



2026 香港 HONG KONG



**LDP**  
APAO  
Leadership  
Development  
Program

# APAO LEADERSHIP DEVELOPMENT PROGRAM (LDP)

Class XIV (2025–2026)

February 7, 2026

Hong Kong, China

# ABSTRACT BOOK

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# LDP Class XIV (2025–26)

## Program Outline

### Orientation Class

The APAO Leadership Development Program (LDP) Class of 2025–26 attended their Orientation Class on April 3–4, 2025, during the 40th APAO Congress in New Delhi, India. The program began with an introductory session, followed by a dynamic Speed Mentoring session led by Dr. Helena Prior FILIPE, and concluded with an engaging half-day Insights Discovery Workshop facilitated by Ms. Ronjana KALYANPUR.

### Master Class

The 3-day Master Class, proudly hosted by the Ophthalmological Society of Chinese Taipei, was held from August 22 to 24, 2025, in Taipei City. The event brought together 19 APAO participants, 10 local attendees, and 4 observers, creating a dynamic and collaborative learning environment. The thoughtfully curated curriculum featured informative talks, interactive workshops, team-building exercises, and engaging gamification activities. The local host also provided a variety of networking opportunities, fostering meaningful professional connections and enriching cultural exchange within the ophthalmology community.



### Graduating Class

The Graduating Class will take place on February 7, 2026, at the APAO Congress in Hong Kong, China. 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 XIV (2025–26)

## Our Graduates



Mohamed AZZAM  
(Maldives)



Othamliza BINTI  
OTHMAN  
(Malaysia)



Poemen CHAN  
(Hong Kong, China)



Akiko HANYUDA  
(Japan)



Nur Nadiah HJ  
JELUDIN (Brunei)



Mahesh JAYAWEERA  
GAMAGE  
(Sri Lanka)



Chansathya KHIEU  
(Cambodia)



Tejsu Singh MALLA  
(Nepal)



Diva MISRA  
(India)



Kaushik MURALI  
(India)



Victor Ephraime  
PAULINO  
(Philippines)



Panida POTITA  
(Thailand)



Ho-Seok SA  
(Korea, Republic of)



Faria Tilat TIMA  
(Bangladesh)



Que Anh VU  
(Viet Nam)



ZhuLi YAP  
(Singapore)



Bayartsetseg  
ZAANKHUU  
(Mongolia)



Moh. Nurdin ZUHRI  
(Indonesia)

## LDP ABSTRACTS

#	Participant Name	Country/Territory	LDP Project Title
1	Mohamed AZZAM	Maldives	Establishing a National ROP Screening Network in Regional Hospitals of the Maldives
2	Othamliza BINTI OTHMAN	Malaysia	Beyond Technical Skill: Understanding Emotional Quotient in Phacoemulsification Training Among Malaysian Ophthalmology Trainees
3	Poemen CHAN	Hong Kong, China	Ophthalmology Education in Medical Students and Community Service: Flipped Classroom Development and Outside Classroom Practice in Community
4	Akiko HANYUDA	Japan	Development of a Sustainable Support Framework for Low Vision Care: A Pilot Study
5	Nur Nadiah HJ JELUDIN	Brunei	Development and Pilot Implementation of an Ocular Trauma Registry in Brunei Darussalam
6	Mahesh JAYAWEERA GAMAGE	Sri Lanka	Resource Efficiency in Eye Care: Improving Efficiency of State Sector Eye Care Services in Sri Lanka Through Maximum Utilization of Resources
7	Chansathya KHIEU	Cambodia	Impact of In-Country Glaucoma Fellowship Training in Cambodia
8	Tejsu Singh MALLA	Nepal	Establishment of Nepal Ophthalmic Society (NOS) Leadership Development Program
9	Diva MISRA	India	SIGHT (Sub-Specialty Inclusion for Grassroots eyeHealth Transformation) Project: Findings and Learnings
10	Kaushik MURALI	India	Creating a National Innovation Platform for Eye Care in India: Situational Analysis and Program Development
11	Victor Ephraime PAULINO	Philippines	Establishment of the Council of Ophthalmology Residents (CORE) – Philippines
12	Panida POTITA	Thailand	Strengthening Community Access to Oculoplastic Services Through Outreach in the Southern Part of Thailand
13	Ho-Seok SA	South Korea	Establishment and Development of the Young Asia-Pacific Society of Ophthalmic Plastic and Reconstructive Surgery (YAPSOPRS)
14	Faria Tilat TIMA	Bangladesh	Challenges to Increase the Efficiency of Young Ophthalmologists in Bangladesh
15	Que Anh VU	Vietnam	Improving Pediatric Eye Care in Rural Vietnam
16	ZhuLi YAP	Singapore	Shaping the Future of Ophthalmic Services: Evaluating a Complex Anterior Segment Service (CASS) Model for Nationwide Integration
17	Bayartsetseg ZAANKHUU	Mongolia	To Improve Surgical Skills of Rural Ophthalmologists
18	Moh. Nurdin ZUHRI	Indonesia	Lithera for Residents: Clinical Mastery in Your Hand



