Save Sight Registries

Seeing Outcomes

ANNUAL REPORT

2023

CONTENTS

DIRECTORS' MESSAGE

We started the Save Sight Registries in 2009 with just one registry focused on wet macular degeneration. We have since grown to 10 registries that track 'real-world' patient treatment outcomes for some of the leading causes of visual impairment and loss worldwide.

Our Registries have provided valuable evidence of how treatments perform in the general population to patients, policy makers, industry, government organisations and more over the past 15 years. As the field of ophthalmology grows and develops, so too do our Registries. We have recently re-developed our flagship age-related macular degeneration module so that we can track treatments for atrophy as they become available in clinics.

We are also utilising advancements in artificial intelligence to help analyse eye scans and gain even further insight to patients' visual outcomes.

We are delighted that we can share our history and our progress with you in this annual report. We would like to take this opportunity to thank those who have been involved with the Registries – our core team, our Users, our funders and our donors. We would also like to give particular thanks to the patients who have agreed to have their data entered into the system. Without you, the work we showcase in this annual report would not be possible.

Professor Mark Gillies
Professor Daniel Barthelmes

ABOUT THE REGISTRIES

Our vision is to reduce the incidence of blindness worldwide by conducting research into patient treatment outcomes

The Save Sight Registries (SSR) is a web-based international platform that allows eye doctors and their teams to track, analyse and review real-world patient outcomes for some of the leading causes of visual impairment worldwide. Our system, which was designed by clinicians for clinicians, helps evaluate current and future treatments as they are released.

Our registries are immediately relevant to clinicians, researchers, public health providers and policy makers seeking to fight blindness and improve patient outcomes in Australia and internationally.

The Registries track long-term 'observational' data. Without observational data, which looks at treatment outcomes among the general population, we would not know if a treatment that worked in the rigid environment of a clinical trial also worked in the general population after it has been released or if it continued to work in the long-term. Conducting observational research on patient treatment outcomes is one of the fastest and most cost-effective ways to improve outcomes at scale.

TIMELINE

2009

Fight Retinal Blindness! registry formed as a stand-alone application. Initial funding was provided by NHMRC grants and the RANZCO Eye Foundation.

2010

FRB! was widely released as a web application.

2013

The first analysis using FRB! data was published. The study looked at 12-month outcomes in treatment-naïve eyes using data entered by 27 retinal specialists.

2014

A 'methods paper' describing the development of the FRB! project was published in *Retina*.

2015

The wet AMD was designated an 'ICHOM Certified Supplier'. Mark Gillies chaired and Daniel Barthelmes was part of the team that developed the International Consortium for Health Outcomes Measurement (ICHOM) standard patient-centred outcomes measures for wet macular degeneration.

A grant from the MDFA grant helped FRB! to expand globally.

The project was renamed the 'Save Sight Registries' to prepare for a growing list of registries to track outcomes of treatment of other eye diseases.

The Fight Corneal Blindness! registry launched with its first module, focused on keratoconus.

2017

The Fight Glaucoma Blindness! registry launched.

2018 The Fight Tumour Blindness! registry initially launched.

2020 The optometry and dry eye modules launched under the Fight Corneal Blindness! registry.

2021 The Fight Uveitis Blindness! registry launched.

2022 The Fight Inherited Retinal Blindness! registry launched.

The Fight Tumour Blindness! registry was redeveloped following consultation with leading Australian uveal melanoma experts, and was re-launched.

2023 The Fight Childhood Blindness! registry launched.

The Registries' flagship macular degeneration module was redeveloped to allow Users to track outcomes for both wet and dry (atrophic) macular degeneration.

WHERE WE ARE HEADED

Minimising data entry burden

The Registries team are focused on expanding the capabilities of the system and improving its usability. One thing that negatively affects our Users' experience is the need for duplicate data entry –most Users need to record clinical data in their practice's electronic medical records (EMR) system, then enter the data again in the Registries in a separate window. Users can currently import data from their EMR into the Registries through a CSV file import. This method that is used effectively in Switzerland, the Netherlands, Portugal and Singapore has led to an increase in data contributed by these countries. However, this is not quite 'true' single-point data entry.

