

# FINE VIEW

"Committed to providing the most technologically advanced, cost-effective patient care, with the highest quality of professionalism."

## Made-To-Order Surgery: It All Depends on Your Eyes

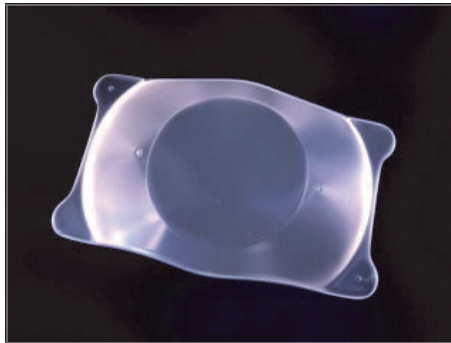


**Richard S. Hoffman, MD, CPI**

You may hear the words "refractive surgery" when you visit our clinic. The phrase encompasses the different surgical procedures we offer which can reduce or eliminate your dependence on glasses. Although Laser-Assisted in situ Keratomileusis (LASIK) is the most widely known, there are other options. The best procedure for you depends on your refractive error, your age and any ocular abnormalities you may have.

For example, in younger patients with mild to moderate amounts of nearsightedness and astigmatism, LASIK is an excellent procedure that can improve distance vision and make the vast majority of these patients glasses independent. Patients with abnormally shaped corneas or corneas that are extremely thin may not be good candidates for LASIK due to an increased chance of developing an unstable cornea. In addition, patients with dry eyes may be bet-

ter candidates for Photorefractive Keratectomy (PRK) rather than LASIK since this technique is less likely to aggravate their dry eyes. PRK uses the same laser to reshape the cornea as LASIK, but does this on the surface of the eye rather than under a corneal flap.



**Implantable collamer lens**

When patients have severe degrees of nearsightedness, an implantable collamer lens (ICL) offers the advantage of eliminating the nearsightedness without removing corneal tissue. The ICL is basically a special contact lens shaped implant that is placed within the eye, behind the colored iris. It has the power to treat severe amounts of nearsightedness that are outside the range of what can be treated with LASIK or PRK. In addition, it is theoretically reversible and can be removed if a patient is not content with the result.

LASIK can treat small amounts of farsightedness (hyperopia), however, when the degree of farsightedness starts to increase, the results with LASIK are less reliable. For older patients with presbyopia and farsightedness, the refractive lens exchange (RLE) is perhaps the best procedure.

A RLE is the same as a cataract procedure with removal of the crystalline lens and replacement with an intraocular lens (IOL). When a RLE is performed, there is no cataract but just a clear crystalline lens. By calculating the correct power of the implant, nearsightedness, farsightedness and astigmatism can all be addressed and eliminated. In addition, special multifocal and accommodating lenses can be implanted at the time of the RLE to give both distance vision and near vision without the need for reading glasses.

As with most things in medicine, one procedure does not fit every patient and every clinical setting. By determining your refractive error, your underlying ocular abnormalities, and your likelihood of developing cataracts, we can individually customize your surgical procedure. This maximizes your chances of a successful surgical outcome. For more information, please call us and talk to Tony, our refractive surgery coordinator about scheduling a complimentary refractive screening.



**Machine used to perform IntraLase Blade-Free LASIK Surgery**

# Am I Going Crazy?

Occasionally patients tell me they see things they know are not there. This is common in people who experience chronically poor vision due to an eye disease. Some patients are reluctant to report these visual symptoms to me because they fear I will determine them to be “crazy” and possibly question them about their mental health. I sometimes hear about these hallucinations not from the patient, but from a close member of the family, or a friend.

If this is happening in your world, I have good news: you or someone you know is probably not crazy. There is a medical syndrome to explain hallucinations in patients with poor vision. It is called Charles Bonnet Syndrome (CBS), named after the Swiss naturalist living in the 1700s. Bonnet’s grandfather was nearly blind due to advanced cataracts, yet he would describe

in detail to Bonnet the birds, people and buildings he would see. Bonnet wrote about what his grandfather saw, and became the first person ever to describe vivid hallucinations in people with visual impairment. We now understand approximately 20% of people with advanced vision loss from macular degeneration experience these hallucinations. These illusions can materialize as almost anything, including faces, people, patterns or inanimate objects. I had a patient once who told me when she opened her refrigerator door she would see a red carpet. While these visions can be disconcerting, patients who have CBS are most often mentally healthy.

We have no way of treating CBS at this time. The visions are usually self-limiting and can vary in length. Some patients tell me they only see the images for a few seconds; others see

them for an entire day. If you are seeing things you know are not there, tell your doctor. Talking about CBS can ease your mind and help you cope with what you are experiencing.



Annette Chang Sims, MD

## Out and About in the Community

With the start of a new year, we turn our attention to resolutions. You hear about the popular ones, such as losing weight and making healthier eating choices. We would like to add “focus on your eye health” to that list. Each January, the ophthalmic community highlights glaucoma awareness. Dr. Sims marked the occasion by offering a complimentary glaucoma screening at the Willamalane Adult Activity Center in Springfield. Dr. Sims brought



with her Wendy and Amber, two of our outstanding technicians, and together they screened, counseled and educated participants about their individual eye health. Senator Lee Beyer, who represents Springfield in the Oregon State Senate was also there. The Oregon Academy of Ophthalmology sponsored the event.



