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Zimmerman, Lorenz E.

Members234Emeritus Members126Honorary Members1

Total Membership 361

NECROLOGY

IN MEMORIUM

FRANCIS P. CAMPBELL MD, ELECTED 1968
JOHN WARREN HENDERSON MD, ELECTED 1956
ROBERT W. HOLLENHORST SR MD, ELECTED 1958
MURIEL I. KAISER-KUPFER MD, ELECTED 1980
ROBERT H. KENNEDY, ELECTED 1995
LOIS A. LLOYD MD, ELECTED 1973
G RICHARD O'CONNOR, ELECTED 1970
ROBERT N. SCHAFFER MD, ELECTED 1952
GILBERT SMOLIN MD, ELECTED 1983

FRANCIS P. CAMPBELL, MD

BY Ronald E. Carr, MD



It is with great regret that we record the passing of Francis P. Campbell, an esteemed retinal surgeon and member of the Society since 1976. Frank died of complications of Parkinson disease at his home in New York on October 1, 2007, exactly 84 years after his birth in Drumquin County, Ireland. Following his early schooling in County Tyrone, he received his medical degree from the Royal College of Surgeons in Dublin where he received first prize medals in Physiology and Obstetrics and Gynecology. He emigrated to the United States in 1950 and following internship and a one-year surgical residency, he joined the U.S. Army from 1951-1955. He served as Captain, Medical Corps, serving in Germany, Japan, and then in Korea where he was awarded a Bronze Star.

His studies in ophthalmology began in 1955 and he completed a residency at the New York University Medical Center. He subsequently received an NIH research fellowship that he completed under the tutelage of Dr. George N. Wise, a former member of the Society. It was at this time that Frank's interest and knowledge of retina began. He next spent six months as a Visiting Fellow at Columbia Presbyterian Medical Center with Dr. Graham Clark, where he developed his expertise in retinal surgery, and then joined the faculty of New York University, ultimately rising to the position of Clinical Professor of Ophthalmology. During his tenure at NYU, he directed the retinal surgery section and was responsible for the training of the resident staff.

Frank was a delight to be with at all times. He was a meticulous surgeon and likewise had this marvelous artistic facility, so that his retinal drawings, so quickly done by him, were virtual works of art. How many of us, his students, tried in vain to emulate this, but he would teach even the most inept artist the proper way to represent the detachment and with infinite patience proceed to assist in the detachment repair. Frank was extraordinarily well versed in medical ophthalmology and the history of ophthalmology. He was a prime resource for the residents in the diagnosis and treatment of retinal diseases and often would interject his discourse with the historical background of the disorder and of those ophthalmologists who had contributed to our knowledge. Frank never lost his Irish accent or his Irish sense of humor. He was the type of teacher everyone would aspire to be: knowledgeable, humorous, kind, and always a gentleman.

Outside of ophthalmology Frank was an avid reader with an encyclopedic memory encompassing his interests, particularly in history. In addition much of his free time was spend on his farm outside New York City, where he particularly enjoyed horseback riding and gardening. This latter was not merely relaxation, as Frank was awarded an Environmentalist of the Year Award by Sullivan County, New York, in recognition of the visionary ecological ideas that he had implemented on his farm.

Frank entered the AOS in 1976, and thoroughly enjoyed the camaraderie of the Society. Due to sickness he was not seen over the last decade, but his soft chuckle, his Irish brough, and companionship are missed.

To his wife of 46 years, Magda, his children, Maria and John, and to other family members, the Society extends sincere condolences.

JOHN WARREN HENDERSON, MD

BY Dennis Robertson, MD



John Henderson has been well known as an ophthalmic surgeon, Chairman of the Department of Ophthalmology, Mayo Clinic, and author of an outstanding textbook on Orbital tumors, but he was more than that. He was a supportive husband and father of two lovely daughters and he was a man with many interests.

One interest he pursued with a passion was the civic theatre. With his wife Nadine, he co-founded the Rochester Civic Theatre in 1947. John carried his talent as a high school thespian into his adult life and performed in numerous roles within the theatre. One of his most memorable roles was a wonderful personification of Elwood P. Dowd in the Play "Harvey". For that role, he received a "Roscoe" (Rochester Civic Theatre's equivalent to the "Oscar"). He won 5 "Roscoes "during his career at the Rochester Civic Theatre and was recognized with a "Lifetime Achievement Award"

He had a special interest in baseball and he and Nadine had season tickets to the Twins. He also had an interest in toy trains and real trains. He was a committed member of a small poker club and had a passion for jazz.

He was dedicated to his profession as an ophthalmologist. He was an excellent clinician and a consummate observer. His textbook on orbital tumors, published in 1973, contained the most complete descriptions of the clinical subtleties of Orbital Diseases and Orbital Tumors that had ever been written. It was recognized globally. As new information became available he saw fit to update the text. With the help of his colleagues, the book underwent several revisions. The last revision was published in the year 2007 when he was 94!

John took great joy in his profession, in the staff, and in the residents He enjoyed his relationship with the residents. He partied with them and won a limbo competition at one of the resident dances. He refereed their softball games. The only time I ever knew John to be unfair was when he was the referee. His outrageous calls always seemed to favor the ladies.

He cared about the residents. When one of the residents was severely injured in a disastrous commercial airplane crash on Christmas Eve, he flew in a snowstorm to Pennsylvania to support, supervise, and assist in the repair of the resident's badly damaged orbit.

I first met John in 1963 when I started my residency. John could be quite intimidating in the role as Department Chair. During working hours he was totally professional and generally a man of few words, but after working hours he was seemingly a different person. He loved a good party – he enjoyed good food, good company, and lively story telling.

He was punctual. Punctuality to him was not a courtesy, but almost a requirement. If a resident was late or failed to show up for rounds or a lecture he would reprimand the resident with a handwritten note crafted with beautiful cursive penmanship. The notes were sealed within a small brown envelope addressed to the resident. The residents called these legendary notes "bullets." The "bullets" often generated an intense emotional reaction from the recipient. In later years John often reflected on these notes with great amusement. He laughed particularly heartily when he recalled how one of the residents suggested that he was "uncivil" for expecting the resident to attend early morning weekend rounds following a late night party at which both John and the resident had participated.

John was a scholarly devotee of jazz. He composed jazz musical scores, and he wrote lyrics for his own music which he played on the piano. He attended Dixieland Jazz events whenever and wherever he could. In the spring of 2006, at age 93, he and his daughter, Holly, took the Amtrak to New Orleans to attend a Dixieland Jazz Festival. They stayed in the French Quarter to be in the center of the action. They attended the festival again in the spring of 2007 and they had already booked reservations for the 2008 New Orleans Spring Jazz Festival.

John maintained an active interest in all his hobbies, but he never let go of Ophthalmology. He rarely missed Monday morning Grand Rounds. Even in his final months, John continued to do what he always had done. He participated in life – always looking forward to the future, to another trip, another meeting, and another jazz festival. The week before he died at age 95, he was packing

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his clothes in anticipation of attending the Annual Meeting of the American Academy of Ophthalmology, being held in New Orleans. He was looking forward to meeting his old friends and former residents, as well as listening to the great music in one of his favorite Jazz cities.

ROBERT W. HOLLENHORST, MD

BY Brian Younge, MD



Dr. Robert W. Hollenhorst, 94, a Mayo Clinic physician, died on January 10, 2008, in Rochester. He was a pioneer in the field of neuro-ophthalmology and published over 90 scientific papers. Some of his work described a phenomenon now known as "Hollenhorst Plaques," cholesterol bodies sometimes found in blood vessels of the retina. They are useful in diagnosing the risk of stroke and other circulatory conditions.

He was a founder of the Minnesota Pre-School Survey of Vision and Hearing and, for 30 years, was Consulting Ophthalmologist to Minnesota State Services for the Blind. Because of his contributions to the state, Gov. Arne Carlson proclaimed April 24, 1991, as "Dr. Robert Hollenhorst Day."

Dr. Hollenhorst was a member of many medical boards and associations including terms as president of the American Ophthalmological Society (AOS) and vice-chairman of the American Board of Ophthalmology. In 1986 he was awarded the prestigious Howe Medal by the AOS.

Robert Hollenhorst was born in St. Cloud on August 12, 1913. After studies at St. Cloud State Teachers College, St. John's University, and the University of Minnesota Medical School, he earned Bachelor of Science, Bachelor of Medicine, and Doctor of Medicine degrees.

Dr. Hollenhorst served in the Army Medical Corps in the Pacific during World War II and was awarded the Bronze Star for his medical role in several amphibious landings in New Guinea and the Philippines.

Following his discharge from the Army in 1946, Dr. Hollenhorst began his career as an ophthalmologist at the Mayo Clinic and Professor of Ophthalmology at the Mayo Graduate School of Medicine. He retired in 1979 and lived in the Brainerd Lakes area before moving back to Rochester in 1996.

Dr. Hollenhorst was preceded in death by his wife of 68 years, Alice Nolan Hollenhorst, who died last month. Dr. Hollenhorst is survived by 7 of his 9 children, Dr. Robert Hollenhorst, Jr., of Duluth, Michael (Sandra) Hollenhorst of Orono, Mary (Bob) Lazarus of Millbrae, CA, John (Swantje) Hollenhorst of Salt Lake City, James (Mary) Hollenhorst of Saratoga, CA, Kathleen (Bob) Pohly of Pagosa Springs, CO, and Thomas Hollenhorst of St. Louis Park. He is also survived by 21 grandchildren, 13 great-grandchildren and 5 of his 9 siblings.

Dr. Hollenhorst and his wife were interred at Fort Snelling National Cemetery in June 2008. Donations in lieu of flowers can be made to Minnesota Public Radio or the Minnesota State Services for the Blind.

Muriel Isolde Kaiser-Kupfer, MD

BY Paul A. Sieving, MD, PhD



Muriel Isolde Kaiser-Kupfer, MD, pioneering researcher in genetic eye diseases and former chief of the National Eye Institute's Ophthalmic Genetics and Visual Function Branch, passed away on January 9, 2008 after a long illness.

Kim, as she was known to her friends and colleagues, was an accomplished clinician and scientist. She had remarkable success in reducing visual loss associated with the metabolic disorders gyrate atrophy and nephropathic cystinosis. She will be remembered for her focus on patients and her commitment to linking laboratory findings to clinical treatments that improved people's eyesight.

