



**Eye Associates** of Boca Raton, P.A.  
950 N.W. 13th Street • Boca Raton, Florida 33486

*Treatment For Your Eyes, Care For You!*  
Specialized, comprehensive eye care right here, in Boca Raton.

**HOWARD B. GOLDMAN, M.D., F.A.C.S.**  
Practice Limited to Cataract & Lens Replacement Surgery

**JEFFREY M. PERLMAN, M.D., F.A.C.S.**  
Pediatric & Neuro-Ophthalmology, Cataract & Laser Surgery

**MARK H. WEINER, M.D.**  
Ophthalmic Plastic Surgery & General Ophthalmology

**ERNESTO I. SEGAL, M.D.**  
Vitreoretinal Diseases & Surgery  
Macular Degeneration & Diabetic Retinopathy

**DOUGLAS A. KOHL, M.D.**  
Glaucoma, Cataract & Laser Surgery

**THOMAS W. HEGLAND, O.D.**  
Comprehensive Eye Exams, Medical & Surgical Triage  
& Surgical Co-Management

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**SPECIAL EDITION**  
*Surgical Procedures*



*Congratulations*

Howard B. Goldman, M.D., F.A.C.S., Mark H. Weiner, M.D. and Ernesto I. Segal, M.D. on your appointment as **"Affiliate Assistant Professors"** at the Charles Schmidt College of Medicine at Florida Atlantic University. Thank you to all the doctors for contributing to the academic success of FAU.

*Eye Associates of Boca Raton offers complimentary Hearing Evaluations and Vision Screenings as a part of their community service. Call (561) 391-8300 for details!*

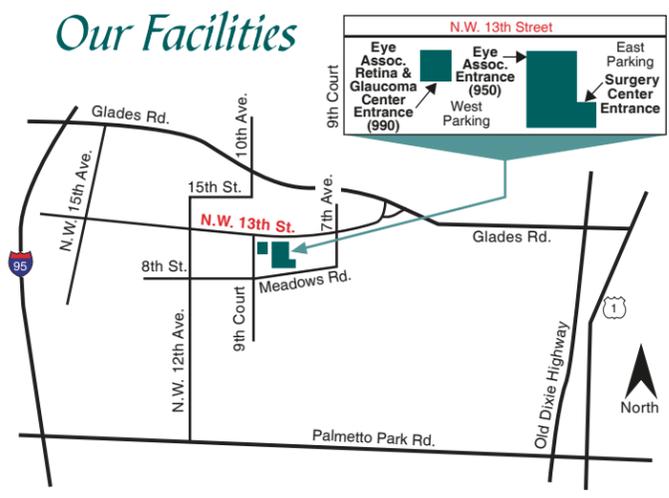
**Tell a Friend Fridays!**

Complimentary cataract and glaucoma screenings are provided every Friday afternoon at Eye Associates of Boca Raton.

No appointment necessary.

If you or someone you know suspects they may have cataracts or glaucoma, we encourage you to take advantage of this **FREE** offer!

**Our Facilities**



**Are My Cataracts Ripe?**

More often than not when I tell a patient they have cataracts, the first question they ask is "are they ripe yet?" This immediately brings the image of a banana to my mind. You know the one that is turning brown and soft. The term "ripe" was coined many years ago when cataract surgery was a more invasive procedure, required a week's stay in the hospital and your head would be immobilized by sandbags on both sides. Because the procedure was more complex, doctors put off cataract surgery until the patient's vision was so compromised that it was the only alternative. In those days there were no intraocular lens implants to correct vision and patients did not receive any type of correction for up to three months following surgery. When a correction was made, it was those ghastly, unattractive "coke" bottle glasses that magnified and distorted everything. Is it really any wonder surgery was a last resort for cataract patients back then?

Thank goodness time and technology have brought us the ability to "cure" your cataracts in a safe, outpatient setting. It is important to know that the only cure for cataracts is to remove them. My technique uses drops to numb the eye and a tiny incision that is self sealing and requires no sutures. In my hands, the patient is in the operating room for approximately 10 minutes and on their way home shortly after. Vision will be blurry immediately following surgery, but improves every day after. The only restrictions I place on my patients is no swimming with their face in the water and no eye make-up for the ladies for at least a 5 day period.

With all the new advances, we no longer wait until patient's cataracts are "ripe", or at risk for severe vision loss due to cataracts. In fact, the more mature a cataract is the more difficult it becomes to remove. When a patient tells me that they are experiencing difficulty seeing road signs at night or are bothered with glare reducing the ability to see tennis or golf balls and seeing fine print has become more challenging, it is usually time to consider surgery.

If you suspect that you may have cataracts and definitely if you have been diagnosed as having them, a comprehensive eye exam is necessary for confirmation that it is time for removal. I am happy to see both new and established patients. Simply call our office at (561) 391-8300 to make your appointment.

*Congratulations* to Dr. Goldman on his nomination as a finalist for 2012 Heroes In Medicine and being recognized as a Top Doctor by Castle Connolly.



*Howard B. Goldman, M.D., F.A.C.S.*  
Cataract & Lens Replacement Surgery

## Eyelid Surgery - Look Better, Be Safer

As we age the skin around our eyes ages and begins to droop and sag causing a look of sadness, tiredness and in some cases may obstruct your vision. Some people who are cursed with an extreme amount of excess eyelid skin often need more light when reading and may be forced to physically hold up their lids to see better. Often times headaches can be attributed to the fatigue of using the forehead muscles to hold the eyes open.

