



our vision is
your vision

January 2013

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- Susan Fromer, M.D.
- Brian Brazzo, M.D.
- Anthony Panarelli, M.D.
- Maayan Keshet, M.D.
- Kenneth Schor, M.D.
- Nikola Ragusa, M.D.
- David Rubaltelli, M.D.
- Daniele Jean, O.D.
- Lisa Modesto, O.D.
- Jason Compton, O.D.
- Diane Calderón, O.D.
- Rebekah Young, O.D.
- Carly Goldberg, O.D.
- Juliana Boneta, O.D.

Fromer Eye Centers is Celebrating 60 Years in Eye Care

**THE TWO NEW ADDITIONS
TO FROMER EYE CENTERS' FAMILY**

Nikola Ragusa, M.D. is a glaucoma specialist. He graduated from the renowned BS/MD program at The Sophie Davis School of Biomedical Education and S.U.N.Y Health Center at Brooklyn with top honors (Alpha Omega Alpha). He then completed his ophthalmology residency at North Shore-Long Island Jewish Medical Center. Dr. Ragusa completed a clinical and surgical fellowship in glaucoma at New York Eye & Ear Infirmary.



David M. Rubaltelli, M.D., M.B.A. is an ophthalmologist who specializes in vitreoretinal diseases. Dr. Rubaltelli graduated from Jefferson Medical College and completed his undergraduate education at Dartmouth College. He received his M.B.A. from Harvard Business School. Dr. Rubaltelli completed a two year fellowship in Vitreoretinal Diseases and Surgery at Schepens Retina Associates and the Massachusetts Eye and Ear Infirmary located in Boston. He was also the Chief Resident in Ophthalmology at the Saint Vincent Catholic Medical Center in New York City.

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**LASER VISION CORRECTION PROCEDURES.
WHAT IS BLADELESS LASIK?**

The two most popular laser refractive surgeries are; LASIK (laser in-situ keratomileusis) and PRK (Photo-Refractive Keratectomy) which uses a laser to change the curvature of the cornea (outer window of the eye). Traditionally in LASIK surgery, the surgeon would create a flap on the cornea with a micro karectome before applying the laser to reshape the comea. With Bladeless LASIK, the surgeon uses two different kinds of lasers, one to create the flap and the other to reshape the cornea. Femtosecond laser is used to create the corneal flap. This laser directs laser energy precisely to create a thin hinged flap on the corneal tissue (the transparent structure that covers the iris and pupil) which then is lifted temporarily for treatment. *(Continued on Page 2)*

On September 13, 2012, Dr. Mark Fromer became a Honorary Police Surgeon at a ceremony and received the badge of honor from Commissioner Ray Kelly.



Dr. Mark Fromer is the Eye Surgeon Director for the New York Rangers (National Hockey League)

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(Continued from Page 1)

Excimer Laser: After the flap is lifted the excimer laser is applied to reshape the cornea to eliminate myopia, hyperopia and astigmatism, when the reshaping of the cornea is completed then the surgeon replaces the flap back in place. This allows for a rapid visual recovery.

This technology enables the surgeon the ability to customize the corneal flap for every individual patient. This technology may now make it possible to treat those who were previously found not to be a candidate due to thin corneas.

WE HAVE BEEN PERFORMING LASER VISION CORRECTION SURGERY SINCE IT RECEIVED FDA APP ROVAL IN 1995.

EYE CONDITIONS & THEIR SYMPTOMS

Allergies: Itchy, red, swollen, tearing eyes may mean eye allergies.

Amblyopia (Lazy Eye): Is a vision development problem in infants and young children that not treated, can lead to permanent vision loss.

Bell's Palsy: This condition causes sudden paralysis of one side of the face. Because of inability to blink, patients may develop a severe dry eye.

Blepharitis: Inflammation of the eyelids can cause chronic eye irritation, tearing, foreign body sensation and crusty debris.

Cataracts: Is clouding of the natural lens of the eye. The most important factor in cataract formation is increasing age, but there are additional factors too.

Chalazion: is a lump of the lid that is caused by obstruction of the drainage duct of an oil gland within the upper or lower eyelid.

