

GLAUCOMA FELLOWSHIP—SAY WHAT?



This subspecialty provides an experience unlike any other.

BY PAUL PETRAKOS, DO

“Why would you want to do glaucoma? Do we even know what it is?” Although always said in jest, it is amazing how many versions of that question I have heard. For many ophthalmology residents, myself included, choosing a fellowship can be a daunting task. Most of us start medical school without ophthalmology on our radar. A particular experience or mentor introduces us to ophthalmology, and then, after minimal clinical and academic exposure during medical school, we begin residency.

Typically, the first few weeks (really, months) of ophthalmology residency involve learning how to use a slit lamp and trying to keep our heads above water. However, seemingly at the same time, trainees are asked to select a fellowship. Few medical students are fortunate enough to know what fellowship they plan to pursue prior to residency. For me, it was oculoplastics—the space that first sparked my interest in ophthalmology.

How in the world did I end up switching from a subspecialty focused on structure and function to a disease like glaucoma? Although it is true that I fell in love with intraocular surgeries and their unique challenges, that does not completely answer the question.

DOCTOR-PATIENT BOND

To do that, I have to go back 10 years to when I was a pharmaceutical sales representative, traveling to physicians’ offices and asking them to sign for samples. It was then that I quickly realized that sales wasn’t the career path for me. I missed the

patient interaction I had experienced while working as an EMT in college. With that in mind, I decided to apply to medical school, seeking intellectual stimulation and that doctor-patient relationship.

During residency, I found that building rapport with patients, educating them on their disease processes, and earning their trust was an even more rewarding experience than I had anticipated. I began to explore different subspecialties outside of oculoplastics and finally found one that merged all of my interests.

With my background in pharmacology as an undergraduate, I was fascinated by the opportunity for novel therapeutic options to address glaucoma. Additionally, the excitement around microinvasive glaucoma surgery and the exhaustive research in the field fulfilled my surgical and intellectual desires. But, above all, it was still the doctor-patient relationship that appealed to me most.

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AT A GLANCE

- Few medical students are fortunate enough to know what fellowship they plan on pursuing prior to residency.
- With the chronic nature of glaucoma and the need for frequent patient visits, glaucoma specialists truly get to know their patients as individuals.
- Although it can be clinically frustrating when a patient’s disease shows progression, it can also be academically stimulating.

ophthalmology; glaucoma specialists truly get to know their patients as individuals while battling this blinding disease together.

MISSION TO FIND ANSWERS

As rewarding as the connection with patients can be, it is impossible to ignore the many challenging discussions that come with glaucoma care. It is heartbreaking to explain to patients that, despite their best efforts to take multiple drops, their

disease has shown progression. However, although clinically frustrating, this can also be academically stimulating.

There is still so much we do not know about glaucoma and ways that we can improve patient care. I want to be part of the mission to find answers and the battle to prevent blindness. Ultimately, that is why I am a glaucoma fellow, looking forward to the lifelong challenge of treating this complex, blinding disease. ■

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