Dr. Kaiser-Kupfer was born in Greenwich Village and later raised in Florida, where at the age of 14 she was the state diving champion. This competitive spirit and drive for excellence stayed with her throughout her life. She graduated from Wellesley College in 1957 and earned her M.D. from Johns Hopkins University School of Medicine in 1961. Dr. Kaiser-Kupfer was one of only four women in the class. She then completed a pediatric internship, residency and fellowship at Johns Hopkins University Hospital and was Instructor there until 1968.

In 1968 Dr. Kaiser-Kupfer moved to the University of Washington School of Medicine in Seattle where she completed a residency in ophthalmology and served as a consultant in the congenital defects clinic. She was one of the few women physicians of her era to be board certified in both pediatrics and ophthalmology. Dr. Kaiser-Kupfer joined the National Eye Institute of the National Institutes of Health in 1972 and served in a number of leadership roles until her retirement in 2004. She established the Ophthalmic Genetics and Visual Function Branch and developed a considerable portfolio of clinical vision studies. The Branch developed psychophysical and electrophysiological techniques to provide accurate measurements of visual function for the differential diagnosis of visual loss and provided all tests of visual function for patients who visited the National Eye Institute's Eye Clinic.

Dr. Kaiser-Kupfer collaborated effectively with numerous National Eye Institute and National Institutes of Health staff and with academic researchers during the course of her career. She and Dr. David Valle of Johns Hopkins University School of Medicine

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conducted a landmark 18-year study of gyrate atrophy, a condition that causes macular degeneration and resulting visual disability by the age of 50 or 60. They discovered that the condition resulted from a deficiency of the enzyme ornithine ketoacid aminotransferase. Though this is a rare ophthalmic genetic condition, they were able to mount a clinical trial that established that a diet restricted in arginine can reduce hyperornithinemia and slow the disease progression.

Dr. Kaiser-Kupfer collaborated with Dr. William A. Gahl, Clinical Director in the National Human Genome Research Institute, on other pediatric genetic conditions, including infantile nephropathic cystinosis. In this rare autosomal recessive lysosomal storage disorder, cystine crystals begin to accumulate in the cornea by age one. As the number of crystals increases in the cornea, patients experience severe pain and have difficulty keeping their eyes open. Occasionally, the crystals break through the corneal surface, causing the cornea to become hazy and resulting in vision loss. Dr. Kaiser-Kupfer and Dr. Gahl successfully tested the use of cysteamine, a byproduct of the amino acid cysteine, on animal corneas. They then conducted a human clinical trial that found that the topical administration of 0.5 percent of cysteamine dissolved cystine crystals and cleared the cornea, resulting in relief of pain and improved vision.

Dr. Kaiser-Kupfer was highly regarded by her colleagues, who described her as a kind and conscientious clinician who was very close to her patients and as a professional who displayed the grace and form of the competitive diver that she was. She paid close attention to the details of her research and at the same time saw her patients as human beings and not merely carriers of eye diseases. Her goal was always to help her patients improve their vision.

In addition to researching gyrate atrophy of the choroid and retina and nephropathic cystinosis, Dr. Kaiser-Kupfer pioneered new ways to diagnose and treat other hereditary diseases such as neurofibromatosis, congenital cataracts, and anomalies of the anterior segment. For example, she described the association of Cushing's disease and lisch nodules in patients with neurofibromatosis. She also identified posterior capsular cataracts, peripheral cortical cataracts, and combined pigment epithelial and retinal hamartomas as markers for neurofibromatosis 2, an autosomal dominant disorder caused by mutations in the neurofibromatosis 2 gene, a tumor suppressor gene on chromosome 22q.

Dr. Kaiser-Kupfer collaborated on studies of a number of genetic conditions that involved the eye and visual system, including Bietti's corneoretinal dystrophy, the ophthalmic manifestations of Hermansky-Pudlak syndrome, collagen vascular disorders, alkaptonuria, Menkes' syndrome, and Usher syndrome. Through her pioneering research on numerous rare genetic diseases, she contributed innovative models for the investigation of other genetically determined eye diseases. Dr. Kaiser-Kupfer was the author or co-author of more than 100 scientific papers, and she mentored and inspired many medical students, residents, and fellows.

In 1990, Dr. Kaiser-Kupfer received the Lifetime Achievement Award from the Cystinosis Foundation. After her retirement from the National Eye Institute in 2004, Dr. Kaiser-Kupfer was honored by the National Library of Medicine in its series "Local Legends: Celebrating America's Local Women Physicians."

Dr. Kaiser-Kupfer is survived by her husband, Dr. Carl Kupfer, founding NEI director and fellow AOS member, their children, Charles and Sarah, and four grandchildren.

ROBERT H. KENNEDY, MD

BY Joseph Flanagan, MD



It was my privilege to have known Bob Kennedy for almost 20 years. He came to Philadelphia in 1988 to serve an oculoplastic fellowship with me at the Wills Eye Hospital and we became colleagues as well as friends.

Bob's wife Margaret told me that he would have liked these words by Helen Keller, "Life is a daring adventure or nothing". As I prepared this memorial I came to realize that he lived those words throughout his life.

Bob was born in Mason City, Iowa on May 25, 1954. His mother was trained as a teacher, but stayed at home to raise Bob and his sisters. His father worked for the Farmer's Home Administration, but was also a flight instructor and that came into play in Bob's teen years.

His sense of adventure became apparent in his very early years when he would disappear from the house to satisfy his curiosity and explore the world around him, much to the fear and consternation of his parents. At the ripe old age of six, he had his first job, a paper route, and did this for several years, all the while involved in numerous activities. He played little league baseball, was a Boy Scout, and in fifth grade he won the "punt" portion of a punt, pass and kick contest. If there was an activity at which he did not excel, it may have been the one tortured year he took piano lessons, with the end result being his version of "Mr. Frog is Full of Hops".

Obviously, the paper route was just the beginning of Bob's business acumen. In fifth grade he started a pigeon business, raising a variety of pigeons for sale. The big step, however, was his purchase of some shares of stock in Ottertail Power Company. The company actually featured him in an article and on the cover of their annual report as their youngest shareholder. When he was 14, he bought a lot on a lake and at 16 another lot. He spent that summer camping on his own lot while working for a development company clearing other lots in the area.

His father's love of flying did rub off on Bob. He learned to fly his father's Cessna, soloed when he was 15 and had an instrument rating, as well as commercial and flight instructor ratings by the time he was 21. He loved flying and continued to fly for the rest of his life.

When Bob was a senior, the high school he attended was destroyed by fire. Instead of attending classes in church basements like his classmates, he decided to go straight to college, enrolling in the spring semester at the University of Minnesota-Morris. He always laughed about the fact he never did receive a high school diploma! He was subsequently accepted at the Air Force Academy, but

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after completing a semester, he decided to return to Minnesota to attend Macalester College in Saint Paul. He worked at numerous jobs to pay for his education, in particular working with the homeless through Catholic Charities.

After graduating in 1976 with a B.A. in chemistry, he had the opportunity to meet Leonard T. Kurland, MD, PhD, a world famous neurologist/epidemiologist on staff at the Mayo Clinic in Rochester. Interestingly, Dr. Kurland was also a pilot and he offered Bob a position to work in clinical research and fly with him as well. His future wife, Margaret, worked for Dr. Kurland. As luck would have it, Margaret was also interested in flying and actually took lessons from Bob, earning her pilot's license and an instrument rating. Bob and Margaret were subsequently married in May, 1977.

During his medical school years he worked on many research projects with Dr. Kurland and others. Bob was the primary author on numerous publications regarding epidemiology and addressing his interest in the cost and need for health care resources. While in medical school and during his residency Bob and Margaret had two children, David born in 1980 and Erin in 1983. Despite his busy schedule, there was always time for the kids and they were soon spending a good deal of time flying around the states with their parents, attending meetings, etc.

Following medical school Bob completed an M.P.H. in epidemiology at the University of Minnesota, then began a residency in ophthalmology at the Mayo Clinic. On completion of his residency in December, 1986 he accepted a position with Alcon Laboratories and UT Southwestern Medical Center and the family moved to Arlington, Texas. In July, 1988 Bob began his fellowship training with me and was awarded a Heed Fellowship, which was extremely helpful since he had moved to Philadelphia for that year, but Margaret and the children had remained in Texas. He returned to Texas the following June and began working full time at UT Southwestern Medical Center in Dallas. He also joined the Naval Reserve and remained in the reserves for ten years. He was Head of the Department of Ophthalmology at Fleet Hospital with a rank of Commander.

During his residency Bob had worked on a clinical research project with Dr. John Dyer and that data served as his thesis for his PhD, granted in 1993 from the University of Minnesota. This project also provided the data for his thesis "Progression of Myopia" submitted and accepted by the prestigious American Ophthalmological Society. In 1995 he began his course work in the executive MBA program at Southern Methodist University in Dallas. This required a tremendous commitment on Bob's part as he was working full time at UT Southwestern during this two year program. However, in typical fashion he graduated as Valedictorian in 1997.

He then became an Adjunct Associate Professor, School of Management, University of Texas in Dallas and was instrumental in the development of business training in medicine. A grant from Novartis Pharmaceuticals for development of "From Residency to the Future: Planning Your Career", resulted in a CD-ROM in 2001 and provided to residents. In 2000 Bob left UT Southwestern to start a private practice in Arlington, Texas. In 2003 he co-founded North Texas Ophthalmic Plastic Surgery with Mark Alford, M.D. and they opened offices in Forth Worth, Abilene, Irving and Denton.

Bob was totally committed to the American Society of Ophthalmic Plastic and Reconstructive Surgery organization. He wanted to encourage everyone who had completed their fellowship training to become active, participating members. To that end he advocated covering a portion of their costs in the first few years after they completed their fellowship so that they would attend the meetings held by the Society.

Despite all of the above endeavors, the priority in Bob's life was his family and friends. He remained very close with his parents and they frequently accompanied Bob and Margaret on family vacations. Much of the family's travel was done by private plane, but often "spill over" members would have to use commercial flights to their destination. Bob continued to play basketball, a throw back to his high school days on the varsity team, run and swim. He ran a marathon in 2004 and was planning to do this again in 2008.

"Life is a daring adventure or nothing". Bob not only would have liked these words, he lived them.