Many of the patients I see with excess eyelid skin (droopy eyelids) believe that surgery is for those of us who are vain at heart. They are often completely unaware that the side effects of droopy lids can result in a loss of peripheral vision. This loss of your side to side vision can be hazardous when driving if you are unable to see pedestrians on the sidewalk or cars that are trying to pass.

It is a common misconception that all eyelid surgery is considered cosmetic and therefore not covered by insurance. However, when your functional vision is impaired it is covered by Medicare and in most cases private insurances. A comprehensive eye examination

including a visual field test is all that is required to present your case to your insurance carrier for coverage.



As always, a free eyelid screening to determine the need for a surgical evaluation is available at Eye Associates. Call our office today! Look Better, Feel Better and See Better after eyelid surgery.

*Congratulations* to Dr. Weiner for being recognized as a Top Doctor by Castle Connolly.

*Mark H. Weiner, M.D.*  
Ophthalmic Plastic Surgery &  
General Ophthalmology



## New Drug For The Treatment Of Wet Macular Degeneration

For so many years our goal as retina specialists in the treatment of wet macular degeneration was to do everything we could to slow the progression of this debilitating disease. Laser to cauterize leaking blood vessels under the retinal tissues in an attempt to keep the disease from quickly spreading was our only option. Often we were faced with the decision to sacrifice vision with laser treatment in hopes of slowing progression and preserving some vision. This approach worked with some and failed with others.

Today's approach to the treatment of wet macular degeneration has changed dramatically for the better. With the introduction of the Anti-VEGF agents, Avastin and Lucentis, treatment of this disease has had much happier endings with greatly improved outcomes and even improvement in vision following treatment. For the first time in the history of treating wet macular degeneration, there is a renewed hope of stopping the progression

without loss of vision, there is even hope of recovering some vision.

Eylea (eye-lee-uh) has recently been approved by the F.D.A. and is the latest drug used for the treatment of wet macular degeneration. Eylea theoretically has a longer lasting effect in the eye, reducing the number of treatments and the frequency of visits to the office. All of these medications are great options for treating wet macular degeneration and have greatly improved patient and doctor satisfaction with their results.

*Ernesto J. Segal, M.D.*  
Vitreo-Retinal Diseases & Surgery  
Macular Degeneration &  
Diabetic Retinopathy



## Glaucoma - Will Surgery Eliminate My Eye Drops?

As the glaucoma specialist at Eye Associates, I am often asked by my patients, if glaucoma surgery will eliminate their need to use eye drops? Glaucoma is a condition that develops when the retinal nerve fibers are no longer able to tolerate the pressure on them that is created inside the eye as it produces and drains aqueous fluid. Current treatment standards involve the introduction of eye drops that either control the production of aqueous or its drainage as a first option. The majority of patients respond well to these medications and their glaucoma remains under control with their use.

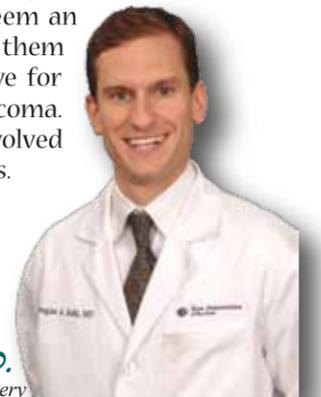
Sometimes eye drop therapy either fails with initial treatment or can fail over time. When this happens, surgical intervention with various lasers is then considered. Laser surgery for glaucoma is considerably less invasive with a low chance of complications. Depending on the type of glaucoma, the two most common laser procedures for glaucoma are the Laser Peripheral Iridotomy or L.P.I., and the Selective Laser Trabeculoplasty or S.L.T. Eye Associates was among the first to provide S.L.T. laser surgery for glaucoma in south Florida. Both procedures have proven quite effective in the treatment of glaucoma and I perform them quite often. Sometimes these laser procedures can be considered to improve the control of glaucoma and

to reduce the need for eye drops.

Actual surgical intervention is always the procedure of last resort in the fight against glaucoma. When eye drops and alternative laser procedures have proven unsuccessful, a surgical trabeculectomy or glaucoma filtering implant is then considered. These procedures are quite involved and not without the potential for complications. And it is because of the potential risks involved with these procedures that they are not considered as an alternative to taking eye drops that are successfully controlling glaucoma.

So, while using eye drops for treating glaucoma can seem an annoyance to some, using them is still the best alternative for the treatment of glaucoma. There is little or no risk involved with using these eye drops.

*Douglas A. Kohl, M.D.*  
Glaucoma, Cataract & Laser Surgery



## Crossed Eyes in Adults

While crossed eyes most commonly occur in early childhood years during the eye's development, this condition can sometimes affect adults as a result of loss of all or most of the vision in one eye. Patients who have lost significant vision in one eye may begin to notice a turning (strabismus) of the poor eye over time. This happens as the brain suppresses the visual signals from the poor eye and begins to accept only the information received from the better eye.

As the pediatric and neuro ophthalmology specialist at Eye Associates, I am often asked by adults with crossed eyes if they are too old to have muscle surgery to straighten their eyes. In many cases the answer is "no". I have operated on a number of adults with this condition to correct their eyes and had excellent results.

Some adults with crossed eyes are a result of a medical condition such as thyroid eye disease, mini-stroke or childhood strabismus that worsens when they become adults. Many of these patients experience double vision and can be relieved of the problem following surgical correction.



*Congratulations* to Dr. Perlman for being recognized as a Top Doctor by Castle Connolly.

*Jeffrey M. Perlman, M.D.*  
Pediatric & Neuro-Ophthalmology,  
Cataract & Laser Surgery

