educating retina specialists
translating science and research
advocating for our patients
advancing the profession
saving sight
improving lives

We’re in this TOGETHER.
IN JUST 3 DECADES, the American Society of Retina Specialists (ASRS) has grown from a small group of 44 charter members to become the largest professional organization of vitreoretinal specialists in the world.

With more than 2,400 global members, closely connected through the activities and resources of ASRS, we have become a powerful force for the advancement of retinal science and improved patient care.

As we celebrate the 30th anniversary of our founding this year, ASRS offers this special report, highlighting our work as we help preserve the precious gift of sight.

During this signature year for our Society, we are moving forward with ambitious projects that will help usher in a new era for ASRS. We began 2012 by relaunching our brand identity — including the creation of a new logo — and completely redesigning our website, which not only has a new look and feel but greatly enhanced capabilities and enriched content.

We recently relaunched our Foundation, creating a new, synergistic partnership with ASRS that will pave the way for even greater impact in advancing retinal science and patient care. Like ASRS, the Foundation has new branding, a new governance structure, and a new mission as the fundraising arm of our Society.

We have also redesigned and improved Retina Times and introduced a new e-newsletter, Retina FYI. We have premiered an exciting new webinar educational format for members and begun building the Retina Image Bank — a new resource for retina specialists that has the potential to significantly impact research and patient care (see page 7 of this report).

Our number-one priority remains advancing retinal science and improving the lives of patients with retinal disease.

Our advocacy efforts on behalf of patients are stronger than ever, including our Therapeutic Surveillance system, which enhances patient safety by alerting physicians to adverse medical events. This innovative system is a great example of the power of our community — which, from our founding in 1982, has always stressed collegiality, openness, and transparency as shared values.

And our exciting new Retina 20/20 initiative, designed to improve the eye health of all Americans, is taking our advocacy to a new level of impact.

I also wish to recognize the extraordinary leadership of our EVP, Jill Blim, who has championed each of these programs with professionalism, insight, and perseverance. The ASRS is fortunate to have Jill and our growing staff as partners in our exciting future.

You can read about all of these things — and much more — in the pages of this report, which is aptly titled “Vision and Hope: Creating a Brighter Future for Our Patients.” I believe it tells the story of an organization of strength and integrity, committed, above all else, to improving the lives of people who need our help. As ASRS enters its fourth decade of service to the nation, we rededicate ourselves to that task.

Suber S. Huang, MD, MBA
President, ASRS
Chair, The Foundation of the American Society of Retina Specialists
THE ASRS AND ITS FOUNDATION ARE FOCUSING THE EXPERTISE OF RETINA SPECIALISTS AROUND THE WORLD TO CREATE INNOVATIVE PROGRAMS TO PRESERVE THE PRECIOUS GIFT OF SIGHT. WE ARE WORKING TOGETHER TO BUILD A COMMUNITY UNITED BY A SINGLE GOAL—IMPROVING THE LIVES OF PEOPLE WITH RETINAL DISEASE.

Redesigned logos and a new brand identity reflect the close relationship of the Society and its Foundation.
ASRS: Three decades of growth and benefit for patients

The American Society of Retina Specialists evolved from a simple and noble idea conceived in the spring of 1982. Founders Jerry Bovino, Roy Levit, and Allen Verne believed that there should exist an open, egalitarian organization to serve the ongoing professional, educational, and social needs of all fellowship-trained practicing retina and vitreous specialists.

At the time, professional organizations serving the retinal community were exclusive; membership was dependent on a positive vote by existing members, with many prerequisites to join. The Vitreous Society, formed in 1982, changed all that, opening its membership to all fellowship-trained practicing retina and vitreous specialists to foster free exchange of ideas across an entire specialty.

The Society began with fewer than 50 members and steadily grew, changing its name to ASRS in 2002 and expanding its education, service, and advocacy activities to eventually become the world's largest organization of retina specialists.

The ASRS now includes more than 2,400 members and serves as an advocate for retina specialists worldwide.

Today, 4 out of 5 US retina specialists are ASRS members — as are 9 out of 10 retinal fellows in training. Our members are located in all US states and territories and in more than 55 countries. Members of the Society have completed one or more years of a vitreoretinal disease fellowship and are engaged in an active retinal specialty practice or are in a vitreoretinal fellowship training program.

