The 40th Asia-Pacific Academy of Ophthalmology Congress

2025 APAO

In Conjunction with
The 83rd Annual Conference of the All India Ophthalmological Society

ASIA-PACIFIC ACADEMY OF OPHTHALMOLOGY ®

LDP
APAO Leadership Development Program

APAO LEADERSHIP DEVELOPMENT PROGRAM (LDP)

Class XIII (2024-25)
April 5, 2025
New Delhi, India

ABSTRACT BOOK

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ACKNOWLEDGEMENT

The 2025 APAO Leadership Development Program (LDP) Alumni Reception cum Graduation Ceremony is proudly sponsored by

Santen

LDP Class XIII (2024-25)

Program Outline

Orientation Class

The APAO Leadership Development Program Class 2024-25 attended the Orientation Class on February 22 and 23, 2024 at the 39th APAO Congress in Bali, Indonesia. The Orientation Class comprised of two introductory sessions on February 22, and two Insights Discovery Workshop sessions facilitated by Prof. Muhammad MOIN.

Master Class

The 3-day Master Class, proudly hosted by the Nepal Ophthalmic Society (NOS), took place from September 13 to 15, 2024, in Kathmandu, Nepal. It brought together 19 APAO participants and 10 local attendees, providing a unique blend of regional and international perspectives. The LDP faculty curated informative and highly interactive sessions, while the local hosts enhanced the experience with diverse networking opportunities, fostering connections within the ophthalmology community.

Graduating Class

The Graduating Class will take place on April 5, 2025, at the APAO Congress in New Delhi, India. Each participant will present their self-initiated LDP Project, showcasing their efforts and insights as a culmination of the program and a requirement for graduation.

LDP Class XIII (2024-25)

Our Graduates


Rachel CHONG
(Singapore)


Andi DEVI INDIRA
(Indonesia)


Christopher GO
(Australia)


Nazli GUL
(Pakistan)


Lom Orng KIRY
(Cambodia)


Pei-Kang LIU
(Chinese Taipei)


Yusuke MURAKAMI
(Japan)


Hong Kee NG
(Malaysia)


Hien NGUYEN
(Viet Nam)


Fitri OTHMAN
(Brunei)


Sagara PATHIRAGE
(Sri Lanka)


Vannakorn PRUKSAKORN
(Thailand)


Prasanna RAMESH
(India)


Raymond Nelson
REGALADO
(Philippines)


Ashraful Huq RIDOY
(Bangladesh)


Kendrick SHIH
(Hong Kong, China)


Arjun SHRESTHA
(Nepal)


Myawutyee SOE
(Myanmar)


Undarmaa TUMURBAATAR
(Mongolia)

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Name	**Rachel CHONG**
Country	**Singapore**
Project Title	**Flourishing Index Measures Among Ophthalmologists in the Asia-Pacific Region**
Mentor	**Prof. Muhammad MOIN**
Abstract	**Purpose:** 1. To evaluate measures of flourishing across practising ophthalmologists in the Asia-Pacific region 2. To identify gaps in wellbeing that may be addressed, in order to aid flourishing **Methods:** A cross-sectional survey was disseminated to practising ophthalmologists in the Asia-Pacific region between June and September 2024. The web-based questionnaire included 12 questions, covering the 6 domains of VanderWeele's Flourishing Measures. Participants also ranked their top negative factors influencing wellbeing, and desired positive interventions that promote flourishing. Demographic data collected included country of practice, involvement in non-clinical work, age, gender, and marital status including children. Countries were grouped based on geography and the United Nations Sustainable Development Group classification. Average flourishing index (FI) measures across all domains, as well as within individual domains were compared. Statistical analysis included unpaired t-test or ANOVA, where $p<0.05$ was deemed significant. **Results:** A total of 52 respondents from 14 countries participated in the survey. Asia-Pacific ophthalmologists who were married with children (FI 7.58±2.1) flourished more than those without children (FI 6.28±2.2; $p<0.0001$). Ophthalmologists who were married (FI 7.49±2.1) flourished more than those who were unmarried (FI 6.48±1.9; $p<0.0001$). Younger Asia-Pacific ophthalmologists between 20 and 50-years-old (FI 6.97±2.2) flourished less than older age groups above 50-years-old (FI 8.44±1.4; $p<0.0001$). The top negative factors influencing wellbeing were limited professional autonomy (59.6%), poor work-life integration (53.8%) and lack of a supportive work environment (50%). **Conclusion:** Advocating for policies that protect meaningful personal connections, more professional autonomy and a supportive work environment may enable better flourishing among Asia-Pacific ophthalmologists.

