

VOLUME I : 3RD EDITION

JUNE 2023



## Elman Retina Group

The Most Compassionate Care In Sight

# NEWSLETTER



Michael J. Elman, M.D.



Sidney "Sid" A. Schechet, M.D.



David Dao, M.D.

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- The First Ever Treatment for Geographic Atrophy (GA) (Approved by the FDA)
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# Slow down Geographic Atrophy **GA** with SYFOVRE

The first and only FDA-approved treatment for GA

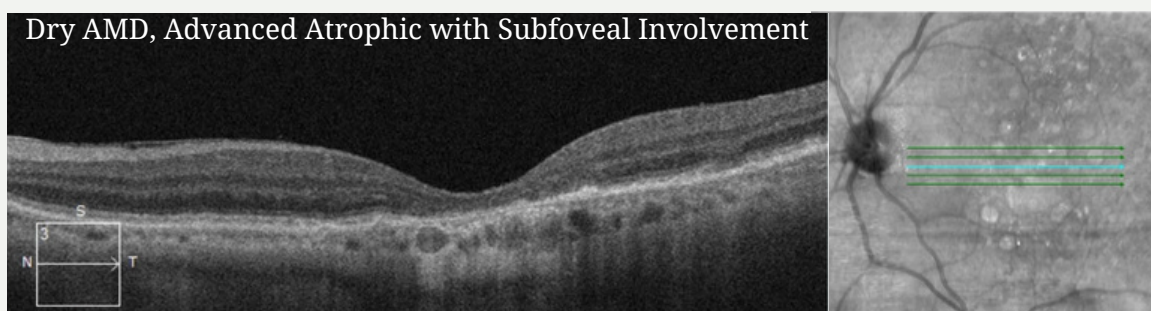
Elman Retina Group participated in these landmark clinical trials in developing this drug.

## What is SYFOVRE?

**SYFOVRE** is a prescription eye injection, used to treat geographic atrophy (GA), the dry advanced form of age-related macular degeneration (AMD).

## What is GA?

GA can worsen over time and lead to permanent and irreversible damage to your retina, the part of your eye that allows you to see. GA cannot be corrected with eyeglasses or surgery. When GA progresses, lesions, or patches of damaged cells, will grow and affect your vision. GA is an irreversible eye disease that is the dry, advanced form of age-related macular degeneration (AMD).



**SYFOVRE** was proven to slow the growth of GA lesions

**SYFOVRE** was studied in 2 clinical trials of over 1200 people with GA. In both trials, lesion growth slowed down for patients who received SYFOVRE versus those who did not.

## How Geographic Atrophy GA Progresses in the Eye

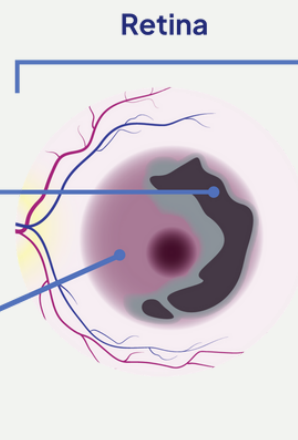
SYFOVRE helps regulate an overactivated part of the immune system in your eye. This overactivation can contribute to the progression of GA.

It's important to know that GA *cannot* be cured, and any damage from lesion growth cannot be reversed.

GA lesion

Lesion progression over time

Macula



How SYFOVRE™ (pegcetacoplan injection) works. (n.d.). <https://syfovire.com/about-syfovire/how-syfovire-works/>  
Resources for you and your patients. (n.d.). <https://syfovireecp.com/resources/>

SYFOVRE is the first and only FDA-approved treatment for GA. (n.d.). SYFOVRE. [https://syfovireecp.com/wordpress/wp-content/themes/apellis/pdf/patient\\_brochure.pdf](https://syfovireecp.com/wordpress/wp-content/themes/apellis/pdf/patient_brochure.pdf)