Because it has an exceptionally high member-retention rate, ASRS truly can be considered the voice of America's retina-related medical community. As some might say, it represents “all things retina.” As we have grown, we have remained true to our key values.

Helping patients. Everything we do is driven by our desire to benefit patients and their families by saving sight.

Building a community. By creating a community that represents nearly every retina specialist in the nation, and by encouraging collegiality and the free flow of innovative scientific ideas, ASRS has helped accelerate the pace of medical breakthroughs in retinal science dramatically.

Serving physicians. We have become the strongest national advocate for our member physicians, and their primary source for cutting-edge education. Through our efforts we have created an environment in which they, in turn, can keep the pipeline of scientific advances robust and constantly moving forward.

Fostering innovation. Today, thanks largely to ASRS efforts, patients are on the cusp of one of the most exciting ophthalmological eras ever. The future holds great promise, including incredible new treatments to restore sight for patients who previously had no hope. Through clinical care and research, our members often dramatically impact the lives of their patients — as well as their patients’ families.

Over 3 decades of service, ASRS has achieved its standing as a leader in health care by being willing to change, adapt, and to grow.

At the same time, in all we do, we remember our origins — a small society that advanced scientific innovation, but did so in a way that put a great emphasis on collegiality, openness, and inclusion. As our organization grows, we seek ways to retain this atmosphere, which we believe helps foster the development of stronger professional relationships and synergy to benefit patients.
Education: Expanded offerings for retina specialists

IN RECENT YEARS, ASRS has made tremendous progress in expanding the breadth and accessibility of its educational offerings. Providing education for our members remains central to our mission of understanding and treating vitreoretinal diseases. Bringing the most advanced concepts and techniques to our members helps them deliver the highest level of care to patients.

Annual Meeting. Our Annual Meeting has become the premier educational event in the world for retina specialists. The main scientific program grew in 2011 to include nearly 100 papers and more than 200 posters, 24 instructional courses, and 29 new films covering the range of retinal diseases and treatments. Our clinical training is among the most advanced offered in any subspecialty setting, including wet-lab surgical techniques and courses utilizing new multimedia technology. More than 700 member-physicians joined us last year, along with 200 nonmember physicians and 300 corporate representatives, from most states and 34 countries around the world. A post-meeting survey showed 86% of respondents made changes to their clinical practice as a result of the meeting.

Expanded website. In early 2012, ASRS launched a completely redesigned and expanded website, featuring not only a new look and feel but also greatly enhanced capabilities that make the site more user-friendly and content rich. Our site now features a variety of educational innovations, including spotlight cases and enhanced access to Retina Times content and studies and reports from other journals and health organizations. Based on member input, the site also has a new and improved RetinaTalk Forum, allowing members to discuss hot topics and share advice. The website has received more than 200,000 visits since its relaunch in February.

Continuing Medical Education. In 2011-2012, ASRS provided CME training to more than 1,300 individuals. ASRS was one of the first subspecialties to accredit its own scientific meeting and other education endeavors — thanks to the strong foundation of scientific exchange and resource-sharing that has been a hallmark of its 30-year history. Our ACCME-accredited program ensures our members are on the cutting edge of developments, in an environment in which continued competence of physicians is increasingly important. ASRS now offers members a CME tracker tool that allows them to retrieve ASRS CME certificates with the click of a mouse.

Annual Practice Management Seminar. Tailored specifically for retina specialists, our Annual Practice Management Seminar continues to offer a vital resource in a practice environment that faces significant change in the future — ranging from use of electronic health records (EHRs) to new federal mandates related to the Affordable Care Act. The 2012 seminar, focusing on EHRs, was one of the most successful and well-attended to date.

Webinars. As a part of its updated strategic vision for member education, ASRS has committed itself to expanding online learning opportunities that respond to emerging topics. We offered the first of our new targeted webinars in May of 2011, titled “CATT: What Retina Specialists Need to Know.” Nearly 400 ASRS members either participated in the live webinar or viewed the online version. The second webinar aired in December 2011, offering guidance on recently reported sterilization issues related to the injection of the drug bevacizumab. The webinar also offered vital information on the selection and use of compounding pharmacies — providing much-needed and timely information for retina specialists.
Science and Research: Translating today’s innovations for tomorrow’s cures

ASRS OFFERS forward-thinking, practical guidance that retina specialists can easily incorporate into their practices. The focus is not only on the latest scientific breakthroughs, but on bringing the results of research from the podium to the clinic.