We have engaged SANRO Health to help us achieve single-point data entry, that is, a system where a clinician will only need to enter data once to fill out both their EMR and the Registries system. The aim is to develop a Substitutable Medical Applications, Reusable Technologies (SMART) on Fast Healthcare Interoperability Resource (FHIR) app that integrates with EMRs to enable single-point data entry. The app can be implemented across many EMRs without significant alteration. It is hoped that this app will reduce the burden of data entry, incentivise the use of the Registries and encourage both new and existing Users to contribute data.

This project is currently in the pilot phase with results from the pilot are expected in early 2024.

Using AI to analyse images

The Registries has also engaged SANRO Health to help develop AI models that can analyse high-quality Optical Coherence Tomography (OCT) retinal images. Ophthalmologists frequently use non-invasive imaging techniques in addition to visual testing in the clinic. These images help inform clinical decisions and provide a valuable source of information on eye disease treatment and progression. Currently, the Registries does not have a means of collecting and interpreting the data from these images.

By developing AI models to analyse and interpret OCT images and linking these images to Registries data, we hope to gain further clinical insights and strengthen the data collected in the Registries. A pilot involving two Australian clinics will establish how we can expand our image linkage capabilities both across Australia and internationally.

We are ensuring throughout this pilot that the project is compliant with ever-changing data privacy, cybersecurity and regulatory requirements to safeguard security of personal data.

Understanding our data and Users

Our ICT Team has been busy implementing a dashboard function in the Registries. While it is currently only available internally, we intend to release the dashboard function to the heads of our national Steering Committees. This function will help us track engagement, patient and User demographics, clinical findings and other performance indicators over time. It will also help our national Steering Committees understand how the project is performing in their country, which could assist in recruitment and incentivise analyses.

The dashboards will also allow us to automate our reporting, which is currently performed manually by our biostatistician.

Clinical quality registries framework

In response to the *Framework for Australian Clinical Quality Registries* (Second Edition, 2022), which is a national standard for clinical safety and quality data collections and reporting we will be making changes to our project governance and processes to ensure we meet the national quality standard for Clinical Quality Registries (CQR) operations, including:

- Having clearly defined governance structures, ensuring the Governing body is a legal public entity that sets the strategic direction and oversights of the operations for SSR (this would include an advisory group and a management committee)

- Ensure the data can be used for safety and quality improvement. This includes abiding by the data governance principles (integrity, transparency, auditability, accountability)

- ·Ensuring reporting to the governing body, health services and clinicians. This will be via Annual Reports, risk adjusted granular data reports to clinicians as well as our Dashboard functionality which will be improved in 2024.

- Having systems in place to monitor variation in practice against expected health outcomes as well as providing feedback to clinicians, health administrators, governments, funders and the community on those health outcomes and variation in practice. We will put into practice outlier measurement and oversight policy ensuring that automated reports (funnel plots) are generated three to six monthly with the following points:
  - Identifying practitioners with performance of 2 or 3 Standard Deviations out of range
  - Sharing practice of excellent practitioner
  - Supporting improvement of poor performers (share with them information on excellent practitioner)

The following state the aims and priorities for Australian national CQRs which will be used to improve the Save Sight Registries:

1. To collate clinical data from health systems and patient reported outcome and experience measures to generate risk-adjusted reports on the appropriateness of care (whether the right care was provided to the patient at the right time and in the right place) based on best practice care recommendations and guidelines.
2. To collate longitudinal health outcome data (eg; post procedural outcomes) for the entire eligible population within a specific clinical domain using data linkage with other health data holdings and administrative health data collections to measure and report on the effectiveness of care and generate patient level predictors of short and long-term outcomes.
3. To provide (feedback) information to patients, consumers, clinicians, health service providers, funders, private health insurers, industry and governments on the appropriateness of care and effectiveness of care, in a way that is tailored to meet their needs.
4. To report on the safety and efficacy of therapies, devices, and procedures and identify significant variation in health care provision.
5. To enable provider specific outcomes to be benchmarked against jurisdictionally aggregated outcome measures nationally and internationally (where possible).