Name	**Andi DEVI INDIRA**
Country	**Indonesia**
Project Title	**Strengthening Glaucoma Case Finding: A Comprehensive Primary Care Training and Referral Program**
Mentor	**Prof. Muhammad MOIN**
Abstract	**Purpose:** To improve the skills of general practitioners (GP) for diagnosing and early detection of glaucoma to support the quality of referrals. To provide accurate data about outcomes and patient satisfaction. **Methods:** The training and workshop program will cover topics including glaucoma suspect or ocular hypertension, intraocular pressure (IOP) measured by I-care or non-contact tonometer (NCT), assessment of the anterior chamber, confrontation visual field, direct ophthalmoscope test, and hands-on examination by direct observation. The ophthalmologist team will evaluate the outcomes of the training program. GPs screen patients, write the report weekly and refer suspected patients to the hospital. All referred patient data are collected, including demographic and examination results from ophthalmologists. **Results:** A total of 32 participants, including GPs and nurses, were on training in a first health facility, launching a manual book for glaucoma detection. Collaborating with stakeholders in the memorandum of understanding for the procurement of NCT. Program challenges, such as lack of eye pressure detection tools, costs, and convenience, were identified. **Conclusion:** Glaucoma became widely recognized as a serious public health concern. Creative steps were taken to eliminate avoidable blindness from this group of diseases. Policy makers considered strengthening glaucoma case finding strategies when budgeting for eye health in Makassar. Collaboration with stakeholders is important for reaching health facilities in an area. Screening camps and vision centers are the most cost-effective strategies for encouraging individuals to undertake glaucoma cases, and enhance the knowledge, awareness, and abilities of the community in improving detection of glaucoma cases.

Name	**Christopher GO**
Country	**Australia**
Project Title	**Evaluation of the Health Economics and Patient Experience of Day 1 Post Vitrectomy Visits to Assist in the Implementation of a National Guideline**
Mentor	**Prof. Muhammad MOIN**
Abstract	**Purpose:** To investigate the health economics and patient experience of day 1 post vitreo-retinal (VR) surgery clinic visit and explore the feasibility of removing day-1 post operative review (D1POR). The results will be used to assist in the implementation of a national guideline. **Methods:** This is a prospective study comparing the economic cost and patient experience in the immediate 2-4 weeks post operative period in patients who had (control) versus those who had not (study) had D1POR. Patients' follow-up schedule was at the surgeon's discretion. Patient survey was used to explore the cost associated with D1POR including transport, carers, accommodation and unintended medical visits. **Results:** Data collection and analysis are ongoing. Preliminary results over 4 weeks included 57 patients. There were 17 patients in the study group and 40 patients in the control group. Overall, 33% preferred medical contact (phone call or clinic visit) for D1POR, but only 26% (n=5) in the study group and all would have been satisfied with phone call for reassurance. When asked about absolute cost, only 14 responded with a mean cost of £36. However, the true cost is significantly higher with transport cost and accompanying person's time often not considered. Final results will be available at the presentation. **Conclusion:** Preliminary results suggest there is a significant cost associated with attending in-person D1POR. Most patients were happy without any D1POR, and those who did were satisfied with phone calls only.

