



## Dr. DeCroos Joins Southeastern Retina Associates in Chattanooga

**T**he newest physician to join the Southeastern Retina Associates (SERA) team is Dr. Francis Char DeCroos, a board-certified ophthalmologist who recently completed his two-year vitreoretinal surgery fellowship at the renowned Wills Eye Hospital in Philadelphia, PA. The training program combines a focus on clinical care and clinical research and is consistently ranked as one of the top ophthalmology hospitals in the world.

"It's a great place to train," said Dr. DeCroos, "The doctors there have the philosophy that clinical trials and clinical research feed directly into your clinical practice and make it better."

While a fellow at Wills Eye Hospital, Dr. DeCroos was the

recipient of both the Heed Fellowship and the Ronald G. Michels Fellowship, each of which are only given to a few retina specialists nationwide.

Dr. DeCroos, who grew up in Fort Walton Beach, FL, received his medical degree at Duke University School of Medicine and continued his internship at Christiana Care Health System.

Becoming a physician was something Dr. DeCroos said really clicked for him. "I found that medicine was a really nice outlet for using science and technology in a productive way," DeCroos said. "It also was a nice way for me to apply the things that I was learning in college. Innovative technologies, innovative ways of thinking—we get to use them to benefit individuals on a direct level or even on a global level through clinical trials."

Motivated to make a difference in the lives of others, Dr. DeCroos went on to complete his Ophthalmology Residency at Duke Eye Center in Durham, N.C.

"I liked ophthalmology because people extremely value their vision, and there is so much that we can do to impact and improve vision, through both the medical and surgical specialty."



In addition, DeCroos said that the ophthalmology specialty is a great community of providers who work together to advance the field. "There have been incredible advances over the last 20 or 30 years, and we are only getting better."

An active contributor to research in his specialty, Dr. DeCroos has presented at multiple international meetings and has published over 20 peer-reviewed research articles in leading journals such as *Ophthalmology*, *American Journal of Ophthalmology*, and *Investigative Ophthalmology and Visual Sciences (IOVS)*.

Dr. DeCroos joined Southeastern Retina Associates in the fall of 2013, a group he had identified during his research fellowship.

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# Clinical Trials Improve Patient Care Locally and Globally

**P**lato's insight, "Necessity is the mother of invention," often proves true, even in a clinic setting when problems arise that frustrate both physician and patient.

These problems, however, can be a motivator for finding a solution through clinical research to the questions, "How can we do something better?" "How can we develop an approach or a therapy that doesn't have a good approach to it yet?" "Should we use the tools that we have now, or do we need to develop a new tool?"

These are the questions that the physicians at Southeastern Retina Associates ask often and do so through their very prolific clinical trials programs located through the region. Southeastern Retina physicians Dr. Richard Breazeale and Dr. Char DeCroos are set to begin a diabetes trial, following patients who have the disease but still have very good vision. Knoxville physicians are currently enrolling in this trial.

"We want to explore whether we should treat or watch these people," DeCroos explained. "Their vision could get worse with diabetes. On one hand, if we don't treat these patients, the disease could get worse, but on the flip side, if you do treat them, you expose them to side effects not needed."

The trial is part of a large collaborative research effort—the Diabetic Retinopathy Clinical Research Network. This Network of over 113 groups, includes private

*"Questions come from clinic, we answer them in a thoughtful way, and then it goes back to clinic to make things better for our patients."*

practices like Southeastern Retina, as well as academic Centers. Dr. DeCroos explained "They work together to answer clinical questions in a meaningful way."

For this particular trial, the

group is looking to enroll 700 patients across the nation. "Patients are excited to qualify," Dr. DeCroos said. "It's a way of contributing back to the standard of care all over the world."

