internally validated new prognostic prediction model to assess the risk of vision loss and blindness or need for treatment in patients with referable diabetic retinopathy. The model shows good performance and has the potential to be used to identify patients with referable diabetic retinopathy.

Type of Presentation: Free papers (06 minutes)

Specialty: Medical Retina

Diabetic Macular Edema

Author: Dr. Adnan Ahmad
Institution: Nowshera Medical College, Nowshera

Purpose: To compare the effectiveness of intra-vitreous Diclofenac-Sodium (IV-D) versus intra-vitreous Triamcinolone Acetonide (IV-T) in the treatment of diabetic macular edema (DME).



Study Design: Quasi Experimental study.

Material & Methods: We recruited 40 eyes with diabetic macular edema (DME). Two groups were made. One group was assigned to 4 mg/0.1 cc of IV-T and the other group received 0.5 mg/0.1 cc of IV-D. There were 20 eyes in each group. Pre and post-opbest corrected visual acuity (BCVA), intra-ocular pressure (IOP), and central subfield thickness of macula (CSFT) were documented and analyzed in both groups. The patients were followed up for 3 months after injection

Result/Conclusion: Both treatment arms displayed marked decrease in CSFT (IV-T with $p = 0.03$ and IV-D with $p = 0.02$), but the difference between groups were not statistically significant. Statistically significant improvement in BCVA was seen in IV-T from the baseline ($p = 0.04$). However, difference between the two groups regarding BCVA was not statistically significant. Transient increase in IOP occurred in 20% of IV-T. In IV-D reduction in IOP was observed that achieved the level of statistical significance ($p = 0.03$).

Type of Presentation: Free papers (06 minutes)

Specialty: Medical Retina

Quantifying retinal vessel density in posterior uveitis using spectral domain optical coherence tomography angiography

Author Dr. Muhammad Aamir Arain

Institution: CMH Peshawar

Purpose: To quantify parafoveal retinal vessel density in posterior uveitis using SD-OCTA.

Study Design: Cross-sectional, observational study.

Material & Methods: Healthy and posterior uveitic subjects were recruited from eye OPD CMH Peshawar from 15 Jan 2022 to 15 Jul 2022. SD-OCTA device (Optical Coherence Tomography RS-3000 Advance 2, Nidek, Japan) was used to generate $3 \times 3 \text{ mm}^2$ OCTA images centered on the fovea. Subjects were placed into 2 groups of 50 patients each. Normal healthy subjects in group 1 and posterior uveitic patients in group 2. A semi-automated method was used to calculate vessel density (VD). Retinal vasculature was assessed in the superficial retinal layer (SRL) and deep retinal layer (DRL) and compared among two groups. A P value < 0.05 was considered significant.

Result/Conclusion: The VD of the parafoveal capillaries was lower in posterior uveitic eyes compared to healthy eyes in all retinal segments. In addition, VD was significantly lower in the DRL of subjects with posterior uveitic macular edema.



Type of Presentation: Free papers (06 minutes)

Specialty: Medical Retina

Subthreshold laser for CSCR:A non-damaging treatment option

Author: Mariam Shamim
Institution: LRBT eye hospital Karachi

Purpose: To study efficacy and safety of sub threshold micro pulse laser for CSCR.

Study Design: Prospective, Interventional.

Material & Methods: 25 Patients with CSCR (> 3 months) were included in the study. Best corrected visual acuity (BCVA) was recorded with Snellen visual acuity chart and was converted to logMAR for statistical analysis. Baseline FAF and Spectral Domain Optical coherence tomography (SD-OCT) was performed. All patient was treated with subthreshold laser (810nm) in micro-pulse mode with 5% duty cycle (DC).

Result/Conclusion: Subthreshold diode laser (810 nm) is an effective and minimally invasive modality for the treatment of chronic CSCR.

Type of Presentation: Free papers (06 minutes)

Specialty: Medical Retina

Safety and clinical efficacy of suprachoroidal triamcinolone in refractory diabetic macular edema

Author: Ambreen Gul
Institution: Rawalpindi Medical University

Purpose: To determine the safety and clinical efficacy of suprachoroidal triamcinolone in cases of refractory diabetic macular edema.

Study Design: Prospective interventional non randomized case series.

Material & Methods: It is an on-going case series conducted at ophthalmology department of Benazir Bhutto Hospital, RMU. 10 eyes of 8 patients with resistant diabetic macular edema with central retinal thickness CRT of >350 micrometers are being enrolled. BCVA along with IOP and CRT pre-injection is documented. Patients are being followed at 1 month and 3 months for BCVA, IOP and CRT. Results are being analyzed via SPSS version 21.

Result/Conclusion: There were 30% females and 70 % males. Mean pre-injection CRT was 613 micronmeter and mean post-injection CRT was 340micron meter. Mean pre-injection BCVA was 0.1 Snellen's decimal and mean post-injection BCVA was 0.5. There was no rise in IOP in any patient. There was statistically significant reduction in CRT and improvement in BCVA ($p < 0.05$).



Suprachoroidal triamcinolone is safe and clinically effective (both functional and anatomical outcomes) in cases of resistant diabetic macular edema.

Type of Presentation: Free papers (06 minutes)

Specialty: Oculoplastics

Marcus Gunn Jaw Winking syndrome - surgical management

Author Dr. Syeda Aisha Bokhari

Institution: The Eye Center, South City Hospital, Karachi

Purpose: To assess the outcomes and complications of Levator Disinsertion and Frontalis Suspension in patients of ptosis with Jaw Winking Syndrome.

Study Design: Quasi Experimental study.

Material & Methods: 10 patients with ptosis secondary to Jaw Winking Syndrome were included in the study. There were 06 (60%) males and 04 (40%) females. Age range was 8 – 14 years. All patients were treated with levator disinsertion and frontalis suspension and post-operative complications were recorded. Follow ups were at one day, one week, one month, three months and six months post-operatively.

Result/Conclusion: 09 out of 10 patients were cosmetically acceptable and symptoms free, 01 needed a revision surgery.

Type of Presentation: Free papers (06 minutes)

Specialty: Oculoplastics

Endovascular treatment of proliferative and non-proliferative low flow vascular orbital lesions

Author Fahd Kamal Akhtar

Institution: Services Hospital, Lahore

Purpose: Vascular lesions of the orbit may be classified as proliferative and non-proliferative low flow vascular malformations. The best endovascular treatment option for these low flow lesions involves multi-staged sclerotherapy. We report our experience using bleomycin and bleomycin foam as a single stand-alone treatment.

Study Design: This was a retrospective clinical study conducted at Lahore General Hospital between 1st November 2018 to 31st December 2021.

Material & Methods: Thirty-four patients were included and the follow-up was 3–36 months. A



multidisciplinary approach was used to treat all lesions with sclerotherapy. Both intra-operative and postoperative adverse events were evaluated. The effect of treatment was evaluated by a grading system: grade I, no improvement in symptoms; grade II, pain, numbness, or swelling slightly relieved; grade III, pain, numbness, or swelling reduced up to the degree of tolerance, functional recovery to normal daily life; grade IV, no pain, numbness, swelling, or dysfunction, and skin pigmentation returned to normal.

Result/Conclusion: The criteria for evaluating the effectiveness of treatment were both clinical and MRI. The effect of treatment showed: grade IV in 18 patients, grade III in 13, grade II in 3, and grade I in none. In one patient major complication occurred directly related to sclerotherapy, unilateral blindness occurred 15 days later, which was due to CRAO. No other adverse effects including thrombo-embolic events were noted.

Type of Presentation: Free papers (06 minutes)

Specialty: Oculoplastics

Developmental issues in visual system in patients with blepharophimosis-ptosis-epicanthus inversus syndrome.

Author: Mohammad Idris

Institution: Ophthalmology Unit, Lady Reading Hospital, Peshawar

Purpose: To determine Developmental issues in visual system in patients with Blepharophimosis-ptosis-epicanthus inversus syndrome.

Study Design: Cross sectional observational study.

Material & Methods: Thirty seven patients with blepharophimosis-ptosis-epicanthus inversus syndrome who were referred for management. Ocular examination included measurement of Snellen visual acuity, cycloplegic refraction, ocular motility and orthoptic assessment, and the presence of amblyopia. Patients were treated with refractive glasses, amblyopia therapy, strabismus surgery, and oculoplastic surgery with Y-V plasty. The range of follow-up was 03 months to 30 months.

Result/Conclusion: Out of 37 patients, 4 (10.8%) had manifest squint which included 3 (75%) esotropia, 1 (25%) exotropia. Nystagmus was noted in one (2.7%) patient. Refractive errors were noted in 09 (24.3%) patients and were advised corrective glasses. Of these, 7 (77.78%) patients had anisometropic hypermetropia and 2 (22.23%) had anisometropic myopia. 3 (8.10 %) patients had unilateral amblyopia. All of these amblyopic patients had strabismus and refractive error.

Conclusion: Although, refractive errors and ocular misalignment with amblyopia are not uncommon, it's an important finding which should be corrected along with cosmetic treatment.



