Adaptive optics retinal imaging: Applications in retinal and systemic disease

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Outline

- 1. Introduction to adaptive optics
 - a. What is adaptive optics and how does it work?
 - i. Basic principles
 - 1. Wavefront sensor
 - 2. Deformable mirror
 - 3. Aberrations corrections
 - a. Atmosphere
 - b. Higher and lower order ocular aberrations
 - ii. General applications
 - 1. Military
 - 2. Astronomy
 - 3. Vision Science
 - a. Anterior segment
 - b. Visual function
 - c. Retinal imaging
 - i. Fundus camera
 - 1. Commercialized and some clinical use
 - ii. Scanning laser ophthalmoscopy
 - 1. Most common
 - iii. OCT
 - 1. Advantage of improved axial resolution
 - iv. Retinal structures visualized with AOSLO
 - 1. Nerve fiber bundles
 - 2. Ganglion cells
 - 3. Retinal vessels
 - a. Vascular wall structure
 - b. Individual red blood cells
 - 4. Cones
 - 5. Rods
 - 6. Retinal pigmented epithelium (RPE)
 - 7. Other
 - v. Functional measures
 - 1. Blood flow
 - a. With and without flicker
 - 2. Cone function

- 2. Adaptive optics in retinal disease
 - a. Systemic vascular disease
 - i. Diabetes
 - 1. Subclinical detection of diabetic retinopathy
 - 2. Retinopathy is worsened compared to clinical examination
 - 3. Better visualization and categorization of clinical lesions
 - a. Microaneurysms
 - b. Exudate
 - c. Edema
 - d. Etc.
 - 4. Blood flow alterations
 - 5. Cone alterations
 - a. Dark Cones
 - ii. Hypertension
 - 1. Wall-to-lumen ratios
 - a. Increased
 - b. Advantages over other techniques
 - 2. Cotton wool spots
 - b. Glaucoma
 - i. Lamina cribosa morphology
 - ii. Vascular changes
 - iii. Ganglion cell imaging
 - iv. Trabecular meshwork imaging (AO gonioscopy)
 - c. Retinal degenerations
 - i. Numerous investigations
 - ii. Clinical trials
 - d. Other
- 3. Challenges with integration into clinical practice
 - a. Small field size
 - b. Length of imaging sessions
 - c. Imaging processing
- 4. Summary