



CONVENTION HIGHLIGHTS

December 15, 2025



Late-Breaking Insights Shaping the Future of Ophthalmology

By: Dr. Rochele V. Pilonis

The Late-Breaking Symposium was a standout session of the meeting, chaired by **Professors Hiroko Terasaki, Quan Dong Nguyen, and Camille Zabala**, and showcased pivotal studies poised to influence contemporary retinal practice. The session opened with **Dr. Taraprasad Das** presenting the Endophthalmitis Management Study, a landmark multicentric randomized trial from India focusing on acute post-cataract endophthalmitis. His talk provided valuable, practice-changing insights into evidence-based management of this vision-threatening complication, particularly relevant to high-volume cataract settings.

Innovation in retinal therapeutics and diagnostics featured prominently in the subsequent presentations. Dr. Quan Dong Nguyen discussed the LIGHTSITE 3B study, highlighting the potential role of photobiomodulation (PBM) as a non-invasive treatment option for non-neovascular age-related macular degeneration. Cutting-edge advances in gene therapy were addressed by **Dr. David Almeida**, who introduced a novel video-based viral vector volumetric analysis designed to improve dosing precision in subretinal gene therapy. Complementing this, **Dr. Gemmy Cheung**

presented long-term efficacy and safety data on 4D-150 genetic medicine, sharing updated results from the PRISM phase 1/2a study at 24 months and phase 2b data at 18 months, underscoring the promise of sustained intraocular gene-based treatments.

The session concluded with forward-looking perspectives on artificial intelligence and surgical innovation. Dr. Kenneth Fong presented the PAIR study, which evaluated agreement among non-retinal specialists using the Pathfinder AI tool for retinal disease referrals, highlighting AI's growing role in improving access and referral accuracy. Finally, **Dr. Vivek Dave** shared a comparative evaluation of low concentrations of C3F8 for large macular holes, addressing not only efficacy and clinical outcomes but also environmental impact—an increasingly relevant consideration in surgical practice. A lively panel discussion and Q&A session followed, allowing for critical appraisal, audience engagement, and synthesis of these late-breaking advances that collectively reflect the evolving landscape of ophthalmology.





Empowering the Next Generation: Young Retina Specialist Symposium

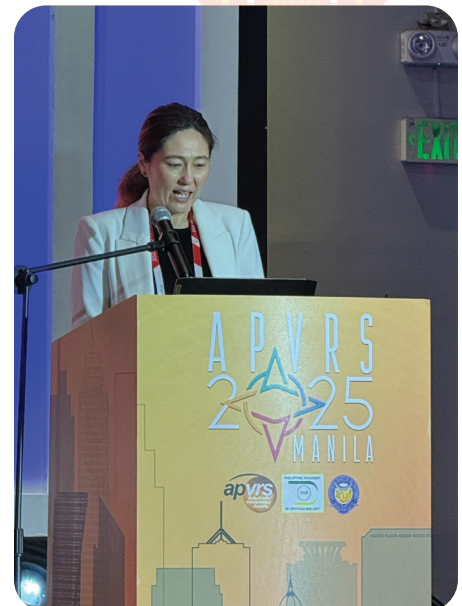
By: Dr. Rochele V. Pilonos

The Young Retina Specialist Symposium was a vibrant and engaging session that highlighted both emerging evidence and real-world clinical experience from early-career retina specialists. Chaired by **Dr. Raymond Wong** and **Dr. Maria Angelica Villano**, the session emphasized practical decision-making, surgical innovation, and thoughtful case analysis. **Dr. Akash Belenje** opened the program with a comprehensive discussion on imaging-based decision-making in retinopathy of prematurity, underscoring how multimodal-imaging and the novel use of oral fundus fluorescein dye angiography (OFDA) can refine diagnosis, guide treatment timing, and improve outcomes in this vulnerable patient population.

Case-based learning formed a central theme of the symposium. An interesting case on TUBB4B-associated retinal dystrophy was presented by **Dr. Bayarjargal Baterdene** illustrated the complexities encountered in daily retinal practice and set the tone for subsequent discussions. **Dr. Nitee Ratrasaporn** then shared her experience with macular buckling using common buckle elements, providing practical surgical insights into patient selection and technique. This was followed by engaging case presentations from **Dr. Mohamed Azzam** and **Dr. Joy Leung**, which further enriched the session

by highlighting varied presentations and management strategies across different retinal pathologies.