2023 AT A GLANCE

269 participating clinicians and clinical assistants in the system.
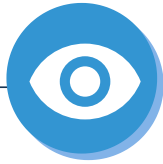
9,403 eyes tracked, with **59,203** total eyes and **1,068,068** total visits in the system

176 active sites from **24** countries

10 manuscripts accepted for publication. View our full list of publications on our website.

04 event booths to promote the Registries, and connect with our existing Users

OUR MODULES

FIGHT RETINAL BLINDNESS! (FRB!)

Chief investigators

Professor Daniel Barthelmes, Director, Department of Ophthalmology, University Hospital Zurich and Chair of Ophthalmology, University of Zurich

Daniel Barthelmes is chair of ophthalmology at the University of Zurich, Switzerland and director of the Department of Ophthalmology at the University Hospital Zurich, Switzerland.

 As a principal investigator in the FRB! project, jointly with Professor Mark Gillies, Daniel Barthelmes designed and helped to establish one of the world's largest registries for anonymously tracking treatment outcomes in patients with macular disease. The system is used Australia-wide by the leading retinal specialists, as well as in major centres around the world. Daniel's research topics for more than 12 years are age-related macular degeneration (AMD), hereditary retinal degeneration and retinal vascular disease. Past and current research involves both clinical and basic research topics.

Professor Mark Gillies, Director of Research, Save Sight Institute; Head, Medical Retina Unit, Sydney Eye Hospital; Director, Macula Research Group, Save Sight Institute

Mark Gillies is a retinal clinician-scientist with more than 35 years' experience in research in retinal disease. He was the first Australian ophthalmologist to be awarded a PhD, which he received for his work on diabetic retinopathy at the Walter and Eliza Hall Institute.

As a principal investigator in the FRB! project, jointly with Professor Mark Gillies, Daniel Barthelmes designed and helped to establish one of the world's largest registries for anonymously tracking treatment outcomes in patients with macular disease. The system is used Australia-wide by the leading retinal specialists, as well as in major centres around the world. Daniel's research topics for more than 12 years are age-related macular degeneration (AMD), hereditary retinal degeneration and retinal vascular disease. Past and current research involves both clinical and basic research topics.

The Fight Retinal Blindness! (FRB!) Registry was developed to investigate the safety, effectiveness, and possible adverse effects of new treatments for macular disease to develop strategies and evidence-based guidelines to manage these retinal conditions in the general population. Established in 2009, the Registry forms the core structure for the Save Sight Registries database and interface. The Registry tracks patient outcomes for age-related macular degeneration, retinal vein occlusion, diabetic macular oedema, and choroidal neovascularisation (other than wet age-related macular degeneration). As of late 2023, the Registry will be capable of tracking outcomes for atrophy as treatments become available.

FRB! is now recognised as one of the world's leading "observational" databases, reporting on real-world outcomes for patients treated with injections of vascular endothelial growth factor (VEGF) inhibitors. It is currently the only system in the world with long-term data on anti-VEGF treatments for macular disease.

FIGHT CORNEAL BLINDNESS! (FCB!)

Chief investigator
Professor Stephanie Watson

Professor Stephanie Watson OAM is a corneal surgeon known for her ground-breaking research in corneal therapies. For Sydney Nano she contributes to the executive leadership team as co-Deputy Director for Industry, Innovation and Commercialisation. She leads the Corneal Research Group at University of Sydney and is Head of the Corneal Unit at the Sydney Eye Hospital.

