



chapter 4

ISRS/AAO: A Global Society

*By Drs. Daniel S. Durrie, Jack T. Holladay, H. Dunbar Hoskins Jr.
and James J. Salz*

For many years after the 1979 incorporation of the International Society of Refractive Surgery (ISRS), refractive surgery was subject to intense scrutiny and experienced periods of controversy. With valid concerns about public health and safety, many members of the American Academy of Ophthalmology did not support refractive surgery because the idea of operating on a healthy and structurally normal cornea contradicted the foundations of medical school education. The Academy initially remained wary of refractive surgery because of the limited amount of clinical data and validity.

However, once refractive surgery was clinically proven to be safe and effective, the Academy assumed a more significant role in refractive education. In 1995, the Academy's Board of Trustees founded the Refractive Surgery Interest Group (RSIG) to serve as a forum for interested Academy members offering opportunities to participate in and influence refractive surgery education.

The RSIG and the ISRS had a shared goal of delivering high-quality refractive surgery programs to ophthalmologists, but they took very different approaches and served slightly different audiences. The RSIG and the ISRS also shared an annual meeting date, with programs held one day prior to the American Academy of Ophthalmology's Annual Meeting, which often required speakers, attendees and exhibitors to choose between meetings.

Space limitations during the Academy's busy Annual Meeting also meant that the ISRS Annual Meeting could be located miles away from the Academy's Subspecialty Day venue, presenting logistical difficulties for ophthalmologists who wished to attend both programs. One surgeon recalls, "After presenting at the RSIG meeting, I took a taxi to the ISRS meeting, which was scheduled at the same time—but nearly 20 miles away."



Same Objective, Different Approach

The RSIG adopted a more conservative approach to refractive surgery education with excellent, structured programs consisting of exclusively invited papers and a comprehensive syllabus—all prepared months prior to the meeting.

Often described as “spontaneous” and “cutting-edge,” the ISRS programs were typically influenced by a large number of members working outside of the United States where less restrictive regulatory environments often expedited clinical developments. ISRS speakers were not required to submit presentations in advance of the meeting, meaning that attendees often heard breaking news about the latest advances in refractive surgery—some of which may have occurred only days or weeks prior to the meeting. As one surgeon recalls, “Surgeons new to the subspecialty or more interested in the fundamentals, attended the RSIG meetings; those interested in the direction of refractive surgery practice 18 to 24 months into the future attended the ISRS programs.”



Dr. Durrie

Union: The ISRS and the RSIG

With increased competition for time, attention, meeting space and industry participation, ISRS and Academy leaders believed that combining the ISRS and the RSIG would create a uniform platform for refractive surgery education.

Dr. Durrie was in the unique position of serving on the ISRS and the RSIG boards of directors and was an early proponent of a union. “When I attended board meetings for both groups, I consistently felt that merging the two made a lot of sense—on a number of levels.”

Dr. Salz served as the chair of the RSIG at this time and remembers, “I was fortunate to be the chair of the Academy’s Refractive Surgery Interest Group when the concept of uniting the ISRS and the Academy began to look more like reality, versus the dream that many of us involved with the ISRS had for many years. Because the ISRS and Academy meetings took place at the same time, they presented a burden for speakers, attendees and industry personnel who had to participate in simultaneous meetings. We all knew it, but the timing was never quite right to merge.

Fortunately, in 2002 we had the right combination of personalities in positions of leadership to make the union a reality. ISRS president, Holladay and the ISRS board looked favorably on a possible joint venture. Many RSIG committee members were either formerly or currently involved with the ISRS, so it appeared that the stars were realigned. However, the key to making it happen was Dr. Dunbar Hoskins, the Academy’s executive vice president.



Dr. Salz



Dr. Hoskins had invited many of us to attend a ‘think tank’ meeting in San Francisco to discuss the Academy’s role in the future of refractive surgery. Dr. Durrie in particular had given a lot of thought to teaching refractive surgery techniques to colleagues and residents. At the end of a fruitful meeting and literally just before we all left for the airport, Hoskins almost knocked us off our seats with the question, ‘What would you all think about having the ISRS be a part of the Academy?’ As they say, ‘The rest is history.’”