At the heart of our science and research efforts is Retina Times — a Society journal that offers cutting-edge research and scientific discourse. In content and design, Retina Times reflects the open, collegial, information-sharing principles that guided the launch of ASRS and have accelerated the development of new treatments and technology to benefit patients. This constant flow of scientific information is bolstered by other resources offered by ASRS to the retinal community, including its website and the Annual Meeting — the largest scientific gathering of retina specialists in the world.

Retina Times redesign and expansion. As the print embodiment of the society’s science- and research-based membership, Retina Times offers a rich trove of scientific information, explaining its application to daily retina practice. The journal is published 5 times yearly: quarterly plus an Annual Meeting issue. In 2012, Retina Times was redesigned — with expanded content and reader-friendly improvements — and its editorial committee structure was updated. A new online version is now available, as a part of the ASRS website redesign, including breaking news published online ahead of print.

Field tests. ASRS published a variety of scientific “field tests” for retina specialists over the last year, offering unbiased evaluations of the use of new surgical instruments and microsurgery systems in everyday practice. These features, which ask practicing retina specialists to field test the latest products and offer their candid evaluations, are published regularly in Retina Times, offering peer-to-peer guidance not easily found elsewhere.

The R&D “unplugged” symposium. ASRS continued to build on the success of its “unplugged” symposium in 2011—a popular feature of the Annual Meeting. Results of important clinical trials are usually presented from the podium at formal meetings. Although results may change retina practice patterns dramatically, retina specialists rarely get the opportunity they need to query the investigators and discuss the results in depth. The R&D “unplugged” symposium bridges the gap between the podium and the clinic, encouraging attendees to participate in discussions with a distinguished panel of prominent investigators.

Clinical updates with expert commentary. The ASRS website offered a wide range of clinical updates in 2011-2012, along with roundtable discussions by key opinion leaders. Topics ranged from results of studies in branch vein and central vein occlusion to treatment updates for age-related macular degeneration. Discussions focused on the practical implications of clinical trials, scientific breakthroughs, and new pharmaceuticals. ASRS members were encouraged to share their views and join in the online discussion via the Society’s new web-based RetinaTalk Forum.
The Retina Image Bank: Supporting a visual specialty

In one of the most far-reaching initiatives in its recent history, ASRS is launching in 2012 the Retina Image Bank — which it hopes will become the world’s largest and best-quality repository of open-access retinal images and video.

The Retina Image Bank (RIB) will include a wide range of image modalities — from standard photography to neuro-imaging (MRI, CT scans) — as well as video, diagrams, figures illustrating retinal anatomy or clinical techniques, and much more. More than just a repository of images, video, and cases, the RIB will have advanced search capability, rating functions, and other dynamic features to make it a constantly evolving platform for discovery and education.

ASRS members will be able to log-on to download images, which can be used for their own scientific or academic purposes or for patient education. Other users, ranging from students to health care organizations, will also be able to access RIB.

High-quality imaging is a key component of retinal science, and the ASRS has long been a leader in encouraging development of advanced standards in imaging technology and usage.

The first step in building the Retina Image Bank is collecting content — a process that has begun in earnest. Images are being sought from the collections of individual physicians and other sources. “Drawing upon the vast experience and insight of our members, there is great potential for our dynamic, open-access, multimedia platform to be a worldwide resource,” said RIB Inaugural Curator Suber Huang, MD, MBA.

“All members of ASRS and anyone who works to understand the retina have something to contribute,” Dr. Huang said. “We welcome submissions from around the world. Some of the field’s pioneers have already pledged their entire collections of images, to be collated and shared. We’re well on our way, with thousands of images already collected.”

ASRS has extended the call for images beyond its members to the health care community in general, and expects to include content from various vision-related institutions.

Other potential uses of the Retina Image Bank include development of targeted image-based publications, Continuing Medical Education, and new patient-education materials.

Comprehensive background information will be provided for each image in the repository, which will be accessible via multiple platforms, including smart phones, and will use interactive tools in real time. The system will be cross-referenced and keyword-searchable.