Type of Presentation: Free papers (06 minutes)

Specialty: Oculoplastics

Periocular Dermoid Cysts with Atypical Presentation and Their Surgical Outcome: A Study from North West Part of Pakistan

Author: Mohammad Idris

Institution: Ophthalmology Unit, Lady Reading Hospital, Peshawar

Purpose: To determine the frequency and surgical outcome of periocular dermoid cysts with atypical presentation.

Study Design: Interventional case series.

Material & Methods: This study was conducted after The Institutional Review Board (IRB) approval and written informed consent from patients/guardians. 31 Patients, who underwent surgical excision of the eyelid tumors in LRH Hospital from January 2014 to Jan 2021, were consecutively enrolled in the study. After histopathological report, cases with atypical presentation were included after complete surgical removal of mass. Exclusion criteria included lesions other than dermoid on histopathology and Imaging and patients without histopathology report. Data was analyzed and presented in the form of tables.

Result/Conclusion: A total of 31 patients with periocular dermoid cysts were enrolled with atypical presentation. Age ranged from 6 years to 35 years. Out of 31 patients, 17 (54.8%) were men and 14 (45.16%) were women. The location of cysts was 08 (25.8%) in Inferomedial region, 05 (16.12%) at orbital Floor, 11 (35.48%) insuperomedial region, 04 (12.9%) at orbital roof, 01 (3.2%) at temple, 01 (3.2%) at Upper eyelid in orbicularis area and only 01 (3.2%) at sub-Conjunctival level. The mean follow-up period was 06 ± 03 months (range from 1 to 24 months). All cysts did not recur during the follow-up periods (period). Rupture of cyst occurred in 03 (9.67%) cases and all including ruptured cysts were removed safely during surgery without recurrence at 24 months follow up. No systemic association was found in any case. Conclusion: commonest atypical location in the present study was orbital floor and surgical outcomes for all these lesions were excellent. Rupture rate during surgical excision was low and without any sequel.



Type of Presentation: Free papers (06 minutes)

Specialty: Optometry

Occurrence of Allergic conjunctivitis in medical students using visual display units

Author Rooma Farman

Institution: FMH college of Medicine and Dentistry

Purpose: To determine the occurrence of allergic conjunctivitis in medical students using visual display terminals for more than two hours age range between 18–26 years.

Study Design: Cross sectional.

Material & Methods: A history of presenting complaints was taken. Duration of visual display terminals was noted. Visual acuity was recorded in both eyes, first monocularly and then binocularly, using Snellen's chart. Subjective refraction was performed for subjects with VA <6/12. This was followed by a comprehensive anterior eye examination by the ophthalmologist with the slit- lamp biomicroscope. Data was analyzed using IBM-SPSS V-23 software.

Result/Conclusion: A total of 60 subjects appeared in eye OPD. The age of the subjects ranged between 18–26 years. The mean age of the patients was 21.95 ± 2.527 (Mean \pm SD). The number of women (n = 32) was higher than men (n = 28). The percentage was (53.3%) and (46.7%) respectively. Out of 60 subjects (n = 39) 65% presented with allergic conjunctivitis and (n = 21) 35% without allergic conjunctivitis after using visual display terminals for more than two hours. Most subjects with a higher percentage of allergic conjunctivitis used visual display terminals for more than eight to ten hours daily. The result was highly significant with the p-value <0.001. Conclusion(s): There was a strong association present between occurrence of allergic conjunctivitis and duration of visual display terminals use in medical students. Visual display terminals usage amongst students should be minimized to improve academic performance.

Type of Presentation: Free papers (06 minutes)

Specialty: Optometry

Effect of change in iris color on myopia

Author Faisal Rashid

Institution: Services Hospital, Lahore

Purpose: To assess the distribution of iris color and its relation with myopia.

Study Design: Cross Sectional study.

Material & Methods: From August 2021 to December 2021, a multi centered, cross-sessional



study was conducted. 300 individuals ranging in age from 11 to 25 years were selected through non-probability purposive sampling technique. All the patients had a maximum of 6 hours of screen time per day. Mild, moderate and severe degree of myopia was included. All subjects were examined for refraction, and slit lamp examination. Slit lamp photographs were used to grade iris color. The relationship between iris color and myopia was studied.

Result/Conclusion: Of the 300 subjects 188 (62.66 %) of the participants were female, with mild 70 (23%), moderate 51 (17%), and severe 67 (22.33%) myopia, while 112 (37.33%) of the participants were male, with mild 45 (15 %), moderate 40 (13.33%), and severe 27 (9%) myopia. 90% of the participants in the study had Grade 3, 4 and 5 iris color. Children with darker iris colors had more myopic refractive error. Study results indicate patients with Grade 5 iris color have a higher likelihood of becoming myopic ($p = 0.001$).

Type of Presentation: Free papers (06 minutes)

Specialty: Pediatric

Myopia, The Growing Eye Epidemic and its Prevention.

Author Prof. Dr Zafar Iqbal

Institution: Lady Reading Hospital, Peshawar

Purpose: Myopia is the biggest health issue affecting the humanity. From a prevalence of 10-20% by the middle of last century, it has increased to 50-90% in the developed world. At present 1.5 billion people are myopes. By the end of this decade 2.5 billion people will be myopes (one third of the world population). By 2050, 4.7 billion people will be myope. Various methods have been used to prevent/retard the progression of myopia. Pharmacological agents especially cycloplegics have been the main armamentarium in this regard. The purpose of this study is to study the effect of Topical 1% Cyclopentolate instilled once at night to retard/stop the progression of Myopia in Children.

Study Design: Case Series.

Material & Methods: This is a cohort of 20 children (40 eyes), with a mean age of 6.75 years (range 01 – 13 years). They all have completed two (2) years of follow up, whereas eight (8) of these children have completed five (5) years of follow up.

Result/Conclusion: The myopia at the start of this study ranged from -1.5D to -17.5D (Mean of -9.9D) in these children. Mean progression of Myopia was 0.5D for the 20 children who completed the two (2) year follow up. Whereas it was 0.44D for the eight (8) children who completed the five (5) years of follow up.



Type of Presentation: Free papers (06 minutes)

Specialty: Pediatric

LASIK in Pediatric age group with Anisometropia

Author Dr. Muhammad Ajmal Chaudhary

Institution: Sheikh Zayed Medical College, Rahim Yar Khan, Pakistan

Purpose: To analyze the results of Laser in Situ Keratomileusis (LASIK) in Anisometropic pediatric patients.

Study Design: It was experimental, Cross-Sectional. LASIK was performed in 15 anisometropic eyes of 15 children.

Material & Methods: After recording patient bio data, detailed ophthalmic and systemic history was taken. Examination included general and systemic, while ophthalmic examination included best corrected visual acuity (BCVA), intraocular pressure (IOP), refraction, slit lamp examination and fundus examination. Topography, pachymetry and mesopic pupil size were also recorded. Flap was taken with Moria disposable microkeratome. LASIK was carried out using Wave light and Bausch+Lomb technologies containing 193 nm argon fluoride excimer laser. Evaluation was done on 1st postoperative day, 1st week, 4th week, 3rd month, 6th month, 01 year, 02 year and on 03 years. In each visit uncorrected (VA), refraction, IOP, slit lamp examination, topography, response of amblyopia therapy, complications and patient's satisfaction level were recorded.

Result/Conclusion: LASIK was carried out in 15 anisometropic eyes. Preoperative BCVA range was from 6/18 to 4/60. Preoperative refractive range was +0.50DS to +5.50DS, 0.00DC to +3.50DC, -3.00DS to -9.00DS and -1.00DC to -3.50DC. At 03 year follow-up postoperative uncorrected VA was in the range from 6/6 to 6/18. Postoperative refractive range was 0.00DS to $\pm 1.50DS$, 0.00DC to $\pm 0.50DC$. Complications like silent debris/pigments in 02 eyes, under-correction in 01 eye, overcorrection in 01 eye and abrasion in 01 eye were noted.

Type of Presentation: Free papers (06 minutes)

Specialty: Pediatric

Retinoblastoma in underdeveloped world: Dilemma of Risk factors

Author Prof. Dr. Muhammad Arif. Co-Author: Prof. Dr. Zia Ul Islam

Institution: Department of Ophthalmology, Kuwait Teaching Hospital Peshawar Medical College

Purpose: To determine the risk factors which result in high mortality in registered



retinoblastoma patients

Study Design: Retrospective.

Material & Methods: This study involved 381 patients registered in Khyber teaching hospital and Kuwait teaching hospital between October 2018- October 2022. The patients were admitted in eye ward in related teaching hospitals. Evaluation under general anesthesia was carried out to determine laterality, number of tumors, size & location. A- Scan & B- Scan were done to confirm the diagnosis. CT- Scan Orbit and brain was done to exclude intracranial extension. Protocol of management included Chemo-therapy, enucleation, adjuvant therapy and external beam radiation as required. Patients with metastasis were diagnosed. Mortality was also recorded. Histopathological confirmation was done including optic nerve invasion to plan treatment.

Result/Conclusion: 381 patients were admitted. Age range was 1 month to 12 years with mean age 2.86 years. Out of which 208 were unilateral & 173 were bilateral. In 67 patients, there was orbital recurrence after enucleation. 10 deaths were recorded.