<b>Name</b>	<b>Mohamed AZZAM</b>
<b>Country/Territory/Region</b>	<b>Maldives</b>
<b>Project Title</b>	<b>Establishing a National ROP Screening Network in Regional Hospitals of the Maldives</b>
<b>Mentor</b>	<b>Prof. Muhammad MOIN</b>
<b>Abstract</b>	<p><b>Purpose:</b> To prevent avoidable childhood blindness by establishing sustainable Retinopathy of Prematurity (ROP) screening services in regional hospitals across the Maldives.</p> <p><b>Methods:</b> Phase 1 was implemented in one regional hospital and three hospitals within the Greater Malé Area, all equipped with NICU facilities. Local ophthalmologists received refresher training on updated ROP screening guidelines. Pediatricians and NICU nurses were trained on standardized ROP screening protocols. Essential screening equipment was procured. A centralized database was established, and ROP screening was integrated into the NICU discharge process. A structured referral pathway was developed with retina specialists in both government and private facilities to ensure timely intervention.</p> <p><b>Results:</b> Between August 2025 and January 2026, a total of 65 preterm infants were screened for ROP across four NICUs. Thirty-six infants had no evidence of ROP. Stage 1 ROP was detected in 10 infants, stage 2 in 9 infants, and stage 3 in 7 infants. No cases of stage 4 or stage 5 ROP were identified. Treatment included ROP laser therapy in 22 infants and intravitreal ranibizumab injections in 5 infants. None of the infants required vitrectomy.</p> <p><b>Conclusion:</b> Preliminary analysis demonstrates improved ROP detection and referral rates following implementation of Phase 1. With the support of the Ministry of Health and the Health Protection Agency, development and implementation of National ROP Guidelines are currently underway. Findings from the first phase provide a practical framework for scaling ROP screening services to additional regional NICUs, supporting long-term sustainability and reducing preventable childhood blindness in the Maldives.</p>





<b>Name</b>	<b>Othmaliza BINTI OTHMAN</b>
<b>Country/Territory/ Region</b>	<b>Malaysia</b>
<b>Project Title</b>	<b>Beyond Technical Skill: Understanding Emotional Quotient in Phacoemulsification Training among Malaysian Ophthalmology Trainees</b>
<b>Mentor</b>	<b>Dr. Sherman VALERO</b>
<b>Abstract</b>	<p><b>Purpose:</b> Phacoemulsification requires not only technical competence but also emotional intelligence (EQ), which influences communication, decision-making, teamwork, and stress regulation. Despite its relevance, EQ remains under-assessed in Malaysian ophthalmology training. This study explored trainees' perceptions of EQ and self-reported EQ-related behaviors in phacoemulsification training to inform the development of an EQ-specific assessment tool (EQ-OSCAR).</p> <p><b>Methods:</b> A cross-sectional mixed-methods study was conducted as part of a larger exploration of EQ in phacoemulsification. Ophthalmology trainees across multiple training years completed a structured questionnaire assessing attitudes toward EQ training and self-reported EQ behaviors using a 5-point Likert scale. Descriptive statistics were generated and aligned with the OSCAR framework domains, including self-awareness, decision-making under pressure, teamwork, and reflective practice.</p> <p><b>Results:</b> Eighty trainees participated (mean age 34.1 years). Trainees strongly agreed that EQ is essential in cataract surgery (mean 4.64) and influences team performance (mean 4.76) and teamwork (mean 4.78). Most believed EQ can be taught (mean 4.53) and should be integrated into cataract training curricula (mean 4.39). High self-reported EQ behaviors included emotional preparation before surgery, monitoring tone of voice, maintaining calm during unexpected events, and post-operative reflection. Lower scores were noted for confidence in managing unexpected complications and routine debriefing after difficult cases.</p> <p><b>Conclusion:</b> Trainees recognize the importance and teachability of EQ in phacoemulsification. Identified gaps highlight the need for structured EQ teaching and assessment, supporting the integration of EQ-OSCAR into training curricula.</p>