The latter part of the symposium focused on advanced intraoperative assessment and rare clinical entities. **Dr. Ryuya Hashimoto** presented on intraoperative retinal blood flow assessment during vitrectomy in diabetic retinopathy, offering a glimpse into how real-time perfusion evaluation may enhance surgical decision-making. An additional compelling case by **Dr. Dominique Nicole Fernandez** maintained the interactive momentum, before **Dr. Ryoh Funatsu** concluded the scientific presentations with a rare case of bilateral choroidal detachment secondary to protein-losing enteropathy. A lively panel discussion and Q&A session followed, allowing for robust exchange between faculty and audience, and reinforcing the symposium's role as a platform for mentorship, learning, and the advancement of young retina specialists worldwide.



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Management of Posterior Segment Trauma: Insights from a Multidisciplinary Symposium

By: Dr. Gillian Saquian

The symposium provided a comprehensive and practical discussion on the diagnostic and surgical challenges encountered in ocular trauma involving the vitreoretinal interface. Co-sponsored with the Asia-Pacific Ocular Trauma Society (APOTS), the session emphasized evidence-based approaches, surgical timing, and nuanced decision-making guided by both imaging and intraoperative findings.

The session opened with an overview of posterior segment manifestations of blunt ocular trauma, with particular focus on traumatic macular holes. Optical coherence tomography (OCT) was emphasized as the gold standard for diagnosis and follow-up. Ongoing debates regarding early surgical intervention versus watchful waiting were discussed, highlighting the need to individualize management based on hole characteristics and visual potential.

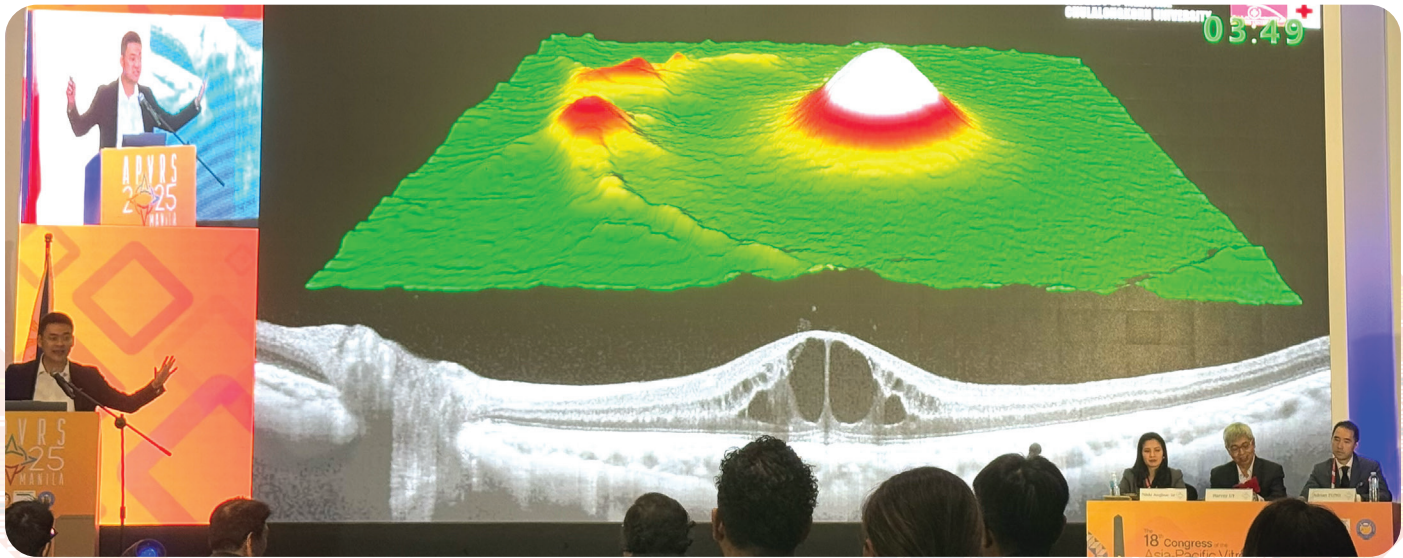
One of the most challenging aspects of posterior segment trauma identified was proliferative vitreoretinopathy (PVR), which remains a major cause of surgical failure and recurrent retinal detachment. Speakers stressed the importance of early surgical intervention in cases of traumatic vitreous hemorrhage and retinal

detachment to minimize secondary complications. Imaging played a critical role in guiding these decisions, particularly when media opacity limited clinical examination.