Type of Presentation: Free papers (06 minutes)

Specialty: Pediatric

Retinoblastoma in the North West Frontier, PAKISTAN

Author Prof. Dr. Zafar Iqbal

Institution: Lady Reading Hospital, Peshawar

Purpose: To determine the Demographics and Treatment Outcomes of Retinoblastoma in Children in this region.

Study Design: Case Series.

Material & Methods: This is a Cohort of 400 children with Retinoblastoma presenting to the authors during the period January 2000 to May 2015.

Result/Conclusion: Retinoblastoma presented at 2.19y and 3.31y of age in Bilateral and Unilateral cases respectively. Its prevalence was slightly higher in the Males. Although Leucocoria was the main presentation, Proptosis accounted for 11.7% and 18.9% of Bilateral and Unilateral cases respectively. Stage V disease was present in 84.5% and 56.8% of eyes in Unilateral and Bilateral cases respectively. Primary Enucleation was carried out in 57% and 42% of unilaterally and bilaterally affected eyes respectively. Chemotherapy was carried out in 21% and 35% of unilaterally and bilaterally affected children. Overall survival of these children was 55.57% for this cohort.



Type of Presentation: Free papers (06 minutes)

Specialty: Pediatric

Long term outcomes of AGV implantation in pediatric glaucoma

Author Lubna Siddiq Mian

Institution: Lahore General Hospital, Ameer-ud-Din Medical College, Post Graduate Medical Institute

Purpose: To describe the long term outcomes of AGV implantation in congenital glaucoma.

Study Design: Prospective interventional case series.

Material & Methods: This study was carried out at The Department of Ophthalmology, Lahore General Hospital over five years from 1st January, 2017 to 31st December, 2021. All eyes of patients under 18 years of age that received AGV were included in the study. Eyes were divided into 2 groups, group A for the better eye with less disease and preferred fixation, and group B for worse eye with more advanced disease in terms of more buphthalmos, amblyopia and poor fixation. Study Outcomes included post op IOP, fixation and following, change in corneal diameters, change in axial length and incidence of retinal detachment and hypotony. Pre op IOP, fixation and following, corneal diameters, axial length and age of patient was recorded.

Result/Conclusion: Sixty eyes of 41 patients met the inclusion criteria and were included in the study, twenty eyes were classified to group A as better eyes or only eyes while 40 eyes were classified to group B as worse eyes in cases of bilateral congenital glaucoma and eyes affected with unilateral congenital glaucoma. Age at surgery ranged from 7days to 17 years, average $3.2 \pm SD 1.8$ years. Post op normal IOP and good fixation and following was 100% in group A. While progression of corneal and axial length enlargement was seen in 5% of group B. Retinal detachment and low IOP was also seen in 5% of group B. fifty six out of 60 included eyes (93.3%) remained stable over the course of follow up. Average follow up duration was $2 \pm SD 1.6$ years. Conclusion AGV implantation in congenital glaucoma is a safe and effective surgery to guard against both disease progression and hypotony.

Type of Presentation: Free papers (06 minutes)

Specialty: Pediatric

A Retrospective Study on final Visual Outcome of Ocular Trauma in Department of Pediatric Ophthalmology in a Tertiary Care Hospital

Author Dr. Rabia Chaudhary

Institution: JPMC, Karachi

Purpose: To analyze final visual outcome of ocular trauma in Department of Pediatric



Ophthalmology in a Tertiary Care Hospital.

Study Design: Retrospective study.

Material & Methods: 240 cases of ocular trauma treated in Department of Pediatric Ophthalmology from December 2018 till June 2019 were retrospectively reviewed. Data included age, gender, type of injury, source of injury, time of presentation, initial and final visual acuity, anterior segment and fundus examination, appropriate management and follow ups.

Result/Conclusion: The leading two types of ocular injury in our paediatric ophthalmology department were domestic followed by road traffic accident with most of the injuries in 7-12 years of age with greater number in boys. Significant predictive factors of final visual acuity in paediatric ocular trauma include initial visual acuity, type of injury, source of injury, duration of presentation and management.

Type of Presentation: Free papers (06 minutes)

Specialty: Pediatric

Efficacy of Atropine 0.01% Eye Drops for Myopia Control in Pakistan

Author Dr. Syeda Aisha Bokhari

Institution: The Eye Center, South City Hospital, Karachi, Pakistan

Purpose: This study explored the effect of atropine 0.01% eye drops on controlling myopic progression in the region of Pakistan.

Study Design: Case series.

Material & Methods: All included children (27 males, 23 females) were treated with atropine 0.01% for 1 year. Baseline spherical equivalent refraction (SER) was recorded at initiation of treatment. The end point was measuring rate of progression in SER at 1 year after treatment. Responders were percentage of subjects with either no progression of myopia, or worsening of myopia of ≤ -0.50 SER at the end of 1 year follow up. Non-responders were the percentage of subjects with progression rate of myopia of > 0.50 SER.

Result/Conclusion: At baseline, the mean SE for 100 eyes (both eyes of 50 children) was 3.25 ± 1.37 D. On follow up after 1 year of treatment with atropine 0.01% drops, mean SE for 100 eyes (both right and left eyes of 50 children) was -2.76 ± 1.36 D. The rate of SER progression was significantly lower at 1 year of follow-up (-0.49 ± 1.36 D). The percentage of responders was 84%, while non-responders were 16%. There were no major safety issues reported in either group. Atropine 0.01% eye drops significantly reduced myopia progression in greater percentage of children.



Type of Presentation: Free papers (06 minutes)

Specialty: Pediatric

Paediatric Epiretinal membrane presenting with neuro-ophthalmological manifestations

Author Najia Uzair

Institution: Al-Shifa Trust Eye Hospital, Rawalpindi

Purpose: To present a rare case of Neurofibromatosis Type 2 in a 9 year old girl, presenting with Left subtle 3rd nerve and UMN type facial palsy and Epiretinal membranes.

Study Design: Observational Case Report.

Material & Methods: Consent taken from guardians for presenting the child's case along with photographs.

Result/Conclusion: MRI revealed Vestibular Schwannomas leading to confirmation of diagnosis of Neurofibromatosis Type 2. This is a rare presentation of NF2 presenting to an ophthalmologist with neuro ophthalmological findings only, and without cataract or hearing or balance difficulties. ERM was a clue to the diagnosis.

Type of Presentation: Free papers (06 minutes)

Specialty: Surgical Retina

Efficacy and safety of PFCL as temporary tamponade in cases of inferior retinal detachment

Author Ali Zain Ul Abidin

Institution: Mayo hospital king Edward medical university

Purpose: To evaluate the efficacy and safety of PFCL in cases of inferior retinal detachment.

Study Design: Case control series.

Material & Methods: After approval from ethical review board, Mayo hospital Lahore and with patient's consent Case Control study was conducted. A detailed history and examination was performed. A total of 35 patients were included in this study. Inclusion criteria was inferior retinal detachments with large breaks, PVR grade both B and C were included and Exclusion criteria was Diabetic retinopathy changes and tractional RD. All surgeries were done by Single Consultant Surgeon. After inducing PVD and doing base shave with whole vitrectomy, air Fluid exchange was done. At this time, we injected One mL of PFCL followed by oil. Endo laser was also done along with it. Patients were examined after 2 weeks, 3 weeks and end of 1 month.



These patients were observed for any uveitic reaction and raise in Intraocular pressure. At end of one and half month we removed oil along with PFCL and did endolaser and gas.

Result/Conclusion: Excellent result with no reaction resulting in complete safety of the PFCL.

Type of Presentation: Free papers (06 minutes)

Specialty: Surgical Retina

Smartphone-based fundus imaging for evaluation of Retinopathy of Prematurity in a low- income country: A pilot study

Author Haroon Tayyab

Institution: The Aga Khan University Hospital, Pakistan

Purpose: To evaluate the feasibility of a novel and simple smart phone-based Retinopathy of Prematurity (ROP) screening approach in a resource-constrained setting.

Study Design: Cross sectional validation study.

Material & Methods: A total of 63 images of eyes with active ROP (stage 1, 2, 3, 4 and/or plus or pre-plus disease) were included in this study. The stage of ROP was documented by the principal investigator using an indirect ophthalmoscope and retinal images were obtained using this novel technique. These images were shared with two masked ROP experts who rated the image quality and determined the stage of ROP and presence of plus disease. Their reports were compared with the initial findings reported by principal investigator using indirect ophthalmoscope.

Result/Conclusion: We reviewed 63 images for image quality, stage of ROP and presence of plus disease. There was significant agreement between the gold standard and the raters 1 and 2 for the presence of plus disease (Cohen's kappa was 0.84 and 1.0) and the stage of the disease (Cohen's kappa 0.65 and 1.0). There was significant agreement between the raters for presence of plus disease and any stage of ROP (Cohen's κ : 0.84 and 0.65 for plus disease and any stage of the ROP, respectively). Raters 1 and 2 rated 96.83% and 98.41% images as excellent / acceptable respectively.

Conclusion: High quality retinal images can be captured with a smartphone and 28D lens without using any additional adapter equipment. This approach of ROP screening can form basis of telemedicine for ROP in resource.