<b>Name</b>	<b>Poemen CHAN</b>
<b>Country/Territory/Region</b>	<b>Hong Kong, China</b>
<b>Project Title</b>	<b>Ophthalmology Education in Medical Students and Community Service: Flipped Classroom Development and Outside Classroom Practice in Community</b>
<b>Mentor</b>	<b>Prof. Muhammad MOIN</b>
<b>Abstract</b>	<p><b>Purpose:</b> To apply a newly constructed, modified ophthalmology module for medical students, which consists of a flipped classroom, interactive case and examination skills-learning, and outside classroom service-learning.</p> <p><b>Methods:</b> Eighteen teaching videos and 9 gamified cases were included in a newly constructed teaching website. Final-year medical students were given access to the website and were requested to review the materials over the weekend before their 5-day ophthalmology rotation. They began the course with a 3-hour hands-on direct ophthalmoscopy practice, followed by the assigned clinical and surgical attachment. On day 4, students join an in-class case-based learning session with a tutor to go through 16 cases over 3.5 hours, answering preset questions, commenting on the clinical photos, and performing the relevant clinical examinations. All students completed an end-of-rotation multiple-choice (MCQ) assessment, an anonymous Likert-scale questionnaire (ALSQ) to rate their acceptance of the course and were assessed for their direct ophthalmoscopy skills. They are also welcome to join our community service, where they can practice their clinical skills.</p> <p><b>Results:</b> All 295 medical students from 2024 to 2025 underwent the new course. Their average MCQ scores were comparable to those of students who underwent a traditional ophthalmology module. The ALSQ scores also reflected the students' enthusiasm, satisfaction, and encouragement during the course. Forty-six students also joined our service-learning session.</p> <p><b>Conclusion:</b> The FCCL model enhanced students' satisfaction and engagement toward learning ophthalmology. The model may also be suitable for other sub-specialties.</p>





<b>Name</b>	<b>Akiko HANYUDA</b>
<b>Country/Territory/ Region</b>	<b>Japan</b>
<b>Project Title</b>	<b>Development of a Sustainable Support Framework for Low Vision Care: A Pilot Study</b>
<b>Mentor</b>	<b>Prof. Madhuwanthi DISSANAYAKE</b>
<b>Abstract</b>	<p><b>Purpose:</b> With global aging accelerating, an estimated 895 million people will have distance vision impairment and over 61 million will be blind by 2050. Despite this burden, low vision support systems remain underdeveloped in many Asian countries, including Japan, particularly regarding coordination between medical and welfare services. To foster independence and enhance quality of life, this study examined the needs for low vision support and evaluated the effectiveness of a structured counseling system in Japan.</p> <p><b>Methods:</b> A single-center, one-group pre-post study was conducted at a low vision care hub (LVCH). Eligible participants were individuals with self-reported functional vision difficulties who visited between July 1 and December 20, 2024. Counseling addressed one or more of the seven domains of low vision care defined by the Japan Society for Low-Vision Research and Rehabilitation. Satisfaction was assessed using a 6-point ordinal scale (0–5) before and after counseling, with changes analyzed by the Wilcoxon signed-rank test.</p> <p><b>Results:</b> Ninety-three participants were included. Satisfaction scores significantly increased after counseling (<math>p &lt; 0.001</math>). Improvements were consistent across sex, age, and International Council of Ophthalmology (ICO) visual impairment classifications (all <math>p &lt; 0.001</math>). Notably, participants who did not meet ICO-defined low vision criteria also reported significant gains (<math>p &lt; 0.001</math>).</p> <p><b>Conclusion:</b> Structured counseling at LVCH significantly improved visitor satisfaction, including among those with mild functional difficulties not classified as low vision. These findings suggest that early-stage counseling interventions may benefit a broader population, underscoring the need for expanded low vision support in the Asia-Pacific region.</p>



<b>Name</b>	<b>Nur Nadiah HJ JELUDIN</b>
<b>Country/Territory/ Region</b>	<b>Brunei</b>
<b>Project Title</b>	<b>Development and Pilot Implementation of an Ocular Trauma Registry in Brunei Darussalam</b>
<b>Mentor</b>	<b>Dr. Vivek DAVE</b>
<b>Abstract</b>	<p><b>Purpose:</b> To develop and pilot an ocular trauma registry based on recognized international classifications, suited to Brunei Darussalam. This project aimed to collect and analyze data on the type, cause and outcomes of ocular trauma. To enhance documentation, monitoring and preventive strategies of ocular trauma.</p> <p><b>Methods:</b> A prospective, observational pilot registry was started in September 2025. At the time of submission, data collection was ongoing. Preliminary findings from the first two months are presented. Information was entered through an electronic form, based on the Birmingham Eye Trauma Terminology (BETT) and the International Globe and Adnexal Trauma Epidemiology Study (IGATES) classifications. Data collected included demographics, mechanisms of injury, type of trauma, severity, management, and outcomes of all cases of ocular and adnexal trauma. Descriptive statistics were used to analyze frequencies, patterns of injury and outcomes; identify common mechanisms, age groups, and preventable causes.</p> <p><b>Results:</b> Forty-six cases were recorded over two months: 89% male, mostly aged 30 to 40 years. Left-eye injuries accounted for 52%. Blunt trauma (43%) was the most common, followed by sharp injuries (24%) and intraocular foreign-body injuries (20%). Primarily closed-globe injuries and affecting Zone 1. Only 7% reported using protective eyewear, showing low compliance with safety practices. Three patients had surgery to remove intraocular foreign bodies. Laborers formed the largest high-risk group (65%), and 41% of work-related injuries occurred in construction.</p> <p><b>Conclusion:</b> Preliminary results show the registry system is feasible, but highlighted issues with clinician participation and data completeness. Strengthening its integration into clinical workflow and further expansion will improve trauma surveillance and guide national prevention initiatives.</p>