Name	**Nazli GUL**
Country	**Pakistan**
Project Title	**Enhancing Multidisciplinary Team Collaboration: Implementing a Retinopathy of Prematurity (ROP) Care Model in KPK, Pakistan**
Mentor	**Prof. Muhammad MOIN**
Abstract	**Purpose:** This project aimed to improve collaboration among multidisciplinary teams managing Retinopathy of Prematurity (ROP) in Khyber Pakhtunkhwa, Pakistan, by addressing communication barriers and enhancing clinical outcomes. **Methods:** The project, conducted from April to September 2024, had three phases. Phase 1 involved a literature review, which identified only three studies on multidisciplinary collaboration in ROP management in Pakistan. A survey was conducted that revealed key communication barriers: limited time for meeting (63.2%), communication hierarchy issues (42.1%), lack of unified data platforms (36.8%), interpersonal challenges (31.6%), and technical difficulties (15.8%). In Phase 2, a multidisciplinary team was created, with defined roles and real-time communication through a WhatsApp group. The team participated in three training sessions and several in-person meetings on ROP management. Phase 3 involved statistical analysis using SPSS-23. Descriptive statistics were used, and chi-square tests compared outcomes before and after intervention, focusing on outreach response, timely screening, timely intervention, and follow-up compliance. **Results:** Significant improvements were observed in outreach response (39.74% to 58.30%, $p < 0.001$) and timely screening in outreach groups (66.0% to 74.30%, $p < 0.001$). Slight improvements were seen in timely intervention (82.46% to 85.29%, $p = 0.283$) and follow-up compliance (90.5% to 96.8%, $p = 0.596$). **Conclusion:** A structured multidisciplinary approach significantly improved outreach response and timely screening in ROP management. Addressing communication barriers fostered collaboration and improved overall care delivery.

Name	**Lom Orng KIRY**
Country	**Cambodia**
Project Title	**The Performance of Public Vision Centers in Cambodia**
Mentor	**Dr. Linda TSAI**
Abstract	**Purpose:** The aims of this study are to capture and promote good practices of eye care service delivery to improve public utility, and to identify the barriers that prevent public utilization of primary eye care services from the supply side. **Methods:** Fieldwork was conducted between February 13 and 29, 2024. Semi-structured, face-to-face interviews were conducted at six referral hospitals/vision centers. **Results:** Barriers that prevent public utilization: • Shortage of staff, and limitations in their confidence level for delivering certain eye health services; • Equipment and medicine shortages which slow things down; • Patients' inability to afford the costs of glasses and transportation (it is not covered by insurance) which makes it difficult for some to visit vision centers; • Lack of public awareness of eye health in the community **Conclusion:** In this study, the barriers that prevent public utilization were related to the shortage of stuff and equipment. These findings suggest that partnering with (NRT) schools or organizations to train more staff, such as ophthalmic technicians or refractionists, looking into fundraising or grant opportunities to acquire new equipment, and establishing a regular maintenance schedule may be effective ways to improve the performance of public vision centers.

Name	**Pei-Kang LIU**
Country	**Chinese Taipei**
Project Title	**Overcoming Challenges in Cataract Surgery Training among Residents: An Asia-Pacific Survey**
Mentor	**Dr. Linda TSAI**
Abstract	**Purpose:** This project aims to investigate the cataract surgery training opportunities and challenges faced by ophthalmologists in Asia-Pacific countries. Due to differences in healthcare systems and cultural factors, the training conditions for ophthalmology residents in cataract surgery vary across countries. For example, in Taiwan, since patients can freely choose their surgeon, they often specify their preferred physician, which significantly reduces surgical opportunities for resident physicians. **Methods**: This study employs a cross-sectional design based on anonymous survey data. An online questionnaire was distributed via email to ophthalmologists from APAO member countries. **Results**: In Taiwan, ophthalmology residents often face significant challenges in gaining experience with cataract surgery due to the structure of the healthcare system and cultural factors. These challenges include the pressures from attending physicians who prioritize performing surgeries themselves, limiting residents' hands-on surgical opportunities. Although electronic simulation systems are available for practice, the high cost of such equipment makes it prohibitive for most training institutions to acquire. Consequently, artificial eyes or porcine eyes are commonly used for simulated surgery in Taiwan, though these alternatives lack sufficient realism for optimal training. **Conclusion**: By understanding and comparing the differences in cataract surgery training across countries, we hope to identify strategies for improvement and draw on successful models from other countries to enhance and standardize competency-based cataract surgery training programs in Taiwan. This study aims to serve as a valuable reference for ophthalmology resident training in Taiwan, fostering future cataract surgery training programs for young ophthalmologists.