Surgical techniques were explored in depth, including the role of retinectomy in eyes with foreshortened retina. Emphasis was placed on gentle tissue handling to avoid iatrogenic breaks, as well as creating smooth and uniform laser edges to reduce postoperative complications. The management of post-traumatic endophthalmitis highlighted the importance of complete and early vitrectomy to control infection and improve anatomical outcomes. Prophylactic antibiotics, as discussed in Dr. William's presentation, were recommended when clinical signs of infection are present rather than as routine use.

The symposium concluded with a thoughtful discussion on decision-making between globe repair, evisceration, and enucleation, weighing anatomical feasibility, visual prognosis, risk of sympathetic ophthalmia, and patient-centered considerations. Overall, the symposium reinforced that successful management of posterior segment trauma requires timely intervention, meticulous surgical technique, and individualized care.





Prevention and Management of Posterior Segment Complications of Anterior Segment Surgery

By: Dr. Adriel Te

The session was chaired by **Drs. Nikki Angue Te** and **Harvey Uy** from the Philippines, and **Dr. Adrian Fung** from Australia along with several experts from various countries who shared new techniques, research, and management strategies for both anterior and posterior surgeons.

The session was opened by **Dr. Makoto Inoue**, who provided valuable insights into Scleral Tunnel IOLs, where he highlighted the use of AS-OCT for visualization and pre-operative planning, as well as promoting the use of bridging sutures to mitigate risk of IOL dislocation. Following this, **Dr. Kenneth Fong** delivered a talk focusing on cataract surgery on myopic patients, and risk of retinal detachment, where he presented key results from the MYOPRED study and introduced an online RD risk calculator, reinforcing the need to assess PVD status in myopic patients prior to cataract surgery. **Dr. R Unnikrishnan Nair** where he discussed differential diagnoses and management of post-operative endophthalmitis, reviewing current practice patterns, relevant clinical studies, and using prognostic scoring systems to guide management decisions.

The sessions continued with **Dr. Andrew Tsai** providing a thorough overview of the management of

Suprachoroidal Hemorrhage, detailing risk factors and epidemiology, along with various surgical approaches for effective drainage. **Dr. Tai-Chi Lin** tackled the etiologies and management of aqueous misdirection syndrome, where he emphasized the use of vitrectomy cutters to allow egress of fluid from behind the lens. Dr. Harvey Uy discussed and shared expertise on the management of a Dropped Nucleus where he showed different techniques in the management of such - either by the use of PPV, a fragmatome, or even with the use of a kebab technique. He also shared a quick algorithm to guide decision-making. **Dr. Thanapong Somkijrungraj** discussed incidence of post-surgical Cystoid Macular Edema, presenting various biomarkers and offering evidence-based recommendations, incorporating these with the recent guidelines from the ESCRS, along with surgical techniques in securing the IOL to avoid post-op CME. Finally, **Dr. Nimesh Patel** expanded the scope with the use of endoscopic vitrectomy, showing techniques on dealing with corneal opacification.

Following each of these presentations, a quick Q and A was held, which promoted active participation with the audience and allowed further sharing of clinical pearls and surgical nuances. The confluence of these talks provided the attendees with a comprehensive toolkit, ranging from diagnostics, risk stratification, and various possible techniques for managing the most commonly encountered problems during anterior segment surgery. Synthesizing the



knowledge on prevention, early detection, and advanced surgical management of posterior segment complications, the session provided attendees—whether primarily anterior or posterior segment surgeons—with a truly holistic and updated perspective.



Flying Babies: Emerging trends in ROP Diagnosis and Treatment

By: Dr. Mara Clemente

I came into the meeting room with the Philippines Retinopathy of Prematurity (ROP) Working Group discussing the local situation with this year's Tano Lecture Awardee, the renowned ROP advocate **Professor Rajvardhan Azad**.

As the guests settle down to their seats, the speakers and hosts continue exchanging information beyond their assigned topics- proving that their dedication to the craft is unquestionable.

Dr. Azad began the session by reminding the audience the need for ROP surveillance and management especially in the Asia-Pacific Region. Low calorie intake, suboptimal neonatal care availability and fluctuating hyper/hypoxic states are among the contributors of increased incidence. The speakers also discussed the role of AI and deep learning to widen the reach of examination. While still in its nascent stages, these have shown much promise in the age of tele-ophthalmology. Conservative approach to management with

the use of intravitreal anti-VEGF alone or in combination with laser photocoagulation made ROP treatment within reach despite the steep learning curve.

