

# Michael E. Snyder, MD

Dr. Snyder discusses his role as a pioneer in the use of artificial irides and offers a tip for creating surgical videos.



## What do you consider to be the most exciting surgical development in which you have been involved?

I have been privileged to be a part of the continuing evolution in treating severe iris defects with prostheses. I had always been fascinated with the surgical

challenge of repairing damaged irides, because each case is a little bit different and often requires some creativity and artisanship. Greg O’Gawa’s pupil cerclage technique and Steven Siepser’s sliding knot provided me the tools with which to achieve some good results, but for patients lacking adequate tissue, I remained frustrated.

When I joined the Cincinnati Eye Institute, I witnessed the paradigm shift that the Cionni Ring for Scleral Fixation (Morcher GmbH; distributed in the United States by FCI Ophthalmics, Inc.) brought about for the management of loose zonules. I became inspired by the introduction of the first aniridia rings from Morcher GmbH in the United States by Robert Osher, MD, and Kenneth Rosenthal, MD. These developments heralded the now ongoing innovations in iris deficiency management. Patients feel empowered to share their frustrations, whereas in the past, many felt their concerns were dismissed, because options did not exist for them.

I was lucky to participate in the trial of the Ophtec 311 iris reconstruction lens (Ophtec BV) that was organized by Francis Price Jr, MD, in 2002. This device permits some degree of cosmesis, albeit limited to three colors. The implant’s 4-mm aperture allows it to provide a greater amount of photic relief compared with other implants of that era. The 9.5-mm incision, however, is suboptimal in these vulnerable eyes.

In 2008, I was honored to implant the first customized, flexible iris prosthesis in the Western Hemisphere. Developed by Professor Hans-Reinard Koch and Human Optics AG, the device was the first to be inserted through a small incision, and it offers a physiologic 3.35-mm pupillary size and much improved cosmesis. With more than 100 devices now implanted, each unique case has taught me important lessons that I will incorporate into the upcoming investigational device exemption study.

## What do you enjoy most about conducting research, and what is your current focus?

I remain inspired by the impact of novel intraocular implants on my patients’ lives. Many people find their lives changed by Cionni Rings, artificial irides, and presbyopia-correcting IOLs. I am gratified to be a part of this process.

Currently, I am involved in some exciting new IOL studies, and I am gearing up for the aforementioned study of the customized iris prosthesis, for which I will act as medical monitor. The development of the protocol and negotiation process with the FDA have been quite an educational experience.

## How has your undergraduate degree in psychology influenced your approach to treating patients and to practicing medicine in general?

I thought psychology would teach me how to understand patients, but it is actually my patients who have taught me volumes about psychology! In my perception class, I was taught that what we believe to be fact or truth is not static; instead, it constantly changes as we become aware of more information or we begin to look at the same information in a different way. In my clinic, I relearn this lesson daily.

## You have produced several award-winning surgical videos. What is the secret to your success?

I pick topics for my videos about which I am passionate. A common challenge for me is to refine my topic to cover a small enough “bite” to permit adequate detail in the time allotted. My favorite videos to watch feature a discrete topic covered in a way that makes me feel like an expert for having viewed the film.

## What is something most people would be surprised to learn about you?

My initial instinct was to share that, despite my outwardly obsessive-compulsive nature, my desk looks more like a city fallen victim to a tropical storm than an orderly array. My daughter thinks people will be more surprised to learn about my willingness to humiliate myself by beginning tae kwon do lessons! ■