Held in the summer of 2001, the “think tank” meeting consisted of an ad-hoc committee of refractive surgeons asked to advise the Academy about incorporating refractive surgery into its programs and structure, eventually producing the Academy’s first Basic and Clinical Science Course section on refractive surgery.

Alió remembers, “The meeting had a wonderful atmosphere. Everyone there understood what a union would represent for both societies. As the only non-American present, my main concern was that an affiliation between the ISRS and Academy would dilute our society and risk losing its visibility and unique personality.”

Alió adds, “Hoskins’ warm personality and wide perspective on ophthalmology, along with Holladay’s enthusiasm and leadership, made for a smooth transition. I left the meeting happy to know that the ISRS was facing a new future, with a strong partner, which would expand the horizons of refractive surgery. I realized that the ISRS would be stronger as a result—not diluted.”

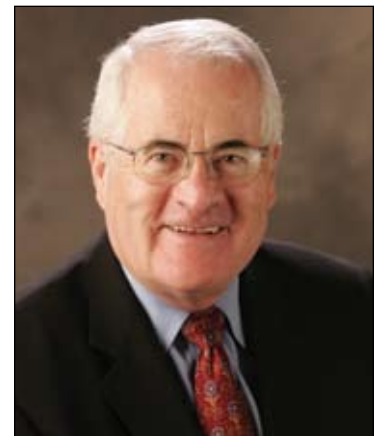
For the remainder of 2001, both groups continued to consider the possibilities. In January 2002, Holladay approached the idea with renewed energy and enthusiasm. He firmly believed that a partnership between the Academy and the ISRS would benefit ophthalmologists, manufacturers and the organizations themselves. He adds, “It was a logical marriage between two groups that had complementary strengths and assets.”

Waring also believed that the partnership would bring together “the international strength of the ISRS and the organizational depth of the Academy.” As he recalls, “As occurs so often, big gifts come in little packages—the little package in this instance was a meeting in a small, nondescript conference room overlooking the Sydney harbor during the International Congress of Ophthalmology in April 2002. Dr. Holladay and I met with Dr. Hoskins, and deputy executive vice president, Mr. David J. Noonan, to revive the possibility of a union between the two groups. The meeting was short, the conversation animated and full of energy, and the conclusions decisive: The two groups would join together.”

Both sides agreed upon the actions that would be required to transform the idea into reality. Holladay requested that the new organization retain the ISRS name in order to preserve the Society’s unique brand and global identity, and the group agreed that the ISRS would host its final 2002 Pre-Academy Annual Meeting in New Orleans, while simultaneously taking steps to terminate ISRS operations in preparation for the road ahead.



Dr. Hoskins



Mr. Noonan



Drs. Holladay, Salz and Durrie



The ISRS/AAO logo



Dr. Durrie, Ms. Aguirre, Ms. Rafaty, Drs. O'Brien and Waring, Ms. Lewis, Ms. Torres, Mr. Noonan, Ms. Hartle and Ms. Rosencrance, Drs. Wilson, Salz, Holladay and Hoskins and Ms. Boyett at the signing ceremony in San Francisco



Journal of Refractive Surgery (1997)



Dr. Waring celebrates the use of art from the Miradas Award with Drs. Knorz, Tsuboda and MacRae

ISRS board members Durrie, Holladay and Lawless dedicated time and effort to secure generous corporate sponsorship from leading ophthalmic manufacturers for the final ISRS Annual Meeting, which was successful and profitable.

In Orlando, Ms. Julia Lewis, ISRS's chief operating officer at the time, successfully managed the myriad details associated with closing the ISRS home office. Lawless remembers, "Ms. Lewis worked tirelessly to ensure ISRS's smooth transition to the Academy." Holladay adds, "I will always be grateful for the efforts of Ms. Lewis, ISRS board members like Durrie and Lawless and the members of the Academy team who worked together to fulfill our joint vision. It was truly an exciting time in our history."

It's Official: ISRS/AAO

The ISRS Orlando office closed in 2002 and on April 14, 2003, representatives from both organizations attended a special signing ceremony in San Francisco.