<b>Name</b>	<b>Mahesh JAYAWEERA GAMAGE</b>
<b>Country/Territory/ Region</b>	<b>Sri Lanka</b>
<b>Project Title</b>	<b>Resource Efficiency in Eye Care: Improving Efficiency of State Sector Eye Care Services in Sri Lanka Through Maximum Utilization of Resources</b>
<b>Mentor</b>	<b>Prof. Madhuwanthi DISSANAYAKE</b>
<b>Abstract</b>	<p><b>Purpose:</b> To develop a practical and sustainable proposal to improve the efficiency and utilization of resources in order to provide optimum state sector eye care services in Sri Lanka.</p> <p><b>Methods:</b> Steps in developing the proposal:</p> <ol style="list-style-type: none"> <li>1. Appointing a working committee comprising state sector Consultant Ophthalmologists.</li> <li>2. Collecting information about the existing facilities and resources within each eye unit.</li> <li>3. Identifying national / regional-level centers of excellence and determining the norms for basic facilities and resources to be available in each category.</li> <li>4. Formulating the nationwide working policy for the regional / national centers efficiently utilizing facilities and human resources by way of clustering.</li> <li>5. Forwarding the proposal for the necessary amendments and approval by the council of the College of Ophthalmologists Sri Lanka and finally to the Ministry of Health for approval and execution.</li> </ol> <p><b>Results:</b> The proposal identified 80 eye units in 56 state sector hospitals across the country, to be developed to the optimum efficiency level by the year 2030. The norms for human and physical resources for the national and regional centers and for peripheral units were defined. We identified 10 eye units in Teaching hospitals to be developed as “Centers of Excellence” and 14 hospitals to be developed as “Regional Centers”. The remaining 32 hospital eye units will be resourced as per the peripheral units.</p> <p><b>Conclusion:</b> A practical and sustainable proposal was developed to improve the state sector eye care services in Sri Lanka through maximum utilization and relocation of resources, to be developed to an optimum level by the year 2030.</p>





<b>Name</b>	<b>Chansathya KHIEU</b>
<b>Country/Territory/ Region</b>	<b>Cambodia</b>
<b>Project Title</b>	<b>Impact of In-Country Glaucoma Fellowship Training in Cambodia</b>
<b>Mentor</b>	<b>Dr. Vivek DAVE</b>
<b>Abstract</b>	<p><b>Purpose:</b></p> <ul style="list-style-type: none"> <li>• To provide and establish a unique fellowship training program in Cambodia through a reverse setting, in which the trainer will come to teach the fellows.</li> <li>• To maintain sustainability by having previous fellows co-train.</li> <li>• To create impact on eye health care and spread subspecialized care throughout the country.</li> </ul> <p><b>Methods:</b></p> <ul style="list-style-type: none"> <li>• Collaborative project between NGO and a government hospital.</li> <li>• 12 face-to-face training sessions with expert from the field of glaucoma from Australia for 24 months.</li> <li>• Equipment donations.</li> <li>• Post-training evaluation (final examination).</li> </ul> <p><b>Results:</b></p> <ul style="list-style-type: none"> <li>• Four new fellows were trained.</li> <li>• 4,896 glaucoma patients were seen during the period (47% female).</li> <li>• 657 surgical procedures were performed.</li> <li>• Established 2 new glaucoma clinics based in the provinces of Takeo and Ratanakiri.</li> </ul> <p><b>Conclusion:</b></p> <ul style="list-style-type: none"> <li>• This in-country (reverse) fellowship training program proves to be a successful venture for developing countries, showing impact through results of patient care and outreach program by trained fellows.</li> </ul>



