



OSLO
2026
28-30 May

PROGRAMME

A NOTE FROM THE HOST

Dear colleagues, friends and guests,

On behalf of Oslo University Hospital, and the EAsDEC 2026 organising committee, we are delighted to welcome you to the 36th Annual EAsDEC Conference, held this year in Oslo, Norway — a city nestled between sea and forest, alive with the promise of a Nordic late spring.

It is a privilege to host this gathering in Oslo, and we are proud to continue the tradition established in the pioneering spirit of Eva Kohner: a uniquely European platform where science, clinical practice, and collegial exchange come together in the shared pursuit of preventing sight loss from diabetic retinopathy.

This year's programme reflects the breadth and vitality of our field, and we have worked to create an environment where both the formal sessions and the spaces in between offer real opportunity for the exchange of ideas. We hope you find the programme stimulating, the conversations energising, and the setting — the blue, the green, and the city in between — an inspiring backdrop for it all.

We are grateful to our sponsors, whose generous support makes this conference possible. Their commitment to advancing the science and care of diabetic eye disease is deeply appreciated.

To every speaker, contributor and participant: Welcome to Oslo. We hope these three days leave you with new knowledge, renewed connections, and a little warmth to carry home.

With warm regards,

Dag Fosmark MD, PhD

Senior Consultant

Eye dept. Oslo University Hospital

Goran Petrovski MD, PhD, Professor

Eye dept. Oslo University Hospital

OUR HOSTS



OSLO UNIVERSITETSSYKEHUS



ORGANISING COMMITTEE

LOCAL ORGANISERS

Dag Fosmark, MD, PhD, Senior Consultant Eye Department Oslo University Hospital

Goran Petrovski, MD, PhD, Professor, Eye Department Oslo University Hospital

Rachel Eilertsen, Event Lead, antVantage

EAsDEC BOARD

Prof Dr Reinier Schlingemann, Oogart, Specialist Medische Retina, Head of Ocular Angiogenesis Group, Amsterdam University Medical Centers

Prof Tunde Peto, Professor of Clinical Ophthalmology, Institute of Clinical Science A, Queen's University Belfast

Prof Stela Vujosevic, MD, PhD, FARVO, FEBO, Ass. Professor of Ophthalmology University of Milan, Milan, Italy, Head of Medical Retina & Imaging Unit, IRCCS MultiMedica, Milan, Italy

Dr Philip Burgess, Senior Clinical Lecturer in Ophthalmology, University of Liverpool

EAsDEC ADMINISTRATION

Kath Prescott

Sara Shields

MORE ABOUT EAsDEC

EAsDEC is dedicated to connecting all those studying diabetic eye complications and aiming through joint efforts to prevent vision loss from diabetes. Our Association includes epidemiologists, statisticians, laboratory scientists, clinical scientists, endocrinologists, and the full range of eye care professionals. There is an emphasis on networking, discussion and thoughtful debate and a tradition of early career scientists and clinicians connecting with senior leaders in the field.

Our Association was conceived in Coimbra in 1989 and held its first meeting in 1991 headed by our first President, Eva Kohner. Until 2022 we functioned as a Study Group under the auspices of the European Association for the Study of Diabetes. Due to changes in the regulations around professional associations the name was changed slightly in 2022. The EAsDEC annual meeting is a non-profit event, with the focus purely on educational output, knowledge sharing and research.

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VENUES

DAY 1

THURSDAY 28 MAY

Meeting at Ullevål Meet

Address: Ullevål Stadium, Sognsveien 77C, 0855 Oslo

EAsDEC Opening Ceremony & Welcome Reception at City Hall

Address: Rådhuset, Rådhusplassen 1, 0037 Oslo

DAY 2

FRIDAY 29 MAY

Meeting at Ullevål Meet

Address: Ullevål Stadium, Sognsveien 77C, 0855 Oslo

Dinner at Sporten

Address: Holmenkollveien 204, 0784 Oslo

DAY 3

SATURDAY 30 MAY

Meeting at Ullevål Meet

Address: Ullevål Stadium, Sognsveien 77C, 0855 Oslo

PROGRAMME OVERVIEW

THURSDAY

15:30	Registration
16:00	'NORTHERN (high) - LIGHTS in diabetes and DR research'
16:45	Roche Sponsored Mini-Symposium
17:30	Bus transfer*
18:00 – 20:00	Opening Ceremony & Welcome Reception at Oslo City Hall