# Recent Publications + Presentations:

## Pneumatic Retinopexy in Dialysis-Associated Rhegmatogenous Retinal Detachments

Eric W. Lai, BS • Paola Oquendo, MD • Isabela Martins Melo, MD • Rajeev H. Muni, MD • Sidney A. Schechet, MD

Published: September 21, 2022 • DOI: <https://doi.org/10.1016/j.oret.2022.09.003>

Pneumatic retinopexy (PR) is a promising treatment option for rhegmatogenous retinal detachment. Its minimally invasive nature, ability to be performed without delay in a clinic, and favorable success in selected patients.<sup>1</sup> In the Pneumatic Retinopexy versus Vitrectomy for the Management of Rhegmatogenous Retinal Detachment Outcomes Randomized Trial (PIVOT), the primary anatomic reattachment rate at 12 months and final anatomic reattachment rate was 98.7%, with no

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Clinical Image

Open Access, Volume 3

## Flashes and floaters as only sign of underlying retinal tear and vitreous hemorrhage

Wei Chen Lai<sup>a</sup>; Timothy Lee<sup>a\*</sup>; Sidney A Schechet<sup>a,b</sup>

<sup>a</sup>University of Maryland School of Medicine, Baltimore, MD, USA.

<sup>b</sup>Uniformed Services, University of the Health Sciences School of Medicine, Bethesda, MD, USA.

<sup>c</sup>Elman Retina Group, Baltimore, MD, USA.

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REPORTS | ARTICLES IN PRESS

PDF [287 KB]

## The Predictive Value of False-Positive ForeseeHome Alerts in the ALOFT Study

Allen C. Ho, MD • Sidney A. Schechet, MD • Mariam Mathai, MD • ... Jennifer H. Jacobs, MD • Miguel A. Busquets, MD • Emily Y. Chew, MD • Show all authors

Open Access • Published: October 21, 2022 • DOI: <https://doi.org/10.1016/j.oret.2022.10.009>

Hindawi  
Case Reports in Ophthalmological Medicine  
Volume 2022, Article ID 4959522, 5 pages  
<https://doi.org/10.1155/2022/4959522>



## Case Report

### Neovascular Glaucoma from Ocular Ischemic Syndrome Treated with Serial Monthly Intravitreal Bevacizumab and Panretinal Photocoagulation: A Case Report

Hassan Asif, Zhuangjun Si, Steven Quan, Pathik Amin, David Dao, Lincoln Shaw, Dimitra Skondra, and Mary Qiu

Department of Ophthalmology and Visual Science, University of Chicago, Chicago, Illinois, USA

Correspondence should be addressed to Mary Qiu; [mary.qiu@gmail.com](mailto:mary.qiu@gmail.com)

Received 13 June 2022; Revised 14 July 2022; Accepted 19 July 2022; Published 28 July 2022

Academic Editor: Kevin J. Blinder

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**Purpose:** To describe a case of open-angle neovascular glaucoma (NVG) secondary to ocular ischemic syndrome (OIS) treated with a planned series of 6 monthly anti-VEGF injections with interspersed panretinal photocoagulation (PRP) sessions. We term this treatment protocol the Salvaging Conventional Outflow Pathway in Neovascular Glaucoma (SCOPING) Protocol, and this is our (MQ and DS) standard of care for all NVG patients presenting with partially or completely open angles. **Case.**



American Journal of Ophthalmology Case Reports

journal homepage: [www.ajocasereports.com/](http://www.ajocasereports.com/)



## Posterior placoid-like maculopathy and macular hole associated with vitamin A deficiency

Eric W. Lai<sup>a</sup>, Russel H. Dinh<sup>b</sup>, Brian K. Do<sup>b,c</sup>, Sidney A. Schechet<sup>d,\*</sup>

<sup>a</sup>University of Maryland School of Medicine, Baltimore, MD, USA

<sup>b</sup>MedStar Health/Georgetown-Washington Hospital Center, Washington, D.C, USA

<sup>c</sup>Retina Group of Washington, Washington, D.C, USA

American Journal of Ophthalmology Case Reports 28 (2022) 101668



American Journal of Ophthalmology Case Reports

journal homepage: [www.ajocasereports.com/](http://www.ajocasereports.com/)