LOIS LLOYD, MD

BY David Knox, MD



Lois Lloyd was born in Toronto, Ontario, Canada, on February 13, 1924. After graduation from Victoria College with a major in Home Economics, she completed medical school at the University of Toronto in 1949. She spent her last year of medical school at the Johns Hopkins Hospital as an Addison Memorial Fellow, sponsored by Victoria College. She finished a year of residency in neurology at the Toronto General Hospital before completing training in ophthalmology that led to certification by both the Canadian and American Board of Ophthalmology in 1954. Her formal education in ophthalmology continued in Baltimore where she was a fellow in neuro-ophthalmology with fellow Canadian, Frank B. Walsh in 1954 and assisted in the preparation of his classic textbook, Neuro-Ophthalmology, Second Edition. From 1955-1957, she was the R.S. McLaughlin Traveling Fellow, having been the first woman receive that award, and studied with Dr. S.P. Meadows in London.

Dr. Lloyd, whose thesis on optic nerve gliomas earned her membership in the American Ophthalmological Society, was a pioneer in both Canadian and North American ophthalmology. She was the first woman to receive her FRCS (C) in ophthalmology

and was the first Canadian to emphasize neuro-ophthalmology in practice and teaching in her home city of Toronto. She played an important role in the development of academic and residency training programs at the University of Toronto, where she was an Associate Professor in the Department of Ophthalmology and Vision Science.

When Lois attended the American Ophthalmological Society meetings, she was always accompanied by her husband, William Smallwood, who gracefully golfed and supported her presence and participation in professional activities. In this way, her style preceded the increased growth, accomplishments, and participation of women in North American medicine and ophthalmology.

Her constant enthusiasm, pleasantness, knowledge, and "exemplary practice", earned her life long friendships and the loving respect from her colleagues, residents she trained, and family. Parkinson disease was a mean final chapter of her life that ended at her home on December, 28, 2006. She leaves her husband William, two daughters, two sisters, a brother, and six grandchildren.

G. RICHARD O'CONNOR, MD

BY Gary N. Holland, MD and Ronald E. Smith, MD



George Richard O'Connor was born on October 8, 1928, in Cincinnati, Ohio. He died unexpectedly of natural causes at his home in Sausalito, California on August 7, 2007. He will be missed, not only by members of the American Ophthalmological Society, but by his numerous friends and colleagues around the world.

Dick O'Connor graduated from Harvard University in 1950, and completed his medical degree at the Columbia University College of Physicians and Surgeons, where he earned the Janeway Prize as the highest ranked medical student in the Class of 1954. He completed residency training in ophthalmology at Columbia Presbyterian Hospital, after which he pursued further training at the National Institutes of Health (NIH), and at the University of Uppsala, Sweden and the State Serum Institute, Copenhagen, Denmark, as a US Public Heath Service Research Fellow. He joined the faculty of the University of California, San Francisco, in 1962, where he was also appointed Director of the Francis I. Proctor Foundation for Research in Ophthalmology, in 1970.

During his academic career, O'Connor made substantial contributions to the field of uveitis, publishing articles on a diverse group of inflammatory eye diseases, including syphilis, Fuchs heterochromic iridocyclitis, and uveitis in children. But he is best known for his extensive research dealing with ocular toxoplasmosis.

O'Connor was elected to the American Ophthalmological Society in 1970, and remained an enthusiastic supporter of the Society for the rest of his life, having encouraged both of us to apply for membership. Shortly before his death, he sent a lovely note of congratulations upon learning that one of us (GNH) had just been elected. His own thesis, on hypersensitivity reactions associated with ocular toxoplasmosis, helped to clarify the relative roles of parasite proliferation and hypersensitivity reactions in the pathogenesis of recurrent toxoplasmic retinochoroiditis, and it has had a major effect on current treatment strategies for the disease. His 1972 publication in the *Transactions of the American Ophthalmological Society* on band keratopathy remains a seminal article on that subject.

O'Connor received numerous distinguished awards for his academic contributions, including the Jackson Memorial Lectureship (1983), the Doyne Lectureship (1985), and the Mildred Weisenfeld Award for Excellence in Ophthalmology (1990). He served on numerous NIH Study Sections, the National Advisory Eye Council, and the Association for Research in Vision and Ophthalmology

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(ARVO) Board of Trustees. He was a Director of the American Board of Ophthalmology, and served on the Editorial Boards of numerous scientific journals, including *Archives of Ophthalmology*, *American Journal of Ophthalmology*, *Investigative Ophthalmology and Visual Science*, and *Survey of Ophthalmology*.

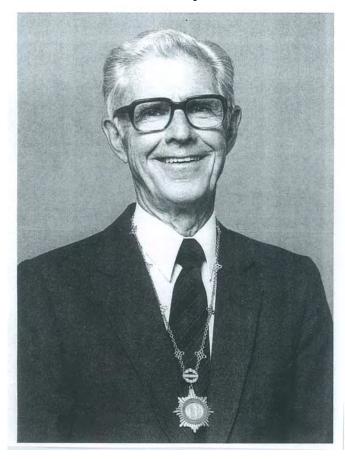
O'Connor had extensive interests outside of ophthalmology. He had a gift for languages, with an interest in syntax and grammar. He is famous for having once delivered a complete lecture in Japanese (which he had translated phonetically), while visiting Japan. He himself spoke several other languages. After his retirement in 1984, he pursued a life-long passion for ancient history and archeology, which was based in part on his own family history. His great-great-great-grandfather, Johann Heinrich Voss, wrote German translations of the Iliad and the Odyssey that were used by the distinguished 19th century German archeologist Heinrich Schliemann in planning his excavations in present day Turkey, which confirmed the existence of Homer's Troy. Because he had always wanted to be involved in a similar project, he spent many summers with a team from Washington University, digging on the Greek island of Ithaca, in search of the mythic home of Odysseus. He and his colleagues believed that Homer's Iliad provided the key to locating this ancient site. Unfortunately, the site had not yet been uncovered at the time of his passing.

O'Connor divided his retirement years between his archeological digs in Greece, a yearly winter retreat in Mexico, and his hillside home and garden overlooking San Francisco Bay. Despite retirement, he maintained his interest in developments within the field of uveitis, and was an avid student of the history of ophthalmology. In particular, he maintained a keen interest in the activities of his former students, often attending their lectures and conferences, to show his support.

O'Connor was a remarkable man for many reasons. As a mentor, he influenced a generation of uveitis subspecialists. And even now, the memory of his encyclopedic knowledge base and his enthusiasm for investigation continue to inspire those who knew him. He is survived by his brother Robert and nieces Diane and Susan O'Connor (Cincinnati, OH), his nephew David O'Connor (Appleton, WI), and his life partner Willem N. Beringer (Sausalito, CA).

ROBERT NESBIT SHAFFER, MD

BY William H. Spencer, MD



Robert Nesbit Shaffer died peacefully at his retirement home in Greenbrae, California, on July 13, 2007 at age 95. He was born January 18, 1912 in Cochranton, Pennsylvania, and raised in nearby Meadville where his father (William Walter Shaffer, M.D.) practiced "horse and buggy" medicine. Bob's parents sent him to a college preparatory school in Covina, California, after a protracted knee infection and slow recovery interrupted his high school education during his senior year. He thoroughly enjoyed the California experience and subsequently matriculated at Pomona College in Claremont California where he sang in the national championship men's chorus and graduated (cum laude, Phi Beta Kappa) in 1934.

Bob received his medical degree from Stanford University in 1938 and interned at Stanford Lane Hospital in San Francisco. Shortly after beginning his ophthalmology residency at Stanford, he returned to Meadville to wed Virginia Jane Miller on August 12, 1939. Their early childhood friendship had set the stage for a remarkably close 67 year marriage blessed by three sons, three grandchildren and four great grandchildren

Bob's enduring curiosity about the causes and effects of glaucoma began during his residency at Stanford Hospital, where he taught himself to perform gonioscopy using a Koeppe lens and a 10 power binocular microscope. Convinced of its value in differentiating angle closure from open angle glaucoma, he incorporated gonioscopy into his teaching curriculum after he accepted a post-residency offer by Professor Frederick Cordes to establish the first glaucoma clinic in the far West at the University of California School of Medicine. There, he served as a voluntary member of the clinical faculty while simultaneously establishing his nascent private practice in downtown San Francisco. Remarkably effective in both venues, Bob was, at heart, a caring physician whose self-effacing calm manner and evident concern for the welfare of his patients generated their trust, while his masterful teaching skills, lectures and publications earned the respect of his academic peers.

Bob's pioneering stewardship of the glaucoma clinic coincided with the onset of a gradual shift toward inclusion of subspecialty education in the curricula of many American departments of ophthalmology. His contemporaries in the field of glaucoma included Hans and Otto Barkan in San Francisco, Peter Kronfeld and Joseph Haas in Chicago, Paul Chandler and Morton Grant in Boston and Jonas Friedenwald in Baltimore. Bob first met Bernard Becker during a series of fruitful scientific conferences - supported by the Josiah Macy Foundation - at which small groups of basic scientists and selected clinicians discussed the causes and effects of glaucoma (1950-55). Their lasting friendship led to co-authorship of the classic glaucoma textbook *Diagnosis and Therapy of the Glaucomas*, which first appeared in 1961. Now in its 7th edition, the text is internationally recognized as an authoritative glaucoma

reference work. His *Manual of Gonioscopy*, published in 1962, still serves as a valuable instructional tool in identifying the stereoscopic appearance of landmark structures of the anterior chamber angle.

The Shaffer Fellowship Training Program was initiated in 1962. Limited to one promising ophthalmologist each year, the program offered trainees the opportunity to learn clinical and surgical skills under Bob's close personal guidance. In addition, they were provided unlimited access to the combined educational resources and manpower of the downtown office and the glaucoma clinic as raw material for clinical research. Of equal importance, the fellows benefited from constructive criticism of their oral presentations and manuscripts by Virginia Shaffer, who had post-graduate training in speech and drama at Yale University. Bob and Virginia Shaffer's generous hospitality and genuine interest in furthering the careers of their fellows is warmly remembered by the 42 fellows who participated in the program prior to Bob's retirement in 2001. Many have followed his example by becoming teachers in departments of ophthalmology and several have gone on to prominent research, editorial and administrative positions in ophthalmology.