## Current Clinical Trials

### Age-related Macular Degeneration (AMD) Studies

- **Treatment in Geographic Atrophy secondary to AMD** Sponsored by Genentech/Roche. Location: Chattanooga. Phase III study on Lampalizumab Treatment in Geographic Atrophy secondary to AMD.
- **Comparison of Age-related Macular Degeneration Treatment Trials (CATT) Follow up Study** Sponsored by the National Eye Institute. Location: Knoxville. Original CATT patients are returning for follow-up to learn about the long term effects of treatments for neovascular AMD.
- **ATLAS** Sponsored by Wills Eye Institute. Location: Chattanooga. Optical coherence tomography guided treat and extend therapy for neovascular age-related macular degeneration using aflibercept.

### Age-related Macular Degeneration (AMD) Studies (CONT.)

- **ARED Sirolimus S2** Sponsored by the National Eye Institute - Location: Knoxville. Intravitreal Sirolimus (vs Placebo) in treatment of Central Geographic Atrophy in patients with AMD.

### Diabetic Retinopathy (DR) Studies

- **ACCORDION** Sponsored by the National Eye Institute & National Heart, Lung & Blood Institute. Location: Tri Cities. Examining the effect of various treatments on cardiovascular disease in people with diabetes.

### Trials Sponsored by Diabetic Retinopathy Clinical Research network (DRCR.net)\*

- **Protocol V** Location: Chattanooga, Knoxville and Tri Cities. Treatment for Central Diabetic Macular Edema in Eyes with "Very Good Vision."

## Current Clinical Trials

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### DRCR.NET (CONT.)

- **Protocol AA** Location: Knoxville. Peripheral Diabetic Retinopathy (DR) – Lesions on Ultra wide-Field Fundus Images and risk of DR worsening over time.
- **Protocol S** Location: Tri Cities & Knoxville. Prompt PRP Laser vs. Intravitreal Ranibizumab with Deferred PRP Laser for Proliferative Diabetic Retinopathy.
- **Protocol U** Location: Knoxville. Short-term evaluation of combination Corticosteroid + Anti-VEGF treatment for persistent Central Diabetic Macular Edema following Anti VEGF therapy in Pseudophakes.

Dr. Howard Cummings does an injection on one of SERA's clinical trial patients.



### DRCR.NET (CONT.)

- **Protocol T** Location: Tri Cities & Knoxville. Comparison of Afibercept, Bevacizumab & Ranibizumab for Diabetic Macular Edema with patients seen in follow up.
- **Genes in Diabetic Retinopathy** Location: Tri Cities & Knoxville. Blood sample collection & submission to the DRCR Genetic Repository (open only to patients who are currently enrolled in an applicable DRCR study).

### Vitromacular Adhesion (VMA) Studies

- **OZONE** Sponsored by ThromboGenics. Location: Tri Cities. Phase 4 Ocriplasmin Study to review anatomic and symptomatic changes over 6 months for symptomatic Vitromacular Adhesion (VMA).

### VMA (CONT.)

- **ORBIT** Sponsored by ThromboGenics. Location: Tri Cities. Phase 4 Study to observe the clinical outcomes and safety in patients receiving JETREA for the treatment of symptomatic VMA.

### UVEITIS STUDIES

- **EyeGuard A** Sponsored by Xoma. Location: Knoxville. Placebo-controlled Safety and Efficacy Study of Gevokizumab in the Treatment of Active Non-infectious, intermediate, Posterior or Pan Uveitis.
- **EyeGuard C** Sponsored by Xoma. Location: Knoxville. Placebo-controlled Study of the Safety and Efficacy of Gevokizumab in the Treatment of Subjects with Non-infectious intermediate, Posterior or Pan-Uveitis currently controlled with Systemic Treatment.

\*The Diabetic Retinopathy Clinical Research Network facilitates multicenter clinical research of diabetic retinopathy, diabetic macular edema and associated conditions. DRCR studies examine the use of laser treatment and injections. Several protocols are available. The studies are funded by the National Eye Institute, a part of the federal government National Institutes of Health.