## Gonioscopy-assisted transluminal trabeculotomy in neovascular glaucoma: Salvaging the conventional outflow pathway

Jacob A. Kanter, Pathik Amin, Rahul Komati, Anna G. Mackin, David Dao, Lincoln T. Shaw, Dimitra Skondra, Mary Qiu

Department of Ophthalmology and Visual Science, University of Chicago Medical Center, Chicago, IL, USA

## ARTICLE INFO

**Keywords:**  
Neovascular glaucoma  
Gonioscopy-assisted transluminal trabeculotomy  
Peripheral anterior synechiae

## ABSTRACT

**Purpose:** To report a case of acute neovascular glaucoma with partial synechial angle closure secondary to central retinal vein occlusion that underwent gonioscopy-assisted transluminal trabeculotomy as well as near-monthly anti-vascular endothelial growth factor (VEGF) injections and panretinal photocoagulation (PRP) treatments. **Observations:** Nine months after GATT, the patient had achieved intraocular pressure control on no medications. However, she was lost to follow up for 4 months and received no anti-VEGF or PRP during that time; she re-presented with acute NVG and complete synechial closure, and ultimately underwent aqueous shunt implantation. **Conclusions and Importance:** To our knowledge, this is the first reported attempt of an ob interno angle surgery to successfully restore aqueous outflow through the conventional outflow pathway in an eye with acute NVG and partial synechial angle closure. We posit that this can be an effective approach to achieve IOP control in NVG.

## Analysis of the Long-Term Visual Outcomes of ForeseeHome Remote Telemonitoring – The ALOFT Study

Michael J. Elman, M.D.

Sid A. Schechet, M.D.

Elman Retina Group  
Baltimore, Maryland

Presented at AAO 2022  
in Chicago, IL



Presented at the Macula  
Society in Miami, FL  
FEB 2023





# Recent Awards:

## DRCR Retina Network Site of the Month

October 2022

Congratulations to:

**Elman Retina Group, P.A**

(DRCR Retina Network Site 111)

### Investigators:

Michael J. Elman, MD  
Sidney A. Schechet, MD  
David T. Dao, MD

### Coordinators:

JoAnn Starr  
Ernestine Copeland, BS

### Technicians:

Kristie M. Dougherty  
Ashley M. Metzger  
Amy Thompson  
Bridgette F. Smith  
Brittney Taylor  
Dallas R. Sandler  
Grace J. Watters  
Joshua Vierheller  
Trinity G. Wolf  
Peggy R. Orr  
Rayleen M. Goldsmith  
Pamela V. Singletary  
Peter Sotirakos  
Teresa Coffey  
Terri Cain

CU06-RE-P2A-01\_Sponsor Newsletter #001\_22Dec2022



## Dear Investigators and Study Coordinators,

The first subject for the CUDMEP2 clinical trial (Protocol No. CU06-RE-P2A-01) has been randomized at Site 04 Elman Retina Group (ERG)!

I would like to express my gratitude to all the researchers for their efforts in this study.

**PROTOCOL:** A Curacle Co., Ltd. - CU06-RE-P2A-01 / CUDMEP2, A Randomized, Open-label, Parallel-group, Multi-center Phase 2a Study to Evaluate the Efficacy and Safety of CU06-1004 for 12 Weeks in Patients with Diabetic Macular Edema (DME) (Pro00066350)

- Recruitment Status: Target number of subjects = 60 (Deadline for target enrollment Nov 2022 – May 2023)