<b>Name</b>	<b>Tejsu Singh MALLA</b>
<b>Country/Territory/Region</b>	<b>Nepal</b>
<b>Project Title</b>	<b>Establishment of Nepal Ophthalmic Society (NOS) Leadership Development Program</b>
<b>Mentor</b>	<b>Dr. Vivek DAVE</b>
<b>Abstract</b>	<p><b>Purpose:</b> To develop a local Leadership Development Program (LDP) and Leadership Development Training (LDT) to enhance leadership capacity among ophthalmologists and residents. The program aims to increase interest in leadership, encourage active participation in the Nepal Ophthalmic Society (NOS), promote team building, and strengthen individual leadership skills. It also seeks to foster a sense of belonging among members, engage alumni of international leadership programs as mentors, and establish a transparent and effective participant selection system.</p> <p><b>Methods:</b> The Leadership Development Training was designed for ophthalmologists and residents, targeting 15–20 participants in each of the seven provinces of Nepal over a one-year period. The training has been successfully completed in three provinces, with sessions in the remaining provinces under planning. From these trainings, selected candidates were invited to participate in the NOS Leadership Development Program.</p> <p><b>Results:</b> To date, 45 members, including residents, have successfully completed the NOS-LDT, and 10 participants have graduated from the NOS-LDP.</p> <p><b>Conclusion:</b> The establishment of the NOS-LDT and NOS-LDP has created a sustainable model for nurturing future leaders within the organization and beyond. The program enhances member engagement, promotes transparent leadership selection, and provides a platform for mentorship and collaboration among alumni of regional leadership programs—benefiting individuals, the organization, and the ophthalmic community at national and international levels.</p>



<b>Name</b>	<b>Diva MISRA</b>
<b>Country/Territory/Region</b>	<b>India</b>
<b>Project Title</b>	<b>SwarnJyoti Initiative for Grassroots Healthcare Transformation (SIGHT) Project</b>
<b>Mentor</b>	<b>Dr. Vivek DAVE</b>
<b>Abstract</b>	<p><b>Purpose:</b> To evaluate the effectiveness of the SwarnJyoti Initiative for Grassroots Healthcare Transformation (SIGHT) in reducing preventable blindness by expanding retinal and glaucoma care in underserved rural communities.</p> <p><b>Methods:</b> Specialty outreach camps were organized in rural Lucknow and adjoining regions. Screening was conducted using handheld fundus cameras and rebound tonometers, supported by local health workers. Patients with abnormal findings were referred to the base hospital for subsidized or Ayushman Bharat–covered treatments, including intravitreal injections, retinal and glaucoma surgeries, and long-term medication support.</p> <p><b>Results:</b> SIGHT screened 6,000 patients, diagnosing 300 with retinal diseases and 121 with glaucoma. Among these, 57% received definitive interventions (surgeries/injections/medications) at reduced cost. Outcomes included improved visual prognosis, increased treatment compliance, and reduced disease burden compared with baseline community data.</p> <p><b>Conclusion:</b> SIGHT demonstrates that super-specialty eye care delivery is both feasible and impactful at the grassroots level. The program has successfully scaled up screening and treatment for retinal and glaucoma diseases in rural Uttar Pradesh, improving patient outcomes through affordable, technology-enabled, and government-supported interventions. Expansion into pediatric, oculoplasty, and corneal subspecialties are planned.</p>





<b>Name</b>	<b>Kaushik MURALI</b>
<b>Country/Territory/ Region</b>	<b>India</b>
<b>Project Title</b>	<b>Creating a National Innovation Platform for Eye Care in India: Situational Analysis and Program Development</b>
<b>Mentor</b>	<b>Dr. Shaheeda MOHAMED, Prof. Santosh HONAVAR</b>
<b>Abstract</b>	<p><b>Purpose:</b> To develop a national innovation platform introduced at the All India Ophthalmological Society (AIOS) by studying barriers and enablers as perceived by ophthalmologists.</p> <p><b>Methods:</b> Conducted situational analysis through mixed-methods research, including quantitative surveys of Innovation Day stakeholders, AIOS members, and qualitative interviews with leaders in other industries (e.g., automobile, biotech, public health innovation) to identify stakeholder needs, enablers, barriers and effective collaborative models.</p> <p><b>Results:</b> A total of 276 survey responses and 6 interviews were analyzed. Motivation hinged on improving patient care, opportunity to collaborate, professional recognition, and actual platform support features (mentoring, commercialization scope). Respondents valued platforms that offered cross-connectivity (idea sharing, project matchmaking), funding/grant opportunities, and regulatory guidance, including IP. 76.6% of AIOS survey respondents were comfortable or found a national virtual innovation platform for eye care useful.</p> <p>Follow-up feedback after implementation will guide continuous improvement.</p> <p><b>Conclusion:</b> This project reiterated a strategic priority for a framework to establish a virtual national innovation platform that is flexible for both foundational support and advanced connectivity, driven by AIOS leadership and attentive to regulatory, commercial, and training dimensions for the entire spectrum of Indian ophthalmologists.</p>