Type of Presentation: Free papers (06 minutes)

Specialty: Surgical Retina

Post-operative visual outcomes based on morphological staging of idiopathic epiretinal membranes on OCT

Author Haroon Tayyab

Institution: The Aga Khan University Hospital, Pakistan

Purpose: To evaluate the recently described optical coherence tomography (OCT) based classification of epiretinal membrane (ERM) and its usefulness in predicting the functional outcome.

Study Design: Retrospective observational review.

Material & Methods: A retrospective observational review of OCT scans of patients with the diagnosis of ERM was carried out from January 2016 to June 2021. All consecutive images diagnosed with any stage of idiopathic ERM and fulfilled the eligibility criteria were included in the analysis. ERM was identified on OCT scans as a thin hyperreflective layer over the inner layers of retina. OCT scans of patients with ERM who underwent vitrectomy, were independently staged as per the new classification by two independent retinal surgeons (non authors) to form a consensus on stage. Best Corrected visual acuity (BCVA) in LogMAR scale and central subfield thickness (CST) on pre- and post- operative spectral domain OCT scans were the variables noted for all patients at the time of diagnosis and at 6 and 12 months follow up visit after undergoing intervention. Partial correlation coefficient was computed between BCVA (LogMAR) and CST by ERM stage adjusting by baseline measures. Non-para matric Friedman repeated measure ANOVA was applied to assess change in variables over time. A p value of 0.05 was considered significant.

Result/Conclusion: Clinical charts of 74 patients with idiopathic ERM were assessed. Clinically significant improvement in BCVA overtime was observed with significant difference in median visual acuity of patients with Stage II-IV with P-Values on Friedman Chi-square of <0.001 that remained consistent on post hoc Dunn's test. The median CST of all patients with Stage II-IV that showed similar consistent improvement with P-value on Friedman Chi-square (p-value <0.001) from baseline to 12th month. Our results showed not only gain in visual acuity but also shift from baseline to anatomical normalization of CST in stage II. We found a decrease in CST with difference of 166micrometer and 151micrometer in stage III and Stage IV respectively. Our results remained consistent with the hypothesis of improved visual outcomes with all stages of ERM with adjusted moderate linear correlation between visual acuity and CST in stage II-IV ($r > 0.3$).

Conclusion: Our results showed equally significant visual outcomes of patients with ERM staged II-IV and therefore can be counselled for improved visual acuity after surgical removal of ERM with improvement up to 5 lines on Snellen's chart from the baseline.



Type of Presentation: Free papers (06 minutes)

Specialty: Surgical Retina

Management of optic disc pit maculopathy with pars plana vitrectomy and internal limiting membrane flap tuck in optic disc pit.

Author: Haroon Tayyab
Institution: The Aga Khan University Hospital, Pakistan

Purpose: To evaluate the efficacy of pars plana vitrectomy and internal limiting membrane peel (ILM) and tuck in the pit for improving structural and functional outcomes.

Study Design: Prospective interventional study.

Material & Methods: We describe 6 consecutive cases of optic disc pit maculopathy operated between 2018 and 2021 at The Aga Khan University Hospital, Pakistan. All cases were treated with 25G pars plana vitrectomy with ILM flap tucked in the pit. All cases received a single row of confluent laser (barely visible) burns at the temporal margin of the optic disc pit followed by iso-volumetric Sulphur hexafluoride gas tamponade. All cases were followed for one year and structural (pre and post-surgical optical coherence tomography images and functional outcomes were documented.

Result/Conclusion: In this study, four patients were males and two females. All patients were operated by single surgeon using a uniform surgical technique. Their pre and post-operative visual outcomes were recorded periodically and at 12 months. Patient 1 aged 34 had a pre-operative best corrected visual acuity (BCVA) of 20/80 improving to 20/25 and improvement in central macular thickness (CMT) (pre-operative: 842um; post-operative: 226um). Second patient was a 27-year-old with pre-operative BCVA of 20/30 which improved to 20/20 and improvement in CMT (pre-operative: 731um; post-operative: 341um). Third patient was 41 years old with pre-operative BCVA of 20/100 and post-op BCVA of 20/30 and improvement in CMT (pre-operative: 690 um; post-operative: 160um). Fourth patient was 35 years old with pre-operative BCVA of 20/200 improving to 20/40 and improvement in CMT (pre-operative: 891um; post-operative: 185um). Fifth patient was 46 years old with pre-operative BCVA of 20/150 improving to 20/30 and improvement in CMT (pre-operative: 729um; post-operative: 210um). Sixth patient was 51 years old with pre-operative BCVA of 20/80 improving to 20/20 and improvement in CMT (pre-operative: 560 um; post-operative: 197um). One patient still had intraretinal edema at 12 months follow up. There were no other significant complications. There were no cases of recurrences. Pars plana vitrectomy with nasal ILM tuck in the optic pit is a safe surgical technique with satisfactory anatomical and functional results at a follow up of 12 months.



Type of Presentation: Free papers (06 minutes)

Specialty: Surgical Retina

To evaluate the safety and efficacy of scleral buckling with 360 degree tire as an effective method for management of Rhegmatogenous retinal detachment

Author Dr. Sana Jahangir

Institution: Lahore General Hospital/AMC/PGMI

Purpose: To evaluate the safety and efficacy of scleral buckling with 360 degree encircling tire as a safe and effective method for management of Rhegmatogenous retinal detachment.

Study Design: Quasi Experimental.

Material & Methods: This study was conducted in Eye Unit I at Lahore General Hospital from January 2021 till December 2021, a total of 50 patients were enrolled in the study. End point of the study was considered at the 6 month follow up of the patient. Patients included in the study were those who had duration of symptoms of less than 3 weeks, no PVD, breaks anterior to the equator, inferior breaks and PVR Grade A or B and retinal dialysis. Patients having breaks posterior to the equator, media opacity and PVR grade C were excluded from the study. Parameters evaluated include visual acuity, postoperative refractive error, IOP, need for anti-glaucoma medication, status of the retina, post op OCT changes, extrusion rate, re-do rate and anterior segment ischemia.

Result/Conclusion: Scleral Buckling with 360 degree tire has comparable anatomical and functional success rate to segmental tire with encircling band with negligible extrusion rate, re-do rate and anterior segment ischemia.

Type of Presentation: Free papers (06 minutes)

Specialty: Surgical Retina

Safety and outcomes of 27 gauge pars plana vitrectomy in diabetic tractional retinal detachment

Author Amer Awan

Institution: Shifa International Hospital and Shifa Taamer-e-Millat University, Islamabad

Purpose: To state the clinical and surgical outcomes in diabetic tractional retinal detachment patients undergoing 27 gauge pars plana vitrectomy.

Study Design: Retrospective cohort study.



Material & Methods: A total of 196 eyes of 176 patients were included, who had 27 gauge pars planovitrectomy for diabetic tractional retinal detachment, over five years between July 1, 2015, and June 30, 2019. All eyes were operated by the same experienced vitreoretinal surgeon using the same vitrectomy system. All these procedures were done at the Shifa International Hospital, Islamabad, Pakistan. The tamponade agents used were air, sulfur hexafluoride, hexafluoroethane, perfluoropropane and silicone oil. The primary outcomes of this study were best corrected visual acuity at 3 months follow-ups, the anatomical success of surgery, and post-operative complications. SPSS 21 was used to evaluate the data.

Result/Conclusion: The mean age of the patients in this study was 55.3 ± 11.3 years. Out of 196 eyes, there were 104 (53.1%) male and 92 (46.9%) female eyes. 126 (64.3%) eyes had combined phacoemulsification and lens implantation along with vitrectomy. Internal limiting membrane peeling was done in 23 (11.7%) eyes. The mean operating time was 90 ± 36 min (range 22 - 170 min). 192 eyes (98%) achieved primary retinal attachment. At 3 months follow up mean BCVA was remarkably improved from the logarithm of the minimal angle of resolution preoperatively 1.86 ± 0.59 to 0.54 ± 0.32 postoperatively (p -value < 0.001). Postoperatively one eye developed suprachoroidal oil migration that was successfully managed. Conclusion: This study strongly suggests that the 27 gauge vitrectomy system offers an excellent outcome in the patients with diabetic tractional retinal detachment.

Type of Presentation: Free papers (06 minutes)

Specialty: Surgical Retina

Outcome of Autologous Inner Limiting Membrane transplant in failed and recurrent macular hole

Author Professor Amer Awan

Institution: Shifa International Hospital Islamabad & Shifa Taameer e Millat University

Purpose: To describe outcome of autologous inner limiting membrane (ILM) transplant in failed and recurrent macular hole (MH).

Study Design: Retrospective study.

Material & Methods: Six eyes of six patients with failed and recurrent MH over five years period between January, 2017 and January 2022. All eyes were operated by the same experienced vitreoretinal surgeon using the same vitrectomy system. All these procedures were done at the Shifa International Hospital, Islamabad, Pakistan. Autologous ILM transplant was performed in all cases and hexafluoroethane or perfluoropropane were used as tamponade agent. The primary outcomes of this study were closure of macular hole, improved best corrected visual acuity at 3 months follow-ups, and lesser post-operative complications. SPSS 21 was used to evaluate the data.



Result/Conclusion: The mean age of the patients in this study was 62 years. Out of 6 patients, 3 patients were male and 3 were female. All patients had closure of MH after surgery and there was no reopening of macular hole. None of the eyes developed infection or retinal detachment. The mean visual acuity improved from 6/60 to 6/12. **Conclusion:** Autologous ILM transplant is a simple and an effective technique that closed MH in all cases. We recommend this technique in failed and recurrent macular holes.