*Our retina specialists utilize the most advanced therapies and surgical approaches to provide the best treatment available. Southeastern Retina Associates also maintains active clinical trials and research programs to provide cutting-edge treatments to East Tennessee, Southwest Virginia and Northern Georgia.*

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[www.southeasternretina.com](http://www.southeasternretina.com)



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ASSOCIATES





## Two New Locations Open in Harriman, Tn. and Rome, Ga.

Recognizing the burden many patients carry trying to make arrangements for transportation to office visits, Southeastern Retina has recently opened two new locations to better serve their patients' needs.

The new Harriman office opened June 23rd at 1855 Tanner Way Suite 120, Harriman, TN. The new location is conveniently located for patients living in and near Roane County.

The Rome, GA office, which opened July 17th, offers a more



*Located at 210 Redmond Rd., the new Rome, Ga., office should significantly improve travel time for patients living in northern Georgia.*

convenient alternative to patients living in northern Georgia. The office is located at 210 Redmond Road in Rome.



*The new Harriman office is located at 1855 Tanner Way, Suite 120, Harriman, TN.*

Below is a list of our other locations throughout Tennessee, Georgia, and Virginia:

### A List of Our Convenient Locations

#### CHATTANOOGA AREA LOCATIONS

##### **Cleveland Office**

2253 Chambliss Avenue, Suite 410  
Cleveland, TN 37311  
Phone: 423.756.1002

##### **Dalton, GA Office**

1506 N. Thornton Ave, Suite C  
Dalton, GA 30720  
Phone: 423.756.1002

##### **Jarnigan Medical Center**

7268 Jarnigan Rd, Suite 300  
Chattanooga, TN 37421  
Phone: 423.756.1002

##### **Rome, GA Office**

210 Redmond Rd  
Rome, GA 30165  
Phone: 423.756.1002

#### KNOXVILLE AREA LOCATIONS

##### **Baptist Office**

2020 Kay St. Knoxville, TN 37920  
Phone: 865.579.3999

##### **Crossville Office**

1051 Genesis Road, Suite 103  
Crossville, TN 38555  
Phone: 931.337.0522

#### KNOXVILLE (CONT.)

##### **Harriman Office**

1855 Tanner Way Suite 120  
Harriman, TN 37748  
Phone: 865.588.0811

##### **Maryville Office**

628 Smithview Dr.  
Maryville, TN 37804  
Phone: 865.977.4528

##### **Morristown Office**

3101 W. Andrew Johnson Hwy.  
Morristown, TN 37814  
Phone: 423.581.1271

##### **Oak Ridge Office**

575 Oak Ridge Turnpike, Suite 202  
Oak Ridge, TN 37830  
Phone: 423.482.3127

##### **Sevierville Office**

1101 Fox Meadows Blvd., Suite 105  
Sevierville, TN 37862  
Phone: 865.588.0811

##### **Southeast Eye Center**

7800 Conner Rd.  
Powell, TN 37849  
Phone: 865.546.7701

##### **Tennessee Valley Eye Center**

140 Capital Dr.  
Knoxville, TN 37922  
Phone: 865.251.0727

#### KNOXVILLE (CONT.)

##### **Univ. of Tennessee Medical Center**

1928 Alcoa Hwy.,  
Building B. Suite 320  
Knoxville, TN 37920  
Phone: 865.522.5453

##### **Weisgarber Office**

1124 E. Weisgarber Rd, Suite 207  
Knoxville, TN 37909  
Phone: 865.588.0811

#### TRI CITIES AREA LOCATIONS

##### **Abingdon, VA Office**

310 Cummings Street, Suite B  
Abingdon, VA 24210  
Phone: 276.623.5254

##### **Bristol Office**

1701 Euclid Avenue, Suite A  
Bristol, VA 24201  
Phone: 423.578.4364

##### **Johnson City Office**

100 Med Tech Parkway, Suite 140  
Johnson City, TN 37604  
Phone: 423.434.0853

##### **Kingsport Office**

2412 N John B Dennis Hwy.  
Kingsport, TN 37660  
Phone: 423.578.4364

## Bristol Office Offers Convenience, Comfort for Tri Cities Patients

For Southeastern Retina Associates patients living in and near Bristol, Virginia, the November 2013 opening of the new office location was a welcomed addition to the growing number of Southeastern Retina locations across the region. Providing much more convenient access, the office has significantly cut down travel time for Tri Cities patients.