Clinical Site	Principal Investigator	Status	Screening	S/F	Randomized	Treated	W/D	Completion
Site 01 RCT (Retina Consultants of Texas)	Charles Wyckoff, MD	Activated	In pre-screening	-	-	-	-	-
Site 02 MAR (Mid Atlantic Retina)	Duo Xu, MD	Activated	In pre-screening	-	-	-	-	-
Site 03 NERC (New England Retina Consultants)	David Lally, MD	Activated	In pre-screening	-	-	-	-	-
Site 04 ERG (Elman Retina Group)	Michael Elman, MD	Activated	1(▲1)	-	1(▲1)	-	-	-
Site 05 CVRC (Cumberland Valley Retina Consultants)	Allen Hu, MD	In set-up	-	-	-	-	-	-
Site 06 ARCR (Austin Research Center for Retina)	Saradha Chexal, MD	Activated	3(▲3)	3(▲3)	-	-	-	-
Site 07 WMRC (Wagner Macula and Retina Center)	Kapil Kapoor, MD	In set-up	-	-	-	-	-	-
Site 08 OCB (Optic Nerve Clinic Consultant of Boston)	Jeffrey Heier, MD	Activated	In pre-screening	-	-	-	-	-
<b>Total</b>			4(▲4)	3(▲3)	1(▲1)	-	-	-



# Clinical Trials:

## AGE RELATED MACULAR DEGENERATION

**Opthea – ShORe -**  
A Phase 3, Multicentre, Double-masked, Randomized Study to Evaluate the Efficacy and Safety of Intravitreal OPT-302 in Combination with Ranibizumab, Compared with Ranibizumab Alone, in Participants with Neovascular Age-related Macular Degeneration (nAMD). Conducted at FS only. Duration of study 2 years-monthly visits

**HAVE A PATIENT  
IN MIND**

**FOR ONE  
OF OUR  
CLINICAL  
TRIALS?**

PLEASE FEEL FREE TO CONTACT OUR  
STUDY COORDINATOR, **JOANN STARR.**  
[STARR@ELMANRETINA.COM](mailto:STARR@ELMANRETINA.COM)  
(410) 686-3000

## MACULAR TELANGIECTASIA, MACULAR HOLE, & EPIRETINAL MEMBRANE

**NHOR – A Natural History Observation and Registry Study of Macular Telangiectasia Type 2: The MacTel Study-Conducted at FS-one visit only with annual phone calls. MacTel confirmed by Reading Center.**

**DRCR AM-**  
Randomized Trial Comparing Immediate versus Deferred Surgery for Symptomatic Epiretinal Membranes – conducted at all offices except Pine Heights and Columbia. No Reading Center approval. If assigned to surgery it must take place within one month of enrollment. With worsening of symptoms surgery can be performed in the deferred surgery group after meeting certain criteria. Follow-up one month post vitrectomy in surgery group, otherwise 3, 6, 12, 18, 24 and 36 months.

## DIABETIC RETINOPATHY

**DRCR AF-** A Randomized Clinical Trial Evaluating Fenofibrate for Prevention of Diabetic Retinopathy Worsening – conducted at all offices except Pine Heights and Columbia – screening, randomization, three month, 6mths and every six months for 4 years. Eligibility determined by Reading Center and PCP approval based on labs taken during screening. Randomization – Fenofibrate vs placebo

**OcuTerra Therapeutics, Inc – OTT 166-201 A Phase 2**  
Randomized, Double-Masked, Vehicle-Controlled, Multicenter Study to Evaluate the Safety and Efficacy of OTT166 Ophthalmic Solution in the Treatment of Diabetic Retinopathy (DR)  
**Total C2022.001 –**  
Evaluation of Repeated, In-Clinic, Self-Imaging by DME Patients Using the Notal Vision Home OCT

**Curacle Co.,Ltd – CU06-RE-P2A-01 -** A Randomized, Open-label, Parallel-group, Multi-center Phase 2a Study to Evaluate the Efficacy and Safety of CU06-1004 for 12 Weeks in Patients with Diabetic Macular Edema (DME)