Type of Presentation: Free papers (06 minutes)

Specialty: Surgical Retina

Change in refractive error in Rhegmatogenous retinal detachment patients with 360 degree scleral buckling with tire

Author Dr. Muhammad Tahir

Institution: Lahore General Hospital /Post Graduate Medical Institute, Lahore

Purpose: To evaluate changes in refractive error in Rhegmatogenous retinal detachment patients after 360 degree scleral buckling with tire.

Study Design: Quasi Experimental study.

Material & Methods: 50 eyes with Rhegmatogenous retinal detachment had undergone 360 degree scleral buckling with 277 type tire. Patients with 18-65 years of age whose previous refractive status was known, with no significant media opacity were included. End point of refractive error change is considered at 6 months after surgery.

Result/Conclusion: 360 degree scleral buckling with 277 type tire produces significant myopic shift after 6 months of surgery.

Type of Presentation: Free papers (06 minutes)

Specialty: Surgical Retina

Safety profile of new technique of Suprachoroidal injection of Triamcinolone without cannula sleeve

Author Muhammad Hasnain

Institution: LRBT Shahpur

Purpose: To evaluate safety of new technique of suprachoroidal injection of Triamcinolone without need of cannula sleeve.

Study Design: Prospective nonrandomized interventional study.



Material & Methods: This was a prospective nonrandomized interventional study, 50 cases were enrolled for study requiring Suprachoroidal injection of Triamcinolone. Pre-operatively. Best Corrected Visual Acuity (BCVA), Intra Ocular Pressure (IOP) and Central Macular Thickness (CMT) wererecorded. A custom made needle without cannula sleeve was used for injection of 0.1 ml (4 mg) Triamcinolone. Immediatelyafter injection IOP was checked with Applanation tonometer at 10 minutes then after every 30 minutes for 2 hours. Patients were followed up after 3 days, 1 week, 1 month and 3 months to see any complication. Results were analyzed statistically.

Result/Conclusion: Out of 50 patients, 30 (60%) were males and 20 (40%) were females. Mean age was 50.8 years. Mean pre injection IOP was 12.7 mm Hg, Mean Post injection IOP: After 10 minutes (14.8 mm Hg), After 30 minutes (14.5 mm Hg), After 2 hours (14.5 mm Hg), After 1 week (14.7 mm Hg), After 1 month (12.9 mm Hg), After 3 months (12.2 mm Hg). Post Injection Conjunctival hemorrhage in 45(90%), Regurgitation of TA in 3 (6 %), IOP rise in 2 (4 %), TA spill over in ACin1 patient (2%).

Type of Presentation: Free papers (06 minutes)

Specialty: Surgical Retina

Comparison of residual silicone oil index after removal of silicone oil with fluid-air versus oil-fluid exchange

Author Amna Rizwan
Institution: Mayo Hospital, Lahore

Purpose: To compare the effectiveness of fluid-air exchange with silicone oil-fluid exchange in reducing the residual silicone oil (SO) droplets after the removal of silicone oil.

Study Design: Prospective, quasi-experimental study.

Material & Methods: This was a prospective, quasi-experimental study conducted from October 2021 to February 2022 at Eye Unit-III, COAVS, Mayo Hospital, Lahore. Sixty-one patients with siliconized eyes underwent removal of SO with two different techniques andwere divided into fluid-air exchange and oil-fluid exchange groups. To quantify the residual silicone droplets objectively, B-scan echo graphic images were analyzed within seven days of surgery. Silicone oil index (SOI) which is the amount of residual SO droplets/vitreal area in the images was calculated with the help of image software.

Result/Conclusion: The residual SOI of the fluid-air exchange group ($0.99 \pm 1.76\%$) was significantly lower than the oil-fluid exchange group ($3.25 \pm 3.85\%$). Fluid-air exchange group was found to be superior in reducing residual SO droplets than the oil-fluid exchange group.



Type of Presentation: Free papers (06 minutes)

Specialty: Vitreo Retina

Safety and efficacy of combined Silicon oil and Densiron 68 tamponade in management of Retinal detachment

Author Dr. Asim Mehboob

Institution: AFIO RWP

Purpose: The objective of the study is to evaluate safety and efficacy of combined Silicon oil and Densiron 68 tamponade in management of Retinal detachment.

Study Design: Quasi experimental design.

Material & Methods: A total of 60 eyes of 60 patients presenting with retinal detachment and multiple breaks in superior and inferior retina were included. All eyes underwent pars planavitreotomy, tamponade of silicon oil and Densiron 68 and Endolaser/cryotherapy. All eyes were followed for 06 months and evaluated for retinal re-attachment, improvement in BCVA, IOP changes, and complications.

Result/Conclusion: Silicon oil and Densiron 68 combined tamponade was effective in managing retinal detachment with multiple retinal breaks. The retinal re-attachment rates were good, with good safety profile.

Type of Presentation: Free papers (06 minutes)

Specialty: Vitreo Retina

AK kit for supra-choroidal injection

Author Muhammad Irfan Karamat

Institution: Ibrahim Eye Center

Purpose: Purpose of this study is to establish the safety and precise delivery of drug with the help of AK kit in supra-choroidal space.

Study Design: Descriptive case series.

Material & Methods: We describe a novel device designed to ensure rapid, safe and precise delivery of injections while improving both patients and surgeon experience. Easily available 1 cc needle has been modified with the help of AK KIT to convert it into a 950 microns micro-needle which makes it safe to get into supra-choroidal space at Pars Plana (3.5mm from limbus). We are hopeful that this model is replicated internationally. We also present data of more than 200 supra-choroidal injections by more than 20 surgeons across the country with the help of AK-Kit.

Result/Conclusion: Device considered to be very useful and made supra-choroidal entry very



easy. Very few adverse events were documented like sub-conjunctival hemorrhage or drug leakage in to sub-tenon space. 1 surgeon out of 200 injections documented intra-vitreous penetration of the microneedle.

Type of Presentation: Free papers (06 minutes)

Specialty: Vitreo Retina

Management of diabetic tractional retinal detachment - New horizons

Author: Dr. Asfandyar Khan

Institution: AFIO, RWP

Purpose: To study the role of intra-operative OCT in management of diabetic tractional retinal detachment.

Study Design: Quasi experimental study.

Material & Methods: A total of 80 eyes were included. Forty eyes underwent standard pars-plana vitrectomy, peeling of membranes with silicon oil tamponade and Endo-laser using conventional operating microscope and wide-angle viewing system. Forty eyes underwent same surgery with intra-operative OCT use. Patients were followed for three months with repeated wide-angle OCT for assessment of membranes removal.

Result/Conclusion: Intra-operative OCT was helpful in complete removal of diabetic tractional membranes, with better retinal re-attachment rates and more improvement in BCVA.

Type of Presentation: Resident free papers (04 minutes)

Specialty: Cataract

Evaluation and monitoring of phacoemulsification skills of post graduate residents by adopting a standardized tool- International Council of Ophthalmology -Ophthalmology Surgical Competency Assessment Rubrics (ICOOSCAR)

Author: Dr. Faraz Munir

Institution: Institute of Ophthalmology, King Edward Medical University/Mayo Hospital

Purpose: To apply a systemic way to teach post graduate residents, the process of phacoemulsification by using- International Council of Ophthalmology -Ophthalmology Surgical



Competency Assessment Rubrics (ICOOSCAR).

Study Design: Prospective Observational Study.

Material & Methods: Sampling Technique: Non-probability Consecutive Sampling.

Setting: Operation Theater of Institute of Ophthalmology, Mayo Hospital, Lahore.

Study Duration: One Year.

Material: International Council of Ophthalmology -Ophthalmology Surgical Competency Assessment Rubrics (ICOOSCAR).

Method: Two groups of post graduate trainees made on the basis of training year i.e., first group comprised of 1st and 2nd year residents, and second comprised of 3rd and 4th year residents. The study is based on one year duration from September 2021 to August 2022. Before the start of study lectures were delivered over phacodynamics, phacoemulsification surgery steps, and management of complications. The pre-training average mean scores, independent completion rates, and complication rates among the groups were calculated. Post training scores will be calculated in the same manner on completion of study. The ICOOSCAR form filled after every surgery. Major complications considered are anterior capsular runaway or extension, posterior capsular rupture (PCR), nucleus/IOL drop, iris tissue damage, corneal edema, corneal striate and zonulodialysis. Patients with age-related cataract nuclear opacification grades 2–3 (LOCS III: Lens Opacity Classification System III) has been considered for cases for trainees and complicated cases not be included in study. All surgeries will be performed under peri bulbar anesthesia.

Result/Conclusion: A total of 913 cases operated by 16 trainees so far. The mean age of trainees was found to be $27.98 \pm .22$ years. Each trainee performed an average of 57 cases, each case carrying maximum score of 100 as per ICOOSCAR (maximum score of 5 per step, each case was divided in 20 steps). Scores in the first and last month will be considered as pre and post training scores, respectively. The data will be statistically analyzed using Statistical Package for the Social Sciences 26.0. Prevalence of an outcome variable along with 95% confidence limits will be considered significant. Semi Log Mar Regression Analysis will be done to correlate OSCAR scores with Independent Completion Rates.



