

Report of Cornea and Anterior Segment Fellowship 2012-2013

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If Ophthalmology is reported to be a balance of medicine and surgery, then the sub-specialty of Cornea and Anterior segment is a blend of clinical medicine, surgery and academia. Finding a one year intensive fellowship which offers sufficient exposure to each of these important areas can be difficult to identify, and then even more difficult to obtain. I was already aware of the world class reputation of the Ophthalmology Department in Auckland through previous fellows' reports. Visiting the department in Auckland, and seeing firsthand the impressive organisational structure of the New Zealand National Eye Centre, and the prodigious output of presentations and publications, coordinated through the leadership of Professor Charles McGhee, confirmed to me that this was a team I wanted to be part of.

My clinical fellowship was for 1 year, and was divided 80% Clinical and 20% Research. The clinical sessions were based at Greenlane Clinical Centre, Auckland, and included 5 outpatient clinics and 3 operating theatres. The corneal team consisted of 4 consultants, led by Prof McGhee, and included Dr Trevor Gray, Dr David Pendergrast and Dr Sue Ormonde. The clinical sessions were well structured, with every opportunity taken for teaching and discussion. The investigation and management plans were complemented by cutting edge imaging and diagnostic equipment.

It was anticipated that most corneal fellows would complete, in a graded fashion, approximately 30 corneal transplants, perform >100 cataracts and assist and perform many other complex anterior segment reconstructions during the year. My surgical opportunities greatly exceeded these figures, and I was exposed to surgical complexities far beyond my expectations. It was particularly beneficial to work with each of the consultants, as the variety of different and complementary approaches to clinical and surgical scenarios ensured well balanced training.

Active academic research projects were both expected and encouraged, with realistic outcomes and deadlines. These led to numerous platform presentations at international and national conferences, and peer reviewed publications. Such opportunities only present themselves when you are part of a dynamic, active university department, and it was encouraging to see the clear desire in Auckland for taking research from the laboratory to the clinic. I also had an active role in teaching medical and optometry students, both in university based lectures and in clinic based sessions.

While a busy fellowship is hard work, there was ample opportunity to play hard too. I was actively encouraged to make full use of my annual leave and weekends to explore the beautiful country of New Zealand. Coming from the UK with a young family, certain aspects of NZ were reassuringly familiar, but it was also refreshing to immerse ourselves in such a different and diverse culture for a year. We were pleasantly surprised how much our children seemed to have thrived in the outdoor lifestyle.

I had always wanted to do a corneal fellowship which was world class, and wondered beforehand if Auckland would live up to the hype. I can reassure any future candidates that the Cornea and Anterior Segment fellowship here far exceeds its' well justified reputation. I am very grateful that I had so many opportunities to learn, develop and hone my clinical, surgical and academic skills in this department, and am sure that this has created a strong foundation for my future career.