The Foundation for Glaucoma Research, founded in 1978 with support from Bob's grateful patients Blanche Matthias and Berenice Hauck, has thrived and currently supports glaucoma research by prominent scientists in the United States, Canada, Europe and Japan. The Foundation also publishes educational pamphlets directed toward patients with glaucoma and provides support for one year of glaucoma fellowship training for foreign ophthalmologists at several American departments of ophthalmology.

Although Bob was an officer in many major national and international eye societies and organizations, he considered his service to the American Board of Ophthalmology the most worthwhile and rewarding. Appointed to the Board in 1960, he served as a Member and Consultant until 1969 when he became Assistant Secretary-Treasurer. He succeeded Francis Heed Adler as Secretary-Treasurer in 1980 and retired in 1985 after 25 years of productive service to the Board.

Bob thoroughly enjoyed participating in the scientific meetings and comradeship of the American Ophthalmological Society. Elected to membership in 1952 and as Chair of the Council in 1974, he served as President at a memorable meeting in San Juan, Puerto Rico in 1984. Bob received the Society's prestigious Howe medal in 1986. He and Virginia also took pleasure in attending meetings of the Pan-American Association of Ophthalmology, where Bob was a member of the Council (1975-87) and recipient of the Gradle Medal (1993). He was Vice-President of the American Academy of Ophthalmology and Otolaryngology in 1968 and has been honored since 1980 by presentation of the Shaffer Lecture at annual meetings of the American Academy of Ophthalmology.

In retirement, the Shaffers visited former fellows and friends and satisfied their wanderlust with numerous trips throughout the world. Bob continued to sing in church choirs and played tennis well into his 80's. He lived an exemplary life and will be remembered by his family, friends and colleagues for the sparkle in his eye and warm personality.

GIL SMOLIN, MD

BY Ivan R. Schwab, MD



Born in 1935, and raised in Brooklyn, Gil completed his high school, college, and medical school in New York. He completed his internship at Ohio State. Gil went on to do his Ophthalmology residency at Ohio State University. Subsequently, he was a medical officer in the Marines serving in Libya, North Africa.

After serving in the Marines, he came to the Francis I. Proctor foundation where did his cornea and external disease fellowship under Phillips Thygeson. After he finished his fellowship, he so impressed Dr. Thygeson that he was asked to join the faculty. In 1967 he joined the Proctor faculty and became very productive clinically and with his research career. He obtained several NIH grants while he was on the Proctor faculty and was NIH funded for 18 consecutive years from 1967-1985. He was a remarkable author having published over 200 peer reviewed articles and nine textbooks. Because his writing and editing skills were so good, he was on the editorial boards of a dozen journals, and was the editor for International Ophthalmology for 20 years. Remarkably, he has also published a medical novel, "The Reign of the Rat" which remains in print proving that his skill in writing extended even beyond medical writing.

He was known regionally, nationally, and internationally and was a sought after lecturer in all of these venues. Perhaps his greatest skill was his ability to teach. He was a key mentor to many with a generation of Proctor fellows who were taught secrets of the discipline of cornea. These fellows are his greatest legacy in Ophthalmology.

In addition to being a member of the American Ophthalmological Society, the American Academy of Ophthalmology, he was a member of Association for Research in Vision and Ophthalmology, a fellow in the American College of Surgeons, among other organizations. He was a member of the Ocular Microbiology and Immunology Group and served as its Executive Secretary from 1977-1987 and its chair in 1988.

With the influence of Bruce Ostler, Gil became interested in the burden of unnecessary blindness in the developing world and worked with Bruce in India and Yemen on an old scourge—leprosy. But, his real interest in international work came in Nepal after visiting that country in 1985. In Nepal, he saw critical needs in the developing world and began working on blinding problems there—especially corneal blindness. His visit to Nepal also encouraged Gil's interest in Buddhism, and this would affect him for the rest of his life.

Subsequently, he led a Proctor team to study corneal ulcers in India at Aravind Eye Hospital where he helped set up the microbiology laboratory. His understanding of the rigors of scientific study helped him establish several studies related to corneal blindness especially due to corneal ulcers. He applied the same scientific effort to the study of the epidemiology of cataracts at Aravind Hospital beginning in 1993 as well. He would continue to work with the Proctor team and their studies at Aravind for seven years.

He married Julie Waldo in 1988, and together they had a daughter, Erica who was the joy of his life. He managed Erica's traveling soccer team for years and he was very involved in her school. Gil was an keen reader, and especially fond of the fine arts having served as the Ophthalmologist for the San Francisco ballet, for free, just as a way to assist the ballet. He was also an avid gardener. Gil was a gentle soul, who, in has later years, would end his missives with a single word "Peace" which for me, epitomizes Gil. He never had a harsh word for those he taught no matter how frustrating we must have been to him. His good humor and constant smile even in the face of the obstacles and adversity he faced is an inspiration to all. He lost his battle to ALS on 24 September 2007.

All who knew him will miss him greatly. Peace be with you.

GEORGE WEINSTEIN, MD

BY Bruce E. Spivey, MD



Ophthalmology lost a charming, urbane leader, one who provided steady leadership in many aspects of ophthalmology. George W. Weinstein was born on January 26, 1935 in East Orange, New Jersey. He married Sheila Wohlreich in 1957, and they had three children: Bruce, Elizabeth, and Rachel, and two grandchildren.

After earning a B.A. in Chemistry from the University of Pennsylvania, George received his M.D. at Downstate Medical Center in New York in 1959, and after interning at Kings County Hospital, he completed a residency at the Downstate Medical Center in 1963. He had fellowships at the NIH (John Dowling), Wilmer Institute (A.E. Maumenee), and Moorfields (Alan Bird and G. Arden, 1987).

George began his teaching career as a clinical instructor at Georgetown University 1963-65 followed by his assistant professorship at Johns Hopkins 1967-70. George became a Chairman at a young age as head of the division of Ophthalmology at the University of Texas, San Antonio in 1970, serving through the time that it became a full department in 1978. In 1980 he became Professor and Chairman of the Department of Ophthalmology at the University of West Virginia. George entered private practice in Jacksonville, Florida in 1996. Shortly thereafter, the impact of Pick's Disease caused George to leave practice, and he died nearly a decade later from prostate cancer and Pick's Disease in Encinitas, California on May 12, 2007.

George served organized ophthalmology in many ways and became a leader in most of the organizations he was involved in. He was one of the last secretaries of the AMA Section Council on Ophthalmology, serving 1974-78. He was Chairman of the Research Committee AUPO ('74-'78) and Editor in Chief of *Ophthalmic Surgery* ('71-'82).

He served as Secretary Treasurer of the AUPO from '78-'79, and as Chairman of the Residency Review Committee for Ophthalmology ('85-'87). He served on the Board of Governors of the American College of Surgeons ('82-'85). He served as an Associate Examiner of the American Board of Ophthalmology.

He served many roles within the American Academy of Ophthalmology including Continuing Education Committee, Inter-Professional Education Committee, Secretary for Public and Professional Information, Chairman of the Long-Range Planning Committee, President-Elect 1990, and President of the American Academy of Ophthalmology, 1991. During a time of considerable tension in the AAO, he served as Chairman of Organizational Design in 1992. He received the honor award of the AAO in 1976 and a Senior Honor Award in 1986.

George was inducted into the American Ophthalmological Society in 1977. His thesis was "Clinical Aspects of the Visually Evoked Potential," a study in normal and abnormal humans and Rhesus monkeys to demonstrate the value of the VEP "to make decisions in the diagnosis and treatment of patients in whom subjective visual acuity cannot be tested." Much of his research was in electrophysiology, and he began working with electroretinography in the early 1960's. George served a term as Chair of the athletic

Necrology

committee in 1981 and was elected to the Council in 1993. He served as Chair of the Council in 1997. George attended his last meeting in 1998, where he discussed a paper on the control of intraocular pressure in eyes following pars plana vitrectomy and gas tamponade.

George W. Weinstein was able to speak comfortably on many ophthalmologic issues and ophthalmic history, play the banjo at a level commensurate with the Preservation Hall Band in New Orleans, or play the spoons with friends and family with equal charm, comfortable pleasure, and joyful exuberance. His charm and joy of life are remembered with deep fondness by family and friends.

George wrote to me in late 1992 as we were both leaving the leadership of the AAO quoting Thucydides: "The secret of happiness is freedom, and the secret of freedom, courage." The George we knew was both happy and courageous. George was a fine human and fine friend in every way.

MINUTES OF THE PROCEEDINGS

One Hundred and Forty-fouth Annual Meeting May15-18, 2008

The ONE HUNDRED AND FORTY-FOURTH ANNUAL MEETING of the American Ophthalmological Society (AOS) was held at The Broadmoor, Colorado Springs, Colorado, on May 15-18, 2008. There was a "Spotlight Session" on the Thursday afternoon May 15 prior to the start of the meeting to introduce all the new members elected to the AOS the prior year. Each new member presented a 10-minute summary of their thesis project and comments on their personal and professional life.

President Dan B. Jones MD called the opening session to order on Friday, May 16. The program began with the AOS-Knapp Symposium on Ethics of Industry –Ophthalmologist Relationships, as follows:

SYMPOSIUM: ETHICS OF INDUSTRY-OPHTHALMOLOGIST RELATIONSHIPS

- 1. "Introductory Comments, Misbehaviors: Observations of a Long Term Department Chair," Lee Jampol.MD
- 2. "What is the Current Status of Individual and Institutional Conflict of Interest?," Michael Camilleri MD
- 3. "How Should Academic Institutions Behave with Regard to Industry?," Jordan Cohen MD
- 4. "How Should Individual Facutly Respond to Industry Relationships?," Susan Day MD
- 5. "How Should Practicing Ophthalmologists Respond to Industry Largesse?," Richard Mills MD, MPH
- 6. "How can Professional Organizations Justify Receiving Corporate Funding for Organizational Activities?," Jerome Kassirer MD
- 7. "Ethical Alignment? Physicians and Their Professional Organizations," Samuel Packer MD

The Meeting was continued with the following scientific program:

- 1. "Drugged by Industry: Rehabilitating our Integrity", Paul L. Lichter MD
- 2. "Non-Contact In Vivo confocal Laser Scanning Microscopy of Patients with Exfoliation Syndrome", Zaher Sbeity MD, Pat-Michael Palmiero MD, Celso Tello MD, Jeffrey M. Liebmann MD, Robert Ritch MD
- 3. "A Syndrome Resembling Acute Posterior Multifocal Placoid Pigment Epitheliopathy in Older Adults" Alexander Taich MD, Mark W. Johnson MD
- 4. "Artificial Intelligence Techniques for Automatic Videoscreening for Amblyogenic Factors", Jonathan Van Eenwyck BS, Arvin Agah PhD, Joseph Giangiacomo MD, Gerhard Cibis MD
- 5. "Anti-cyclic Citrullinated Peptide and Ocular Involvement of Rheumatoid Arthritis", Sujit Itty BA, Sophie J. Bakri MD, Jose S. Puliao MD, MS, MPH, Keith H. Baratz MD

EXECUTIVE SESSION, SATURDAY, MAY 17

DAN B. JONES MD: I reconvene the 144th meeting the American Ophthalmological Society. I would like to appoint Dr. Ed Raab as a parliamentary for this morning's Executive Session. I will entertain a motion for approval of the minutes of the Executive Session from May 22 of last year, which have been printed in the *Transactions*. Any discussion? All in favor? Aye. The motion carries. The Secretary -Treasurer will now present his report.