According to SERA's Tri Cities Administrator, Maxine Stonecipher, the office, located at 1701 Euclid Ave., Suite A, was completely remodeled and offers a beautiful, calming atmosphere.

"Our patients were traveling long distances to our other office locations," said Stonecipher. "With our new location, however, we are able to offer the patients who live

in the area the proper care they need without the burden of a long commute."

As do the other Southeastern Retina locations, a wide range of services are offered to patients with macular degeneration, diabetic retinopathy, retinal vascular diseases, retinal detachments,

retina surgery, and all diseases of the retina and vitreous.

Tri Cities Vitreoretinal Specialists who see patients at the new Bristol office and other Tri Cities locations include Joseph M. Gunn, MD, Howard L. Cummings, MD, Allan Couch, MD, and Cris Larzo, MD.



*Located at 1701 Euclid Ave., the new Bristol, Va., office should significantly improve travel time for patients living in and around Bristol.*

## DeCroos Joins Southeastern Retina

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"When I was in my residency, I had a Research Fellowship at the Duke Reading Center in Durham reading images.

"We received data from all over the world, and I was able to see what groups were participating in research studies. Southeastern Retina Associates was one of the top groups in the country."

After making inquiries, he was put in touch with Dr. Nick

Anderson, who assisted Dr. DeCroos with joining SERA. "I really liked the values and priorities of the group," said Dr.

***"This group has a long sense of integrity, of doing the right thing for their patients and their employees."***

DeCroos. "This group has a long sense of integrity, of doing the right thing for their patients and their employees. Integrity is a core value of the group. They are also one of

the top groups for clinical trials and research in the country."

Dr. DeCroos actively participates in Southeastern Retina Associates ongoing clinical trials program. He just finished enrollment in a macular degeneration trial and is beginning enrollment for a diabetes trial soon. Dr. DeCroos believes that participation in trials can significantly improve the lives of his patients, as well as patients all over the world.

Dr. DeCroos and his wife Emily,

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# Improving Patient Outcomes for Age-related Macular Degeneration



A common ophthalmic condition affecting people age 50 years and older is age-related macular degeneration (AMD). AMD may be associated with central vision loss, a devastating condition affecting an individual's ability to read, to drive a car, or even to see someone's face if in its advanced stages. AMD can develop so slowly that it's not until the vision is getting severely bad that the patient will notice.

The two major types of AMD are "dry" (non-neovascular) and a "wet" (neovascular). The dry form—the most common—is the early stage of the condition. Typically, there is little or no vision loss during this stage, although there are a few exceptions of a more advanced "dry" degeneration. Wet AMD is the late stage of the condition, affecting about 10 percent of all people with AMD. The majority of central vision loss stems from Wet AMD, which implies leakage and bleeding in the macula due to abnormal blood vessels known as choroidal neovascularization. As the vessels start to grow

beneath the center of the macula, they leak fluid or blood, causing central vision loss with blurring and distortion of vision. Untreated, these abnormal blood vessels typically will grow relatively large and eventually cause scarring with permanent, often severe, central vision loss.

