SCIENCE AND MEDICINE MAKE FOR A BETTER TOMORROW





Can the future be read in the lines on the palms of one's hands? In the tea leaves at the bottom of a cup? Or in specific cards carefully selected from a tarot deck? Whatever you choose to believe, one thing is certain

when it comes to the future: For patients with age-related macular degeneration (AMD), the prognosis is looking better with each passing year. No crystal ball needed. With each new development in imaging and treatment and with every study and clinical trial under our belts, we broaden our understanding of this devastating disease, allowing earlier detection and leading to novel ways to monitor and treat patients.

This issue's cover focus on AMD offers a look at ongoing efforts related to the management of patients with AMD.

M. Cristina Kenney, MD, PhD, and Baruch D. Kuppermann, MD, PhD, explain how mitochondria-targeting drugs have the potential to prevent the occurrence of mitochondrial DNA damage and treat age-related disease in "Mitochondrial Genetics in AMD" (page 64).

Imaging modalities are used to diagnose diseases and conditions and also to follow patients and track disease progression. Theodore Leng, MD, MS, discusses the latter in his article "Predicting Geographic Atrophy Growth With SD-OCT" on page 61. He describes a study using data from volume spectral-domain optical coherence tomography (SD-OCT) scans of the macula to develop an algorithm to identify macular regions where geographic atrophy is likely to grow.

Many patients with AMD know what an Amsler grid is—in fact, they may have one on their refrigerator or bathroom mirror. But Amsler testing requires patients to subjectively identify a change in their vision and then contact their eye care providers. Turn to page 68 and read about how a remote screening tool may lead to earlier detection and improved outcomes in "Putting Vision Monitoring in the Hands of Patients With AMD" by S.K. Steven Houston III, MD.

We have all heard stories about consumers who sought what they perceived to be cheaper or better care, but who ended up regretting their choices. Retina patients are not immune to the siren call of alternative opportunities. In "Buyer Beware: Ignorance ≠ Bliss," authors Zubair A. Ansari, MD; Ajay E. Kuriyan, MD, MS; Thomas A. Albini, MD; and Harry W. Flynn Jr, MD, discuss how unregulated stem cell clinics pose real risks to patients with AMD (page 71).

We retina specialists may have a leg up over fortune tellers. They look at tea leaves, palms, or crystal balls and attempt to discern the future. We take into account facts about our patients, add in what we know about current options for treatment, and offer our expert thoughts on what their futures hold. Nothing beats our all-access pass to the windows of the soul!

Mm. Ho, m Tobet Lany

Allen C. Ho. MD. Chief Medical Editor

Robert L. Avery, MD, Associate Medical Editor