

Satish S. Modi, MD

Dr. Modi discusses how smart staffing and advanced surgical technologies helped him build a successful refractive cataract practice.



Were you always interested in ophthalmology?

I always knew I wanted to be a doctor, but I resisted the idea of practicing ophthalmology because so many of my family members, including my father, were ophthalmologists. At one point, my relatives were practicing ophthalmology in North America, Africa, Asia, and Europe simultaneously. After I finished medical school in India, I tried internal medicine, general surgery, and orthopedics, but I eventually came back to ophthalmology. I realized that I enjoyed this specialty, so it did not make sense to avoid it just because it was the “family business.”

In the early 1970s, I came to the US and had the great fortune of receiving a 3-year residency at Albert Einstein College of Medicine in the Bronx. Since 1976, I have been practicing ophthalmology in Poughkeepsie, New York.

What kind of surgery do you perform in your practice?

Although I offer LASIK, I spend more than 50% of my time performing cataract surgery. In addition to implanting what I call *government-issue IOLs*, I also offer my patients presbyopia-correcting IOLs such as the Crystalens, Rezoom, and the Acrysof Restor. I have had a lot of success with these lenses because I pick my refractive cataract patients carefully.

I treat people who agree to receive advanced-technology IOLs more like LASIK patients than cataract patients. I give them a lot of literature to read and ask them to fill out questionnaires. After I meet with them personally to discuss the different IOL options, I hand them off to my refractive coordinator, Stacey Koch. A good refractive coordinator can be invaluable to a cataract surgeon who wants to incorporate refractive IOLs into his high-volume practice. At my practice, Stacey is available to answer the multitude of questions refractive cataract patients inevitably have.

Of which of the FDA studies in which you have participated are you most proud?

A couple of years ago, I was the lead author on the pivotal phase 3 study that led to the FDA's fast-tracked approval of Nevanac, an eye drop that helps control pain and inflammation after cataract surgery. I routinely prescribe Nevanac to my cataract patients perioperatively.

I was also one of the investigators for Discovisc, the first ophthalmic viscosurgical device that combined cohesive and dispersive qualities. Now that I no longer have to use two different viscoelastics, cataract surgery is less cumbersome. Patients also appreciate the results. It is gratifying to see them return the day after surgery with crystal-clear corneas and 20/20 or 20/25 vision.

What technologies are essential to your refractive practice?

I would not perform refractive IOL surgery without an IOLMaster. I also find the Pentacam rotating Scheimpflug camera useful for assessing patients who may be prone to forme fruste keratoconus. My favorite instrument, however, may be the Intralase FS femtosecond laser.

In my experience, the actual thickness of a corneal flap created by a microkeratome set to 100 μm can range between 50 and 150 μm . I just completed six procedures with the Intralase FS laser set at 100 μm . The flaps' thicknesses ranged between 94 and 112 μm . The laser was a huge expense for my small practice, but its consistency and quality have improved my refractive surgery results.

In 2005, you climbed Mt. Kilimanjaro in Tanzania. Where do you want to go next?

I originally planned to travel to the Mt. Everest base camp in Bhutan this month, but the trip fell through. Instead, I am going to Machu Piccu in Peru and the Galapagos Islands in September. Closer to home, I will be participating in a 45-mile bicycle ride through New York City's five boroughs in May.

In addition to traveling for pleasure, I visit other countries to perform free surgery. I just returned from India, where I operated on cataract patients in rural villages, although I did manage to get away to Bangkok, Thailand, for a long weekend. My next trip will be to Pakistan with the Layton Rahmatulla Benevolent Trust, a UK-based charitable organization that performs 20% to 25% of all the cataract surgeries in Pakistan. I enjoy these trips, and I would like to do more of them in the future. ■