Name	**Yusuke MURAKAMI**
Country	**Japan**
Project Title	**Development of an International Registry of Bietti Crystalline Dystrophy Toward Future Clinical Trials**
Mentor	**Dr. Linda TSAI**
Abstract	**Purpose:** Bietti crystalline dystrophy (BCD) is an ultra-rare disease caused by biallelic mutations in the *CYP4V2* gene. Due to founder mutations, BCD is more prevalent in East and South Asian countries. This study aims to raise awareness of BCD and gather natural history data for future clinical trials. **Methods:** An international, multi-center collaboration was initiated to study BCD and other inherited retinal diseases (IRDs). In a pilot study, 15 BCD patients from 5 institutes in Japan were followed prospectively for two years. Additionally, a *Cyp4v3*-deficient mouse model (the murine homolog of *CYP4V2*) was developed to test the efficacy of *CYP4V2* gene therapy. **Results:** In addition to collaborations with institutions in Japan and South Korea, the study was expanded to include Taiwan, Indonesia, and Nepal. In the pilot cohort of 15 BCD patients, the median age was 65 years (range: 44-76), with median BCVA of 0.31 LogMAR and ellipsoid zone (EZ) length of 0.26 mm. Annual decline were 0.11 LogMAR (14.9%/year) and 0.09 mm in EZ length (-16.4%/year). In *Cyp4v3*$^{-/-}$ mice, degeneration of retinal pigment epitheliums and altered lipid profiles were observed, and the effects of CYP4V2 gene transfer were evaluated. **Conclusion:** Based on findings from the pilot study, we are establishing an international registry of BCD. Combined with advances in translational research, this data will enhance patient care and accelerate therapeutic development for BCD and other IRDs in the Asia-Pacific region.

Name	**Hong Kee NG**
Country	**Malaysia**
Project Title	**Establishing Steroid-Induced Glaucoma Registry (SIGR) as a Catalyst in Enhancing National Eye Database (NED) Towards Improvement of Big Data on Ophthalmic Diseases in Malaysia**
Mentor	**Dr. Sherman VALERO**
Abstract	**Purpose:** Firstly, to identify the barriers in establishing SIGR into NED and possible solutions in overcoming it. The second phase is to create and integrate SIGR into existing NED with participation from outside of Ministry of Health (MOH) of at least 25%. Subsequently, to study the incidence and possible association of SIG in Malaysia. Finally, to expand the SIGR model to other subspecialty diseases towards improvement of big data on ophthalmic diseases in Malaysia. **Methods:** An analysis on the first phase of the project using SWOT analysis model to determine the barriers and solutions in establishing SIGR into NED. **Results:** The barriers include issues pertaining to governance, data's confidentiality, ownership and usage rights. Funding for the design, start up and maintenance of SIGR is also a challenge. A sub-optimal collaborative mindset between different stakeholders could prevent this effort. The possible solutions are identifying, engaging and advocating the importance of this project to the stakeholders and possible decision makers. Discussion with the technical team handling the SIGR for value-for-money packages and identify potential source of funding to make it sustainable. Lastly, advocating to all ophthalmology members about the importance of this project to future generations in terms of data for policy making, public health advocacy, training and research opportunity. **Conclusion:** The barriers to establishing the SIGR include governance, data-related concerns, funding and collaborative mindset which could be potentially solved by advocacy to the stakeholders, source for funding and information to the ophthalmology fraternity about the importance of this collaborative project.