Professor Watson is Chief Investigator for the Fight Corneal Blindness! Project. As Chair, Australian Vision Research; recent past-Chair to the Association for Research in Vision and Ophthalmology's (ARVO) Advocacy and Outreach Committee and Secretary to the Asia Pacific Ophthalmic Trauma Society, Professor Watson contributes to profession, policy and advocacy. The Medal of the Order of Australia was awarded for services to ophthalmology. In 2023, Professor Watson became a Graduate of the Australian Institute of Company Directors (GAICD), and a Gold ARVO fellow and in 2019 a Fellow of the Academy of Asia-Pacific Professors of Ophthalmology (AAPPO). Professor Watson was the only Australian to make the Power List of the Top 100 women in Ophthalmology in 2021 and in 2022 the only Australian woman on the Top 100 Power list for all ophthalmologists. She has received an Outstanding Service in Prevention of Blindness award from the Asia Pacific Academy of Ophthalmology, ARVO Silver Fellowship (FARVO), New Zealand's Dorothy Potter Medal and an NSW Premier's Prize for Leadership in Innovation.

The Fight Corneal Blindness! (FCB!) project launched in 2015 with its first module, keratoconus. In 2020, an optometry module was introduced to monitor optometry outcomes in keratoconus, complementing the original module and allowing both ophthalmologists and optometrists to contribute data. The module has resulted in significant research outputs, leading to influential publications and presentations at conferences. These contributions have substantially advanced our comprehension of keratoconus and its diverse treatment methodologies.

A Steering Committee of international experts in the field of keratoconus oversee the direction of the Registry. An Advisory Committee, made up of representatives from patient groups, industry, and other stakeholders offer valuable insights and directions for the Registry's operation. These committees play a crucial role in guiding the strategic and operational aspects of the registry, ensuring that it maintains a comprehensive and patient-centric approach in its efforts to collect, analyse, and disseminate data for the benefit of individuals affected by keratoconus.

The dry eye module was launched in 2020 to collect long-term data on the management of dry eye disease in both ophthalmology and optometry practices. In addition to collecting treatment outcomes, the module also collects patient-reported outcomes, allowing the team to understand the impact of dry eye on patient quality of life. The ability to collect longitudinal data may also improve our understanding of dry eye natural history which is currently poorly understood.

FIGHT GLAUCOMA BLINDNESS! (FGB!)

Chief investigator

Associate Professor Mitchell Lawlor

Associate Professor Lawlor is a glaucoma surgeon and specialist in diseases of the optic nerve. He has a PhD in bioethics from the University of Sydney, and has dual fellowship training in glaucoma and neuro-ophthalmology, both at Moorfields Eye Hospital in London. Associate Professor Lawlor is a Consultant Ophthalmologist at the Sydney Eye Hospital and a clinical academic at the University of Sydney. His research focuses on improving the diagnosis of glaucoma and other optic neuropathies. He is also the Chief Investigator of "Fight Glaucoma Blindness!" an international registry of glaucoma outcomes that provides real world evidence of the safety and efficacy of a range of glaucoma treatments.

When the registry first began, the initial focus was on tracking outcomes from some of the minimally invasive glaucoma surgery (MIGS) devices that had recently come to market. More recently clinicians have been using the registry to audit outcomes from more traditional glaucoma procedures such as trabeculectomy and tube shunt surgery.

The number of visits in the registry is growing by 10% per annum on average. Currently we are tracking over 10000 eyes with a total of around 67000 unique visits. FGB! is currently tracking around 3000 cataract with iStent inject procedures, and over 500 cataract with Hydrus microstent procedures. Similarly there are over 800 trabeculectomies int the registry, as well as around 1200 selective laser trabeculoplasty (SLT) procedures.

To date we have focused on IOP as the primary outcome measure, but this is a surrogate outcome measure. The more relevant outcomes of visual field, optic nerve OCT changes, and patient reported outcomes have to date been a challenge to incorporate. The next phase of FBG! will be working toward automating data extraction from devices to allow more in-depth analysis of the hard outcome measures mentioned above.

FIGHT UVEITIS BLINDNESS! (FUB!)