Type of Presentation: Resident free papers (04 minutes)

Specialty: Cataract

Comparison of Two Hole Assisted Phaco Chop with Stop and Chop Technique for Nuclear Disassembly in Resident Cataract Surgery

Author Dr. Rehan Naqaish

Institution: Al-Shifa trust eye hospital, Rawalpindi

Purpose: Mastering the two hole assisted phaco chop would make the transition of resident surgeons from divide and conquer to phaco chop smoother and more efficient.

Study Design: Quasi experimental study.

Material & Methods: Sample size: 50 eyes in both groups Inclusion criteria: patients presenting with cataract above the age of 18 years, Cataract grade NS+2, NS+3, mature, cortical and PSC. Exclusion criteria: uveitis, glaucoma, traumatic cataract, small pupil, zonular weakness, subluxation, small palpebral fissure, soft cataract and posterior polar cataract. Data collection procedure: Preoperative examination will include BCVA, IOP and anterior and posterior segment examination. Cataract grading will be done according to the LOCS classification. 1 surgeon in their second year of training will perform both techniques under supervision of attending surgeon. Ultrasound time, total surgical time and volume of balanced salt solution (BSS) delivered will be recorded. For the two hole assisted phaco chop, the 30° phaco tip will be buried into the endonucleus about 3/4th depth anterior to the capsulorrhexis margin. The nucleus will be rotated 180° and the phaco tip will be impaled into the nucleus in a similar manner described previously. The chopper will be placed into the hole previously created on the opposite side and horizontal force will be applied similar to the horizontal chop. For the stop and chop technique, a central trench will be grooved within the capsulorrhexis margin and the cracking maneuver performed by placing the phaco tip and the chopper deep within the groove. Phacoemulsification parameters will be vacuum 500 mmHg, flow 30cc/min, phaco power 55% and bottle height 90 cm was applied. For the central groove in stop and chop the parameters will be vacuum 70 mmHg, flow 20cc/min, phaco power 70% and bottle height 90 cm.

Data Analysis: Statistical analysis will be done using SPSS version 20. The chi-square test and the independent samples t-test will be used to compare the groups for statistical significance.

Result/Conclusion: In this study, we tried to compare two phaco techniques. Our findings show that the hole assisted phaco chop technique is non inferior in terms of Ultrasound time, total surgical time and volume of balanced salt solution (BSS) delivered to stop and chop technique and thus a practical alternative for surgeons aiming to move on to horizontal chop.



Type of Presentation: Resident free papers (04 minutes)

Specialty: Community Ophthalmology

High Prevalence of Demodex Infestation is associated with Poor Blood Glucose Control in Type 2 Diabetes Mellitus: A Cross-Sectional Study in the Guangzhou Diabetic Eye Study

Author Nuan Zhang

Institution: State Key Laboratory of Ophthalmology, Zhongshan Ophthalmic Center, Sun Yat-sen University, Guangdong Provincial Key Laboratory of Ophthalmology and Visual Science, Guangzhou, China

Purpose: The aim of this study was to investigate the association between type 2 diabetes mellitus (T2DM) and ocular Demodex mite infection.

Study Design: Cross-sectional case-control study.

Material & Methods: 381 patients with T2DM from nearby communities were enrolled, and 163 age-matched and sex-matched nondiabetic patients from the cataract clinic were included as the control group. All subjects underwent personal history and demographic data collection, ocular examination, and lash sampling, followed by microscopic examination and counting of Demodex mites. Binocular fundus photography was performed for diabetic patients. Statistical correlation between ocular Demodex infestation and T2DM and blood glucose control status was performed.

Result/Conclusion: The Demodex mite infestation rate (62.5% vs. 44.8%, $P < 0.001$) and count [3 (0–12) vs. 2 (0–9.6), $P = 0.01$], especially of Demodex brevis (18.9% vs. 4.9%, $P < 0.001$) [0 (0–1) vs. 0 (0–0), $P < 0.001$], were significantly higher in the T2DM patient group than that in the control group. The ratio of Demodex brevis to Demodex folliculorum in the T2DM patient group was significantly higher than that in the control group (1:3 vs. 1:9, $P < 0.001$). Diabetic patients presented with more cylindrical dandruff (55.1% vs. 39.3%, $P = 0.001$). Ocular Demodex infestation was strongly associated with poor blood glucose control ($HbA1c > 7\%$) (odds ratio = 1.82; 95% confidence interval, 1.12–2.94; $P = 0.2$) and female sex (odds ratio = 1.69, 95% confidence interval, 1.08–2.65, $P = 0.02$). No association was found between Demodex infestation and the severity of diabetic retinopathy. Patients with T2DM, especially those with poor blood glucose control, tend to have a higher prevalence of ocular Demodex infestation, suggesting that high blood glucose is a risk factor for demodicosis.



Type of Presentation: Resident free papers (04 minutes)

Specialty: Cornea

Central corneal thickness

Author Dr. Akhil S.

Institution: ESIPGIMSR

Purpose: Comparison of central corneal thickness measurement using optical and ultrasound pachymetry in primary open angle glaucoma patients.

Study Design: Case control, observational and quantitative study.

Material & Methods: A Total of 140 subjects that met the inclusion and exclusion criteria were included in the study. Divided in three subgroups of 35 each, according to whether on one or two or three anti-glaucoma drugs, and 35 were age matched healthy control group. Central corneal thickness (CCT) measurements were taken by ultrasonic pachymeter (UP) TOMEY SP-100, and by CEM-530 Specular microscope. (NCSM)

Result/Conclusion: We found that, the mean CCT taken with NCSM and USP was 540.83 ± 35.51 mm and 538.74 ± 36.22 mm, respectively, in Right eyes (RE) of 35 glaucoma patients on one drug, which was statistically non-significant ($p = 0.80$). Similarly Left eyes (LE), mean CCT with NCSM was 544.17 ± 33.98 mm, and with USP was 541.69 ± 36.6 mm. Here also ($p = 0.76$) non-significant. Similarly mean CCT taken with NCSM and USP was 539.83 ± 30.85 mm and 537.66 ± 30.5 mm, respectively in RT eyes of 35 glaucoma patients on two drugs. This difference was found statistically insignificant ($p = 0.76$). Left eyes, mean CCT was 541.91 ± 29.79 mm with NCSM as compared to USP which was 540.11 ± 29.89 mm. The difference was non-significant ($p = 0.80$). On comparing the mean CCT values of RE in glaucoma subjects who were controlled on three anti-glaucoma drugs using two devices it was found to be 528.37 ± 26.44 mm using NCSM and 527.09 ± 26.17 mm using USP. The p value was calculated to be ($p = 0.84$) and was statistically non-significant. The mean values of CCT for LE was 521.94 ± 26.53 mm with NCSM and with USP was 520 ± 26.52 mm respectively. The p value was calculated to be ($p = 0.81$) which was also statistically non-significant. Comparison of mean CCT measurements using Non-Contact Specular Microscopy and Ultrasonic Pachymetry in 35 age matched controls RT eye was found to be 517.83 ± 21.27 mm and 515.97 ± 20.91 mm respectively. The difference was also non-significant ($p = 0.71$). Similarly, for LE mean CCT values were 518.8 ± 24.21 mm and 516.8 ± 24.37 mm respectively. The p value was calculated to be 0.73 and which was statistically non-significant.

Conclusions: The CCT measured using Non -Contact Specular Microscopy is found to be higher than that measured using Ultrasound Pachymeter in POAG patients on one drug, two drugs, three drugs as well as healthy age matched controls, however the difference is not statistically significant. This may be due to the increase in ultrasound speed due to changes in cornea with glaucoma and aging. There was highly significant linear correlation between the CCT measured



using NCSM and UP in all POAG subgroups on one drug, two drugs, three drugs as well as healthy controls. This suggests that the devices could be used interchangeably in in glaucoma patients as well as healthy subjects of similar age group.

Type of Presentation: Resident free papers (04 minutes)

Specialty: Diagnostic Ophthalmology

Diagnostic accuracy of direct ophthalmoscopy and Non-Mydriatic Retinal Photography for screening of Diabetic Retinopathy

Author Dr. Azam Mughal

Institution: ISRA Postgraduate Institute of Ophthalmology / Al-Ibrahim Eye Hospital, Karachi

Purpose: To determine the reliability of direct ophthalmoscopy and Non-Mydriatic fundus photography for screening of Diabetic Retinopathy.

Study Design: Observational, cross sectional.

Material & Methods: All individuals with type 2 diabetes of ≥ 40 years of age were screened for diabetic retinopathy (DR) by two trained optometrists and an ophthalmologist. First Optometrist used Non Mydriatic Fundus Camera (NMFC) and second optometrist used direct ophthalmoscopy (DO) after dilating the pupils. Final examination was done by the Ophthalmologist with slit lamp using Volk fundus lens which was considered as reference standard. Every investigator was kept unaware of the findings of others.

Result/Conclusion: NMFC is recommended tool for DR screening; but DO by well-trained optometrist can be reliable where neither ophthalmologist nor NMFC is available.