FRIDAY

8:30	Registration
9:00	Welcome
10:00	Coffee Break
10:45	Debate: 'A paradigm shift is needed in trial design for intravitreal agents in DME'
11:15	Session 2: Imaging and Artificial Intelligence
12:30	Lunch Buffet
13:00	Poster Session
15:00	Session 3: Laboratory Experimental A & Keynote
15:45	Keynote: Professor emeritus. Trond G Jensen
16:15	Eva Kohner Lecture: Prof. Toke Bek
16:45	AGM + Lithuania Introduction
17:15	Close
17:30	Bus transfer**
18:00 - 22:00	Conference Dinner at Sporten

SATURDAY

8:30	Registration
9:00	Session 4: Screening
9:45	Session 5: Translational
10:30	Coffee Break
11:00	Keynote: Prof. Per M Thorsby
11:25	Keynote: Dr Lars Krogvold
11:50	Session 6: Research Horizons
12:45	Poster Prize & Closing Remarks
13:00	Farewell – Standing lunch

*Buses will transport attendees from Ullevål Meet to City Hall

**Buses will transport attendees from Ullevål Meet to Sporten and back to Ullevål Meet and National Theatre

DETAILED PROGRAMME

THURSDAY 28 MAY

DAY 1

15:30	Registration
16:00	'NORTHERN (high) - LIGHTS in diabetes and DR research. An Eye on the Past, Present and Future' Dr Kåre Birkeland, Prof. of internal medicine & Dr Goran Petrovski, Prof. of ophthalmology
16:45	Roche sponsored mini-symposium - Evolving Treatment Strategies in Diabetic Macular Edema: Clinical Experience with Faricimab <ul style="list-style-type: none">Welcome and Introduction - Dag FosmarkDME in Focus: From Biomarkers to Clinical Practice - Prof Stela VujosevicFrom Clinical Trials to Real-World Practice: Translating Evidence into Patient Care - Prof Serena SalvatorePanel discussion and Q&AClosing remarks Dag Fosmark.
17:30	Bus to Welcome Reception — Oslo City Hall Buses will transport attendees from Ullevål Meet to Oslo City Hall
18:00 – 20:00	36th EAsDEC Annual Meeting Opening Ceremony Welcome reception at Oslo City Hall (Nobel Ceremony Hall) All guests must clear security between 18:00-18:30. The reception formalities begin at 18:30 sharp.

FRIDAY 29 MAY

DAY 2

8:30	Registration All posters must be mounted between 08:30–08:45, to ensure they are in place for the first session.
9:00	Welcome — Dag Fosmark
9:15	SESSION 1: CLINICAL Moderators: Stela Vujosevic and Christina Rennie Rennie, UK. Optimising Anti-VEGF and corticosteroid use in centre-involved diabetic macular oedema: A validated UK Delphi consensus supporting individualised patient care (5 mins + 2 mins Q&A) Rapid Fire (4 min / presentation) Vujosevic, Italy. A randomized, active-controlled clinical trial of fluocinolone acetonide 0.19-mg intravitreal implant for diabetic macular oedema: visual acuity outcomes based on lens status -- Results from the NEW DAY study O'Donovan, UK. Switching from Aflibercept to Faricimab in diabetic macular oedema: Real-world outcomes Huber, Austria. One-year real-world outcomes after switching from Aflibercept to Faricimab in diabetic macular oedema Ahmad, UK. Intravitreal Faricimab for treatment of diabetic macular oedema: Impressive real-world outcomes sustained at 52 weeks Salvatore, UK. Real-world dexamethasone implant (DEX-I) injection burden in diabetic macular oedema: insights from 10 UK sites using the mediSIGHT EMR