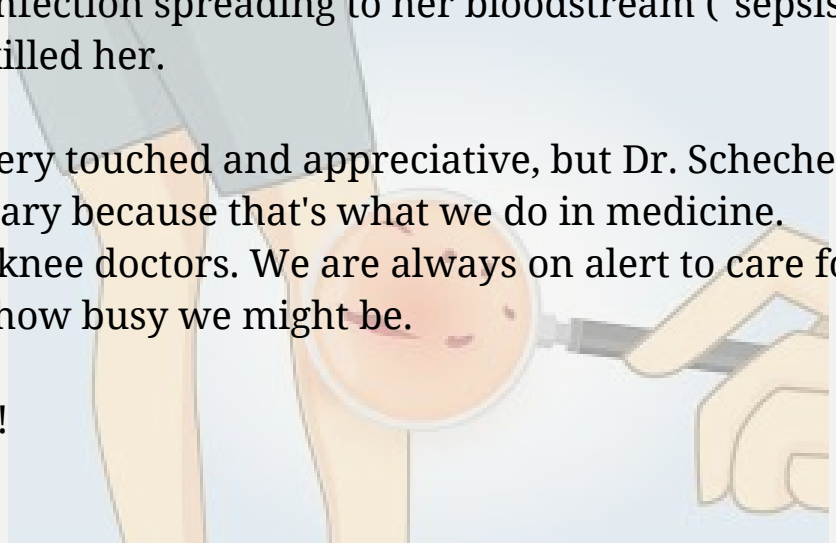
Ms. B, a pleasant 70-year-old "regular" at the Elman Retina Group, receiving intravitreal injections in her left eye for wet AMD, recently presented for one of her regularly scheduled visits. Dr. Schechet noticed that she seemed uncomfortable in her exam chair. When asked, she divulged that her right knee has been bothering her the past few days, and it's the same knee that recently had surgery. She said she called her surgeon's office and was told that she is still healing and to keep changing her wound dressings as instructed.

Dr. Schechet was in the middle of a busy clinic with several add-on emergencies to address in addition to the regularly scheduled patients. Nevertheless, he was concerned and asked Ms. B to show him her knee. She exposed her right knee with the overlying dressing. With her permission, Dr. Schechet gently removed the dressing and saw her knee was tender to the touch and infected with surrounding redness and pus in the bed of the wound. He quickly and carefully used available supplies to thoroughly clean the wound. He applied antibiotic salve followed by placing new wound dressing. The not-only-retina encounter concluded with her intraocular injection (with fresh sterile materials of course!), and Dr. Schechet instructed Ms. B to call and see her surgeon ASAP, which she did.

At her next visit, she mentioned that her surgeon was so relieved, appreciative, and impressed that an eye doctor was able to address the simmering serious problem and fix it. He told Ms. B that not only was her knee saved, but that act prevented infection spreading to her bloodstream ("sepsis") which potentially could have killed her.

Ms. B and her husband were very touched and appreciative, but Dr. Schechet said that no thanks was necessary because that's what we do in medicine. We're much more than eye or knee doctors. We are always on alert to care for the patient entirely no matter how busy we might be.

The patient always comes first!



# Help *Stop* Step Therapy

The number of insurance companies that require step therapy continues to increase each year. Step therapy is solely designed to cut costs and requires patients to “fail” through a series, or steps, of certain cheaper treatments before the insurance will cover the doctor’s prescribed treatment.

*How can you advocate for yourself to get your insurance to approve the prescribed treatment?*

- You can help advocate against harmful policies that delay care and interfere with the doctor-patient relationship.
- Visit [SeeforALifetime.org](http://SeeforALifetime.org) for educational resources.
- Contact Congress to oppose step therapy. [Visit here](#) or text RSPatient to 52886.
- Share your step therapy story to help convince policymakers that it is a flawed policy that must end. [Visit here](#) or text SHAREMYSTORY to 52886.
- Contact Medicare to complain about step therapy or prior authorization: [Visit here](#) or 1-800-Medicare.
- [Watch and share](#) the story of a 98 year old WWII veteran who was required to "fail first" on step therapy and suffer through months of near blindness before getting the medication his retina specialist had recommended.