Type of Presentation: Resident free papers (04 minutes)

Specialty: General Ophthalmology

Variability in central macular thickness after phacoemulsification in non-insulin dependent diabetics with and without retinopathy

Author Dr. Farah Zafar

Institution: Lahore General Hospital/ PGMI/ AMC, Lahore

Purpose:

1. To find the frequency of diabetic retinopathy in patients of non-insulin dependent diabetes mellitus undergoing phacoemulsification for cataract.



2. To compare the mean change in central macular thickness after phacoemulsification in non-insulin dependent diabetics with and without diabetic retinopathy.

Study Design: Randomized controlled trial.

Material & Methods: The 126 patients were included from Ophthalmology Department of Lahore General Hospital, Lahore. Informed consent was taken from all the study participants. Diabetic retinopathy was recorded by doing fundoscopy on slit lamp with +78D lens. All the patients meeting the inclusion criteria underwent measurement of macular thickness by using OCT at preoperative stage. All patients underwent phacoemulsification

Result/Conclusion: In current study we compared the mean change in central macular thickness after phacoemulsification in non-insulin dependent diabetics with and without diabetic retinopathy. We concluded that phacoemulsification surgery is directly linked with a significantly higher incidence of central macular thickening in diabetic retinopathy group.

Type of Presentation: Resident free papers (04 minutes)

Specialty: General Ophthalmology

Comparison of Ocular Trauma Score (OTS) and Penetrating Ocular Trauma Score (POTS) in Predicting Visual Outcome in Children

Author Dr. Faraz Munir

Institution: King Edward Medical University/ Mayo Hospital, Lahore

Purpose: OTS(1) and POTS(2) are two different types of scoring systems used after ocular trauma to estimate the visual prognosis of the patient so that the patient can be managed accordingly. The purpose of this study is to find out the more accurate and reliable scoring system (OTS or POTS) for predicting visual outcome after ocular trauma in children.

Study Design: Comparative Longitudinal Study.

Material & Methods: Sample size of 34 patients is estimated by using 5% level of significance, 90% power of test with expected mean value of Penetrating Ocular Trauma Scale as 100% and Ocular Trauma Scale as 78.3%. Sampling Technique: Non probability convenient sampling.

Setting: Eye Unit 1, Mayo Hospital, Lahore.

Study Duration: 06 months after presentation of patient.

Result/Conclusion: 34 children included as per eligibility criteria. Mean of initial VA was 20/200 (range no light perception (NLP) to 20/20). Mean of final VA was averaged Counting Fingers, (range: no light perception (NLP)—20/20). Most common objects of injury were sharp edged objects like knife, scissors, screw driver, pencil, wooden stick etc. According to preliminary results of this study, it was found that POTS system gives better prediction of visual outcome in children



than that of OTS. Because OTS gives much weightage to visual acuity, which is difficult to evaluate accurately.

Type of Presentation: Resident free papers (04 minutes)

Specialty: General Ophthalmology

To study the effect of phacoemulsification on measurement of Ganglion Cell Complex changes and optic nerve head parameters using spectral domain optical coherence tomography

Author: Sajeela Luqman
Institution: Lahore General Hospital, Lahore

Purpose: To study the effect of phacoemulsification on measurement of Ganglion Cell Complex changes and optic nerve head parameters using spectral domain optical coherence tomography (OCT).

Study Design: Quasi experimental study design.

Material & Methods: The present study involved 117 both male and female patients aged ≥ 40 years diagnosed with cataract undergoing phacoemulsification and IOL implantation. Spectral domain optical coherence tomography was performed before and then 1 month after the surgery to determine changes in retinal nerve fiber layer and ganglion cell complex thickness. An informed written consent was obtained from all the patients.

Result/Conclusion: The mean age of the patients was 58.5 ± 9.1 years. Ratio between male to female patients was of 1:1.6. After 1 month of surgery, there was significant increase in retinal nerve fiber layer thickness from $93.14 \pm 3.22 \mu\text{m}$ to $102.76 \pm 3.79 \mu\text{m}$ with a mean change of $9.63 \pm 1.69 \mu\text{m}$ ($p\text{-value} < 0.001$). Similar significant increase was also noted in average ganglion cell complex thickness from $84.63 \pm 2.30 \mu\text{m}$ to $89.41 \pm 3.03 \mu\text{m}$ with a mean change of $4.78 \pm 1.67 \mu\text{m}$ ($p\text{-value} < 0.001$).



Type of Presentation: Resident free papers (04 minutes)

Specialty: General Ophthalmology

Comparison of changes in retinal nerve fiber layer thickness by spectral domain optical coherence tomography in glaucomatous and non-glaucomatous patients after phacoemulsification

Author Dr. Maryam Shahid
Institution: Lahore General Hospital, Lahore

Purpose: To compare the changes in measurement of retinal nerve fiber layer thickness in glaucomatous and non-glaucoma glaucomatous patients after phacoemulsification.

Study Design: This study was a quasi-experimental study.

Material & Methods: The present study involved 40 both male and female patients aged ≥ 40 years diagnosed of primary open angle glaucoma matched with another 40 patients without glaucoma undergoing phacoemulsification and IOL implantation. Spectral domain optical coherence tomography was performed before and then 1 week and 1 month after the surgery to measure changes in retinal nerve fiber layer thickness. At each follow-up intraocular pressure was also recorded. Change in retinal nerve fiber layer thickness and intraocular pressure was noted and compared between patients with versus without co-existent glaucoma. An informed written consent was obtained from all the patients.

Result/Conclusion: We observed that following an initial decrease in RNFL thickness after 1st post-operative week, there was a subsequent increase in RNFL thickness after cataract surgery which was highest in glaucomatous eyes (74.57 ± 7.99 to $85.90 \pm 5.44 \mu\text{m}$ with a mean change of $11.33 \pm 4.30 \mu\text{m}$; $p\text{-value} < 0.001$) as compared to non-glaucomatous eyes (94.68 ± 4.64 to $98.75 \pm 4.41 \mu\text{m}$ with a mean change of $4.08 \pm 2.59 \mu\text{m}$; $p\text{-value} < 0.001$). A similar but inverse relationship was observed in intraocular pressure which increased initially before reducing at 1 month after the surgery with greater reduction in non-glaucomatous eyes (13.35 ± 1.59 to $12.20 \pm 1.35 \text{ mmHg}$ with a mean change of $1.15 \pm 1.81 \text{ mmHg}$; $p\text{-value} < 0.001$) as compared to glaucomatous eyes (12.40 ± 1.22 to $11.70 \pm 1.16 \text{ mmHg}$ with a mean change of $0.70 \pm 1.54 \text{ mmHg}$; $p\text{-value} = 0.006$). Conclusion: In patients with concomitant glaucoma, cataract surgery alone resulted in substantial reduction in intraocular pressure with subsequent increase in retinal nerve fiber layer thickness which advocates that cataract surgery alone may suffice in the management of such patients with or without IOP-lowering medications and need for additional surgery for glaucoma should be carefully assessed on post-operative optical coherence tomographic scans.



Type of Presentation: Resident free papers (04 minutes)

Specialty: Glaucoma

A cost effective visual field monitoring

Author Taimoor Ashraf Khan

Institution: Armed Forces Institute of Ophthalmology Rawalpindi

Purpose: To Compare Specvis a Computer based visual field software with standard automated perimetry.

Study Design: Cross Sectional.

Material & Methods: Subjects presenting to the outpatient department were recruited based on consecutive sampling technique and were divided into healthy and diseased groups. Basic data collection instrument after written informed consent was filled with bio-data, ophthalmic data, disease conditions, and attached with reports of both HFA and Specvis for analysis by 3 senior Ophthalmology consultants independently. A total of 218 eyes of 109 subjects were included in this pilot study. SAP was done on the VF 30-2 program using Humphrey Field Analyzer 3. The same patient would then perform the visual field assessment on a PC with Specvis installed. Visual fields of a subject obtained from HFA and Specvis were then coupled and sent to 3 different seniors. The assessment was done by comparing the visual fields printouts in the graphical domain and scored based on a 5-point Likert scale which were then analyzed for inter-observer reliability. After each test, all subjects were asked to rate the difficulty level of performing HFA and Specvis based on a 5-point Likert scale. The duration of test performed on HFA and Specvis were also noted for comparison.

Result/Conclusion: We observed male preponderance in our study participants (n = 128, 58.72%). Majority of the participants were non diseased (n = 170, 77.98%) while advanced Glaucoma was the commonest disease in diseased group (n = 22, 10.09%). The observations for age had an average of 40.71 (SD = 15.24). The observations for HFA test duration had an average of 213.33 seconds (SD = 33.49, Min = 174.00, Max = 314.00) while Specvis test duration had an average of 267.36 seconds (SD = 35.98, Min = 228.00, Max = 370.00). A significant positive correlation was observed between score 1, score 2, and score 3. A significant negative correlation was observed between ease of using HFA by participants and age, with a correlation of -.28. A significant negative correlation was observed between ease of using Specvis by participants and age. Specvis, a computer based free open software used in our study can give promising results in diagnosing as well as monitoring the progression of visual field defects. It may act as a cost-effective and readily available bridge between visual field exam by confrontation method and standard automated perimetry.