DAY 2

10:00	<p>Peto, UK. Two-year effectiveness, durability and safety of Faricimab in eyes with diabetic macular oedema: Results from the UK FARWIDE-DME Study</p> <p>Questions & discussion (12 min)</p> <p>Moderators' conclusions (2 min)</p> <p>Coffee Break</p>
10:45	<p>DEBATE</p> <p>'A paradigm shift is needed in trial design for intravitreal agents in DME'</p> <p>For: Reinier Schlingemann Against: Philip Burgess</p>
11:15	<p>SESSION 2: IMAGING AND ARTIFICIAL INTELLIGENCE</p> <p>Moderators: Goran Petrovski and Maria Cicinelli</p> <p>Short talk (10 mins)</p> <p>Goran Petrovski. 'Implementation of Artificial Intelligence in DR screening in Norway'</p> <p>Free papers (5 min + 2 min Q&A / presentation)</p> <p>McNally, UK. Creation of a validated OCT fluid segmentation gold standard to support AI development in DMO</p> <p>Cicinelli, Italy. Intraretinal fluid redistribution as a dynamic biomarker of treatment response in diabetic macular oedema</p> <p>Jeppesen, Denmark. Visual acuity is reduced with increasing central retinal thickness, higher age and female sex in diabetic macular oedema</p> <p>Widmann-Sedlitzky, Austria. Hard exudate and hyperreflective foci dynamics across anatomical response patterns in faricimab-treated diabetic macular oedema</p> <p>Pignataro, Italy. Microaneurysm reflectivity as a prognostic biomarker for intravitreal treatment response in diabetic retinopathy</p> <p>Almeida, Portugal. Retinal microvascular and neuronal findings in type 2 diabetes: Results from a screening programme</p> <p>Marques, Portugal. Two-year longitudinal progression of microvascular changes in moderate to severe non-proliferative diabetic retinopathy: The RICHARD Study</p> <p>Anne Katrin Sjølie Student Prize</p> <p>Dag Fosmark. Anne Katrin Sjølie Memorial talk</p> <p>Kunze, Austria. Diabetic vascular and inflammatory microstructures followed over time by high-resolution adaptive optics imaging (5 min)</p> <p>Moderators' conclusions (5 min)</p>
12:30	<p>Lunch Buffet</p>
13:00	<p>POSTER SESSION (13:00–15:00)</p> <p>Poster Section 1. Clinical A</p> <p>Moderators: Maria Grazia Pignataro and Toke Bek</p> <p>Gruszka-Goh, UK. Injection treatment intervals in eyes with DMO switching to 8mg Aflibercept</p> <p>Wales, UK. Can telephone consultations enhance the diabetic ophthalmology service?</p> <p>Bettencourt, Portugal. Early-onset high-risk proliferative diabetic retinopathy in type 1 diabetes: a rare case and 20-year cohort analysis</p>

Chatziralli, Greece. Randomized, controlled study to investigate the efficacy and safety of resveratrol vitamin supplements in patients with non-proliferative diabetic retinopathy without diabetic macular oedema (REVOLUTION study)

Tarasi, Romania. Early worsening of diabetic retinopathy after rapid glycaemic control: A case report highlighting vitamin D as a nutritional intervention

O'Toole, Republic of Ireland. Diabetic Retinopathy Screening Outcomes in Pregnancy: A Review of the Pregnancy Pathway in the Irish National Diabetic Retinal Screening Programme.

Poster Section 2. Clinical B

Moderators: Andreas Pollreis and Morten C. Moe

Ferreira, Portugal. Fluocinolone acetonide after glaucoma surgery in diabetic macular oedema: clinical risk or safe therapeutic option?

Saraan, UK. Effectiveness and safety of intravitreal steroid therapy for diabetic macular oedema: A clinical audit at the Royal Liverpool University Hospital.

Peto, UK. Injection frequency, loading dose completion, and 12-month outcomes of anti-VEGF treatment in diabetic macular oedema

Madeira, Portugal. Sustained disease control with fluocinolone acetonide implant in refractory diabetic macular oedema: Real-world evidence

Earley, UK. Diabetic and surgical factors associated with progression of pseudophakic diabetic retinopathy, a 5 year follow up study

Bettencourt, Portugal. Acute bilateral cystoid macular oedema following SARS-CoV-2 vaccination in a type 1 diabetic patient: A case report

Tomić, Croatia. Citicoline shows potential in reducing the hard exudates in diabetic retinopathy

Similie, Denmark. Rapid glycaemic reduction and early worsening of diabetic retinopathy in type 1 diabetes: A Danish nationwide cohort study

Poster Section 3. Imaging and Artificial Intelligence

Moderators: Inês Pereira Marques and Signe Jeppesen

Carotenuto, Italy. OCT and OCTA phenotypes as predictors of durable response to aflibercept 8 mg in diabetic macular oedema: An 18-month real-world analysis

Carotenuto, Italy. Artificial intelligence--guided inflammatory biomarkers to support a proactive dexamethasone implant regimen in diabetic macular oedema: A real-world study analysis