The American Academy of Ophthalmology's Refractive Surgery Interest Group (RSIG) and the International Society of Refractive Surgery (ISRS) achieved their goal of creating the world's largest international organization solely dedicated to refractive surgery: the International Society of Refractive Surgery of the American Academy of Ophthalmology (ISRS/AAO).

The ISRS/AAO union merged two traditions of excellence and now provides members with powerful refractive surgery educational programs worldwide in addition to continued support for innovation and research. Hoskins notes the significance of the international aspect of the new organization, "No country is the leader in everything when it comes to medicine and this is certainly the case when it comes to refractive surgery." He adds, "By combining the assets of the RSIG and the ISRS, we have brought together both organizations' experience and knowledge, greatly benefiting the development and success of refractive surgery globally."

Journal of Refractive Surgery

The *Journal of Refractive Surgery* continues to benefit from the union. Published nine times a year, with the goal of becoming a monthly publication, the Journal is dedicated to original research, review and evaluation of refractive surgical procedures. It serves as the Society's official peer-reviewed publication and plays a key role in international refractive surgery education.

At the time, more than half of the articles came from outside the United States, and the Editorial Board anticipated that the joining of these two organizations would increase contributions from within the United States.

Waring, editor-in-chief since 1989, emphasizes, “The Journal’s success results from the vigorous participation of dozens of ophthalmologists and researchers around the world—authors, reviewers, board members, associate editors and the staff at Slack, Inc.”

The Journal has been recognized by the Institute of Scientific Information’s Impact Factor ranking since 2000, with an average rank of 10 out of approximately 45 ophthalmology journals with an impressive mean impact factor score of 2.1.

Since January 2005, the Journal’s unique cover has been graced each month with images from Miradas’ award recipients.

The Miradas Award, created by Dr. Alió and his wife, Ms. María Lopez, in 1998, attempts to create a platform in which science and society unite with a common understanding of the importance of preventing blindness by creating a competition among artists who depict some aspect of sight, light or vision in their paintings. The biannual winners of this modern art competition from Spain and Latin America have their works displayed both in the sponsoring clinics and on the cover of the Journal.

Refractive Surgery Outlook

Prior to the ISRS/AAO union in 2003, *Refractive Surgery Outlook* was an official publication of the Academy’s RSIG. Today this e-newsletter is skillfully guided by Chief Medical Editor Dr. McDonald and distributed monthly to all ISRS/AAO members.

Each issue offers opinion and advice on the latest advances from leading experts in the field, as well as a quick look at highlights from peer-reviewed clinical journals. It also includes a calendar of upcoming meetings and news from the ISRS/AAO and the refractive surgery industry.

Sent to over 2,400 refractive surgeons in more than 80 countries, *Refractive Surgery Outlook* enables readers to get up-to-speed quickly on the latest advances and techniques in refractive surgery.

2003: Inaugural Joint Meeting

For the first time, on November 14 and 15, 2003, the meetings of both organizations combined, just prior to the Academy’s Annual Meeting in Anaheim, California for Refractive Surgery Subspecialty Day.

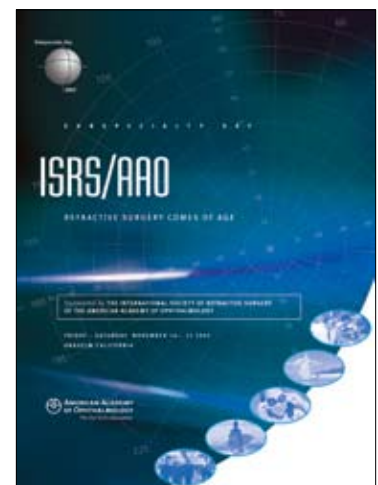
The Society has maintained its traditional program with the presentation of the Barraquer and Lans Awards, in addition to acknowledgement of other award recipients. Today, the joint program includes a structured and classical review of refractive surgery and presentations of new and emerging technologies. The overall program also features both invited and free papers.



Refractive Surgery Outlook (2002)



Dr. McDonald



Subspecialty Day Program (2003)

The Present and Future

Refractive surgeons continue to carry the banner of progress forward with technology that promises to expand the frontiers of refractive surgery and reduce dependence upon spectacles to address visual impairment in new and exciting ways.