REPORT OF THE SECRETARY-TREASURER

THOMAS J. LIESEGANG MD:

The Society remains in excellent financial condition although the recent market downturn has affected the resources of the AOS. The AOS funds are actively managed by Vanguard and the Council receives regular reports and meets with the Vanguard representative on a regular basis. The three sources of income for the AOS are membership dues, annual meeting registration fees, and investment income. The AOS continues to subsidize the meeting and the Transactions, although the expenses of the *Transactions* have declined significantly now that is it published only online. The symposium during the Annual Meeting is funded by the Knapp Fund. It is recommended that the dues remain the same for the upcoming year. There are now 236 active members and 111 emeritus members. New members that have been accepted for membership were featured in the spotlight session on Thursday afternoon and they will be introduced at the banquet. There is now enhanced information on the AOS website, including information about membership, about governance, about the Annual meeting, and about several other AOS activities, including biosketches and photos from the AOS meetings dating back to 1996. A new section is the publication of the AOS History in PDF format by Dr. Wheeler and then a continuation by Dr. Newell. There is a listing of all prior AOS members back to 1864, highlighting the Founders. All members are encouraged to submit a biosketch and photo for the Website. The bylaws changes and consideration of International Members will be discussed later in this Executive Session.

DAN B. JONES MD: I would like to vote to accept the report as read. All in favor? Aye. Opposed? The motion carries. The Council Chair will now present his report.



2008 AOS PRESIDENT DAN JONES

REPORT OF THE CHAIR OF THE COUNCIL

GEORGE B. BARTLEY MD: Good morning. We have two items for your consideration. The first is to review some changes in the Bylaws that were first introduced a year ago and the second is to call for a vote on these modifications. You, as the membership, gave the Council and the other leadership members license to proceed with this information as gathered to modify the proposed Bylaws. This slide summarizes the current governance of the Council of the AOS. As you can see in the top box, we have the President, President-elect, Secretary-Treasurer, and Editor working with very closely with the five-member Council. Several committees and representatives report to this group. Last year, these were the bylaws that were proposed and put into motion for revision.

The first is that we would like to continue the role of President. Although the role is largely ceremonial, input from the membership was that this position should be continued, as opposed to being eliminated. The President-elect; however, seemed to be somewhat unnecessary in terms of its function. We would like to change the title of the Secretary-Treasurer to the Executive Vice President and also to specify this term of office could extend to a maximum of ten years. At the current time there is no time duration specified for this. All appointments will be made by the Council -- again through close collaboration with all the individuals within the box on the previous slide.

If a thesis is revised we wanted to clarify that the topic of the thesis could not be changed and that a person can only be a thesis candidate twice. It should be unnecessary to state this, but we wanted to codify that all presenters at the Annual Meeting must comply with requirements of the Accreditation Council for Continuing Medical Education and that the AOS Bylaws need to be followed or the individual would not be able to present his or her paper. Finally, to clarify that e-mail voting and meetings would be acceptable for Council meetings and actions between the two face-to-face meetings that are held each spring and fall.

Here is what the changes would do in reference to the slide I showed you just a moment ago. The Council remains the same, the President remains, the Secretary-Treasurer becomes an Executive Vice President, and the Editor remains as is. As you see, the committee and representative persons report to this group. You will note that the Committee on Programs and Committee on Membership are highlighted in asterisks to remind us that we would like to have these two very important leaders present at the fall Council meeting. These roles are critical to the vitality and the future of this society. By not having the President-elect the expense for attending the fall Council meeting expense is avoided, allowing other individuals attend to participate in the activities of the Council and the leadership group. That summarizes the changes of the work that has been done over the past year. I will hand it now to our president to call for a vote.

DAN B. JONES MD: Is there any discussion from the floor? We do not have a floor microphone, so I ask you to stand and speak up or you can come to the podium if you like.



2008 AOS PRESIDENT DAN JONES AND HIS WIFE MARILYN

ALFRED SOMMER MD: I think is an appropriate change. I have just one very minor technical issue. If you are going to have the EVP for up to ten years, then it always gets a little bit problematic in most organizations, if they do not want to do it for more than five years. Sometimes it is nice to break it up into five year terms, renewable for maximum of ten years, minor point.

THOMAS J. LIESEGANG MD: Presently it is renewable each year for a maximum of 10 years.

ROBERT STAMPER MD: Two comments. One, I am not sure I understand the reason why the President-elect no longer comes to the fall meeting and perhaps you could explain that a little bit. Secondly, I would just would ask that I think its quite appropriate to ask people who come to podium to conform to the ACCME and AOS guidelines but I think it would be reasonable to communicate the relevant guidelines to anybody before hand so people can be aware of what is expected of them.

GEORGE B. BARTLEY MD: The requirements are very easy to find and they are communicated multiple times and they are all available on the website as Dr. Liesegang has indicated. Tom, do you want to comment on that or Danny?

THOMAS J. LIESEGANG MD: It mainly is that you disclose and that you have the paper available for the Editor of the *Transactions*. Those are the two main items and they are reminded ad nauseum.

GEORGE B. BARTLEY MD: The comment about the President-elect, I guess again in a nutshell it would be redundancy and expense as to why that position would not be continued. Tom or Daniel do you want to comment on that?

DAN B. JONES MD: In terms of the order of ascension, it is quite evident that the Council member in the fifth year, the senior member becomes the Chair and the Council felt it was no longer necessary to have a pre-ceremonious President-elect, considering the narrow scope of responsibility and activities of the President, including to be honored by the Society, but unnecessary to have an individual appointed in advance of that.

GEORGE B. BARTLEY MD: Any more comments?

FRONCIE GUTMAN MD: The leadership of the AOS is a very small group of accomplished people at the Council. When we had a retreat in 1992, one of the things that we established as a goal was to expand or to be more inclusive in terms of the membership participating in the organization. There was concern about how much memory in the organization you have when you reduce the group. I do not know that by reducing it by one, the position President-elect, will affect this. I do not have any problem with that recommendation. I am wondering if at the Council meetings, the Program Committee, because they only have one meeting a year and I think it is very important to have dialogue and to have the input, and also from the Committee on Membership. I mean, this is about the direction of where the Society is going. We need to have discussions around what we need to do to be sure that we understand

why people want to join and why people do not want to join. I guess to conclude this, I am wondering if including the chairs of those two committees at Council meeting is to ensure dialogue. I do not know if it is appropriate to add this, but I have had a continuing concern about the fact that I do not believe people bring their best offerings to this meeting. This has been debated for years, as well as the issue of continuing to publish the *Transactions*. I do believe that if people had the opportunity to bring their best material here without the questions about publishing or do we publish.



2008 AOS COUNCIL. FROM LEFT: THOMAS J. LIESEGANG, DOUGLAS D. KOCH, SUSAN H. DAY, RICHARD K. PARRISH II, DAN B. JONES, LEE M. JAMPOL, MARILYN B. METS, HANS E. GROSSNIKLAUS, GEORGE B. BARTLEY.

GEROGE B. BARTLEY MD: That is a different issue which we will get to.

FRONCIE GUTMAN MD: Ok, I did not know if there would be an opportunity. I thought this might be my one shot at the microphone.

GEORGE B. BARTLEY MD: There will be others.

FRONCIE GUTMAN MD: Anyway, I would encourage being more inclusive at the Council, so those people that may become future members of the Council will have been part of the dialogue.

GEORGE B. BARTLEY MD: I will take your comments to be in support in fact of what we are proposing to do, and that is exactly what you have done. Again, highlighted on the slide is this change does promote inclusivity that was one of the charges we received back from you, the members. By having the Program Chair at the Council meetings both fall and spring, as we did this time with Dr. Mills and having the Chair of the Committee on Membership, again this is the lifeline for this society. By opening up one slot, if you will, at the table, particularly at the fall meeting, a lot seems to happen in May, and then there is certainly not a whole lot activity often outside the Council between those meetings, this allows the membership committee chair to participate in the fall meeting. So Froncie, I think what you are saying is exactly what we are going to try to do.

DAN B. JONES MD: I might add that the Council did discuss at length the very issue that Froncie brought up about the business of the connection of papers presented and the requirement that they must be published in the *Transactions*. That is going to be a topic of further discussion at the fall meeting of the Council, most importantly. Is there any other discussion? If not, then I would entertain a motion to approve the report as submitted and approve the Bylaws changes circulated and discussed. Further discussion? Hearing none, all in favor say "Aye". Opposed? The report and Bylaw change motion is passed. Thank you.

GEORGE B. BARTLEY MD: I will move now onto the perpetually interesting policy about the AOS athletic trophies. As of 8 minutes ago, this is the latest version. The plan is as follows: to take a photograph of all of the trophies that are here at this meeting at the banquet. The trophies that have someone's name of it, for instance, the Truhlsen trophy and the Wilkinson Tennis trophy, if those two individuals' families would like to take the trophy home with them, I think forever, right Tom?