## DIAGNOSIS

Because of the lack of visual symptoms, diagnosing the disease can be difficult to diagnosis in the primary care setting. Nick

*"In the past, patients with Wet AMD would almost inevitably go blind. Now, most patients with Wet AMD retain highly functional vision."*

Anderson, MD, a retina surgeon with Southeastern Retina Associates recommends that patients over the age of 65 should have an annual eye exam with their eye care provider to detect AMD and other conditions such as glaucoma and cataracts.

"Primary care providers should follow the guidelines set forth by the American Academy of Ophthalmology regarding the frequency of eye exams and referrals to eye care providers for patients of various ages and risk factors," Anderson said. "In short, most patients over the age of 65 should have a dilated eye exam every year."

When the pupils are dilated, a complete examination of the front and back of the eye is conducted, and if diagnosed, individuals with AMD may have several types of tests to assess the condition, including color photography of the macula to document drusen, pigment changes, and other characteristics of AMD.

Fluorescein angiography is another common diagnostic test that can aid in determining the extent of macular degeneration and helps distinguish between the dry and wet forms of the condition. By injecting sodium fluorescein dye into a peripheral vein, choroidal neovascularization in the macula can be visualized as a leaking blood vessel complex under the retina.

Optical Coherence Tomography (OCT) a non-invasive, imaging technique that uses low energy laser to scan the macula and determine whether there is fluid in the macula, potentially signifying Wet AMD. Commonly used as an adjunct to fluorescein angiography to help diagnose Wet AMD, it can also be used to assess the response to treatment for Wet AMD.

## TREATMENT

Treatment for AMD varies according to type. Currently, there are no FDA-approved treatments for Dry AMD, but as Anderson pointed out, many patients with Dry AMD should take a vitamin

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## In the News...

*Spotlight on Joseph Gunn, M.D.*

For those who know him, Dr. Joseph M. Gunn's tendency to bleed orange would come as no surprise. Originally from Memphis, TN, Gunn, who practices with Southeastern Retina Associates, received a good portion of his education on each of the University of Tennessee campuses. Gunn knew from a very early age that he wanted to study medicine, but it wasn't until college that he decided it was people that he wanted to take care of instead of animals.

"I still love animals, and tease about going back to school to be a veterinary ophthalmologist, but I guess I'm a little old for that now," Gunn laughed. "I feel lucky that I knew early on what I wanted to do, and pretty much knew how I needed to get there. I was fortunate to figure that out early on."

After double majoring in biology and zoology at the UT-Knoxville campus, Gunn headed back home to west Tennessee for medical school at the University of Tennessee Center for the Health Sciences in Memphis. After graduating in 1985, he came right back to the other end of the state for his ophthalmology residency at the UT-Chattanooga campus.

His interest in ophthalmology was also something he developed early on, namely out of personal experience. "I started wearing glasses when I was 15, after I didn't get to take the written test for my driver's permit because I failed

the vision test," he recalled. "A moment that really stands out to me is the day I got my glasses, and I was driving up our street with my mom. We passed a huge oak tree, and I said to her, 'Wow, I can see the leaves on that tree now.' I thought my mom was going to start crying," he recalled.

His fellowship training in retina and vitreous was completed in Chicago at the Illinois Eye and Ear Infirmary, after which he went to Florida to practice and then to Charlotte, N.C., for seven years.

Gunn started working in the Tri Cities in January 1997, when he joined Southeastern Retina Associates.

A quick look at Gunn's CV reveals his keen interest in academic work and clinical research, and he said his group has been very fortunate to be included in their speciality's major clinical trials. "We were one of the centers nationally included in the Submacular Surgery Trials and that really helped us be included in the other clinical trials," he said. "These studies help keep us on the cutting edge of things."

Although Gunn sees patients for retinal detachment and other retinal macular diseases, one area of interest for Gunn is diabetes, primarily because of the large number of patients he sees with diabetes and macular degeneration. "So many people in this area are affected by diabetes," said Gunn. "Some of the medicines that we

are using treat both conditions. We might use slightly different doses or a slightly different timing regime, but some of the medicines used to treat diabetes were spun off of medicines used to treat macular degeneration.