<b>Name</b>	<b>Victor Ephraime PAULINO</b>
<b>Country/Territory/ Region</b>	<b>Philippines</b>
<b>Project Title</b>	<b>Establishment of the Council of Ophthalmology Residents (CORE) – Philippines</b>
<b>Mentor</b>	<b>Dr. Sherman VALERO</b>
<b>Abstract</b>	<p><b>Purpose:</b> The project aimed to establish a national council of ophthalmology residents under the supervision of the Philippine Academy of Ophthalmology (PAO). This council strengthened coordination, collaboration, and communication among residents from various training institutions while serving as a platform for advocacy, representation, and mutual support. It also promoted leadership development, mentorship, professionalism, camaraderie, and a culture of service among future ophthalmologists.</p> <p><b>Methods:</b> The Council of Ophthalmology Residents (CORE) operates under the guidance of the PAO in close collaboration with the Philippine Network of Young Ophthalmologists. Members consisted of resident representatives from accredited training institutions recognized as Members-in-Training by PAO. The organizational structure included national officers and regional representatives from Luzon, Visayas, and Mindanao. Key activities included a Resident Liaison Function, CORE Online Community, Training Institution Calendar, Leadership Development Participation, Mentorship Program, and Inter-Institutional Collaborations.</p> <p><b>Results:</b> With thirty-eight (38) accredited training institutions distributed all over the Philippines, the initiative led to a unified and well-represented body of ophthalmology residents, improving communication, collaboration, and alignment of residency training with national professional goals. It enhanced leadership and mentorship opportunities, contributing to the development of future ophthalmology leaders across institutional, community, and national levels.</p> <p><b>Conclusion:</b> CORE continues to operate under PAO oversight, with annual elections, institutional partnerships, and leadership succession ensuring sustainability. Through collaboration, mentorship, and leadership development, CORE remains a vital platform advancing ophthalmic education and practice in the Philippines.</p>



<b>Name</b>	<b>Panida POTITA</b>
<b>Country/Territory/Region</b>	<b>Thailand</b>
<b>Project Title</b>	<b>Strengthening Community Access to Oculoplastic Services Through Outreach in the Southern Part of Thailand</b>
<b>Mentor</b>	<b>Dr. Catherine GREEN</b>
<b>Abstract</b>	<p><b>Purpose:</b> Patients in remote provinces of Thailand often lack access to treatment for eyelid disorders and nasolacrimal duct obstruction, leading to impaired vision, discomfort, and reduced quality of life. This project aimed to improve access to oculoplastic surgery through a mobile outreach program in the southern part of Thailand.</p> <p><b>Methods:</b> A three-phase project was implemented. The preparation phase involved securing funding, equipment, facilities, and staff. The screening phase used hospital campaigns and social media to identify patients with eyelid disorders or nasolacrimal duct obstruction for preliminary assessment. The implementation phase brought a surgical team from Bangkok to Satun for patient screening and two days of surgery, with outcomes reported to the hospital directors.</p> <p><b>Results:</b> A total of 62 patients were screened. Diagnoses included dermatochalasis, ptosis, brow ptosis, nasolacrimal duct obstruction, entropion, and eyelid mass. Forty-eight patients, involving 84 eyes, underwent surgery. The mean age was 57.3 years; 36 (73.5%) were female and 13 (26.5%) were male. Procedures performed included upper blepharoplasty, levator advancement, mullerectomy, lower eyelid retractor reinsertion with lateral tarsal strip, direct brow lift, and eyelid reconstruction. One postoperative complication of recurrent entropion was reported. Most patients learned about the program through local campaigns (55.1%) or social media (38.8%). The primary reasons for participation were ease of transportation and confidence in the medical team. Overall satisfaction was very high, with a mean score of 4.97 out of 5.</p> <p><b>Conclusion:</b> This outreach program provided timely oculoplastic care, reduced healthcare disparities, and strengthened local capacity. The model demonstrates that targeted outreach can effectively expand access to subspecialty services in underserved regions.</p>





<b>Name</b>	<b>Ho-Seok SA</b>
<b>Country/Territory/Region</b>	<b>Korea, Republic of</b>
<b>Project Title</b>	<b>Establishment and Development of the Young Asia-Pacific Society of Ophthalmic Plastic and Reconstructive Surgery (YAPSOPRS)</b>
<b>Mentor</b>	<b>Prof. Linda TSAI</b>
<b>Abstract</b>	<p><b>Purpose:</b> This project aims to establish and develop the Young Asia-Pacific Society of Ophthalmic Plastic and Reconstructive Surgery (YAPSOPRS) as a sustainable sub-community within APSOPRS. It is also to support young oculoplastic doctors in the Asia-Pacific region by providing education and coaching, and to connect them socially and academically.</p> <p><b>Methods:</b> A three-phase activation plan was implemented: (1) establishment of membership criteria and formation of a YAPSOPRS committee and an operating council; (2) development and promotion of educational programs, including an online teaching program and international fellowship opportunities; and (3) creation of operational regulations to secure long-term sustainability. Member recruitment and needs-assessment surveys guided strategic planning and activity design.</p> <p><b>Results:</b> Key outcomes include: completion and public release of a 10-session online teaching program for young ophthalmologists on the APSOPRS website, providing accessible foundational training; securing an additional International Training Center to expand the APSOPRS International Fellowship Program; successful selection of APSOPRS international fellows through a newly standardized application and review process; and establishment of a functioning YAPSOPRS committee with defined leadership roles, enabling the group to autonomously conduct recurring educational and academic activities.</p> <p><b>Conclusion:</b> The project built the structural, educational, and operational foundations required for YAPSOPRS to function as a sustainable leadership-development platform within APSOPRS. These results demonstrate that the program can successfully support emerging oculoplastic surgeons and maintain continued development across the Asia-Pacific region.</p>