Chief investigator

Dr Richard Symes

Dr Richard Symes is a consultant ophthalmologist at Sydney Eye Hospital and Senior Clinical Lecturer at the University of Sydney. He subspecialises in uveitis, medical retina and glaucoma and he is followship trained in these three subspecialties. He is a director at Gordon Eye Surgery. Richard enjoys participating in research and has served as a sub-investigator for 15 clinical trials over the past 10 years. He has a particular interest in patient outcomes for uveitis and was heavily involved in the design of the Fight Uveitis Blindness! registry module.

Richard has a strong interest in registrar teaching, both in the clinic and in the wetlab. He is a regular trainer on the microsurgical skills course. He has a passion for aid work and has participated in eye-care outreach programs to Papua New Guinea and the Philippines.

Fight Uveitis Blindness! (FUB!) is the most complex registry to date. It has required a great deal of work and beta testing to launch this registry. The registry launched in its final form just under a year ago. The first analysis for FUB! took place this year – data from 3154 patient encounter (339) eyes at the International Ocular Inflammation Society meeting in Berlin, August 2023.

We are currently involved in a project to investigate the efficacy of adalimumab for patients with uveitis. It is hoped that the results of this study will help to support the availability of adalimumab through the PBS in Australia. Preliminary data were presented at the RANZCO meeting in Perth, October 2023. 149 Eligible eyes were identified (1181 patient visits). Data collection is still ongoing. With this project we hope to directly influence the quality of patient care using registry data.

FIGHT INHERITED RETINAL BLINDNESS! (FIRB!)

Chief investigator
Professor Matthew Simunovic

Matthew Simunovic is Professor of Ophthalmology and Visual Science at the University of Sydney and a Senior Consultant Surgeon in the Retina Division at Sydney Eye Hospital. His work addresses the leading causes of irreversible blindness in children and adults through translational research, which encompasses laboratory investigations through to clinical trials. Professor Simunovic's work on visual function in patients with inherited retinal disease led to the development of a computer-based test of colour discrimination, which is currently in use at the National Institutes of Health, UCL/Moorfields Eye Hospital and the University of Oxford. He is the first Australian ophthalmologist to be supported by a career development award from the Foundation Fighting Blindness, USA. Professor Simunovic was the first vitreoretinal surgeon to perform approved retinal gene therapy in the Southern Hemisphere (Luxturna) in 2020. To date, he has secured >$4 million in research funding as chief investigator, and he is currently supported by grants from the NHMRC, MRFF, Macula Disease Foundation Australia, Macula Society and Sydney Eye Hospital Foundation.

The Fight Inherited Retinal Blindness! (FIRB!) Registry was launched in 2022. It has two key aims:
- To track real-world outcomes of patients undergoing Luxturna gene therapy, and other emerging treatments as they become available.
- To track the natural history of patients diagnosed with inherited retinal disease using a standardised nomenclature, according to the human phenotype ontology program.

FIGHT TUMOUR BLINDNESS! (FTB!)

Chief investigator
Dr Roderick O'Day

Rod O'Day is a Melbourne-based ophthalmologist subspecialising in ocular oncology. Rod is thrilled to be working as part of the collaborative group of Australian and New Zealand ocular oncologists to implement the Fight Tumour Blindness (FTB!) registry as the core way we measure real world outcomes of patients with uveal melanoma.

Rod first worked with Professor Gillies and his team more than 15 years ago when studying in Sydney, a testament to Professor Gillies' ability to forge long-term research collaborations that make these projects successful.

Fight Tumour Blindness! (FTB!) tracks the management and outcomes of patients with uveal melanoma. Uveal melanoma is a rare, but deadly cancer, affecting approximately 250 patients in Australia each year. In the past it has carried a high fatality rate, with up to 50% of patients with uveal melanoma dying from the condition, but there is hope. Earlier treatment of intraocular tumours and new medications for disease once it leaves the eye are revolutionising our care of affected patients and will hopefully improve outcomes.

FTB! went live in 2023. This is a very important milestone and to date patients from all around Australia have been entered into the registry. This registry is in its infancy, but we are progressing well and will be expanding its use with clinicians in Australia, New Zealand and the United Kingdom. The module was discussed in presentations at the Australian Ophthalmic Registries Symposium, and at RANZCO 2023.