THOMAS J. LIESEGANG MD: Yes

GEORGE B. BARTLEY MD: They may do so. Winners of the trophies this year may take the trophies home and have them engraved, but you must return them to the AOS office in San Francisco at your expense by next April. However, if you win a trophy this year and you do not want to fiddle with the trophy, then you can leave it here and the AOS staff will take the trophy back to storage. In the future the plan would be not to bring the trophies to the meetings. This is very expensive to do so and it is a lot of work for our staff. We will feature photographs of the trophies, only not the actual hardware. That is the latest proposal that I will pass to our president.

DAN B. JONES, MD: Thank you for your report. Dr. Kirk Wilhelmus will now present the report of the Committee on Theses.

REPORT OF THE COMMITTEE ON THESES

KIRK WILHELMUS MD: The Committee on Theses received 14 theses by the deadline of January 1, 2008, 11 of which were new theses and three were revised theses. The committee reviewed these over the last several months and recommended that two theses be accepted completely, ten theses be accepted with minor revisions, and two theses be accepted with major revisions.

DAN B. JONES MD. Thank you for your report. The Secretary-Treasurer will now read the names of those individuals whose thesis have been accepted.

THOMAS J. LIESEGANG MD: These individuals are tentatively accepted pending receipt of minor revisions in their theses within the next two months. We welcome these new members.

Eduardo C. Alfonso, MD:

Genotypic identification of Fusarium species from ocular sources - comparison to morphologic classification in antifungal sensitivity

R. Rand Allingham, MD

Pilot project: Assessment of Visual Status of the Aeta, a Hunter-Gatherer Population of the Philippines

Donald L. Budenz, MD, MPH

Inter-Eye Asymmetry of the Retinal Nerve Fiber Layer as a Tool for Early Glaucoma Diagnosis

Gary E. Fish, MD

Intravitreous Bevacizumab in the Treatment of Macular Edema from Branch Retinal Vein Occlusion and Hemisphere Retinal Vein Occlusion

Frederick W. Fraunfelder, MD

Liquid Nitrogen Cryotherapy for External Eye Disease

James L. Kinyoun, MD

Long-Term Visual Acuity Results of Treated and Untreated Radiation Retinopathy

Marian S. Macsai, MD

The Role of Omega-3 Dietary Supplementation in Dry Eye and Blepharitis: A Pilot Study

Joan W. Miller, MD

Higher Irradiance and Photodynamic Therapy for Age-Related Macular Degeneration

Timothy W. Olsen, MD

The Minnesota Grading System of Autofluorescence for Eyebank Eyes: MGS-AF

James G. Ravin, MD

The Visual Difficulties of Several Prominent Artists

Joel S. Schuman, MD

Spectral Domain Optical Coherence Tomography for Glaucoma

James C. Tsai, MD

Safety of Intravitreally Administered Recombinant Erythropoietin

DAN B. JONES MD: I would like a vote to accept these candidates as read under the terms as presented by the Secretary Treasurer. All in favor? Aye. Opposed? So done. The motion carries. Thank you. Dr. Rich Parrish will now present the Editor's report.

REPORT OF THE EDITOR

RICHARD K. PARRISH II, MD: The 2007 edition of the *Transactions of the American Ophthalmological Society* was published online in February 2008 and became available through PubMed on April 21, 2008. Since the initial availability of the Transactions online through the National Library of Medicine in September 2005, the hits or number of times users click the links, as provided by

LinkOut Statistics (<u>linkout@ncbi.nlm.nih.gov</u>) are as follows Journal Medline Abbreviation (ISSN) Trans Am Ophthalmol Soc (0065-9533) 9/2005 – 180, 10/2005 – 1001, 11/2005 – 949, 12/2005 – 799 2005 Total = 2929

1/2006 - 771, 2/2006 - 358, 3/2006 - 161, 4/2006 - 139, 5/2006 - 115. 6/2006 - 105, 7/2006 - 88, 8/2006 - 41, 9/2006 - 45, 10/2006 - 129, 11/2006 - 116, 12/2006 - 64

2006 Total = 2132

1/2007 - 104, 2/2007 - 86, 3/2007 - 73, 4/2007 - 44, 5/2007 - 65, 6/2007 - 74, 7/2007 - 65, 8/2007 - 57, 9/2007 - 83, 10/2007 - 83, 11/2007 - 53, 12/2007 - 70 2007 Total = 774

1/2008 - 50, 2/2008 - 58, 3/2008 - 51, 4/2008 - 672008 Year to date = 226

Recorded sessions of the papers, primary discussions, and secondary discussions of presented at the 2008 meeting will available through the AOS website through the Members Only section. This information would not be accessible from PubMed Central through the National Library of Medicine. Authors of papers and primary discussants are reminded that the editor must receive all manuscripts before the scheduled time of presentation to assure timely publication. Failure to do so may result in prevention of presentation of the paper at the Annual Meeting.

Authors of theses should submit manuscripts that require minimal copyediting. They are responsible for assuring the accuracy and completeness of all references. If the preparation of the manuscript requires extensive copyediting to reconfigure figures, tables, or references, then the author may be required to pay for this additional service, as judged appropriate by the Council.

Confusion still exists regarding the publication of papers or theses that will be published in the TAOS and submission to another journal. After presentation at the Annual Meeting, the author may seek publication at another journal if that journal, which will hold the copyright and give permission for a related version to be published in the TAOS in December of the same year. This provides a narrow window of time for publication in another journal.

DAN B. JONES MD: Thank you. Dr. Richard Mills will now present the report of the committee on programs.

REPORT OF THE COMMITTEE ON PROGRAMS

RICHARD MILLS MD: The Committee on Programs consists of me, Marco Zarbin, Steve Feldman, and Richard Abbott. This year we received 28 abstracts, 3 of which we rejected because of no IRB approval and the work was done with human subjects or the medical records of same, 20 abstracts were accepted as platform presentations, and five accepted poster offers. The Knapp Symposium, most of you were able to attend yesterday. Many of you have spoken with me afterwards to indicate that you had a little countervailing view to what the speakers had said and, therefore, I would encourage all of you to put those thoughts in writing and send them post haste to Lee Jampol. We will be convening in two weeks at O'Hare Airport to write the white paper and certainly any feedback that you can provide will be very helpful to that group to achieve balance in the white paper that results. The conflict of interest landscape for AOS, as for any medical society, is under continual change. The ACCME seems to be very creative in terms of the requirements with which they keep asking us to comply. Our current policy does require that disclosure be done early so that the program committee can consider your disclosures as part of the criteria for accepting a paper. Annual meeting evaluation forms will be done electronically and most of you already received an email about that process. One other reminder about IRB requirements, any study involving patients whether standard treatment is given, whether the patients are limited to those of the author, or whether the study is retrospective or prospective; none of that matters all of the above require IRB approval. The IRBs are not very happy about trying to give approval retrospectively, so he first step then for authors considering a study is to get the IRB approval first and then to proceed with the study. Finally, to reiterate what Dr. Parrish said the manuscripts for papers and discussants must be in the Editor's hands prior to the platform presentation. I am happy to entertain any questions. If not, thank you.

DAN B. JONES MD: Thank you. Dr. Barrett Haik will now present the report of the Committee on Membership

REPORT OF THE COMMITTEE ON MEMBERSHIP

BARRETT HAIK MD: I apologize. We had formally or attempted to more formally organize the process of membership of potential candidate evaluations and recruitment following guidelines had been set up by the Council and the officers and previous committee members. We essentially searched through a large number of national lists of ophthalmic leaders through subspecialty societies, national ophthalmic societies, the advisory councils of the National Eye Institute. and other areas to identify individuals that would be ideal for the organization. We then divided them between the four members of the Committee and essentially tried to evaluate who was or was not potentially a good candidate. At this point, and at the end, we ended up with 28 complete applications for consideration of membership and they were submitted to Council and to the leadership yesterday.

DAN B. JONES MD: Thank you Dr. Ralph Eagle will now present the report of the Archivist/Photographer.



NEW MEMBERS. FROM LEFT: GARY N. HOLLAND, ANDREW J.W. HUANG, MICHAEL BRODSKY, STEVEN M. ARCHER, R. LAWRENCE TYCHSEN, EDWARD G. BUCKLEY, JAMES D. REYNOLDS, JOHN C. MORRISON, JAYNE S. WEISS, MARK TERRY, JOHN SIMON, DAVID WALLACE, DAVID PARKE II, ANNE L. COLEMAN, REZA DANA, LEONARD A. LEVIN, STEVEN NEWMAN

REPORT OF THE ARCHIVIST/PHOTOGRAPHER

RALPH C. EAGLE JR MD: I took 549 digital photographs at the One Hundred Forty-third Annual Meeting of the Society held at The Greenbrier, White Sulphur Springs, West Virginia. Eleven of these were included as color illustrations in the 2007 on-line volume of the *Transactions of the American Ophthalmological Society*. These included photos of 2007 AOS President John G. Clarkson, President Clarkson and his wife Diana, a group photo of The Council and a group photo of the New Members, a photo of new member Stephen Mcleod and his Wife Marion. Also included were photos of 2007 Lucien Howe Medalist Daniel M. Albert and Dr. Albert and his wife Eleanor, Honored Former Secretary-Treasurer Pat Wilkinson with President John Clarkson and Travis Meredith, AOS

Members Lee Jampol and Arthur Jampolsky, invited speaker Balamurali Ambati at the Angiogenesis Symposium and McCulloch Canada Cup Golf Trophy winner Robert Sergott.

The digital archives of the Society now comprise more than 3520 high resolution digital photographs stored on CDs. PowerPoint presentations in PDF formation of meeting photos from 1996 through 2007 currently can be viewed on the AOS website. A presentation from the 2008 meetings will be posted on the website sometime after the meeting. These files are quite large and a high-speed connection is recommended downloading and viewing.

DAN B. JONES MD: A big thanks to Ralph. I would like a vote to accept these reports as presented. All in favor? "Aye". Opposed? The motion passed. Dr. Robert Drews will now present the report of the Committee Emeritus Members.