Color Blindness: Is the inability to distinguish the differences between certain colors.

Corneal Ulcer: Is an open sore on the cornea — the clear front window of the eye.

Detached Retina: In retinal detachment the retina peels away from its underlying layer of support tissue. Flashes of light and floating spots are classic warning signs of a detached retina.

Dry Eye Syndrome: Can have many different causes and in many cases, there is no single identifiable cause.

Eye Occlusions (Eye Strokes): Sudden vision loss can occur when a clot or blockage interrupts blood flow to vital eye structures.

Eye Twitching: The most common things that make the muscle in your eyelid twitch are fatigue, stress, and caffeine.

Floaters, Flashes and Spots: While annoying, ordinary eye floaters and spots are very common and usually aren't cause for alarm, but they also may signal a serious problem, like a detached retina, or retina tear.

Macular Hole: Is a small break in the macula, the central area of the retina that is responsible for central vision.

Nystagmus: Uncontrollable eye movements from nystagmus often have neurological causes.

Ocular Migraine: Are painless, temporary visual disturbances that can affect one or both eyes.

Ocular Rosacea: is a skin condition that often results in eye and eyelid irritation.

Optic Neuritis and Optic Neuropathy: Are the inflammation of the optic nerve (the bundle of nerve fibers that transmit visual information to your brain from your eye) that may cause a complete or partial loss of vision.

Photophobia: High sensitivity to all types of light, has variety of cause and there are a number of treatments on hand, depending on the primary cause.

Pinguecula and Pterygium: Are fleshy tissue that grows over the corneas (the clear front window of the eye).

Ptosis: Ptosis is also called "drooping eyelid." It is caused by weakness of the muscle responsible for raising the eyelid. Drooping eyelids can be corrected.

Sjogren's Syndrome: Is a systemic autoimmune disease. Dry eyes, dry mouth, joint pain, and fatigue are primary symptoms.

Strabismus: Is a disorder in which the two eyes do not line up in the same direction. With early diagnosis and treatment, the problem can usually be corrected.

Stye: Or (hordeolum) is a very common infection of a gland at the edge of the eyelid. It occurs when bacteria infect one of the tiny glands at the base of the eyelid hairs.

Subconjunctival Hemorrhage: Sudden redness in the white of the eye may be a subconjunctival hemorrhage. It looks as though you have blood on the eye. It can look alarming, but it is usually harmless.

Uveitis: Is a term for inflammation of the eye. Symptoms may include vision loss, redness of the eye, blurred vision, and ocular pain.

INTERVIEWS

Does Drinking 3 cups of Coffee a Day raise Glaucoma Risk?

THURSDAY, Oct. 4 (HealthDay News) — People who drink at least three cups of coffee a day might be increasing their risk of developing glaucoma, which can lead to vision loss or blindness, according to Harvard University researchers. Specifically, caffeinated coffee appears to be associated with a type of glaucoma called exfoliation glaucoma, which is characterized by tiny fibers peeling from the eye's lens that can cause a pressure build-up, the researchers said. Since this is the first study to link caffeinated coffee and exfoliation glaucoma in a U.S.-based population, and because it is an association study and not a clinical trial, the results needs to be confirmed through more studies. If confirmed, those at risk of exfoliation glaucoma, particularly those with a family history of glaucoma would be recommended to limit their intake of coffee to less than three cups per day. The study did not find the same link with any other caffeinated products, such as soda, tea or chocolate. "This is the first look and now they need more investigation to find out how strong this correlation is," said Dr. Mark Fromer. Despite the finding, Dr. Fromer won't be drinking less coffee yet. I don't think all the answers are in, but it's useful information. But do I think everyone should change their habits yet? Probably not" Although the study showed an association between high levels of coffee intake and increased risk of developing glaucoma, it did not prove a cause-and-effect.

HealthDay

Cholesterol Drug (Statins) Tied to Reduced Glaucoma Risks

Tuesday, October 2, 2012 -

Researchers may have discovered yet another potential use for the widely used cholesterol-lowering drugs known as Statins. In a new study, older people with high cholesterol who had taken Statins for two years had an 8 percent reduced risk of developing open-angle glaucoma, the most common form of the eye disease. "That's a big deal," said Dr. Mark Fromer, "We're talking 3 million people in the United States who have glaucoma and half of those people don't know it. "There's growing evidence that statins may be beneficial beyond their cholesterol lowering properties," Glaucoma, often affects people over 60 and can lead to blindness. People at higher risk include those with a family member with glaucoma, blacks and older Hispanics.

