

Alaska Dispatch News

Alaska should leave eye surgery to the surgeons; optometrists don't qualify

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OPINION: Senate Bill 55 widens and "modernizes" the scope of practice allowed to optometrists in Alaska - but only by lowering standards of medical and surgical care

The Alaska Legislature is considering legislation (Senate Bill 55) that places eye care patients at risk by allowing health practitioners (optometrists) who are not medical doctors and surgeons to perform laser and scalpel surgery on your eyes. This legislation is a threat to the quality of surgical care all Alaskans deserve. When it comes to eye surgery, every patient deserves the best and safest care possible from qualified medical doctors and trained surgeons. Would you want any other than the most highly trained medical doctor and surgeon to perform surgery on your eyes or those of your loved ones? Of course not!

Yet proponents of SB 55 claim it "modernizes and updates" the scope of practice for optometrists; however, they fail to inform you that it does so only by lowering standards of medical and surgical care. Patients in Alaska deserve more than an optometrist who underwent a weekend course at a hotel to learn surgery. They deserve a medical doctor who is not only trained as a surgeon, but who can also selectively and appropriately prescribe narcotics, with a full understanding of the patient's concomitant systemic conditions, and the potential impact of these controlled substances. Permitting optometrists to do all of this while letting them escape the watchful eye of the Alaska State Medical Board is dangerous and akin to allowing chiropractors to dabble in spinal surgery.

I've spent thousands of hours learning how to perform surgery. Four years of ophthalmology training is not the same as four years of optometry training. Ophthalmologists live and breathe surgery in residency, and spend nights, weekends and holidays in the hospital performing surgery and learning sterile technique. Much of our "time off" is spent in wet labs practicing surgery on cow and pig eyes, as well as on simulation machines. At home, we tie endless surgical knots and suture grape skins, plastic wrap and tissue paper for practice. Obsessive compulsiveness is the hallmark of a good surgeon. It is an honor, a privilege, a stress and a burden. It changes your life and your patients' lives forever. It changes your relationship with your patients. They are truly your responsibility.

Every surgeon, no matter how seasoned, no matter how skilled, occasionally experiences untoward outcomes. Only one half of our training covers surgery; the other half covers how to manage the inevitable surgical complications. I was taught that if one performs surgery, one must be fully capable of managing potential problems.

Here are some of the complications I have witnessed over the past few years. I've limited these to the procedures that optometrists would be allowed to perform if SB 55 passes:

- Intractable elevated pressure after laser (PI) peripheral iridotomy (where a laser punches a hole through the iris), requiring immediate glaucoma surgery
- Subluxed intraocular lens after laser capsulotomy, requiring surgical repair and repositioning of the intraocular lens
- Perforation through the full thickness of the eyelid after chalazion excision
- Globe rupture during limbal relaxing incision
- Scleral melting after pterygium surgery
- Inability to close the eyes after blepharoplasty, requiring reconstructive surgery with skin grafts
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Fortunately, a skilled ophthalmologist through years of medical and clinical training has gained the skills required to readily handle the complications of these "non-invasive" procedures. How would optometrists with far less medical education and clinical training fare under similar circumstances?

There has been a push for SB 55 because of so-called "health access issues." As a part of the Alaska Native Medical Center, I can tell you the ophthalmologists routinely fly out to many Alaska communities to provide care to both Natives and non-Natives, including Barrow, Kotzebue, Nome, Sitka, Juneau, Bethel, Dillingham, Kodiak and Ketchikan, just to name a few.

Another major area of concern is that SB 55 removes the restriction of prescribing a four-day limitation on controlled substances containing hydrocodone. There is a reason why medicine organizes itself into cardiologists and cardiovascular surgeons, neurologists and neurosurgeons, etcetera. There's a reason why you want a surgeon to do surgery. They do it a lot, they do it well and they manage the inevitable complications. Please keep Alaska's high standards for medical and surgical care by opposing SB 55. Thank you for your time and consideration.

Dr. Kelly Lorenz is a board-certified ophthalmologist and glaucoma specialist in Anchorage. She earned her M.D. from Ohio State University, completing her surgical internship, ophthalmology residency and glaucoma fellowship at Henry Ford Hospital in Detroit.