Hopeful Horizons

Having low or no vision does not mean you have to give up doing things you love to do — or trying new things. This issue includes stories about and tips for traveling, an activity you can enjoy regardless of whether you have full, low or no vision. Please be sure to visit our blog post, "Traveling with Low Vision or No Vision" for more on traveling with low vision. We hope some of this content will provide you with hope for expanding your horizons.

Speaking of hope, research breakthroughs offer new promise in fighting eye disease. We are proud to announce that DEF-funded stem-cell research into a treatment for retinitis pigmentosa (RP) by Dr. Henry Klassen has received approval from the FDA to move to clinical trial. Read more about Dr. Klassen's research in the following article.
RP Stem-Cell Treatment Moves to Clinical Trial

The U.S. Food & Drug Administration approved an initial clinical trial of a novel stem cell-based treatment for retinitis pigmentosa (RP) developed by DEF-funded researcher Dr. Henry Klassen and colleagues at the University of California, Irvine (UCI). The start of this clinical trial will be the culmination of a project that began in 2006, when DEF brought Klassen to UCI to begin this research.

Grant money often comes with very strict constraints that can slow the progression of research, Klassen explains. “In reality, we needed more flexibility to move forward efficiently,” he says. “DEF provided us with the flexible support we need to move toward cures.”

Retinitis pigmentosa (RP) is a group of hereditary blinding disorders that begins with the loss of rod photoreceptors in the retina. The new treatment is intended to preserve vision by intervening when degenerating photoreceptors (rods and cones) can be protected and potentially reactivated.

“This milestone is a very important one for our project,” says Klassen, an associate professor of ophthalmology with UCI’s Gavin Herbert Eye Institute. “It signals a turning point, marking the beginning of the clinical phase of our research, and we are all very excited about this progress.”

The primary purpose of the trial is to determine the safety of a single injection of human retinal progenitor cells into the eyes of patients with advanced RP. The trial will begin enrolling patients at UCI in the next few months.

“We are very pleased that a project our donors have been helping to fund is entering this phase,” says DEF Medical Director Dr. Anthony Nesburn. “This treatment is moving toward its final approval for patients with RP; eventually we hope it will be able to help people with AMD, as well. DEF’s invests in this type of translational research and because it is the best way to find treatments and cures for blinding retinal diseases.”
PROFILE

Through a Lens with One Eye Blind

Carolyn Hammett “can put in a hard contact lens in the middle of a sandstorm in the desert at midnight.” She can change trains in Italy in a matter of minutes; she can photograph the world’s treasures without missing a shot; and she can travel for six weeks with one small suitcase. And she can do it all with one “good” eye.

Now in her 70s, Hammett was diagnosed with keratoconus (KC) in the 1960s. “I didn’t know what keratoconus was, and I didn’t care,” she says. “Until very recently, every time I hit the wall, some new lens development saved me.” She has worn “every iteration of contact lens,” including hard lenses and gas-permeable lenses. She has been piggybacking (wearing a hard lens over a soft lens) successfully for more than two decades. Through a Lens cont’d...

Traveling Tails

Going with a guide dog

Sometimes the greatest of all mobility tools is not a tool at all. Perhaps it’s a furry friend. While taking care of a service-canine companion requires way more time and effort than taking care of a mobility cane, the payback — in both love and freedom — can be immeasurable.

Adam Lawrence was diagnosed with retinitis pigmentosa (RP) at age 17. Now 55 and legally blind, he has come to depend on his guide dog, a black and tan Labrador named Escort. “Escort gives me confidence,” Lawrence says. “When I walk with a cane, I don’t feel as confident, and I’m much slower. He gives me confidence, mobility and ability.”

Traveling Tails cont’d...
DEF NEWS

KC in OC
DEF presents keratoconus seminar in Orange County

The National Keratoconus Foundation hosted a seminar for people with keratoconus (KC) and their family members at the University of California, Irvine, on March 14. Experts from UC Irvine’s Gavin Herbert Eye Institute (GHEI) were on hand to discuss KC, treatments and other advances.

Dr. Matthew Wade kicked off the event by explaining KC, what causes it and how it affects vision. This gave everyone in attendance a basic understanding of the disease before treatment options were presented.

Dr. Paul Blaze discussed the importance of contact lenses for correcting the distortions caused by KC and described the many different lenses now available. Dr. Jennifer Che discussed lens materials, caring for various types of lenses and ways to deal with glare. Dr. Sam Garg, medical director of GHEI, spoke about corneal crosslinking (CXL). This was followed by a comprehensive lecture on surgical options for KC by Dr. Marjan Farid, which included videos on Intacs and the variations of corneal transplant surgery.

The event was sponsored by The Discovery Eye Foundation and the Schoellerman Family Foundation.

Don’t worry if you missed this informative day: All the presentations from the event may be viewed on the DEF YouTube channel and the NKCF website.