Let there be sight! Wednesday, August 15, 2012 -

Doc's work lets blind mice see; human tests not far away. A New York neuroscientist can restore sight to blind mice — a breakthrough that gives hope to millions of people without sight. "This would be a giant leap from where we are now," said Dr. Mark Fromer, "It has the potential to go all the way — to give blind people close to normal sight," The nonsurgical technique, which uses high-tech spectacles embedded with a tiny video camera and computer chip, could be tested on humans in two years. Blindness is often caused by diseases that damage the parts of the retina that detect light and the neural circuitry that attaches to it.

Cataract Surgery May Cut Risk of Hip Fractures
July 31, 2012 - A new study suggests cataract surgery may help some senior citizens reduce their risk of fall related hip fractures. A cataract is a clouding of the eye's lens; symptoms can include blurry vision, glare and poor night vision. As a result, people with cataracts may be more prone to falls. Those who had cataract surgery were less likely to sustain a hip fracture after the surgery. "Some people wait much too long for cataract surgery, and this puts the elderly at risk for a hip fracture or falling," said Dr. Mark Fromer. "Elderly people are more fragile, so if they don't see a step or an elevation and trip, that could be a death sentence," Dr. Fromer said. "Cataract surgery takes less than 10 minutes and can dramatically alter a person's lifestyle."

Saving on Eye Care; Bargains and Risks, Why cutting costs on eye care sometimes goes too far.

June 8, 2012 - In a tough economy, saving money is on everyone's mind. But when it comes to eye care, experts say that what you do to save money today may put you at risk of much higher costs in the future. As people try to ration their income, they will often choose to skip their routine eye exam. It's penny-wise and health care-foolish. Don't Skimp on Health Care for Your Eyes According to the CDC, 61 million Americans are at high risk of losing their eyesight, yet only half that number saw an eye doctor in the previous year. Many people measure the health of their eyes with their ability to see, that is the biggest misconception. If they don't have vision problems now, or they have glasses that correct their vision, they often believe that their eyes are doing just fine. "There are lots of blinding diseases without symptoms up front," Dr. Fromer says. "That's why it is so important to come in early and be tested."

Glaucoma Need Not Steal Sight
FRIDAY, April 20, 2012

Though glaucoma has been nicknamed the silent thief of sight, eye experts now say it generally doesn't have to be that way. "For most people, if you treat early, you should have vision for a lifetime," said Dr. Mark Fromer, "Some people are just more susceptible to optic nerve damage," Dr. Fromer noted. People who have a family history of glaucoma are more likely to develop glaucoma themselves. Blacks and Hispanics have a four to five times higher risk for glaucoma than whites. Older people, especially those who are also developing cataracts, have an increased risk of glaucoma as well, according to Dr. Fromer. And those who take any type of steroid medication -- whether it's oral, inhaled or even a topical cream -- also face a higher risk for glaucoma, he noted. "If you're going to get glaucoma, you're going to get glaucoma," he said. "But you don't have to lose your vision. It can be protected with appropriate medications."

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iPads May Help Those With 'Low Vision' Read Better
November 12, 2012

iPads and other tablets with backlight screens may allow millions of people with "low vision" to read faster and easier, a new study suggests. Low vision is an umbrella term for people who still have trouble reading, watching TV, or performing other daily activities despite glasses, contact lenses, medication, or even surgery. For people in this situation, the only options left are often magnifying glasses and low-vision aids, many of which are bulky and not that easy to use. The new study shows that iPads, Kindles, and other backlit tablets may allow some people to read faster and more comfortably. According to the findings, readers read faster on the iPad 2 than the newspaper or printed article. This improvement was most pronounced among people who had low vision in both eyes. Contrast counts, the backlight boosts contrast sensitivity or the ability to see an object stand out from its background. Many people with low vision lose this ability. The magnified font and backlight allows them to improve their reading ability and comfort. iPads can benefit most everyone with low vision, age-related macular degeneration, and diabetic eye disease, says Dr. Mark Fromer. "These devices create contrast between the letters and the background so they can read more easily -- without magnifiers." "The 18-point font size and the contrast allow them to pick up the shape of the letters much easier than standard print," Dr. Fromer says. They also beat the alternatives, vision aids, which can run as high as \$3,000 and are generally not covered by insurance. iPad 2s cost around \$400.