The Retina Image Bank will be integrated fully with the ASRS website, allowing members to use a single login for access. Early development of the RIB is being funded by a grant from Allergan.

“The Retina Image Bank has the potential to radically speed up the impact of our work as a community of retina specialists by widening access to high-quality imagery — which is a crucial building block of research and innovation,” Dr. Huang said. “This is just the latest iteration of our long history of openness, inclusivity, and knowledge-sharing — the true core and foundation of ASRS.”
Advocacy: Ensuring quality and safety for our patients

The Advocacy Efforts of ASRS are driven by a simple goal: Our steadfast commitment to ensuring access to the highest quality of care for patients with retinal disease. Our advocacy is aimed at advancing these goals by helping shape professional standards, legislation, and state and federal policies that impact our specialty.

Protecting access to care. An aging population and much greater incidence of diseases such as diabetes mellitus mean more patients are in need of care from retina specialists. To ensure access to quality retinal care, ASRS has stepped up its efforts to educate patients about our profession, including an improved and expanded “Find a Retina Specialist” online tool, relaunched this year. At the same time, ASRS has been a strong advocate at the state level for robust patient safety protections to ensure effective retinal treatments are offered only by qualified practitioners. In 2011-2012, ASRS successfully helped to defeat proposed rule changes in Indiana that would have put patients at risk by blurring the lines between providers of services related to eye care.

Ensuring safety through therapeutic surveillance. In 2011, ASRS launched its wide-ranging Therapeutic Surveillance program, which identifies safety concerns, rare events, and emerging trends on all drugs and devices used by retina specialists. Since its inception, the service has been used 4 times to provide timely alerts for the retina community. Last year, ASRS quickly mobilized resources through this program to help physicians when sterilization issues related to Avastin became a potential issue — offering physicians online updates and working closely with national compounding pharmacies to develop educational materials. The program also worked with the Centers for Disease Control (CDC) to investigate and provide member alerts about a multistate outbreak of post-procedural fungal endophthalmitis.

Pursuing accreditation and certification. ASRS continues to believe that accreditation of retina fellowships and board certification of retina specialists are in the best interests of patients. Accreditation and board certification are the most broadly accepted criteria that assure the public and medical community of appropriate skills needed to treat medical and surgical problems. Our proposal for formal accreditation/certification, which is supported by the American Board of Ophthalmology, moved forward in 2011 with the designation of a new ASRS Committee on Retina Accreditation and Certification.

Strengthening our advocacy voice. In an effort to extend our ability to advocate with legislators and policy makers, ASRS has created the Retina Advocacy and Federal Affairs (RAFA) task force, which will place active member representatives in every US state and region to serve on issues of special interest to practicing retina specialists. President-Elect John Thompson, representing ASRS, testified in March 2012 before the Medicare Evidence Development and Coverage Advisory Committee (MEDCAC) about new treatment modalities for diabetic macular edema (DME). At the session’s conclusion, MEDCAC voted that CMS should have relatively high confidence that DME patients who receive anti-VEGF treatment are better off than those treated without these drugs.

Retina 20/20: Advocating for patients. In 2012, ASRS launched Retina 20/20, a public health education campaign designed to support the goals of the federal government’s Healthy People 2020 — which is aimed at improving the overall health of Americans. Retina 20/20 seeks to reduce visual impairment that otherwise can occur from untreated age-related macular degeneration and diabetic retinopathy.
Building a Community: Collegiality still key to ASRS success

ASRS IS AN ORGANIZATION ROOTED in openness and inclusivity. This spirit has created a strong sense of collegiality within its ranks. Though our membership is diverse, we are connected by mutually shared professional values and interests.

Our community includes, by extension, the patients and families we serve. As it continues to grow, ASRS has placed a priority on nurturing the strong connections — between physician colleagues and between physicians, patients and families — that add to our unity of purpose and give deeper meaning to all we seek to accomplish.

Strengthened organizational structure. To better serve members, ASRS in 2011 re-organized its committee and governance structure, began implementing a new strategic plan, and made a major investment in robust information technology (IT) infrastructure — which will serve as the backbone of our mission to provide continuing retinal education and a forum for scientific exchange. As a part of its new organizational structure, ASRS has created a new synergistic mission and vision with its partner Foundation, which serves as the philanthropic arm of ASRS (see page 10).