REPORT OF THE COMMITTEE ON EMERITI

ROBERT C. DREWS MD: According to our Bylaws: Any Active Member who has been a member for 25 years or who has reached the age of 70 years or who has completely retired from active practice or from gainful occupation, may upon written request become an Emeritus Member of the Society, subject to the recommendation of the Council and the affirmative vote of three quarters of the members present at the Executive Session of an Annual Meeting. I am sorry to report that 9 of our esteemed colleagues have died since our last Annual Meeting:

Francis P. Campbell	New York, NY	1968
John Warren Henderson	Rochester, MN	1956
Robert W. Hollenhorst	St Louis Park, MN	1958
Robert H. Kennedy	Arlington, TX	1995
Muriel Kaiser-Kupfer	Bethesda, MD	1971
Lois A. Lloyd	Toronto, ON	1973
G. Richard O'Connor	Sausalito, CA	1970
Robert N. Shaffer	Greenbrae, CA	1952
Gilbert Smolin	San Francisco, CA	1983

Currently we have 111 Emeritus Members. 14 of our Active Members have requested Emeritus status in 2008:

NAME	JOINED	COUNCIL RECOMMENDATION
Douglas R. Anderson	1981	yes
Al Biglan	1990	yes
George Blankenship	1986	yes
Jay Federman	1982	yes
Bartley R. Frueh	1984	yes
Eugene M. Helveston	1980	yes
David Hull	1990	yes
Edward Jaeger	1980	yes
Frederick A Jakobiec	1984	yes
David L. Knox	1973	yes
Henry Metz	1983	yes
Walter J. Stark	1980	yes
Mark Tso	1987	yes
Thomas O. Wood	1984	yes

The Emeritus Members and their guests will have their traditional luncheon today at noon in the Crystal Room in the Broadmoor Main Building. Respectfully submitted.

DAN B. JONES MD: I would like the members to stand for a moment of silence to honor those members who have passed away in the past year. I would like a vote to approve the report and to accept the members who are applying for emeritus status that list of members who have already been approved by the Council. All in favor? Aye. Opposed? The motion passes. The Secretary-Treasurer will now read the names of those individuals proposed for membership bought to us by the Committee on Membership.

THOMAS J. LIESEGANG MD: The following are a list of the names proposed for membership followed by the Proposing member and the Seconding member

Anthony C. Arnold: Alfredo Sadun, Bradley Straatsma

John D. Baker: David Stager, Steven Archer Neil M. Bressler: Lee Jampol, Morton Goldberg David J. Browning: John Clarkson, Travis Meredith J. Douglas Cameron: Hans Grossniklaus, Narsing Rao Stephen P. Christiansen: Thomas France, C. Gail Summers

Roger A. Dailey: George Bartley, David Wilson Janet L. Davis: David Tse, John Clarkson

Eric D. Donnenfeld: Richard Lindstrom, Edward Holland

Albert O. Edwards: Jose Pulido, George Bartley
Christina Joy Flaxel: David Wilson, Travis Meredith
Tamara R. Fountain: Bruce Spivey, Susan Day
Robert A. Goldberg: George Bartley, David Tse
John D. Goosey: Malcolm Mazow, Dan Jones
David Huang: Douglas Koch, Ronald Smith
L. Jay Katz: George L. Spaeth, Louis B. Cantor

Judy E. Kim: Julia Haller, Dennis Han

Ronald R. Krueger: Daniel Durrie, Douglas Koch Andreas Katsuya Lauer: David Wilson, Emily Chew Paul P. Lee W. Banks: Anderson, M. Bruce Shields Gregg T. Lueder: Jane Kivlin, Lawrence Tychsen Edward E. Manche: Douglas Koch, Roger Steinert Steven L. Mansberger: Richard Mills, Richard Parrish, II Timothy James McCulley: Allan Flach, John Bullock Peter A. Netland: C. Stephen Foster, Barrett Haik Silvia Orengo-Nania: Dan Jones, Ronald Gross

Kerry B. Solomon: Richard Lindstrom, Edward Holland

These candidates will be invited to submit applications for review by the Committee on Membership. The recommendations from that committee will come to Fall Council Meeting for further consideration. The reports of the Committee on New Members, Committee on Athletics, Committee on Prizes, will be presented at the banquet tonight. Other committees and representative reports not presented during this executive session are available in a packet at the registration desk and will be included in the *Transactions*.

REPORT OF THE REPRESENTATIVE TO THE INTERNATIONAL COUNCIL OF OPHTHALMOLOGY

BRUCE E. SPIVEY MD: The International Council of Ophthalmology celebrated the 150th year since the first International Congress of Ophthalmology, held in Brussels in 1857. The International Council was officially organized in 1927, and celebrated its 80th Anniversary in 2007. During the World Ophthalmology Congress in Sao Paulo, Brazil in February 2006 (XXX International Congress of Ophthalmology), a new set of leaders were elected for four years: President – Dr. Bruce E. Spivey (USA), Vice President - Dr. Akef El Maghraby (Saudi Arabia), - Secretary General, Dr. Jean-Jacques De Laey (Belgium), and Treasurer - Dr. Yasuo Tano (Japan). In recent years, the Council has taken a far more active role than was its case since its inception. The organization has defined a Strategic Plan and has had added a series of new Initiatives and Task Forces in addition to its major programs. The ICO Programs are vital and growing although relatively young. Major programs include: The International Basic and Clinical Sciences Assessments, exams similar to the OKAP, are offered annually. In 2008 over 2000 candidates sat for the exam in 95 test centers in 62 countries. It is becoming the international standard for assessing the cognitive knowledge acquired in residency training in world ophthalmology. The ICO has awarded 287 Fellowships through March 2008. These Fellowships of three months are available from more than 60 ophthalmology departments in 27 countries around the world to ophthalmologists from developing countries. Education Committee efforts have created a curriculum for medical students and residency training. The residency Curriculum has been translated into many languages and is becoming the basis for residency training worldwide. Courses for Residency Program Directors have been given in Mexico, Peru, Egypt, Pakistan, Argentina and Brazil and are planned in Slovenia and Ethiopia 2008. Additional regional training centers are being created: 1) in diabetic eye disease at Peking University, supported by Eli Lilly, and 2) a general training program in Slovenia, supported by Alcon. Additional programs include: International Clinical Guidelines; Standards with reports on visual assessment, function, and driving standards; training programs in Nigeria; a particular high volume/high quality cataract surgery program being developed in Ibadan; plus a regional training program in Senegal. Cooperative relationships with four supranational societies, Asia-Pacific Academy of Ophthalmology (APAO), Middle East African Council of Ophthalmology (MEACO), Pan-American Association of Ophthalmology (PAAO), and the European Society of Ophthalmology (SOE), are creating the opportunity for joint programmatic and Congress activities. ICO will co-sponsor Congresses with MEACO in 2009 and the APAO in Sydney in 2011. The World Ophthalmology Congresses will be held every two years, and are now scheduled for Hong Kong 2008, Berlin 2010, Dubai 2012 and Tokyo 2014. The ICO has organized a World Ophthalmology Roundtable on Leadership Development

(WORLD) and, as part of that formed with MEACO an Advisory Leadership Group for Sub-Saharan Africa. Finally, the ICO has developed the World Ophthalmology Residency Development (WORD) program, an online forum and resource center for Residency Program Directors to share information and resources, particularly educational methods and materials. For further information, please see the ICO website: www.icoph.org.

REPORT OF THE REPRESENTATIVE TO THE PAN AMERICAN ASSOCIATION OF OPHTHALMOLOGY

SUZANNE VÉRONNEAU-TROUTMAN MD: The XXVII Pan-American Association of Ophthalmology Congress under Dr Richard L. Abbot, President of the PAAO and the local PAAO Congress President Dr. Rafael Sanchez Fontán was convened in Cancun Mexico May 31- June 3, 2007 and enjoyed a total attendance of 5000 from 41 countries, including 3100 ophthalmologists. In addition to symposia, courses, free papers, and posters and satellite specialty meeting the meeting featured four honorary lectures: The Gradle Lecture by Rubens Belfort Jr., MD, the AJO Lecture by Richard K. Parrish, MD, the PAAO Lecture by J. Bronwyn Bateman, MD and the AOI Lecture by Enrique L. Graue, MD, and two medals and an award: The Maumenee and Gradle Medals, the Boyd Humanitarian Award and two biennial monetary prizes: The perpetually endowed 8th "Troutman-Véronneau Prize" (\$10,000.00), and, the 6th "Carl Kupfer Prevention of Blindness Prize" (\$5,000) As always the social program was outstanding. Ongoing PAAO Educational Activities: The Pan-American Council of University Professors in Ophthalmology (PACUPO): Paulo Augusto Arruda de Mello MD, chair: Promotes standardized university training programs throughout Latin America. PACUPO sponsors the ICO Assessment and the International Basic and Clinical Science examination as the written evaluation for national board certification. See www.paao.org under PACUPO) The Fellowships Committee: Juan Verdaguer MD, chair: Selected candidates and awarded 25 Fellowships that were funded by the PAAO Foundation and the Retina Research Foundation, the Tim & Judith Sear Foundation and Mr. David Pyott. The Visiting Professors Program: Cristian Luco MD, chair: Sent 13 visiting professors to lecture at national meeting in Latin America. Residents Committee: Alfredo A. Sadun, MD, chair: Still in development. Residency Education in Latin America Committee: Karl Golnick, MD, chair: Sets minimum standards for residency education among training institutions in Latin America. Participated with the ICO in the "Educating the Educators" meetings held in June 2007 in Buenos Aires and in September 2007 in Brasilia. Education for Emerging Countries Committee: Rafael Cortez Hernandez, MD, J. Bronwyn Bateman MD, and Francisco Contreras MD, co-chairs: Despite the current unrest in Haiti they held a two day training course with the Haitian Ophthalmological Society in Port-au-Price in November 2007. Leadership Committee: Zelia Correa, MD, chair: Held the sixth annual training Leadership Course "Curso de Liderazgo" in San Francisco California in conjunction with the AAO attended by 14 Latin American ophthalmologists. The Professional Relations Committee: Natalio Izquierdo MD, chair: Coordinates regularly held meetings devoted to national society regulatory and legislative advocacy in Argentina, Brazil, Chile, Costa Rica, Nicaragua and Venezuela. Other Meetings and Activities for 2007: XV Pan-American Regional Course: Alicia de Pacheco, MD (Uruguay), chair: Held at the Conrad Hotel, Punta del Este, Uruguay, March 6 - 8, 2008. Host to 1000 ophthalmologists from 16 countries, it was one of the best attended regional courses in our history.