"We are getting better results now, but not because we are doing a better job—we've always done the best job we can—but the visual results for our patients have gotten better as our treatments have gotten better," he shared. "It's really nice to be able to either stabilize a patient's vision or make it better. Previously, the only way to treat patients with macular degeneration was to use the laser. We could treat the leaks, but the patient's vision didn't get better. We did the best we could at the time, but some of the treatments we are developing are making us better at what we do."

As Gunn explained, diabetes in general is a chronic disease and very frustrating for patients

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## In the News...

*Spotlight on John C. Hoskins, M.D.*

After a conversation with retina surgeon John C. Hoskins, MD, “community-centered” might top the list of his many attributes. Hoskins, who founded Southeastern Retina Associates (SERA) in 1980, grew up in Knoxville and returned home after finishing his education so that he could give back to the patients of East Tennessee.

“I really want to emphasize how great it is to practice medicine here in East Tennessee,” Hoskins shared. “I watched my dad practice here in Knoxville and East Tennessee. I could see how gratifying it was for him, so it was easy for me to see myself doing that.”

Hoskins, who received an undergraduate degree in English from Vanderbilt University in 1966, went on to receive his medical degree from the University of Tennessee, Memphis, and completed his ophthalmology residency at Brooke Army Medical Center in San Antonio, Texas. Hoskins’ father, an ophthalmologist, was a role model for Hoskins’ career path. “Ophthalmology was a big part of my background. I really liked ophthalmology like my father did, so it just came naturally after that,” he said.

However, Hoskins saw that, at the time, ophthalmic subspecialties were growing and tremendously needed, so he decided to pursue a retina fellowship at the Massa-

chusetts Eye and Ear Infirmary, Harvard University, in Boston.

“There were not a lot of programs at the time, so I was fortunate to get to do that,” he said. “I could see that the retina was going to be an important field of study, as age-related macular degeneration in older people was more commonplace, as well as the growth of diabetic problems. No

*“East Tennessee is a great place to practice, and we are able to do something here that the people would really benefit from, and they are really grateful for what we do.”*

one in Knoxville was doing it, so I was very fortunate to bring my training back to East Tennessee.”

As the first retina surgeon in East Tennessee, Hoskins has helped grow SERA into what it is today. Currently, fourteen providers see patients in Knoxville, Chattanooga, and the Tri Cities, and as Hoskins pointed out, all of them are as grateful as he is to be practicing in East Tennessee.

“East Tennessee is a great place to practice, and we are able to do something here that the people would really benefit from, and they are really grateful for what we do,” he said. “Five of our physicians grew up in Knoxville and all of them came back here because it’s a



great place to live. We are a pretty unique practice in that regard. Four of them even attended Bearden High School, imagine that.”

“We really have been fortunate all the way down the line. We have great partners and great patients who appreciate what we do,” he continued.

An important part of his practice, Hoskins shared, is the group’s involvement in clinical trials, including historically significant subretinal surgery trials (e.g. CATT, AREDS, DRCR).

“Our practice as a whole has been involved in a number of trials sponsored by the National Eye Institute, such as for diabetic retinopathy and macular degeneration. Trials have always been a significant focal point of our practice,” he said. “We like to be tied into academic centers and remain at the forefront of things, and that is certainly one way of doing that.

“Participation is very beneficial to our patients, as well. They can receive cutting edge therapies through trials that may not be available for a few years,” he pointed out.

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# ForeseeHome™

## Significantly Improving Patient Care

An exciting opportunity for Southeastern Retina patients with Dry AMD is the ForeSeeHome™ monitoring device, on which The National Eye Institute (NEI) recently completed a study.

"This study was actually stopped early because patients using the ForeseeHome device showed significantly better results than those patients not using the device," said Keith Shuler, MD. "I have only seen the NEI halt a study early a handful of times in my career due to positive results."