To read more about all these interviews, visit us at www.fromereye.com

OPTICAL LOCATION

3130 Grand Concourse in Bronx

We accept the optical insurance plans for most unions, for more information and to find out if we accept your plan please call Yelena Optical Manager
(718) 741-3200

EDUCATIONAL PROGRAMS TO THE OPTOMETRIST & PHYSICIANS IN THE REGION

On Wed 2/8/2012 and Wed 3/21/2012

Dr. Kenneth Schor, lectured on Understanding Visual Fields and Dr. Brian Brazzo, lectured on the topic of Tearing, the programs were held at Fromer Eye Centers' office in Manhattan.

On Wed 5/2/2012 at Mario's Restaurant in Bronx Dr. Mark Fromer lectured to thirty physicians on Ancillary Testing for the Diagnosis and Management of Ocular Disease

On Wed 5/23/2012 and Wed 5/30/2012 Dr. Mark Fromer lectured on Ancillary Testing for the Diagnosis and Management of Ocular Disease and Dr. Anthony Panarelli lectured on Intraocular Lens Placement in Children

On Wed 9/12/2012 Dr. Carly Goldberg lectured to the staff of Fromer Eye Centers on Carotid Artery Disease and The Eye at the Manhattan office.

On Wed 10/10/2012 and Wed 10/17/2012 Dr. Brian Brazzo lectured on Common Oculoplastics Topics and Dr. Carly Goldberg on Carotid Artery Disease and The Eye

JDRF Walk To Cure Diabetes



On Sunday, September 30th, more than 40 of Fromer Eye Centers' staff, friends and family joined together for the juvenile diabetes foundation fundraising at Foley Square in Manhattan. Fromer Eye Centers' team raised more than \$4,500.00 this year.

Some of the lectures were repeated to Accommodate a Larger Audience

Diabetic Retinopathy • Sutureless Cataract Surgery • Glaucoma • Macular Degeneration • Pediatric Eye Care • Cornea Disease
• Laser Vision Correction • Age Related Retinal Diseases • Plastics, Cosmetic & Reconstructive Eye Surgery • Botox



2012 has been a year of dramatic change. I feel fortunate that we have been able to bring Fromer Eye Centers to Harlem this year. As the first free standing multidisciplinary eye center in East Harlem, we look forward to providing the finest eye care available to our new neighbors. The goal of our organization is to bring the highest level of eye care to our patients compassionately. We will continue to do this in the years to come to the best of our ability. This year, the new health care act has affected the way we provide care drastically. The cuts to Medicare and Medicaid have been enormous. The new health care laws have mandated electronic medical records that are extensive. Unfortunately, the time necessary to input patient data at the time of service is quite difficult. This has increased your wait during appointments. For this we sincerely apologize. We are complying with the government mandate and will to the best of our ability attempt to improve these systems to better serve you. We have hired additional staff to help in this regard. In 2013, Fromer Eye Centers will be building a state of the art ambulatory surgical center to take care of every aspect of your ocular health. We continue to add physicians from the finest ophthalmology and optometric programs in the country to care for your eyes. This year, Dr. Ragusa, a glaucoma specialist, and Dr. Rubaltelli, a retina specialist were added to our service. We also intend to add a pediatric ophthalmologist this summer. Our very own Dr. Diane Calderon established the first private office based optometric residency training program in NY in conjunction with the SUNY School of Optometry. We continue to purchase the most sophisticated technologically advanced instrumentation available to care for your eyes. This coupled with the highly trained staff and physicians on board will serve your eyes well in 2013. Our vision is truly your vision. Wishing you all a lifetime of excellent eye health....

Mark Fromer, MD
Medical Director