FIGHT CHILDHOOD BLINDNESS! (FChB!)

Chief investigator
Dr Caroline Catt

Dr Caroline Catt is the Principal Investigator of the Fight Childhood Blindness! Registry. She is a paediatric eye surgeon with experience caring for premature babies through to older children and adults. She is a consultant ophthalmologist at The Childrens' Hospital at Westmead, and provides retinopathy of prematurity screening and treatment at Royal North Shore Hospital and Liverpool Hospital Neonatal Intensive Care Units. Dr Catt is the Chair, Australia New Zealand Paediatric Ophthalmology Society (ANZPOS) and co-Chair, Vision2030 and Beyond Paediatric Ophthalmology Working Group. She is a Clinical Senior Lecturer with The University of Sydney and has a special interest in Retinopathy of Prematurity.

The Fight Childhood Blindness! Registry tracks treatment outcomes for eye conditions affecting children and babies. Its first module, focused on retinopathy of prematurity (ROP), has been in development since early 2020 and was launched in September 2023. It tracks treatments used, practice patterns and ophthalmic and neurodevelopmental outcomes for babies treated for ROP. It follows the Save Sight Registry model of being a secure, web-based registry that allows for multinational input for sites with ethics approval to participate. It allows users to track the outcomes of their cohort. It provides a useful graphical display of the ROP activity score (and later, visual acuity) which is useful for clinicians and for patients and their families to track progress after treatment. This Registry will be a source of real-world data which will be used to drive improvements in patient outcomes.

2023 EVENT HIGHLIGHTS

Australian Ophthalmic Registries Symposium (AORS)

In September, the Save Sight Registries (SSR) organised the inaugural 'Australian Ophthalmic Registries Symposium (AORS)'. Held over two days, the Symposium invited leading ophthalmic registries to come together to share their experiences, successes, and challenges.

Professor Mark Gillies, Associate Professor Mitchell Lawlor, Dr Caroline Catt, Professor Matthew Simunovic, Dr Richard Symes, Dr Rod O'Day, Dr Hemal Mehta and others from the Save Sight Registries were among the presenters.

Attendees discussed ethics and governance, data security, funding and more, as well as potential collaborative opportunities. The event was positively received and will likely become an annual event.

EURETINA 2023

In October, SSR Project Manager Mila Kolmogorova and Project Officer (France) Hannah Crowdy held a booth at the EURETINA 2023 conference in Amsterdam. This was the first time the Sydney office has attended the conference since 2019.

Mila and Hannah were able to connect with existing Users, as well as potential new Users who could aid the project's international expansion. The conference also provided an opportunity for the Sydney Team to meet with its main contacts in the Netherlands in the interest of continuing a positive working relationship.

RANZCO 2023

This year, the Save Sight Registries shared a booth with the Save Sight Institute at RANZCO 2023 in Perth. The booth gave the Registries team the opportunity to introduce the project to prospective new Users. The team were also able to connect with existing Users to provide training refreshers, information on newly launched modules, and to answer questions regarding CPD points.

The Registries were well-represented in presentations at the conference, including in rapid-fire sessions in corneal and retinal research.

Dr Hemal Mehta, Dr Richard Symes, Professor Stephanie Watson and Dr Rod O'Day presented at a dedicated session on ophthalmic registries.

The Registries also held a Fight Retinal Blindness! Steering Committee, which reviewed the development of the macular atrophy module, and a Fight Corneal Blindness! Users Meeting which gave Users an update on how the module has progressed over the past 12 months.

2023 PUBLICATIONS

1. Izquierdo-Serra et al., 'Macular Neovascularization type influence on anti-VEGF intravitreal therapy outcomes in Age-related Macular Degeneration' (November 2023). *Ophthalmology Retina*.