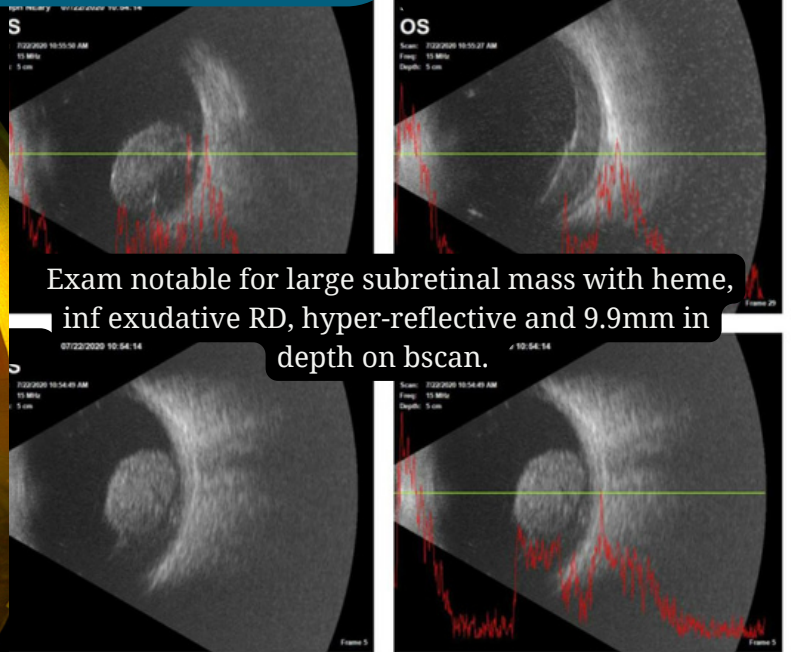
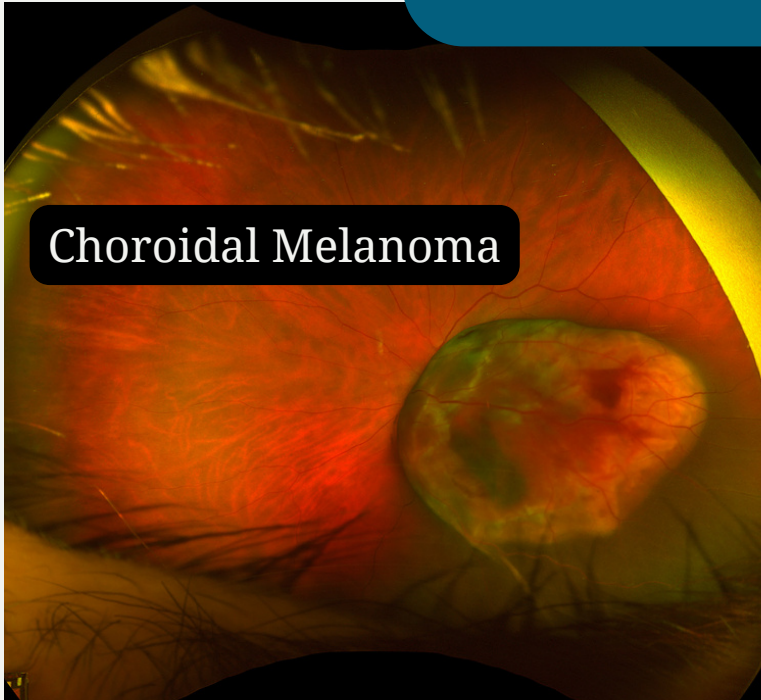
The American Society of Retina Specialists. (n.d.). Help Stop Step Therapy - Patients - The American Society of Retina Specialists. ASRS. <https://www.asrs.org/patients/help-stop-step-therapy>

There are hyperlinks on this page where words are unlined. These will not work for paper copies.