Name	**Hien NGUYEN**
Country	**Viet Nam**
Project Title	**Establishment of the Vietnam Society of Ophthalmic Plastic and Reconstructive Surgery (VSOPRS)**
Mentor	**Dr. Shaheeda MOHAMED**
Abstract	**Purpose:** To gather a group of ophthalmologists with the same passion for ophthalmic plastic and reconstructive to carry out scientific activities, exchange experiences, improve expertise, train and integrate internationally. **Methods:** We divide the process of implementing the project into 5 steps. Step 1: Take a survey of participants' needs. Step 2: the planning phase. Step 3: Prepare the dossier for the establishment of the association. Step 4: Send the dossier to the competent authorities. Step 5: Conduct a preparatory meeting and prepare for the congress. **Results:** We have completed the first 4 steps. In step 1 and step 2, we conducted a survey and found the need to establish an association of ophthalmologists nationwide. The operating regulations and policies were completed and approved. Steps 3 and 4: The dossier, operating regulations and list of the campaign committee have been completed and submitted to the Ministry of Health. Step 5: After receiving the written approval from the Ministry of Health to establish the VSOPRS Association, we will proceed to plan the congress and implement the contents in the previous document. **Conclusion:** The establishment of the VSOPRS association is urgent for ophthalmologists of each country to improve knowledge and integrate internationally.

Name	**Fitri OTHMAN**
Country	**Brunei**
Project Title	**To Enhance the Surgical Skills Training Among Ophthalmology Residents in Brunei**
Mentor	**Dr. Vivek DAVE**
Abstract	**Purpose:** This project aimed to elevate the quality of microsurgical training for ophthalmology residents at Brunei Eye Centre. The primary objectives were to assess resident satisfaction and training opportunities, identify barriers limiting surgical experience, and enhance the training program structure. **Methods:** A cohort study design was adopted, involving a survey to measure residents' monthly operating theater (OT) exposure, hands-on surgical opportunities, confidence levels, satisfaction with the current program, and factors hindering training. Based on initial feedback, targeted interventions were introduced, including dedicated theory sessions, wet lab practices, protected OT time for training, and structured post-surgical debriefings. A follow-up survey was conducted post-intervention to evaluate improvements. **Results:** Following these interventions, 100% of residents reported heightened confidence in OT sessions, and feedback from trainers underscored the positive impact on trainee performance. **Conclusion:** This initiative successfully established a more structured, supportive microsurgical training program that enhanced resident confidence and skill. The insights gained emphasize the need for ongoing support and structured opportunities in surgical training to optimize learning outcomes for future ophthalmologists.

Name	**Sagara PATHIRAGE**
Country	**Sri Lanka**
Project Title	**Restructuring Screening Process of School Children for Refractive Errors**
Mentor	**Dr. Vivek DAVE**
Abstract	**Purpose:** Currently, vision screening of school children is conducted at ages 5, 9, 12, and 15 years by public health inspectors. Due to the large time gaps in between, progressive refractive errors such as progressive myopia and keratoconus are diagnosed at a significantly advanced stage. This project aims to annually screen the vision of school children through teachers and refer those identified to the nearest eye clinic for further management. **Methods:** Teachers and students were educated on the importance of annual visual assessment, and teachers were trained to assess vision using the Snellen chart. School teachers screened students for uncorrected vision and referred details to an eye clinic for further assessment. At the clinic, cycloplegic refraction and corneal topography were performed, followed by spectacle prescription. Follow-ups were scheduled every six months to monitor progression. **Results:** First, 436 teachers from 10 schools were trained to test visual acuity. Then, a total of 8,257 students were tested by teachers, with 928 (11.2%) students found to have reduced vision. Among them, only 376 (4.5%) already used spectacles, and only 248 (3%) had regular follow-ups. Newly diagnosed cases, 552 (6.7%), and cases with defaulted follow-ups, 128 (1.5%), were referred to the nearest eye clinic for further management. **Conclusion:** Undiagnosed reduced vision is common among school children. Class teachers are a valuable resource who can be trained to identify affected children early. Prompt diagnosis, spectacle provision, and regular follow-ups with further treatment are essential to maintaining children's visual health.