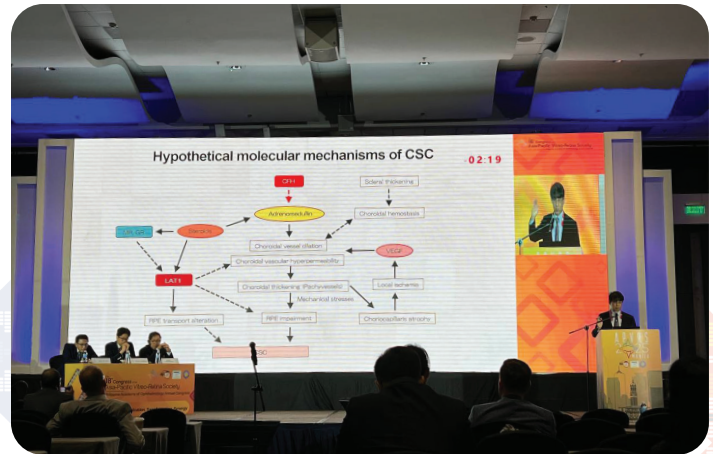
It is comforting to witness how ROP diagnosis and treatment grow with newer technologies and pharmacologic advancements. Standardized nomenclature is also making its way in improving uniformity and understanding the disease status beyond country borders. Emerging risk factors thoroughly discussed by **Dr. Nawazish Shaikh** recognized the multifactorial casualities that contribute to ROP formation in premature retinas.

Imaging in prematures, as **Dr. Sengul Ozdek** has specified have always been more difficult when compared to adults. Ultrawidefield and widefield imaging in contact and non-contact forms have been able to provide modes for documentation and diagnosis. Oral (fundus fluorescein angiogram) FFA has also made an earmark in monitoring treatment response and reactivation in post anti-VEGF and laser photocoagulation treated babies. **Dr. Akash Belenje** also showed how oral FFA can confirm clinically doubtful areas of ischemia

that are more posterior than clinically apparent. We hope to see more flying babies as various countries adapt this diagnostic strategy.

Treatment strategies are also evolving. Previously focused on tertiary care, modern medicine has begun conducting studies on the efficacy and safety of secondary and primary prevention modalities. This was very exciting news brought to us by the energetic **Dr. J Peter Campbell**.

We must continue pursuing ROP advocacies and remember this goal from the Philippine ROP Working Group: "One child blind from ROP is once child too many".



Pachychoroid

By: Dr. Joy Dizon

Central serous chorioretinopathy (CSC) is increasingly recognized as a disorder with a significant genetic and molecular basis, particularly within the spectrum of pachychoroid diseases. Genetic studies have identified associations between CSC and variants in genes involved in choroidal vascular regulation, extracellular matrix remodeling, and complement pathways, including *CFH*, *ARMS2*, and genes related to steroid metabolism. These findings suggest that inherited susceptibility influences choroidal thickness, vascular permeability, and individual response to stress or corticosteroids, all of which are key risk factors for CSC.

Based on these genetic insights, several hypothetical molecular mechanisms have been proposed. Dysregulation of the choroidal vasculature may lead to increased hydrostatic pressure and choroidal hyperpermeability. Altered mineralocorticoid receptor signaling and abnormal cortisol metabolism may further amplify vascular leakage. In addition, complement pathway activation and endothelial dysfunction may contribute to chronic inflammation and remodeling of the choroidal vessels, resulting in damage to the retinal pigment epithelium (RPE) and subsequent serous retinal detachment.

Indocyanine green angiography (ICGA) plays a critical role in

visualizing pachychoroid-related changes. Pachychoroid-associated punctate hyperfluorescent spots on ICGA represent focal areas of choroidal vascular hyperpermeability or dilated choroidal vessels. These punctate spots are often seen in areas of increased choroidal thickness and may precede or coexist with active CSC lesions. Their presence supports the concept that CSC originates primarily from choroidal pathology rather than primary RPE dysfunction.

Overall, genetic and ICGA findings reinforce the view of CSC as a choroid-driven disease, providing insight into its pathogenesis and potential targets for future therapy.

When Refractive Surgery Doesn't Go as Planned: Lessons from Cataract & Refractive 4

By: Dr. Jacob Mangahas

The *Cataract & Refractive* symposium, "Identifying and Managing Refractive Surgery Complications," delivered a fast-paced and practical tour through the world of post-refractive surprises—both expected and unexpected. Designed with the general ophthalmologist in mind, the session focused on sharpening clinical instincts, managing complications early, and knowing exactly when to refer.