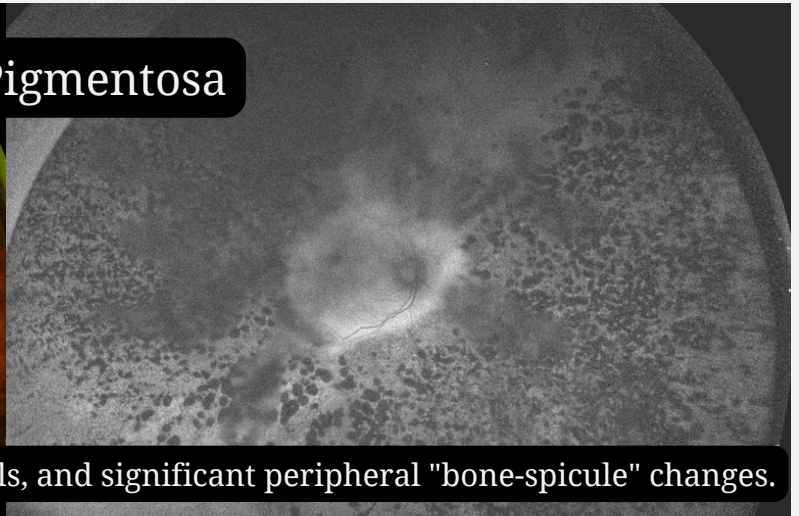
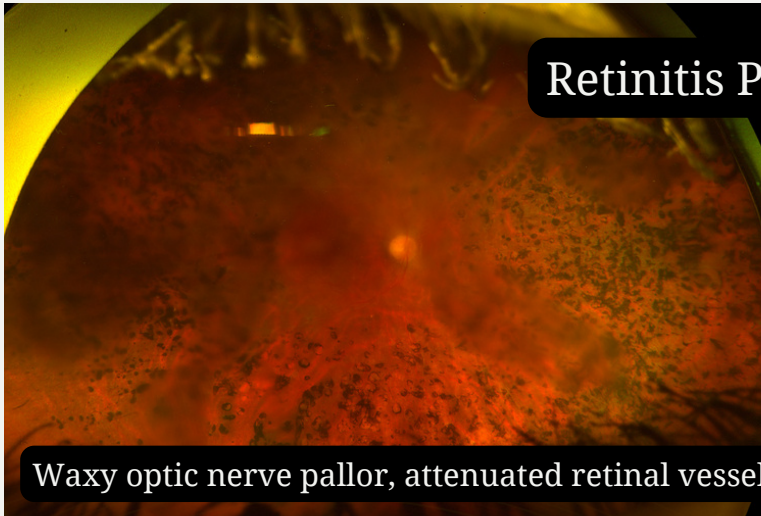


# Retinal Photos

Choroidal Melanoma

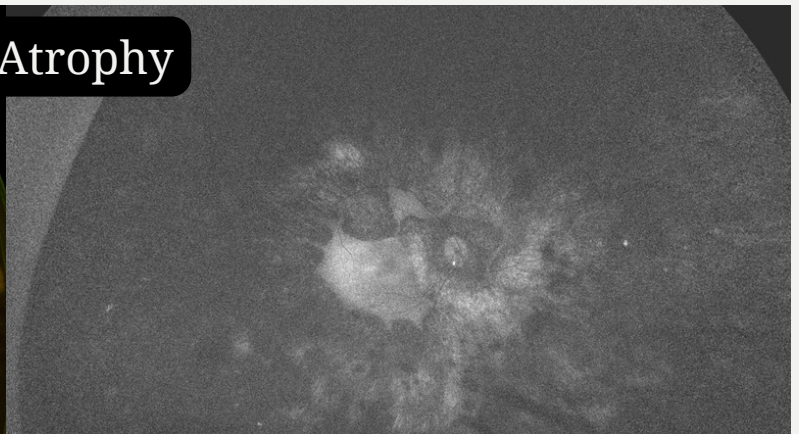
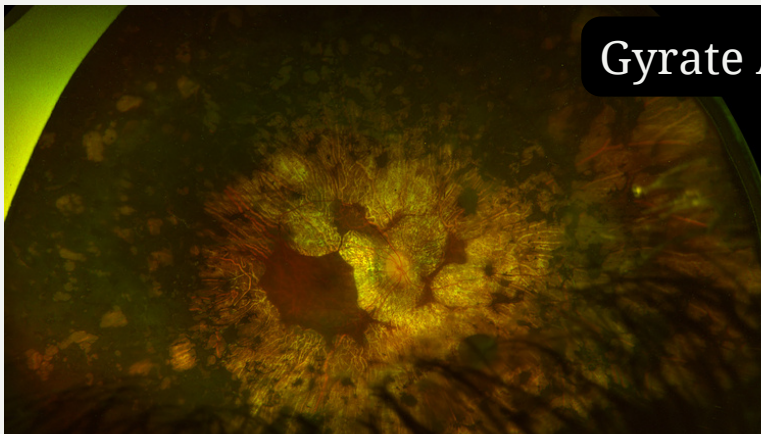