Pinto, Portugal. Microaneurysm counting as a biomarker for the hyperperfusion stage of non-proliferative diabetic retinopathy

Poster Section 4. Screening

Moderators: Geir Bertelsen and Philip Burgess

Davies, UK. Feasibility of an alternative pathway for hospital referrals from Diabetic Eye Screening Wales (DESW) for people suspected with sight-threatening diabetic eye disease (diabetic maculopathy)

Babić, Croatia. Design and implementation of a national programme for diabetic retinopathy screening in Croatia: A telemedicine-based population health initiative

Sharif, Sweden. Quantifying diabetic retinopathy in the elderly: Long term screening outcomes

Jamison, UK. Rates of retinopathy and maculopathy at diabetes clinics

DAY 2

	<p>in three regions of Tanzania</p> <p>Meredith, UK. A review of people within the English National Diabetic Eye Screening Programme who were screened without mydriasis</p> <p>Sauesund, Norway. Implementation of diabetic retinopathy screening in the Oslo Region, Norway: A Three-year pilot study</p> <p>Rahim, UK. Post-COVID-19 barriers to diabetic retinopathy screening attendance: An updated systematic review</p> <p>Sproule, UK. The Diabetes Complications in Senior Adults (DCSA) Study: Diabetic eye disease in people over the age of 80 with diabetes in Northern Ireland</p> <p>Ao, China. Establishing a regional diabetic eye screening system in Hinggan League, China</p>
14:30	<p>Coffee Break</p>
15:00	<p>SESSION 3: LABORATORY EXPERIMENTAL A</p> <p>Moderators: Patrice Fort and Imre Lengyel (5 min + 2 min Q&A / presentation)</p> <p>Fort, USA. The Mary Tyler Moore Vision Initiative Biorepository and Resource Center: Deep structural analysis of the neurovascular unit components as a function of diabetic retinal disease</p> <p>Lengyel, UK. A Type 1 Diabetic Abcc6 +/- mouse model reveals mechanisms of ectopic calcification and therapeutic potential of oral pyrophosphate</p> <p>Su, Germany. VE-cadherin Y685 phosphorylation is critical for neurovascular unit regulation during retinal angiogenesis</p> <p>Ambrosio, Portugal. Negative impact of a primary immune challenge triggered by lipopolysaccharide on the retina of diabetic rats</p> <p>Lin, Germany. MDM2 regulates integrin $\beta 8$ expression in mouse diabetic retina</p> <p>Arroba, Spain. Proteomic and inflammatory signatures associated with diabetic retinopathy in type 1 diabetes mellitus</p> <p>Moderators' conclusions (3 min)</p>
15:45	<p>KEYNOTE: Professor emeritus. Trond G Jenssen, Nephrologist, Rikshospitalet, Oslo University Hospital</p> <p>'An Eye for the Kidney' (20 mins + 10 mins Q&A)</p>
16:15	<p>Eva Kohner Lecture: Professor, dr. med. Toke Bek, Eye dept., Aarhus University Hospital, Denmark. Introduced by RS</p> <p>"To look - may be to overlook - when we try to understand diabetic retinopathy" (20 mins + 10 mins Q&A)</p>
16:45	<p>AGM + Lithuania introduction</p> <p>Vilma Jurate Balciuniene. Lithuania introduction</p>
17:15	<p>Close</p>
17:30-22:00	<p>Conference Dinner at Sporten - nestled in the hills of Oslo</p> <p>Buses will transport attendees from Ullevål Meet to Sporten and back to Ullevål Meet and National Theatre. Dinner starts at 18:00.</p>