New brand identity and logo. In January, ASRS launched its new brand identity, including a new logo and look and feel for all ASRS organizational materials. Contemporary typefaces and new thematic colors help reinforce ASRS's new strategic plan and mission for the future. The brand identity of ASRS's Foundation was also updated, with a companion logo and complementary thematic colors.

Expanded PAT Survey. Issued yearly, the Preferences and Trends (PAT) Survey has become one of ASRS's most important member benefits — measuring the interests, knowledge, and opinions of our professional community. The survey measures members' preferences and opinions on a range of topics, from surgical techniques and instrumentation to practice structure and socioeconomic issues. In 2012, for the first time, it offered 10-year trend data on key topics such as scleral buckling and vitrectomy, as well as comparisons of opinions from retina specialists around the world, receiving its highest response rate ever from participating physicians.

New opportunities for young physicians. The ASRS's Young Physicians Section is a subsection of the Society made up of members who have completed their training in the last 7 years. It provides a forum to discuss issues unique to the early years of practice. The section has expanded its activities recently in an effort to provide even greater value for young physicians.

New publication: Retina FYI. In early 2012, ASRS launched Retina FYI, a new publication designed to help keep members better informed of Society news, CME offerings, upcoming meetings, industry information, and much more. Distributed electronically, Retina FYI delivers breaking news, while keeping ASRS members better connected with each other.

“I'm early in my career and already have been able to participate within ASRS on many levels. It's an incredibly diverse membership and makes for a very rich professional experience.”

Christine Kay, MD

Founded by Roy Levit, Allen Verne and Jerry Bovino (l to r, above), the ASRS is rooted in the concept of open, egalitarian sharing of information.
The Foundation: Making vision a reality through fundraising

2012 MARKED A MILESTONE YEAR for the Foundation of the American Society of Retina Specialists, the philanthropic arm of ASRS, which was restructured to align it more closely with the Society’s long-term mission and goals.

As the fundraising arm of ASRS, the Foundation has embarked on a new effort to create a stronger culture of philanthropy and become a more effective resource in helping drive forward our profession’s deep commitment to improving the lives of patients.

Now more closely aligned than ever before, ASRS and its Foundation are entering into a new era of partnership for patients: ASRS will establish a vision and agenda for the profession’s future, while the Foundation will serve as the fundraising engine to accomplish the short-term and long-term goals needed to make this vision a reality.

“With this new structure, the Foundation and ASRS will be more effective in focusing the expertise of retina specialists around the world to create innovative programs to preserve the precious gift of sight,” said Mark E. Hammer, MD, president of the Foundation. “We are working together to build a community united by a single goal: to improve the lives of people with retinal disease.”

Why give to the Foundation? “We’re focused on the things that matter to donors,” said Dr. Hammer. “We leverage great ideas that will benefit patients, guided by a well-defined wish list of projects and programs from ASRS. Contributions to the Foundation will help us as we seek to turn today’s ideas into tomorrow’s cures.”

Among the Foundation’s recent highlights:

**New name and branding.** In August 2011, the Foundation adopted a new name, evolving from the American Retina Foundation to the Foundation of the ASRS, and in early 2012 it unveiled a new logo and visual brand identity.

**New governance and mission.** The Foundation Board of Directors has been reconfigured, with overlapping representation with ASRS to ensure stronger integration of activities. The Foundation’s strategic plan was updated and its role as the fundraising arm of ASRS formalized.

**Joint meetings and planning.** In 2011, the Foundation and ASRS conducted their first-ever joint Board meeting, symbolizing the new synergistic goals of the 2 entities. The Foundation is now based at ASRS headquarters in Chicago.

**Saving Vision website redesign.** In 2012, the Foundation worked closely with ASRS to redesign and enhance the Saving Vision website (savingvision.org), our patient-education portal, accessible directly or via the ASRS website. Important resources and informational articles for patients have been added and content will continue to be updated with the goal of ensuring the site serves as the trusted source of all patient education related to the retina. Expanded sections on age-related macular degeneration and diabetic retinopathy are among the site’s new features.
WE GRATEFULLY ACKNOWLEDGE
the contributions of these generous donors, who have helped to advance the
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