Retinitis Pigmentosa



Waxy optic nerve pallor, attenuated retinal vessels, and significant peripheral "bone-spicule" changes.

Gyrate Atrophy



A rare autosomal recessive retinal dystrophy characterized by progressive chorioretinal degeneration, early cataract formation and myopia.



# Staff Events



# Summer Kick-off





# Patient Reviews



04/04/2023 ★★★★★ The doctor was very knowledgeable. Excellent bedside manner. He answered all of my questions and didn't rush through.

04/03/2023 ★★★★★ Knowledge, friendly, well run facility! The doctor was very knowledgeable. Excellent bedside manner. He answered all of my questions and didn't rush through.

03/09/2023 ★★★★★ Have been with Dr Elman through thick and thin—two surgeries and ongoing treatment for wet MD. He's the best in Baltimore, hands down.

**Ayme L**  
Local Guide · 23 reviews · 5 photos  
★★★★★ 2 days ago **NEW**

Updated for 2023 - I still feel the same way as below!!

Who would think you would say that going to the eye doctor would be amazing? Well, if you have this is where you want to go. Dr. Elman is kind, smart, thorough. His staff is amazing. Everyone is friendly. It is the one doctor's office that I truly don't mind going to every 3 months.

★★★★★  
December 1st, 2022  
Been seeing Dr Elman for years and received excellent care, Dr Elman is an expert in his field

**Patient Perspective** ^

Wait time **5 minutes**

5.0 ★ Easy Appointment	5.0 ★ Friendly Staff
5.0 ★ Accurate Diagnosis	5.0 ★ Bedside Manner
5.0 ★ Spends Time with Patients	5.0 ★ Appropriate Followup

**Regina Reed**  
Local Guide · 57 reviews  
★★★★★ a month ago

I had my first appointment on November 21, 2022. I must say I was a little apprehensive and nervous. Everyone is so professional, and make your visit so calm. From my first encounter when I walked through the door, the nice Assistant helped me with signing in look so easy. Everyone is so helpful and explained each detail and what to expect next. The waiting room area made everything so comfortable while you wait. I must thank the twins, that helped with the dye injection feel so relaxed. (Excellent Duo Team). Excellent staff and the Receptionist was awesome. Dr. Dao put my mind at ease and explained everything to me in terms that I could relate to. For anyone that needs excellent eye care, please make an appointment with The Elman Retina Group. I give this office 100 Stars. Nice atmosphere and everyone treat you with respect. Excellent Customer Service and would recommend this office to family, friends, and colleagues.

Like

JoAnn



## Employee Spotlight

Some of you may not know Joann because she's hidden behind binders of study protocols. She was one of the original few who have been with Dr. Elman at the Elman Retina Group since it's first days ~30 years ago! She is our clinical trial guru with international acclaim from the many successful trials she has participated in along with many well-deserved awards. TONS of paperwork, phone calls, teaching, and multitasking - Joann handles it all with exquisite aplomb. It is thanks to Joann that our patients have access to exciting cutting edge treatments and that the field of Retina has progressed this far.

### FRANKLIN SQUARE

Seven Square Medical Building

9114 Philadelphia Road Suite 310  
Baltimore, MD 21237

### PIKESVILLE

Woodholme Medical Building

1838 Greene Tree Road Suite 170  
Pikesville, MD 21208

### GLEN BURNIE

Quarterfield 100 Medical Building

7671 Quarterfield Road Suite 100  
Glen Burnie, MD 21061

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