<b>Name</b>	<b>Faria Tilat TIMA</b>
<b>Country/Territory/Region</b>	<b>Bangladesh</b>
<b>Project Title</b>	<b>Challenges to Increase the Efficiency of Young Ophthalmologists in Bangladesh</b>
<b>Mentor</b>	<b>Prof. Muhammad MOIN</b>
<b>Abstract</b>	<p><b>Purpose:</b> To improve the capabilities of young ophthalmologists in Bangladesh through identifying gaps in current training, targeted training &amp; mentorship, and professional networking, ultimately enhancing the accessibility and quality of eye care services across the country.</p> <p><b>Methods:</b> A mixed-methods study was conducted at a tertiary eye hospital in Bangladesh. Quantitative data were collected from young ophthalmologists (<math>\leq 10</math> years of practice) using a structured questionnaire assessing training exposure, workload, and institutional support. Qualitative data were obtained through focus group discussions and key informant interviews with senior ophthalmologists, educators, and policymakers.</p> <p><b>Results:</b> A total of forty-nine young ophthalmologists participated in the study. The findings identified gaps in structured training and mentorship, high clinical workloads &amp; inconsistent institutional support as key barriers to professional efficiency. Qualitative analysis further highlighted misalignment between training curricula and service demands, limited career development pathways &amp; the need for coordinated governance in ophthalmic workforce planning.</p> <p><b>Conclusion:</b> Collaborative efforts between academic institutions, professional associations, and government bodies are essential to create an enabling environment that empowers the next generation of ophthalmologists in Bangladesh.</p>



<b>Name</b>	<b>Que Anh VU</b>
<b>Country/Territory/ Region</b>	<b>Viet Nam</b>
<b>Project Title</b>	<b>Improving Pediatric Eye Care in Rural Viet Nam</b>
<b>Mentor</b>	<b>Prof. Madhuwanthi DISSANAYAKE</b>
<b>Abstract</b>	<p><b>Purpose:</b> To assess the current landscape of pediatric ophthalmology in rural Viet Nam and implement a sustainable model to enhance local capacity and service delivery.</p> <p><b>Methods:</b> A two-phase mixed-methods approach. Phase I involved a cross-sectional descriptive survey of ophthalmologists in rural areas using a structured questionnaire to identify service availability, workforce barriers, and training needs. Phase II focused on intervention and system strengthening through partnerships with local hospitals and NGOs. Interventions included on-site surgical support, workshops, and online lecture series.</p> <p><b>Results:</b> In collaboration with partners, the initiative provided free eye examinations to approximately 500 pediatric patients across three remote provinces. Surgical interventions for ptosis, strabismus, and cataracts were performed on about 100 patients. In addition, the project delivered specialized workshops attended by 100 ophthalmologists and an online lecture series on pediatric eye diseases that reached 500 practitioners from 20 different rural regions.</p> <p><b>Conclusion:</b> This project demonstrates that a collaborative model combining direct service delivery with robust professional training can effectively overcome barriers to pediatric eye care in low-resource settings.</p>





<b>Name</b>	<b>ZhuLi YAP</b>
<b>Country/Territory/Region</b>	<b>Singapore</b>
<b>Project Title</b>	<b>Shaping the Future of Ophthalmic Services: Evaluating a Complex Anterior Segment Service (CASS) Model for Nationwide Integration</b>
<b>Mentor</b>	<b>Dr. Shaheeda MOHAMED</b>
<b>Abstract</b>	<p><b>Purpose:</b> This project evaluates a newly developed CASS with the goal of determining its feasibility for broader adoption and nationwide implementation.</p> <p><b>Methods:</b> A mixed-methods evaluation was employed.</p> <p><i>Quantitative:</i> A retrospective review of all secondary intraocular lens procedures performed by the CASS team from July 2022–June 2024 which included the variable visual acuity, intraocular pressure, postoperative refraction and endothelial cell count, all at baseline and at postoperative intervals. Quarterly clinic and surgical wait times, and patient complaint data from July 2021–June 2025, were also analysed.</p> <p><i>Qualitative:</i> Logs of educational outputs and operational challenges were reviewed.</p> <p>Outcomes will assess surgical quality, efficiency, patient experience, and improvement needs.</p> <p><b>Results:</b> Clinical outcomes were non-inferior or better than the majority of studies currently published. Of 178 patients, visual acuity improved in 98% of patients. Best corrected visual acuity was 6/12 or better in 91% of patients. Four (4) patients required returns to surgery for complications i.e. repeated dislocation or retinal detachment. The clinic and surgical wait times were significantly reduced compared to the time before the service was established, from a 6 – 9 month wait time down to 14 weeks for non-urgent cases and a formalized pathway for the referral of emergency cases. As a result, patient complaints related to complex cataract dropped significantly. Operational challenges included accurate tracking of cases.</p> <p><b>Conclusion:</b> Initial results are promising - beyond improving clinical outcomes, the project fosters leadership in service innovation, supports training and education, and contributes to strengthening health systems. Ultimately, this work aims to shape a future-ready framework for complex anterior segment care that can be integrated across diverse healthcare settings.</p>



