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**From:** Boris Nikolic [REDACTED]  
**Sent:** Sunday, May 19, 2013 11:48 PM  
**To:** Jeffrey Epstein (jeevacation@gmail.com)  
**Subject:** FW: Yesterday

Please keep this confidential.

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Mark is great but I do thank that he is trying his best to calm me down. It is the best if you read from my mail at the bottom first.

Re his email:<=span>

Snellen numbers – is a test that show that I will most likely not have much improvement after cataract surgery. He is explaining why it might

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His worry is something that I did not mention at all – his worry is that he will need to continue killing my retina by laser (laser burns it by a heat), that he will need to continue to go in rounds and rounds. Essentially my blood vessels of retina are slowly collapsing. This ischemia is what is producing Vascular growth factor hormone which as a result has a growth of new fragile blood vessels growing where they should not be growing. As they are where they should not be; they are fragile and result in bleeding. As a consequence of bleeding you get scarring and retinal detachments.

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Laser acts to burn these ischemic parts of retina so they stop producing vascular growth factor (and by each treatment I am losing a part of my vision).

Lucretis acts to block vascular growth factors but it needs repeat injections and has side effect.

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Neither of these stop underlying problem that my small blood vessels are collapsing.

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Sorry to bother you with details but just in case you wondered.

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Now really I need back to work.

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From: Mark Blumenkranz [mailto: [REDACTED]]  
Sent: Sunday, May 19, 2013 11:56 AM  
To: Boris Nikolic  
Subject: Re: Yesterday

Boris

It is no worry at all. I enjoy all our interactions and trying to be of help. First of all I do think you notice significant improvement in the right eye, even if the Snellen numbers ( ie 20=60...20/50 etc) don't change that much because the amount of brightness, lack of glare, improved colors etc should be dramatic. And there is a possibility the Snellen acuity could improved b= 2-3 lines up to 20/40 or better too. We just have to wait and see.&=bsp;

As to the lucentis, if it were me I would wait for several reasons. First of all, the clinical appearance of the neovascularization is relatively benign, it is in fact hard to find without the angiogram and looks mostly if not totally regressed. We should give the laser time to work and see if it does the trick. If not we can always add lucentis, but wouldn't it be better to know whether we need it or not before injecting. Even if you were to have a very minor amount of bleeding we could inject then and then it would clear rapidly. The only issue in my mind is whether to prophylactically the areas that are non perfused now but without neovascularization. That is probably the hardest question but if you are being examined regularly with periodic angiograms then we should be able to pick anything starting up very quickl= so I think it is reasonable just to watch. If you want to speak directly today I am just around the house working and would be happy to do so=

best

Mark

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On Sat, May 18, 2013 at 10:17 PM, Boris Nikolic <mailto:[REDACTED] target="\_blank">[REDACTED]> wrote:

Hi Mark!

Thank you so much for Yesterday's visit.

I am so sorry of I scared you (that I am fainting or something) but I was very distressed after learning that I have two new neovascularization in my "healthy" eye.

As that came after I heard from your cataract surgeon that a cataract surgery will probably not lead to a significant (some but not too much) improvement in my vision on my right eye, I was somewhat shaken.

THANK YOU AGAIN for your care.

My only question to you is whether I still need a Lucentis injection. I am afraid that a) these neovascularizations have progressed somewhat fast (these were not there at all in February). If we count that my last Lucentis was given on January 28th and perhaps has worked for 3 months or so would indicate that these two neovascularizations are only month old or so.

b) As it takes some time for laser treatment to start working (6 weeks and more I think), I am afraid that there might be a chance for these neovascularizations to grow and bleed – something that I can't afford in this eye.

Do you think that it is worth having a Lucentis injection in this laser treated eye? Lucentis would start working immediately and might synergize with laser for neovascularization to dry off.

On the other hand, there is a risk with every Lucentis injection. Last time 2 weeks after Lucentis and a laser in this same eye, I developed new long floaters and OCT was indicative of beginning of PVD.

What would you do in my shoes?

I am so sorry to bother you but I am scared and confused.

Thank you

Boris