Each year, the ISRS/AAO programs include the Academy's Refractive Surgery Subspecialty Day, an Annual Regional Meeting and Cosponsored Meetings, which all enable attendees to compare balanced information on the latest techniques, devices, pharmaceuticals and innovations and explain how to recognize, manage and avoid complications, as well as describe and demonstrate details of surgical techniques that can facilitate the achievement of improved outcomes in patients undergoing refractive, cataract and corneal surgery.

Refractive Surgery Subspecialty Day

The Academy's Refractive Surgery Subspecialty Day sponsored by the ISRS/AAO offers meeting attendees the latest information on refractive surgical procedures with a two-day course that includes a comprehensive update of leading edge developments in refractive surgery, and an emphasis on managing and avoiding complications.

Annual Regional Meeting

Each year, ISRS/AAO holds an Annual Regional Meeting outside of the United States for ophthalmologists who may not be able to attend the Academy's Annual Meeting and Subspecialty Day. Regional Meetings provide attendees with high quality, state of the art information designed to improve patient care in the fields of cataract, refractive and corneal surgery.

To date, ISRS/AAO Annual Regional Meetings have been held in Hong Kong (2005), Istanbul (2006) and Beijing (2007), and will be held in Cancun in 2008.

Cosponsored Meetings

ISRS/AAO works closely with other ophthalmic societies to deliver refractive surgery educational events and scientific programs that are relevant to members and meet their specific needs around the world through cosponsored meeting agreements.



Drs. Carones and Waring at the ISRS/AAO Gala Dinner and Dance (2003)



ISRS/AAO Annual Regional Meeting in Beijing, China



Drs. Salz and Barraquer Coll in Cartagena at an ISRS/AAO cosponsored meeting

ISRS/AAO Refractive Surgery Subspecialty Day



Subspecialty Day Program Chairs Drs. O'Brien and Vukich (2003)



Drs. Rosenthal, Lippman and Honan (2003)



Dr. Knorz at the podium (2004)



Drs. El-Danasoury and Carones (2005)



Drs. Schanzlin, Weiss and Atlas (2006)



Refractive Surgery Subspecialty Day exhibits (2006)

ISRS/AAO Annual Regional Meetings



ISRS/AAO Annual Regional Meeting in Hong Kong (2005)



Mr. Cooke presenting Dr. Kim with the Best Paper of the Session Award in Hong Kong (2005)



ISRS/AAO Annual Regional Meeting in Istanbul, Turkey (2006)



Drs. Lindstrom and El-Danasoury, Mr. Ott and Dr. Yilmaz at the ISRS/AAO Gala in Istanbul (2006)



ISRS/AAO Annual Regional Meeting in Beijing, China (2007)



Exhibit Floor at the ISRS/AAO Meeting in Beijing (2007)



ISRS/AAO Cosponsored Meetings



ISRS event in Russia (1990)



Drs. Amor, Hoyos, Ditzen, Ditzen and Carriazo at Tunis Live '98 in Tunisia (1998)



Attendees of the 2nd ISRS Symposium in Russia (2000)



Dr. Krueger, Ms. Gu, Ms. Torres and Dr. Waring in Shanghai (2000)



Wet lab during Athens Meeting (2001)



Drs. Klyce and McDonald, Mr. G. Binder and Dr. P. Binder at the Aegean VIII in Ithaca, Greece (2004)



Attendees at the International Intraocular Implant and Refractive Surgery Meeting in India (2006)



Dr. Alió with dignitaries in India (2006)



Mr. Veerasami, Minister of Health for India with Dr. Alió in Chennai, India (2006)



Drs. Cucalón, Tamayo, Izquierdo, Ossma, Varas, Rincón, Agarwal, Carriazo, Agarwal, Henríquez, Barraquer and Vejeano, Ms. Ana Maria Torrès, Drs. Cantu, Ríos, Vargas, Pérez and Escobar at the XXXII Colombian Society of Ophthalmology Meeting in Colombia (2006)



Dr. Alió with attendees of the Alicante Congress in Spain (2007)



Dr. Hardten speaking at the XVII Annual Course of Los Andes Ophthalmological Foundation in Chile (2007)