Type of Presentation: Resident free papers (04 minutes)

Specialty: Pediatric

Outcomes of group D and group E better eyes in patients with bilateral retinoblastoma treated with systemic chemotherapy and IAC

Author Dr. Iqra Aslam
Institution: Lahore general hospital, Lahore

Purpose: To study Outcomes of group D and group E better eyes in patients with bilateral retinoblastoma treated with systemic chemotherapy and IAC.

Study Design: Cross sectional, Retrospective study.

Material & Methods: Eyes with optic nerve involvement on MRI and eyes with orbital features including proptosis or motility defects were excluded from the study. Eyes which were primarily enucleated at another set up were also excluded from the study. Eyes presenting with intra ocular retinoblastoma over five years from 2017 to 2021 were included in the study.

Result/Conclusion: Vision and globe can be saved in eyes with intra ocular retinoblastoma falling in groups D to E (ICRB) undergoing systemic and intra-arterial chemotherapy.

Type of Presentation: Resident free papers (04 minutes)

Specialty: Pediatric

Vision preservation and globe salvage in eyes with intra-ocular retinoblastoma

Author Dr. Iqra Qureshi
Institution: Lahore General Hospital, Lahore

Purpose: To study the effect of intra ocular retinoblastoma treatment on globe salvage and vision preservation.

Study Design: This is a cross sectional, retrospective study.

Material & Methods: This is a cross sectional, retrospective study that included eyes with intra ocular retinoblastoma ICRB group A to E. Eyes with optic nerve involvement on MRI and eyes with orbital features including proptosis or motility defects were excluded from the study. Eyes which were primarily enucleated at another set up were also excluded from the study. Eyes presenting with intra ocular retinoblastoma over five years from 2017 to 2021 were included in the study.



Result/Conclusion: The study included 114 eyes of 73 patients. These eyes were divided into 3 groups, group (I) had 54 eyes which were the better eyes (only eyes) with the other eye having more advanced disease. Sixty eyes were the worse eyes; of these worse eyes; group (II) included 27 eyes with unilateral retinoblastoma and Group (III) included 33 worse eyes with fellow eyes having less advanced retinoblastoma. In Group 1 (The 54 better only eyes), 6 eyes had group A RB, vision preservation was achieved in all eyes with group A. 17 eyes had group B and vision was saved in 15 out of 20. Four eyes had group C and vision was saved in all of them. 19 eyes had group D and vision was saved in 17 out of 19. Eight eyes were group E eyes with exudative retinal detachment or huge retinoblastomas filling more than 2/3 of the globe, no group E better eye had buphthalmos, useful vision was saved in 8/8 eyes. Group (II) was the group with 27 eyes with unilateral retinoblastoma and it included 10 eyes with group E retinoblastoma having buphthalmos and these 10 eyes underwent primary enucleation, clear optic nerve resection margins were seen on histopathology and the mean length of optic nerve stump was $14 \pm SD 2.2$ mm. This this group had post operative systemic chemotherapy with 6 cycles of CEV. 4 eyes had group E retinoblastoma with huge tumours, useful vision was saved in the four of them after strict amblyopia therapy. 7 were group D eyes and vision was saved in them, no unilateral retinoblastoma had group C, 2 patients had group B unilateral retinoblastoma, one underwent primary IAC and the other had primary systemic chemotherapy and vision was saved in both. All patients with unilateral retinoblastoma saved eyes required strict amblyopia therapy. Of patients with unilateral retinoblastoma only 2 out of 27 had intact fovea, the rest of 25 had macular tumors involving the fovea. Group (III) included 33 worse eyes, all of them were falling in group E (ICRB), with the fellow eye having better retinoblastoma ICRB Group. Of these 23 had primary enucleation, ten eyes survived and had complete tumor regression, so ten patients were lucky to enjoy bilateral eye salvage in spite of bilateral retinoblastoma. One of these survivors had good vision and nine out of these 10 eyes had dense amblyopia and relatively poor compliance with amblyopia therapy.

Type of Presentation: Resident free papers (04 minutes)

Specialty: Pediatric

oral

Author Dr. Ashvinah Qayyum

Institution: CMH

Purpose: This study was conducted in children with developmental delay, to describe the prevalence of various ocular abnormalities in children with developmental delay in a private eye facility setup.

Study Design: Observational cross sectional.



Material & Methods: Children under 05 years of age with confirmed diagnosis of developmental delay attending the pediatric eye setup were studied for the presence of ocular manifestations by undergoing a complete ophthalmic examination and the prevalence of different conditions was statistically analyzed.

Result/Conclusion: A total of 105 children with developmental delay were studied over a period of 12 months. Ocular manifestations were seen in 83.6% of cases. Amongst the various ocular manifestations, refractive error was found to be the most common finding (41.1%), followed by strabismus (16%) and cataract (5.7%).

Type of Presentation: Resident free papers (04 minutes)

Specialty: Pediatric

Comparison of efficacy of laser photocoagulation versus intravitreal ranibizumab in zone 2 retinopathy of prematurity

Author: Dr. Sana Chaudhry
Institution: Jinnah Hospital, Lahore

Purpose: We conducted this study to compare the effectiveness of laser with effectiveness of intravitreal ranibizumab in terms of recurrence, complications, and the need for another treatment modality in infants who developed zone II retinopathy of prematurity (ROP).

Study Design: Randomized Controlled Trial.

Material & Methods: We studied 52 eyes of premature infants with zone II, stage 2 or 3 ROP with plus disease. After a detailed retinal exam, we divided the subjects into two groups of equal numbers, i.e., 26 in each group. Infants in group A received laser photocoagulation under sedation, whereas infants in group B received intravitreal ranibizumab in a dose of 0.3 mg in 0.03 ml. We reassessed all infants by binocular indirect ophthalmoscope at one week, four weeks, and then monthly for the next six months.

Result/Conclusion: The mean gestational age (in weeks) of infants in groups A and B was 32.4 ± 2.88 and 31 ± 2.21 , and the mean birth weight was 1.5 ± 0.549 and 1.41 ± 0.326 Kg, respectively. Recurrence leading to treatment switch in groups A and B was 7.7% and 23.1%, respectively (p -value 0.000). Complications were present in 17.3% and 30.8% of infants in groups A and B, respectively (p -value: 0.403). Intravitreal ranibizumab did not prove to be non-inferior to laser therapy in terms of recurrence, switching to other treatment, and survival without active ROP, as indicated by a p -value of 0.000. The laser was superior to intravitreal ranibizumab in preventing recurrence, switching treatment, and survival without active ROP.



Type of Presentation: Resident free papers (04 minutes)

Specialty: Surgical Retina

Outcomes of all nasal ports 25G PPV versus conventional 25G PPV for Stage 4 Retinopathy of Prematurity

Author: Mehreen Akram
Institution: Lahore General Hospital

Purpose: In some cases of stage 4 retinopathy of prematurity (ROP), especially stage 4b, the temporal retina may be dragged in the retrolental space. Placement of sclerotomies in the temporal half may endanger hitting the retina directly. We use an “all-nasal” approach for 25-gauge lens sparing vitrectomy (LSV) in such eyes to compare creation of iatrogenic breaks intra operatively with conventional PPV. Outcome is based on intra-operative iatrogenic breaks, hemorrhages and anatomical attachment at the end of procedure.

Study Design: Quasi experimental.

Material & Methods: Examination under anesthesia was done before starting the procedure to know the extent of retinal detachment behind the crystalline lens. It is important to ensure that no retina is drawn anteriorly in the nasal half. The eye was draped with all aseptic precautions. The surgeon sat on the nasal side of the eye to be operated with the operating microscope rotated and oriented accordingly. All eyes were operated using the 25-gauge trocar/cannula system. The first sclerotomy for the infusion cannula was placed nasally, 1 mm from the limbus, along the horizontal meridian at 3 or 9 o’ clock position for the right and left eyes, respectively. The infusion was turned on after checking the position of the cannula in the vitreous cavity via direct illumination through the cornea. Two more sclerotomies were placed in the superonasal and inferonasal quadrant for the vitreous cutter and endoilluminator. The central placement of the infusion cannula facilitated better rotation of the globe during surgery because a superior/inferior placed infusion cannula would impinge on the lids in the small palpebral aperture of an infant. The nasal bridge also helped in keeping the cannula stable and away from the crystalline lens. The superonasal and inferonasal ports could be used effectively to achieve the surgical objectives. The vitreous planes were dissected from ridge to lens, ridge to periphery, ridge to ridge, ridge to disc, and circumferentially along the ridge. The case was closed after a partial fluid–air exchange, and the sclerotomies were sutured with 6-0 vicryl sutures. Any breaks created by the surgeon or hemorrhages were noted throughout the procedure.

Result/Conclusion: Our study included 28 eyes of 18 patients with stage 4B. Group 1 (with conventional ports site), included 11 eyes, 6 of them achieved retinal attachment with no intraoperative iatrogenic retinal breaks or hemorrhages. Group 2 (with all nasal ports) included 17 eyes, out of which 15 achieved retinal attachment with no iatrogenic retinal breaks or per operative retinal hemorrhage. The all nasal approach achieves anatomical attachment with lesser chances of intra-operative break reation or hemorrhages when compared to the conventional approach.



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