Name	**Vannakorn PRUKSAKORN**
Country	**Thailand**
Project Title	**Mental Health Promotion to Enhance the Efficient Work of Ophthalmology Residents**
Mentor	**Dr. Vivek DAVE**
Abstract	**Purpose:** Ophthalmology residency training is inherently challenging, as general practitioners transition to a more specialized field while adapting to new work environments and colleagues. This adjustment often induces stress, anxiety, and frustration, affecting not only first-year residents but also those in the second and third years. These emotional challenges can negatively impact both professional performance and personal relationships. The objective of this project is to explore the effectiveness of a mindset workshop in improving the well-being and efficiency of ophthalmology residents by assessing their levels of depression, anxiety, and stress before and after the intervention. **Methods:** The Depression Anxiety Stress Scale-21 (DASS-21) questionnaire was administered two weeks prior to a one-day mindset workshop to evaluate the emotional states of the residents. The workshop, led by mental coaches, focused on fostering a positive attitude and enhancing mental resilience. One-month post-workshop, the DASS-21 questionnaire will be administered again to assess changes in the residents' emotional states. **Results:** A total of 26 ophthalmology residents from a tertiary care center participated in the study. Prevalence rates of depression, anxiety, and stress before the workshop were 42.3%, 53.85%, and 42.31%, respectively. Pre- and post-intervention DASS-21 scores will be compared to determine the workshop's impact on reducing emotional distress and enhancing residents' overall well-being. Workshop satisfaction will be analyzed to gauge the perceived usefulness of the intervention. **Conclusion:** A mindset workshop may serve as an effective tool to improve residents' emotional well-being and promote a more enjoyable and efficient work environment.

Name	**Prasanna RAMESH**
Country	**India**
Project Title	**Incorporating the Novel 4D, Cost-Effective, Self-Built & Portable Holographic MIGS Training Module in Dry Labs / Unlocking Next-Level Surgical Precision**
Mentor	**Dr. Sherman VALERO**
Abstract	**Purpose:** This study aimed to evaluate the effectiveness of Eye MG Holo, a surgical simulation training tool, in enhancing skills for Minimally Invasive Glaucoma Surgery (MIGS) and to identify opportunities for future improvements. **Methods:** This prospective dry-lab interventional study used the HoloLens 2 device installed with Eye MG Holo software for simulated iStent Inject W placement training. Data were collected from two resident groups: one trained priorly with the simulation system and one without. Quantitative assessment was conducted using a Likert scale questionnaire, while qualitative feedback was gathered through focus groups. **Results:** A total of 60 residents split into 2 groups participated in the study. A statistical power of 90% with 95% confidence interval ($p < 0.05$) was fixed for statistical analysis. The mean age was 31.43 ± 0.54. The male to female ratio was 23:37. Result from the group without prior experience showed an overall positive response of 77.8%, while the simulator-trained group achieved a positive response of 84.3%. Feedback revealed that the most common criticism was related to the simulator's tactile sensation. However, 91% of participants indicated that they would recommend the simulator for training purposes ($p < 0.05$). Suggestions for improvement mainly included enhancing the tactile feedback system. **Conclusion:** Eye MG Holo demonstrated significant effectiveness as a training tool for MIGS, showing a strong positive impact on the skill levels of participants. While the feedback highlighted some areas for improvement such as the need for better tactile experience, it still has an excellent endorsement rate.

Name	**Raymond Nelson REGALADO**
Country	**Philippines**
Project Title	**The Philippine Ophthalmology Residency Training (P.O.R.T.) Project: Website for Training Programs and Applicant Matching**
Mentor	**Prof. Madhuwanthi DISSANAYAKE**
Abstract	**Purpose:** 1. To enhance awareness of the training institutions in the country; 2. To increase the number of applicants in the training institutions; and 3. To help applicants get into their ideal programs. **Methods:** 1. Gathering information A form has been sent to the chairs of the training institutions. Data regarding department name, location, contact details, and number diversity of cases, consultants, and services were collected. A general description of their training program was asked for. 2. Website creation Data will be gathered and uploaded onto a website. A quiz will be created for applicants to rate what they look for in a program, and the quiz will generate suggestions. 3. Pilot testing for next year's applicants Pilot testing will begin once application for programs commences. 4. Post-implementation survey A survey will be conducted with all applicants who used the website and matching system to find out how many followed the suggestion, and how well their training is going. **Results:** A letter was sent to all chairs of the training institutions; 35 institutions were invited to participate. A meeting with a website developer is underway. Target date for website launch is by year end. **Conclusion:** A consolidated online resource is timely to provide applicants with more options to undergo training. A matching system will also be helpful.