SATURDAY 30 MAY 2026

DAY 3

8:30	Registration
9:00	SESSION 4: SCREENING Moderators: Maja Gran Erke, Geir Bertelsen and Laura Cushley Short Talk (7 min / presentation) Erke, Norway. Update on diabetic eye screening in Norway Discussion (5 min) Free Papers (5 min / presentation) Borjan, Croatia. Proliferative Diabetic Retinopathy in Young-Onset Type 1 Diabetes in Croatia: Risk Factors and a Predictive Economic Model for National Screening Haidar, UK. Progression of diabetic retinopathy from referral to treatment or vision loss: External validation, update and net clinical benefit of a multivariable prediction model Cushley, UK. Diabetes Complications in Senior Adults (DCSA) Study: investigating diabetic eye disease, knowledge and opinions in people over 80 in Northern Ireland Vrabec, Croatia. First twelve-month results of diabetic retinopathy screening in Croatia: what we have done and achieved Discussion & moderators' conclusions (6 min)
9:45	SESSION 5: TRANSLATIONAL Moderators: Ingeborg Klaassen and Eleni Beli (6 min + 2 min Q&A / presentation) Jansson, Norway. Light-adapted full-field electroretinography predicts diabetic retinopathy progression: A 10-year prospective cohort study Peterson, Denmark. The amplitude of spontaneous diameter oscillations in retinal arterioles is increased in patients with vision threatening diabetic retinopathy Beli, UK. The role of microglia circadian clock in diabetic retinopathy Klaassen, The Netherlands. Retinal and cerebral microvascular changes in diabetes and Alzheimer's disease Besic, Denmark. Clinical interpretation of inner retinal phenotypes in children and young adults with type 1 diabetes Discussion & moderators' conclusions (5 min)
10:30	Coffee Break
11:00	KEYNOTE: Per M Thorsby, Professor in medical biochemistry, Medical chair of department Hormone Laboratory, Specialised in endocrinology and internal medicine, Oslo University Hospital 'Early detection of diabetes - finding the patient before the disease'
11:25	KEYNOTE: Lars Krogvold, MD, PhD, Head of Diabetes Unit, Paediatric Dept., Oslo University Hospital Prevention and screening of type 1 diabetes

11:50

SESSION 6: RESEARCH HORIZONS

Moderators: Dag Fosmark and Mojca Urbančič
(6 min + 2 min Q&A / presentation)

Torm, Denmark. Retinal neurophysiological and microvascular parameters in young patients with type 1 diabetes

Hellgren, Sweden. Methods to detect change in visual fields in diabetic patients followed over a ten-years period

Toma, Italy. Evaluation of quality of life with a novel computerised system and visual function in patients with centreinvolving diabetic macular oedema

Al-Zubaidy, UK. Predicting anti-VEGF outcomes in centre-involving diabetic macular oedema using regression and multimodal deep learning: A real-world NHS cohort

Urbančič, Valentincic, Simoncic, Kravanja, Slovenia. Association between macular pigment optical density, diabetes, and diabetic retinopathy

Yu, China. A gold nano-array SERS platform integrated with aptamer-antibody recognition enables non-invasive diagnosis and specific screening of diabetic retinopathy via tear

Discussion & moderators' conclusions (7 min)

12:45

Poster Prize & Closing Remarks — Reinier Schlingemann

13:00

Farewell

Join us for a standing lunch before you begin your journey home.



CONTRIBUTORS INFORMATION

ORAL PRESENTATION

Guidelines

To ensure smooth technical execution during the sessions, please follow the instructions below:

- Accepted formats: PowerPoint (PPTX) or Keynote
- Aspect ratio: 16:9 (widescreen)
- Slide 2 must include a declaration of any conflicts of interest
- If your presentation includes video content, please also submit the video(s) separately in MP4 format
- Please name your files using the following format.
- Presentation date - Session #/ name - Your Name & Paper title as listed in the program.pptx
- Example: Friday_ Session 1_Rennie, UK. Optimising Anti-VEGF and corticosteroid

Presentation upload deadline

All presentation files must be uploaded by no later than 8:45am on the day of your presentation via dropbox.



On the day

Please take a seat in the reserved section in the front of the room by the end of the break, just before your session. This will help us keep everything running smoothly and on time.

POSTER SESSION

Posters will be displayed on Friday and Saturday, May 29-30. All posters must be mounted between 08:30 – 08:45, to ensure they are in place for the first session. We kindly ask all presenters to be available at their posters during the designated poster session times as listed in the programme.

MODERATORS

Please review the abstracts of the presentations in your session and be prepared to lead the discussion.

For oral presentations, please ensure presenters stop at or shortly after their allotted time to allow discussion time at the end of each presentation. You have an additional few minutes at the beginning of the session to introduce the key messages and at the end to sum up and emphasise key points. There is no need to read out the title slide.

For poster presentations, please ensure you visit each poster during the first half of the poster session.



OSLO
2026

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Conflict of interest disclosure

The content of this meeting is independent of commercial interests. Any conflict of interest by the scientific organisers or the presenters will be disclosed in the related presentations and with the abstracts.