Dr. Sims and State Senator Lee Beyer



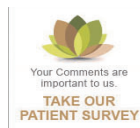
L to R: Amber, Wendy, Dr. Sims

### New! Patient Portal

- Schedule an Appointment
- Renew Your Medications
- Pay Your Bill
- Ask Our Office A Billing or Medical Question
- Tell Us About Your Experience

[Click here!](#)

- ❑ Fine View Newsletters
- ❑ Learn About Our Research Programs & How You Can Participate
- ❑ View our Ads



Visit [www.finemd.com](http://www.finemd.com) and tell us what you think!

# New Faces and New Opportunities at Our Clinic



**Christina, technician**

We are excited to announce our surgery coordinator, Christina, has accepted an opportunity to continue with us as a technician in training.

Christina came to us as a check-in receptionist in 2009 and since then has enjoyed immersing herself in the world of eye care. She is thrilled to become more directly involved with patient care and will be working towards certification as a technician. Congratulations Christina!

Ashley O. is our new surgery coordinator. She and Christina are working together closely during the transition to make it seamless for you. Ashley has extensive scheduling experience and has



**Ashley O., surgery coordinator**

attended nursing school. She has a two-year-old son who is the love of her life.

Nicol, our newest insurance expert, works behind the scenes coordinating your insurance benefits

and ensuring we send accurate billing information to your insurance company. She does a fantastic job!

You may see Ashley S. during your next visit. She is one of our technicians and she joined our staff in March last year. Ashley S. was born and raised in eastern Washington but had been living



**Ashley S., COA**

and working in Montana for the past seven years before joining our team. She brings with her four years of experience as a certified ophthalmic assistant.



**Nicol, insurance coordinator**

Nichole is from Eugene, but has spent the last few years living in Alaska. Nichole has been working in the medical field for several years; the last three have been as a certified ophthalmic assistant. Congratulations and welcome to all!



**Nichole, COA**

## Improved Vision and Exceeded Expectations



**Carol Rivendell, patient**

Even with glasses, my vision was getting increasingly blurry. I could not read street signs, nor could I read the instructions on medication bottles. It was time to remove my cataracts. Both Drs. Hoffman and Sims contributed to my wonderful surgical results. The staff is incredible. They explained everything as I went through surgery so I had nothing to worry about. They are very person-

able people. I was not expecting to be able to see without glasses after surgery, but I can. I am able to read the index of an Atlas, and within 3 days after my surgery I was driving! I am doing all this, and reading books, without glasses! I really, really, really like Dr. Sims and Dr. Hoffman as my eye care team.



Find us on Facebook and Twitter. Search Fine, Hoffman & Sims to see what we are up to.



Scan the QR code with your smartphone to visit our website.

## A Great Comfort: I Feel Blessed!



**Dennis Eastburn, patient**

Dr. Sims performed my cataract surgery in January. The employees at the office and the surgery center were so nice. They would touch my arm or shoulder to comfort me. I feel so blessed to have my eyes cared for here. The whole office staff, from the front desk to the surgeons, exhibit love and care for each patient. I just want everyone to know how important each one is. Thank you!

*Drs.*  
**Fine, Hoffman  
& Sims**  
OPHTHALMOLOGISTS

I. Howard Fine, M.D.  
Richard S. Hoffman, M.D.  
Annette Chang Sims, M.D.

PHYSICIANS AND SURGEONS  
OPHTHALMOLOGY

1550 Oak Street, Suite 5  
Eugene, Oregon 97401-7701

RETURN SERVICE REQUESTED



## DRS. FINE, HOFFMAN & SIMS: HONORS & AWARDS & ACTIVITIES

October 6, 2013, Eugene, OR – Our “Seeing Pink” team hit the pavement in the annual Race for the Cure fun walk/run. Our fundraising efforts earned us a mention in Eugene’s Register Guard newspaper. We raised more than \$200 for breast cancer research with our quilt raffle. Two of our staff members, Carolyn and Brandy, made the quilt. Congratulations to Lois Overstreet, our quilt winner.



**Pink Friday, September 2013**

November 16-19, 2013: New Orleans, LA – Dr. Hoffman taught several courses at the

annual meeting of the American Academy of Ophthalmology (AAO). At the prestigious Cataract Spotlight Session, he presented a case of cataract surgery in a patient with Marfan’s Syndrome to more than 3,000 international ophthalmologists and surgeons. Laurie, our administrator taught several courses, and Dr. Sims and Laurie, while in New Orleans, LA, participated in the 5K Run/Walk for Vision. The money raised benefits the Eye Bank Association of America, the oldest national transplant organization.



**Dr. Sims and Laurie, New Orleans, LA, November 2013**

trial Award for Distinguished Service in Ophthalmology. He also lectured on the changes he has seen in cataract surgery and his tricks for managing intraoperative floppy iris syndrome surgically. Laurie taught courses on avoiding pitfalls when using electronic health records, and effective patient service through phone calls. She also chaired the New Technology Day for ophthalmic administrators.

**Dr. Fine receiving the Philip M. Corboy, MD Memorial Award in Kauai, HI, January 2014**



**Laurie Brown poised to present, Kauai, HI, January 2014**