Name	**Ashraful Huq RIDOY**
Country	**Bangladesh**
Project Title	**Empowering the Future: Facilitating First Private Practice for Young Ophthalmologists Through Group Practice in Bangladesh**
Mentor	**Prof. Madhuwanthi DISSANAYAKE**
Abstract	**Purpose:** To form a Young Ophthalmologists group, who will establish a private hospital at Dhaka, Bangladesh for group practice by themselves and grow their career through professional services. **Methods:** A group of 30 ophthalmologists who have just finished post-graduation or fellowship (all are between 35 and 45 years old) initiated their first full-time private practice by setting up a subspecialty-based eye hospital with their own investment. To start a private eye hospital with all subspeciality services, they need a minimum investment of around 6 crore BDT. After investment and establishment of the hospital, all shareholders shall work together for the best possible patient services, hospital management and practice development. **Results:** We will analyze 12 months' data from April 2024 to March 2025. Data taken for share distribution, subspecialty services, patient & surgery flow, financial revenue and disbursements. We will also analyze patient service, reliability and increase in patient flow to the hospital. **Conclusion:** The overall performance of this private hospital will enlighten the potentiality of the Young Ophthalmologists, as this is run only by YO, without any senior reputed ophthalmologist involved.

Name	**Kendrick SHIH**
Country	**Hong Kong, China**
Project Title	**Use of Artificial Intelligence in Enhancing Triage of Patients Presenting With Chronic Visual Impairment to the Hong Kong Public Ophthalmological Service**
Mentor	**Prof. Madhuwanthi DISSANAYAKE**
Abstract	**Purpose:** The Fundus-Triage AI project aims to automate the triage process in public ophthalmic specialist outpatient clinics in Hong Kong under the Hospital Authority using deep learning techniques applied to a single standard macula-centric fundus photo, focusing on the development and evaluation of a deep learning system for classifying fundus images into triage categories. **Methods:** A dataset was utilized, comprising 5,725 fundus images from 3,057 Chinese patients, aged 50 and above, from a cross-sectional random population-based study. The subjects underwent comprehensive eye assessment by an ophthalmologist, including presenting visual acuity (PVA), best-corrected visual acuity (BCVA), automatic and subjective refraction, IOP, slit-lamp examination of the anterior segment, and funduscopic examination of the posterior segment. Fundus photography was performed using the iCare Eidon Retina Camera. The images were categorized into three classes: 'No referral needed', 'Routine', 'Early', based on face-to-face assessment by the ophthalmologist. A ResNet-18 convolutional neural network, pretrained and fine-tuned via transfer learning, was employed for classification. The dataset was split into training (3,959 images), validation (1,194 images), and testing (572 images) sets. To address class imbalance, weighted sampling and transfer learning strategies were applied. **Results:** The model demonstrated an overall accuracy of 76.5% on the validation set, with class-specific accuracies varying significantly: 'No referral needed' (82.5%), 'Early' (17.8%), and 'Routine' (43.5%). The results indicate a strong bias towards the 'No referral needed' class. **Conclusion:** Machine learning may be able to accurately assist in triage using fundus photos alone.

Name	**Arjun SHRESTHA**
Country	**Nepal**
Project Title	**Introducing Phacoemulsification in Competency-Based Residency Training in Nepal**
Mentor	**Prof. Muhammad MOIN**
Abstract	**Purpose:** None of the postgraduate ophthalmology curricula has included cataract surgery training with phacoemulsification technology in Nepal. This project aims to make resident doctors of our ophthalmology program competent in phacoemulsification technology before the end of the residency training. **Methods:** We submitted the self-appraisal form to the Medical Education Commission (MEC), the highest regulating authority for medical education in Nepal to run the National Board of Medical Specialty (NBMS)- Ophthalmology Program. Sessions of meetings and curriculum development projects were held several times for competency-based residency training. Key stakeholders, such as the curriculum experts, program coordinators of different medical specialties and subspecialties, directors, heads of faculty, and representatives from MEC were involved in drafting the concept of competency-based medical specialty training. **Results:** The Competency-Based Curriculum for NBMS- Ophthalmology was prepared and submitted to the MEC. We included phacoemulsification as a mandatory part of competency-based residency training and the MEC approved this proposal. A draft of the training syllabus for phacoemulsification was prepared. The Electronic Logbook and the Ophthalmology Surgical Competency Assessment Rubric (OSCAR) designed by the International Council of Ophthalmology (ICO) were introduced as assessment tools. We established a dry lab and a wet lab for phacoemulsification training. Competent human resources and infrastructure for the teaching program are already in hand. **Conclusion:** Now, we are training residents in the step-by-step structured modules in phacoemulsification. Hopefully, this initiative will be a pioneering model to replicate in all the training institutes in Nepal in the future.