The ForeseeHome AMD Monitoring Program is a prescription-based, comprehensive telemoni-

toring and data management system that extends the management of AMD to patients' homes between office visits. The test results are transmitted to a central monitoring center that will alert physicians to immediate, significant visual field changes in their patients, so that patients can be recalled for timely follow-up, and necessary treatment may be initiated.

The ForeseeHome AMD Monitoring Program utilizes a simple to use device based on preferential hyperacuity perimetry, a form of visual-field testing, to identify minute visual distortions, or metamorphopsia, for the detection of early CNV development.



*The patient above is pictured using the ForeseeHome™ device, which allows her physician to monitor her Dry AMD from home, extending the time between office visits.*

### In the News...

## Spotlight on John C. Hoskins, M.D.

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Many of these trials have led to great advances in the specialty, some of the most significant advancements in pharmacologic treatments.

"For patients with what we call 'wet' age-related macular degeneration [AMD], the only treatment in years past was to seal off the bleeding with a laser, and we didn't have very good outcomes with these patients. They would often get to where they couldn't read or drive, and AMD can significantly change their lifestyle," he explained. "Now we have anti-

VEGF drugs, such as Lucentis and Avastin that we use a lot. When patients come in with bleeding in the back of the eye, we can treat them with intravitreal injections. They receive the injections every month for varied periods of time depending on the eye's response, but so many people can keep reading and driving, but in the early part of my career, we couldn't do that. It's pretty standard treatment we do in the office, and it's a hugely significant advancement."

For Hoskins, community is more than the patient population; it

includes his healthcare colleagues as well. Hoskins has been influential in bringing ophthalmologists and optometrists together in the community to provide top-quality eye care to East Tennesseans.

"SERA has tried to play a part in bringing the community of ophthalmologists and optometrists together to better serve our region," he said. "With the new healthcare laws, we feel it is even more important to work together."

At home, Hoskins, who is married and has three grown children, is an avid golfer and University of Tennessee football fan.

Provided courtesy of *East Tennessee Medical News*.

## In the News...

# Southeastern Retina Recognized Nationally for Clinical Excellence

**S**outheastern Retina Associates recently received a prestigious industry award for its contributions to advancing medical research of diabetes-induced retinal disorders. Southeastern Retina Associates was awarded the **Top Site for 2013 Award** by the Diabetic Retinopathy Clinical Research (DRCR) Network for demonstrating outstanding performance in the DRCR Network.

"We are honored to be acknowledged at this level for our clinical excellence," said Dr. Joseph M. Googe, Jr. of Southeastern Retina Associates. "Our entire staff has always been committed to providing the finest care possible and offering our patients the newest and best treatments of vision-threatening diseases."

The DRCR is a collaborative network funded by the National Eye Institute (NIH) and is dedi-

cated to clinical research of diabetic retinopathy, diabetic macular edema and associated conditions. The DRCR includes over 113 participating sites (offices) with over 320 physicians throughout the United States.

"If you are diabetic and have vision issues, as a patient of Southeastern Retina Associates, you can be assured you have the most experienced medical team in the region working to preserve your eyesight," said Googe. "We have been leading clinical trials for more than 15 years and continue to advance leading edge research to stay abreast of the latest refinements in surgical technique and scientific discovery for our patients."

For patients who would like more information on enrolling in a clinical trial, please contact one of the Southeastern Retina Associates



*Dr. Joseph M. Googe, Jr. and Kristina Oliver accepting the DRCR Top Site for 2013 award*

clinical trials coordinators:

### CHATTANOOGA

Steve McBee, (423) 756-1002

### KNOXVILLE

Kristina Oliver, Lisa Lovelady  
(865) 588-0811

### TRI CITIES

Deanna Long (423) 578-4364

## In the News...

# Spotlight on Joseph Gunn, M.D.

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because it changes everything that they do, especially for those with type 1 who have had it from a very young age.