Say Cheese
Share your travel photos with the DEF community

We want to see where you go! Please post your travel photos to our Facebook page to inspire fellow members of the DEF community. We’ll also post them to our Pinterest travel board, so be sure to check that out, too. If you would like to post directly to our Pinterest boards, please “follow” DEF, then send an e-mail to contactus@discoveryeye.org, and we’ll authorize you.
EVERYDAY SOLUTIONS

Tips for dealing with vision loss

Trip Tips for Healthy Eyes

With some advanced planning and common sense, keeping your eyes healthy while you are away from home is so much easier. Here are seven tips to get you travel-ready:

1. Bring back-up lenses or glasses. The last thing you want to be doing on vacation is looking for an ophthalmologist or optician to get a new prescription and have glasses made. You also may want to carry a copy of your prescription with you in a safe place.

2. Keep your eyes lubricated while flying. Air on planes is very drying, so drink plenty of water, direct air vents away from your eyes, and bring artificial tears to combat dry eyes. For long flights, remove your contact lenses, and use an eye mask if you plan to sleep.

3. Never use water to clean your contact lenses. Water is not sterile and will vary from location to location as you travel. To avoid a serious eye infection, always carry an extra bottle of solution. (For more on caring for your contacts, visit our blog post on proper lens care.)

4. Bring prescription eye drops with you. Bring extra unopened bottles with you for glaucoma, allergies or dry eyes. Don’t assume you can get the same prescription medicine in another country.

5. Never wear contact lenses in an ocean, lake or river. Doing so can put you at risk for a corneal infection. If you need corrective lenses when you are in the water, consider prescription goggles.

6. Take at least one pair of sunglasses — preferably two. No matter where you go, you need to protect your eyes from the sun’s harmful UV rays. If you are snow-skiling or snowboarding, goggles are an even better option to protect your eyes from reflections off the snow and the drying wind as you race down the slopes. (For more on UV protection, visit our blog post on protective eye wear.)
7. Don’t ignore vision changes. Even if you don’t experience pain, remember that floaters, flashes or blurred vision could be an indicator of something more serious, such as a retinal detachment, stroke or diabetes that is worsening. If you do have significant vision changes while you are away from home, visit eyeSmart’s [Find an Eye MD] to search for an ophthalmologist by location.

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**NUTRITION**

**Eating Eye-Healthy on the Road**

Whether you are heading out by car, train, bus, boat or plane, you can — and should — be proactive in choosing healthier travel snacks. If you shop ahead of time, there are many prepackaged snack foods that provide great nutrition and satiate your hunger. Depending on how you are traveling, whole foods, such as baby carrots and celery sticks, or fresh, easy-to-eat fruit, such berries, are good first choices.

Need protein? Eye-healthy salmon jerky, foil-packed tuna or salmon, or single-serving nut-butter packages can do the trick. Energy or fruit/nut bars are also a good choice when you just need something to hold you over for a bit. A word of caution on bars: Search for brands that contain very few, simple ingredients, such as fruit, nuts, seeds and crispy rice — with limited amounts of added sugar. Avoid energy bars that have chocolate chips, as they are more like candy bars.

At the airport? Buy nuts (raw are healthier), a trail mix (without candy in it!), Greek low-fat yogurt containing the smallest amount of sugar, or fresh fruit. Thirsty? Avoid soda, and go for plain or sparkling water, or 100% fruit or vegetable juice. Need crunch? Choose unflavored pretzels or pita chips instead of potato chips.

Consider spending just a little time in the kitchen before you travel, making your own healthier travel snacks. Check out our newest travel-friendly recipes on Eye Cook: [Healthier Nut-less Granola] and [Seedy Walnut Trail Mix].

Happy trails!
Leaving a Legacy
by Dr. Anthony Nesburn

Dr. Anthony Nesburn is the medical director of The Discovery Eye Foundation (DEF) and the president of the Nesburn Family Foundation. His wife, Dr. Cristina Kenney, is an internationally recognized eye researcher, DEF’s research director and a professor of ophthalmology at University of California, Irvine.

My parents lived fairly frugally, but they always were interested in philanthropy, and they gave money to things that were important to them. They gave to DEF not only to help me, but to help fund age-related macular degeneration (AMD) research and patient outreach. In fact, they donated the money that started the Macular Degeneration Partnership (MDP).

I was brought up in the milieu of you do for others, and you are charitable. They started the Nesburn Family Foundation for this reason, and we continue their charitable work. Anything we ask patients to contribute to, we contribute to, as well, both personally and through the foundation.

Cris and I are going to leave a legacy gift to DEF. People really need to consider this: If you have a medical problem, and you want to help, but you can’t afford to give now, leave something to help future generations.

I ask people to leave money in their will for DEF. That’s been a real difference-maker for the organization. We recently got a sizable legacy for AMD research from someone we didn’t even know! Even though we may not have known these donors previously, MDP and DEF clearly made a difference to them.

Please join Cris and me in leaving a vision legacy through DEF. For information about leaving a legacy gift to DEF, visit our website or contact Susan at contactus@discoveryeye.org.