2. M. Airaldi et al., 'Twenty-four-month real-life treatment outcomes of polypoidal choroidal vasculopathy versus type 1 macular neovascularization in Caucasians' (October 2023). *Clinical and Experimental Ophthalmology*

3. E. Debourdeau et al., 'Does HbA1c Level or Glomerular Filtration Rate Affect the Clinical Response to Endothelial Growth Factor Therapy (Ranibizumab or Aflibercept) in Diabetic Macular Edema? A Real-Life Experience' (October 2023). *Ophthalmology and Therapy*

4. C. Catt et al., 'Development of a joint set of database parameters for the EU-ROP and Fight Childhood Blindness! ROP Registries' (September 2023). *British Journal of Ophthalmology*

5. A. Hunt et al., 'Hemiretinal vein occlusion 12-month outcomes are unique with vascular endothelial growth factor inhibitors: data from the Fight Retinal Blindness! Registry' (June 2023). *British Journal of Ophthalmology*

6. H. Kandel et al., 'Comparison of standard versus accelerated corneal collagen cross-linking for keratoconus: 5-year outcomes from the Save Sight Keratoconus Registry' (June 2023). *Eye*

7. H. Kandel et al., 'Opportunities and challenges for clinical registries' (May 2023). *Clinical and Experimental Ophthalmology*

8. S. Bhandari et al., 'Changes in 12-month outcomes over time for age-related macular degeneration, diabetic macular oedema and retinal vein occlusion' (April 2023). *Eye*

9. E. E. Cornish et al., 'Outcomes of switching from proactive to reactive treatment after developing advanced central neovascular age-related macular degeneration' (March 2023). *Retina*

10. K. Y. C. Teo et al., 'Longer treatment intervals are associated with reduced treatment persistence in neovascular age related macular degeneration' (February 2023). *Retina*

ACKNOWLEDGEMENTS

We would like to acknowledge the following individuals and organisations who have supported our work in the past year: our external developers (SSTech), SANRO Health, Glaukos, Bayer, Apellis, Roche, Australian Vision Research, Singapore National Eye Centre and, of course, the patients that make the Registries possible.

DIRECTORS

Professor Mark Gillies
Professor Daniel Barthelmes

MODULE CHIEF INVESTIGATORS

Fight Retinal Blindness! – Professor Mark Gillies, Professor Daniel Barthelmes
Fight Corneal Blindness! – Professor Stephanie Watson
Fight Glaucoma Blindness! – Associate Professor Mitchell Lawlor
Fight Uveitis Blindness! – Dr Richard Symes
Fight Inherited Retinal Blindness! – Professor Matthew Simunovic
Fight Tumour Blindness! – Dr Roderick O'Day
Fight Childhood Blindness! – Dr Caroline Catt

PROJECT TEAM

Project Manager – Mila Kolmogorova
Software Developer – Marco Garcia
Project Coordinator – Robert Medynski
Research Officer – Dianna Raad
Project Officer – Alison Grinyer
Biostatisticians – Yohei Hashimoto, Marianna Rosso
Project Administration Assistant – Mia Rainey, Chantelle Logue
Postdoctoral Fellow (Fight Corneal Blindness!) – Himal Kandel
Postdoctoral Fellow (Fight Corneal Blindness!) – Ngozi Chidi-Egboka
Project Officer (France) – Hannah Crowdy
Project Officer (Europe) – Sarah Steinmann
Training Officer (UK) – Charles Henning
PhD student (Fight Retinal Blindness!) – Dr Adrian Hunt

2023 FINANCIALS

INCOME	$
Commencing balance (carry forward)	1,797,071
Revenue	793,180
Total Revenue	2,590,251

EXPENDITURE	
Salaries	-866,549
Total Salary Expenditure	-866,549
Employee Benefit Expenses	-7,727
Consultants and Contractors	-91,352
Conference and Travel	-182,615
Equipment Utilities and Communication	-7,136
Consumables	-571
Miscellaneous	-2,495
Printing and Publications	-6,526
Marketing and Promotion	-3,512
Indirect Cost Recovery	-157,249
Total Other Expenditure	-459,183
Total Expenditure	-1,325,732
NET SURPLUS/(DEFICIT)	1,264,519

Save Sight Registries

Seeing Outcomes

savesightregistries.org