"Denial is probably a big factor in younger patients," Gunn said. "But with the better treatments available, there is a good chance they can completely avoid developing retinopathy."

A good illustration Gunn shared was the outcomes of a brother and sister seen in clinic who both had type 1 diabetes. The brother completely neglected his disease and hadn't seen an eye doctor until he was 18. Even though the clinic was aggressive in taking care of him, he went downhill quickly, and by the time he was 20, he was completely blind in both eyes.

His younger sister, on the other hand, learned from her brother's example, kept her A1C under control, and had no retinopathy.

"Over time, the longer you live with it, the higher the chances of developing leakage in the center of the retina. If patients can control their sugars, they do a lot better over time," Gunn explained. "In the past, most diabetic patients didn't live long enough to develop retina problems, but the retina specialty has really taken off

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## Improving Patient Outcomes for Age-related Macular Degeneration

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supplement consistent with the findings of the Age-Related Eye Disease Study (AREDS), a study managed by the National Eye Institute, a division of the National Institutes of Health. Southeastern Retina Associates was one of the major centers that participated in the study.

"AREDS demonstrated that many patients with Dry AMD can reduce their risk of developing Advanced AMD by about 25%," Anderson said. "Patients cannot achieve the recommended level of vitamins through diet alone or by taking a multivitamin."

Patients with Wet AMD should be under the care of a retina surgeon, and current treatment options include medications such as Eylea, Lucentis, or Avastin, as well as laser.

"These new medications have revolutionized the care of patients with Wet AMD," said Anderson. "In the past, patients with Wet AMD would almost inevitably go blind. Now, most patients with Wet AMD retain highly functional vision."

As one of the largest retina practices in the country, Southeastern Retina Associates is very active in clinical trials programs. "Our patients have access to cutting-edge treatments that aren't available anywhere else in the country," Anderson enthused. "We historically haven't had any treatment options for Dry AMD, but

Southeastern Retina has almost completed recruiting for one clinical trial for patients with Dry AMD and will be starting another clinical trial for Dry AMD in the near future."

Several trials for patients with Wet AMD are on the horizon, with hopes that these new treatments will improve the care of patients with Wet AMD.

## DeCroos Joins Southeastern Retina

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a neurologist, both practice in the Chattanooga area. "We love Chattanooga," he enthused. "We are located in the middle of the mountain, and we both enjoy hiking and cycling on the bike trails. We really enjoy the pace here."

## In the News...

### Spotlight on Joseph Gunn, M.D.

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because of greater demand as a result of the better treatments for blood sugar control. I tell my patients to be aggressive with managing their sugars, and they won't have to come see me quite as often."

Gunn and three other providers see patients in Kingsport, Bristol, Johnson City, and Abingdon, covering the Tri Cities region for Southeastern Retina Associates, with offices also located throughout East Tennessee and Northern Georgia.

Gunn and his wife Julie have been active community members. Julie owns a business and is past president of Junior League in Kingsport. She also has been on the YMCA board and the Second Harvest Food Bank board. Gunn serves on the board of directors for two local surgery centers and Indian Path Hospital. A 2012 graduate of Dobyns-Bennett High School, their son Conner played baseball there and is now a junior at Amherst College, where he also plays baseball.

Provided courtesy of *East Tennessee Medical News*.

### Joseph M. Gunn, M.D.

#### MEDICAL SCHOOL

*University of Tennessee  
College of Medicine*

#### FELLOWSHIP

*Illinois Eye and Ear  
Infirmary, Univ of  
Illinois at Chicago*

#### RESIDENCY

*University of Tennessee*

#### BOARD CERTIFICATION

*American Board of  
Ophthalmology*



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Diabetic Eye Disease
- ◆ Diabetic Retinopathy
- ◆ Retinal Vein and Artery  
Occlusion
- ◆ Flashes and Floaters