Name	**Myawutyee SOE**
Country	**Myanmar**
Project Title	**Implementation of Artificial Intelligence-Assisted Diabetic Retinopathy Screening in Suburban Area of Yangon, Myanmar**
Mentor	**Dr. Shaheeda MOHAMAD**
Abstract	**Purpose:** Diabetic retinopathy (DR) causes irreversible blindness, which is preventable by early detection and timely treatment. Manpower and access to screening are challenging in suburban and rural areas. This study aims to validate the acceptability of diabetic screening assisted by artificial intelligence (AI) versus standard care with slit lamp examination. **Methods:** A cross-sectional, two-arm comparative cohort study to compare AI-assisted DR screening to standard care. DR screening in diabetes patients was conducted with Singapore Eye Lesion Analyzer (SELENA+) with a portable fundus camera. Each patient received two-field fundus photography, automatically analyzed by AI and standard of care with a fundus examination by an ophthalmologist. Questionnaires were administered to test the acceptability of AI-DR screening by ophthalmologists and patients. **Results:** A total of 414 eyes of 207 patients (mean age 60.13 (SD=9.39), male 20.3% and female 79.7%) were screened. AI-DR screening versus standard care had a sensitivity of 85% and a specificity of 100% with high agreement (kappa value 0.915 ($p<0.001$)). Comparing AI-DR screening versus standard of care (350 versus 362 had no DR/mild DR, 3 versus 2 had proliferative DR), both classified 6 patients as moderate NPDR, 2 patients for severe PDR and advanced PDR, but AI-screening had more ungradable eyes versus standard of care (52 (12.6%) versus 39 (100%)). Questionnaires showed 98.6% of patients found AI-DR screening acceptable. **Conclusion:** AI-assisted DR screening is a valid method of DR screening in suburban Myanmar populations with high acceptability rates, which can improve access and coverage of DR screening services.

Name	**Undarmaa TUMURBAATAR**
Country	**Mongolia**
Project Title	**Establishing Eye Bank in Mongolia**
Mentor	**Dr. Shaheeda MOHAMED**
Abstract	**Purpose:** Eye care in Mongolia is expanding, but corneal care remains severely underdeveloped. Corneal disorders rank fifth among eye diseases and are a leading cause of vision loss, with no surgical procedures available in tertiary-level hospitals in Mongolia. The purpose of this project is to enhance the quality and accessibility of diagnosis, treatment, and surgical care for corneal disorders by training specialists and supplying necessary diagnostic equipment in Mongolia. **Methods:** The First Central Hospital of Mongolia (FCHM) will manage project operations, coordinating with relevant organizations. FCHM will establish an eye bank for corneal transplantation, support project team salaries, and provide necessary supplies and training facilities. The Ramayamma International Eye Bank (RIEB) eye bank of the Indian LV Prasad Eye Institute will offer nonmonetary support through training programs for eye technicians, microbiologists, and corneal specialists. **Results:** FCHM's ophthalmology department has partnered with the Ministry of Health and the Health Development Center. A national cornea transplantation team has developed standards for eye banking in Mongolia, and an eye bank facility has been established in FCHM. **Conclusion:** Eye doctors and residents from 21 provinces, 9 districts, and tertiary hospitals in Ulaanbaatar will receive training. Standardized screening, diagnostic, and treatment tools will be provided for patients with corneal conditions. An eye bank and necessary supplies for corneal transplantation will be established in public hospitals across Mongolia.