Kicking off the program, **Dr. Maria Cecilia Gertrudis Agdeppa** tackled complications of PRK and LASIK,

revisiting common pitfalls such as dry eye, flap-related issues, and regression. Her talk emphasized that early recognition and calm, systematic management can make all the difference between a worried patient and a satisfied one.

Next, **Dr. Keshia Lourdes Duyongco-Lenon** dove into the serious—but preventable—topic of post-refractive ectasia and the role of corneal cross-linking (CXL). With clear clinical pearls and red flags, she reminded participants that careful screening and timely intervention remain the best defenses against progression.

The discussion then shifted gears as **Dr. Potenciano Larrazabal III** explored complications related to lenticular extraction, highlighting patient selection, postoperative

visual complaints, and how to approach suboptimal outcomes with confidence.

Wrapping up the session, **Dr. Anna Lisa Yu** covered phakic intraocular lens complications, breaking down issues such as vault-related problems, cataract formation, and endothelial concerns—all while stressing the importance of long-term follow-up.

Beyond diagnostics and management, the session strongly emphasized patient counseling, reinforcing the value of setting realistic expectations and fostering informed decision-making. By the end, participants walked away better prepared to handle refractive surgery complications—and even better equipped to explain them with clarity and reassurance.



Posterior Segment Considerations of Cataract and Refractive Surgery

By: Dr. Anna San Pedro

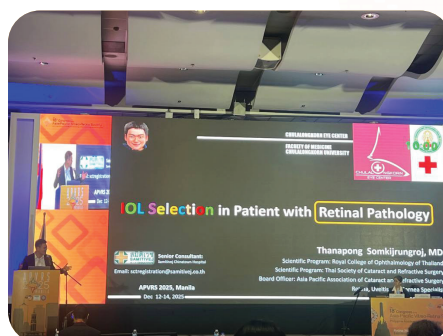
This APVRS 2025 scientific session highlighted the increasing necessity of incorporating retinal considerations into cataract and refractive surgical decision-making, covering a broad range of topics including refractive lens exchange and cataract surgery in extreme myopia, cataract surgery in diabetic eye disease and age-related macular degeneration, surgical approaches for vitreomacular interface disorders, intraocular lens selection in eyes with retinal pathology, management of peripheral retinal degenerations, and cystoid macular edema following cataract surgery.

The session began with talks on refractive lens exchange and cataract surgery in highly myopic eyes, emphasizing the elevated risks of retinal detachment, macular pathology, and other posterior segment complications. Cataract surgery in patients with diabetic eye disease was also discussed, with a focus on perioperative and postoperative strategies to minimize progression of diabetic retinopathy and macular edema. Further discussions delved into cataract surgery in the context of age-related macular degeneration, highlighting the importance of appropriate planning and setting reasonable visual expectations. A review of surgical techniques for vitreomacular interface disorders contrasted sequential procedures

with combined phacoemulsification and pars plana vitrectomy. While combined and staged procedures each have their own advantages and limitations, it was emphasized that surgical complexity and individual patient factors should ultimately guide the choice of approach.

In the latter part of the session, intraocular lens selection in eyes with retinal pathology was discussed, emphasizing careful patient selection when considering premium IOLs. While compromised macular function warrants caution, premium IOLs may still be appropriate in selected patients following thorough retinal evaluation and appropriate

counseling. The management of peripheral retinal degenerations in relation to cataract and refractive surgery was also addressed, including when prophylactic treatment is advantageous, along with updates on cystoid macular edema management following cataract surgery. Across all topics, common themes emerged—namely the importance of meticulous preoperative retinal assessment, individualized surgical planning, and vigilant postoperative surveillance. Overall, the session reaffirmed an individualized approach for achieving safe and optimal outcomes in complex cataract and refractive surgery cases with retinal pathologies.



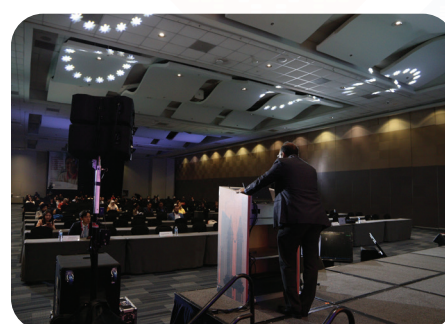
DAY 3 PHOTOS



CONVENTION HIGHLIGHTS



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VIDEO HIGHLIGHTS



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