Barometer Ambassador Programme Ambassador Spotlight...



Professor Focke Ziemssen Role: Hospital Director



When did your clinic join the patient and clinician multi-country survey and what is your involvement in the survey?

As part of the Barometer programme, I was able to participate in the pilot phase of the survey in Tübingen. This helped us to improve the format and to condense the content to essential points before we started the actual data collection in August 2021.

How many patients has your clinic recruited to date?

Due to vacations, we have only just started, but are making good progress. In addition, the pandemic could set us back a bit.





Why did you agree to take part in the patient and clinician multi-country survey?

The issue of under-treatment has been an important topic for me for years, because this means that the full potential of anti-VEGF drugs cannot be accessed. Our studies showed that there are significant differences/changes from the start of the naïve patient to the later course.





What is your biggest achievement as part of the patient and clinician multi-country survey, so far?



Actually, every patient who has been convinced of adhering to the treatment strategy is already a success. But, of course, I am also pleased to see how many colleagues confirm how important this topic is, through engaging with the survey.



Why is patient centricity important to you and how has it affected your recruitment strategy?

It is in line with my personal belief in patient autonomy and also the ideal of participatory decision-making. Therefore, it does not surprise patients when they are asked for their opinion and experience. In terms of limiting factors and suffering the burden, the patients themselves are the greatest experts.

Therefore, most patients are more than happy to be asked for their assessment.

Are there any other recommendations or insights into patient-centric care that you would like to share with the Ambassador community?



In my experience, patients who have just started treatment differ significantly from those who have already received injections for several months.

Although we may not expect a significant change - fundus findings and situation may also look superficially unchanged - a fundamental change of mind may have developed. So, it is important that we as physicians remain vigilant and, above all, responsive to changing individual needs. Furthermore, this is precisely what can bring joy, so that we do not fall into a monotony, but instead seek variety and surprise.



Are there any further details you would like to share?

I would like to encourage anyone and everyone to share their recipes for success for good adherence or their path to successful communication. Medical schools do not necessarily prepare us well in communication skills and tricks. Thus, if we learn from each other and share successful methods, it can contribute to better medical practices and outcomes.

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