<b>Name</b>	<b>Bayartsetseg ZAANKHUU</b>
<b>Country/Territory/Region</b>	<b>Mongolia</b>
<b>Project Title</b>	<b>To Improve Surgical Skills of Rural Ophthalmologists</b>
<b>Mentor</b>	<b>Prof. Linda TSAI</b>
<b>Abstract</b>	<p><b>Purpose:</b> Mongolia has a vast territory of 1,564,116 sq km. With a population density of 1,8 sq km. Therefore, the main goals of this study are</p> <ul style="list-style-type: none"> <li>• To reduce the centralization of healthcare services</li> <li>• To bring surgical care closer to patients</li> <li>• To save patients' time</li> <li>• To reduce financial burden on patients</li> </ul> <p><b>Methods:</b></p> <ul style="list-style-type: none"> <li>• Evaluate the ophthalmologist workforce, surgical capacity, and the availability of essential ophthalmic equipment in each of the 21 rural provinces and analyze the findings.</li> <li>• Develop and implement professional training and mentorship programs locally.</li> <li>• Assessment of surgical skills through pre- and post-training evaluations, independently performed case numbers.</li> </ul> <p><b>Planned Intervention</b></p> <ul style="list-style-type: none"> <li>• 6 local ophthalmologists</li> <li>• 6 surgeons specialized in microsurgery</li> <li>• Organizer</li> <li>• Public Hospital</li> </ul> <p><b>Results:</b></p> <ul style="list-style-type: none"> <li>• Each province typically has only 1 to 2 ophthalmologists.</li> <li>• Before, only 3 provinces were capable of performing intraocular surgeries, such as cataract extraction.</li> <li>• As a result of professional training, technical performance and quality of patient care significantly improved in 6 rural provinces.</li> <li>• Equipment shortages were identified in many provinces, leading to recommendations for urgent upgrades.</li> </ul> <p><b>Conclusion:</b> Taking into account the vast territory of Mongolia and its unique settlement patterns, systematically improving the surgical skills of rural ophthalmologists has a significant impact on the accessibility and quality of eye care services. Increasing equipment availability and organizing regular professional on-the- job practical training are key factors for success.</p>



<b>Name</b>	<b>Moh. Nurdin ZUHRI</b>
<b>Country/Territory/ Region</b>	<b>Indonesia</b>
<b>Project Title</b>	<b>Lithera for Medical Students: Clinical Mastery in Your Hand</b>
<b>Mentor</b>	<b>Prof. Madhuwanthi DISSANAYAKE</b>
<b>Abstract</b>	<p><b>Purpose:</b> This study aimed to evaluate the usability, satisfaction, and user acceptance of Lithera—a digital clinical learning platform designed to support medical students in mastering core clinical concepts efficiently during clerkship rotations.</p> <p><b>Methods:</b> A cross-sectional descriptive study was conducted among medical students who used <i>Lithera</i> for at least 30 days. Data were collected using three validated instruments: the System Usability Scale (SUS) to measure usability, a Likert-scale questionnaire (1–5) to assess satisfaction and motivation, and the Net Promoter Score (NPS) to evaluate loyalty and recommendation intention. Quantitative data were analyzed descriptively using means and standard deviations, while NPS was calculated as the difference between the percentage of promoters and detractors. The current analysis included 19 participants, with the sample size expected to increase as data collection continues.</p> <p><b>Results:</b> The mean SUS score was <math>78.8 \pm 8.2</math>, indicating good–excellent usability. The overall mean Likert score was <math>4.31 \pm 0.21</math>, reflecting high satisfaction and motivation, with the highest ratings for content relevance (4.58) and overall satisfaction (4.47). The NPS value was +42.1, representing a good level of loyalty and willingness to recommend. Qualitative feedback supported these findings, emphasizing <i>Lithera's</i> efficiency, clarity, and ease of use.</p> <p><b>Conclusion:</b> <i>Lithera</i> demonstrated high usability, user satisfaction, and loyalty among medical students. The platform effectively supports clinical learning through concise, structured, and accessible content. Ongoing data collection may further strengthen the evidence for <i>Lithera's</i> role as a practical and well-received digital learning companion in medical education.</p>





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