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# *IOA EXCHANGE PROGRAMME – VU MEDICAL CENTRE, AMSTERDAM*

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The future of Orthoptics it is now clear lies in extending roles. As professionals who undoubtedly have a wide and extensive knowledge basis, we also have the ability to take over roles more commonly taken on by other health professionals. One of the main aims of my visit to the department was to gain an insight into any similarities and differences between the UK and Holland, especially regarding the area of extended roles of the orthoptist. As a student I have had the opportunity to visit numerous departments throughout the country giving me, what I feel, a good base as to commence my career as an orthoptist. For myself, the visit to Amsterdam was to try to further my experiences thus far.

As a newly qualified Orthoptic student from the University of Liverpool, I have not yet had the chance to settle into practice and to be influenced into a working style. This is why I wanted to experience what the IOA exchange programme had to offer before becoming a professional, so as to go into the experience with an unbiased mind and to gain the most from my experiences. The site I chose to visit was the Vrije Universiteit Medisch Centrum in Amsterdam, The Netherlands.

My first impression of the Oogheelkunde (ophthalmology) department within the VU medical centre was the size of it. With a room for each Orthoptist (there are 5 within the department), separate laser and imaging rooms, about 10 rooms used by the ophthalmologists, in addition to a small procedures theatre and ward all within the department, the size compared to many I have seen within the UK is remarkable. But it doesn't end there, the size of each of the rooms also impresses. Upon first viewing the rooms there is a rather large piece of testing equipment upon the wall of every room which interests me having never seen it before. It was later explained to me that it's known as the Maddox Cross, and is used often within the department for both near and distance measurements. I found this very interesting to note as this is done routinely rather than the prism cover test, but I am yet to discover a comparison of the two techniques within the literature.

As my visit from the 7<sup>th</sup> June to the 11<sup>th</sup> June was very short I was asked regarding any areas of interest I had. As my dissertation was regarding Age Related Macular Degeneration, this is an area of interest of mine and I was most intrigued to follow their ARMD clinic, including observing injections with Dr. De Jong. Having previously seen these before it was not the procedure I found of interest rather the basis on which their patients and type of injection were selected. Following discussion regarding their selection procedure, the similarities between our two countries becomes apparent. However, it was clear that Avastin was much more available for use compared to its usage within the UK, I suppose that being one of the drawbacks of our NHS.

I had the pleasure of observations within other closely run ophthalmologist/orthoptic clinics, such as the Retinoblastoma clinic. The screening

procedure in place within the department was one to be admired, with any child with a family member affected by retinoblastoma, having a full and comprehensive examination under anesthesia with the ophthalmoscope. Unfortunately I have had no such experience during my student placements so am unable to compare the Dutch procedure to the UK's, but still I now have the knowledge that such a procedure is a highly worthwhile one.

In addition, to watch the expertise of Dr. Van Rijn was greatly appreciated. A pioneer in his field, it was a pleasure to observe him in action and to see what I was told was a pioneering procedure take place within my presence. However, I shall not disclose anymore and shall allow you to find out more from the Strabismological convention in Turkey later this year.

Let's not forget what I went to Amsterdam to do. During my observations within the clinics it was most interesting to observe the differences in the principle investigations between our two countries. Discovering not only the differences, but the similarities that are important and to be able to discuss with another professional regarding opinions on management options. I will take away from this experience a more in-depth knowledge behind investigations and management, and aim to implement this in my future career as an Orthoptist.

My visit to the department was most enlightening. I gained knowledge to further myself as not only an individual but as an Orthoptist as well. With my full career ahead of me I look forward to the opportunities and possibilities that may arise for me. For my visit to the department I have to extend my thanks to Mrs Katherine Fray and Miss Amber Bakels, without whom my visit would not have been possible. In addition, I would like to thank everyone else within the department who made me feel very welcome throughout my visit and explained everything to me in English to help with my understanding,

Many thanks and Best Wishes to all.

***Danielle Eckersley***