Ursula Schmidt-Erfurth, MD

Ursula Schmidt-Erfurth, MD, is Professor and Chair of the Department of Ophthalmology at the University Eye Hospital in Vienna, Austria.

1. What has been the biggest influence on how you approach the practice of ophthalmology and retina research?

The biggest influence on my consecutive research activity was my stay at Harvard University for 2 years as a research fellow supported by the German Research Council. I was inspired by how organized and structured research was at the Wellman Laboratories as well as the investigators' high level of motivation. Also, there was a good combination of practical and academic conditions at Harvard; I was a full-time researcher and I did not have to do routine clinic work. During my stay at Harvard, my main research focus was the development of novel treatment approaches for neovascular diseases of the eye. Because this was an interdisciplinary approach, I worked with an oncology team. We combined ophthalmologic and oncologic expertise and our advances were tremendous. We succeeded in taking photodynamic therapy (PDT) with verteporfin (Visudyne, Novartis Ophthalmics), a pilot project, from the first cell culture work to the initial designs for clinical trials. Tayyaba Hasan, PhD, a world expert in PDT, was my professor at the Wellman Laboratories. Her knowledge and scientific guidance made my research successful and she strongly influenced my personal evolution. She was a true role model—a responsible scientist, an open-minded global citizen, and she possessed a straightforward personality. My current focus of research involves clinical studies to design and evaluate pharmacologic therapies and novel diagnostic imaging techniques to manage retinal disease.

2. What is your current role and involvement with Euretina?

Euretina is the largest retinal society in Europe. I am a part of the new generation of board members, which includes a small group of young leaders in the field of retina in Europe. The organization strives to provide cutting-edge knowledge to retinologists in Europe by organizing meetings that deliver pertinent scientific and clinical information. Euretina supports international exchange between Europe and the United States. We invite speakers from the United States to our meetings and we, in turn, send European speakers to conferences hosted by societies like the American Academy of Ophthalmology or the Asia Pacific Academy of Ophthalmology. In addition to organizing conferences, Euretina publishes guidelines on how to treat major diseases according to European standards. For example, we published guidelines on how to diagnose and manage diabetic retinopathy and age-related macular degeneration—which was my duty as a leading author on behalf of Euretina. In the future we plan to publish our own society journal that focuses strictly on topics in retina.

3. In your opinion, what areas of retinal research hold the greatest promise for new therapies/modalities?

Retina specialists need more flexible and comprehensive preclinical and clinical studies for antiangiogenic therapy. There definitely is a need for solid clinical studies in order to introduce new approaches and substances to the market. The retina community, however, needs appropriate preclinical studies so that we can understand and optimize the mechanism of pharmacologic therapy. Intelligent and independent preclinical studies would help us to better understand how medication works and what its biochemistry looks like in human ocular disease. We cannot just simply inject drugs repeatedly and only measure visual acuity at various time points. We need to understand why we achieve clinical effects, what the clinically relevant biomarkers are, and the possible side effects.

4. From the perspective of a very experienced presenter, can you describe how the content of material that is being presented has changed over the past 5 to 10 years?

I think that the influence of the pharmaceutical indus-

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try has grown significantly and marketing issues have become an important aspect of retinal research. As a result, however, many presentations at meetings only focus on highlighting the same data from the same clinical studies with the same products over and over. There is not enough independent and widespread data being presented at the major meetings. This is not a criticism toward our industry partners who are performing and supporting excellent research; this has been of tremendous benefit to our patients. It is, however, a wish that the ophthalmic community would take a more active role in pharmacologic research. We need to have more studies on the mechanism of action for new compounds and not so many on the efficiency of existing drugs. Overall, it is my opinion that more presentations currently lack a basic and independent approach than in the past.

5. In what hobbies do you partake when you are not working?

My main hobby is doing interesting things with my two children. We play sports together, we go to the movies and theater together, and we travel together to interesting places, like Asia and South America. Kids' perspectives always add a completely new color and a different flavor to things and they are entertaining in their own right. This is my personal pleasure and I try to use the privilege of my being a member of a global academic community their favor, so that they can experience what it is like to be part of an open and interactive academic community. ■