2008 Pan-American Research Day: Drs. Rubens Belfort and Peter Quiros, co-chairs: In conjunction with ARVO, Renaissance Hotel, Fort Lauderdale, Florida USA, April 26, 2008, attended by 194 Ophthalmologists from 15 countries. Major Initiative: Formation of a Communications Committee: Zelia Correa MD, chair: PAAO Membership has remained at about 1500 for the past 10 years while the number of Latin American Ophthalmologists has grown to 20,000. This committee is working actively to recruit new members by developing communication among dues paying members, associate members and non-members and promoting membership benefits, especially PAAO sponsored scholarships and awards and prevention of blindness programs as well as opportunities for continuing education and community service. Put in Your Calendar! Joint Meeting PAAO/AAO San Francisco, CA, October 2009: www.paao.org

REPORT OF THE REPRESENTATIVE TO THE AMERICAN COLLEGE OF SURGEONS

MALCOLM L. MAZOW MD: The American College of Surgeons met in New Orleans in October, 2007. There were many issues discussed. Among these issues was the fact that the Board of Governors was not getting enough information from the Board of Regents and was quite frequently left in the dark. This issue was reviewed and corrected by the executive committee as well as the Board of Regents and hopefully this should not happen again. The second matter was that your representative, who is Chairman of the Ophthalmic Surgery section, wrote a guest editorial for the American College of Surgeons in *EyeNet*. This was well received by the College . Now an editorial will be written in the appropriate *Ear*, *Nose and Throat Journal*. Several of the other surgical specialties are doing this with the idea that surgical sub-specialties should join the American College of Surgeons in greater numbers for one surgical voice on the Hill. The third thing is that it is hoped that in October, 2008 at the annual meeting of the American College of Surgeons there will be ophthalmology symposium as there was in 2006 when we met in Chicago. This is being worked on at the present time. Lastly, the E.V.P. and the executive committee of the A.C. S. sent a strong letter in support of ophthalmology in the California ophthalmology / optometry issue in the Legislature. Respectively submitted

REPORT OF THE REPRESENTATIVES TO THE AMERICAN ORTHOPTIC COUNCIL

EDWARD L. RAAB MD: The mission of the American Orthoptic Council is to protect the health of the public by accrediting orthoptic training programs, examining and certifying graduates of these programs, and overseeing the practice of this profession by certified orthoptists. Our Society's representatives continue to be Drs. Thomas France, Edward Raab, and David Weakley, providing continuity that contributes valuably to this mission.

All of our representatives have been involved over several years as officers of the Council, and all are active on Council committees and as examiners of candidates for certification. Dr. France and Dr. Raab are Past Presidents. One of us is designated annually (this year Dr. Raab) to serve on the Nominating Committee for officers and new Council members. Dr. France continues to chair the Ad Hoc International Committee, serves on the Accreditation, Bylaws, Editorial, Program, and Public Relations Committees, and is the representative to the Canadian Orthoptic Council. After many years of distinguished service, Dr. France has stepped down as Editor of the American Orthoptic Journal, being replaced by Dr. James Reynolds, a newly elected member of our Society, Dr. Raab is Chair of the Bylaws Committee and a member of the Ethics, Ad Hoc International, and Ad Hoc Program Support Committees. Dr. Weakley is Vice-President of the Council, Chair of the Accreditation Committee, and a member of the Editorial, Examination, and Program Committees. A new training program at the Minneapolis Children's Hospital was recently approved. There currently are 11 Council-approved training programs, with a total of 13 students. Seven graduating students are expected to take their certifying examinations this year, joined by approximately six graduates of other programs and foreign-certified orthoptists. A revised Syllabus of Orthoptic Instruction, which embraces the curriculum to be mastered by orthoptic students, was approved and is being distributed to all programs. Students are now required to keep a log of their patient encounters, to help insure compliance with Council requirements for eligibility to take the certifying examinations. The Council continues to work toward recognition of the American Orthoptic Journal by Medline. A proposal currently under investigation is to offer the AOJ as an annual supplement to the Journal of the American Association for Pediatric Ophthalmology and Strabismus (J AAPOS), which would accomplish the recognition goal. Ophthalmologist and orthoptist Members of the Council present a workshop at the Annual Meeting of the American Association for Pediatric Ophthalmology and Strabismus. This has become a regular component of the AAPOS meeting program, and serves as an excellent demonstration of the value of orthoptists as members of an ophthalmology practice's staff.

The 2008 Academy meeting will include a symposium co-sponsored by the Academy, the Council, and the American Association of Certified Orthoptists entitled "Drifting Apart: from Birth to Adulthood, How to Manage exotropia." Manuscripts from these presentations are assigned by the Academy to the American Orthoptic Journal. The Society's representatives recommend continuing support of this important eye care component.

REPORT OF THE REPRESENTATIVE TO THE COUNCIL OF THE AMERICAN ACADEMY OF OPHTHALMOLOGY

JOHN F. O'NEILL MD: The Council of the American Academy of Ophthalmology (AAO) continues to meet in formal session twice yearly, first during the annual Academy meeting in the fall and then jointly at the Mid-year Forum in Washington in April. The Council was established to provide liaison between the AAO Board of Trustees and the numerous member societies involved with socioeconomic, governmental and public service issues. The current Council consists of voting representatives of all fifty states and includes Puerto Rico and the District of Columbia. Twenty-four Sub-Specialty societies have equal representation; however, the five "Special Interest Societies" which include the AOS, ARVO, ABO, EBAA (Eye Bank Association) and the Canadian Ophthalmological Society have Associate Non-voting Councilors. Each representative, including the AOS representative, provides a report to the AAO Council each year summarizing the activities of the individual states and societies. Since the founding in 1864 the objective of the AOS has been "the advancement of ophthalmic Science and art", and its activities are primarily for the academic, educational and collegial benefit of its members. Although the AOS maintains no political or economic agenda, participation in the Council reflects its broad support for the Academy's mission. As in previous years, the AAO has sponsored and promoted a Congressional Advocacy Day during where several Councilors or alternatives were briefed on the Academy's top legislative priorities and counseled on relationship building with their congressional representatives before proceeding to Capitol Hill and the offices of their personal representatives in the House and Senate. During the Mid-Year Forum and Council meeting, several recurring problems continue to take precedence. A top priority is the persisting efforts of organized Optometry to use the legislative route to expand their scope of practice to include invasive surgical procedures, both Laser and scalpel procedures, and a variety of injection procedures. Other threats to ophthalmologists include the problems with Medicare reimbursement and potential significant fee cuts. Symposia topics at the MYF included the present political climate for health care reform, ophthalmology in the military and the VA system, managing conflict of interest, the AAO web based education system, and preparing practices for the onslaught of the baby boomer generation. The Council meeting had a symposium and discussion about the Ophthalmology-led eye care team concept. Both the AOS and the AAO continue to receive benefit in the forum provided by the MYF and the AAO Council activities.

DAN B. JONES MD: May I have a vote to accept the list of candidates proposed for membership? All in favor? Aye. Opposed? The motion carries. George Bartley, the Chair of Council will now present the Council appointment report.

REPORT OF THE CHAIR OF THE COUNCIL

GEORGE B. BARTLEY MD: Thank you, Mr. President. We will to bring forward the following individuals for Council appointments. New member of the council: Richard Mills, president-elect, Pat Wilkinson will discuss that in a moment; EVP, Tom Liesegang to continue; Editor, Richard Parrish, to continue; Committee on the Theses, James Chodosh; Committee on Programs, Ron Gross; Committee on Membership, Lou Cantor; Jay Erie to continue as the Committee on New Members, Head Committee on Prizes Buck Crawford, Banks Anderson for the Emeritus Committee, Woody VanMeter to continue as the Committee of Athletics, Ralph Eagle as the Archivist Photographer and that is a perpetual appointment, by the way forever; representative to the AAO Council, Dr. Liesegang with Richard Mills as the alternate; Bruce Spivey as a representative to the International Council of Ophthalmology, Malcolm Mazow to continue with Ed Raab who is an alternate for the American College of Surgeons, Suzanne

Verona Troutman as the Representative of the PAAO, individuals listed as you can see as representatives to the American Orthoptic Council, and Ed Wilson to continue as the JCAHPO Representative. I have sent those to you Mr. President.

DAN B. JONES MD: I would like a vote to accept the report of the Council and these recommendations for appointment. All in favor? Aye. Opposed? The motion carries. Thank you. Is there any new business from the floor and, if so, then I would like you to come to the podium to my right. Either podium works.

ROBERT STAMPER MD: I have two items. One is a question and the other is a comment. The first is actually a question to Rich. I noticed that the number of hits for the *Transactions* has dropped radically from the first year. I am wondering if he or anyone else has any thoughts about why in the first five plus months of this year that there are less hits than there are members of the American Ophthalmological Society. The second is a comment that perhaps only relates and to nobody else in this room. I am beginning to have some great difficulty with email as a method of communication. I find myself overwhelmed with emails. I spend the first half hour or forty minutes of every morning just erasing those emails that I do not want to read. I then have to find the time sometime during the day to address those that I should address and I find more and more things slipping through the cracks. I just wonder in this day in age whether e-mail is in fact our most effective method of communication, particularly for important issues and whether we should at least reconsider snail mail or some other way of making sure that the important stuff gets through to the membership. Thank you.

THOMAS J. LIESEGANG MD: The first question related to the number of hits. When it first came out, the hits came mainly from librarians and research librarians who were extremely excited that it is now available on line because they have had requests in the past. It is mainly research laboratories and actually they have contacted me on a number of occasions. They were very pleased that it was available because otherwise they had difficulties getting the *Transactions*, so that explains the main original bolus of hits. As far as the email communications is concerned, the Council is aware of some of those difficulties and will discuss it further in length at the fall Council meeting.

DAN B. JONES MD: A reminder, too, that the newsletter which now comes out three times a year with effort and input of Tom has complete information of activities of the organization and, as you saw a rolling calendar of events, deadlines and needs. I would encourage you to use that source.

ALLAN J. FLACH MD: I have to disclose a bias. I am not a member on any subspecialty group society. I love all of ophthalmology. If I were to choose a society, then I would go to every single one: glaucoma, retina, plastics, uveitis, you name it. This is the only society that provides everything. With that introduction and expression of bias, I would like to bring back the statement of Froncie Gutman about the integrity of the material presented at this meeting. I completely agree with Froncie. It is the most important part of the meeting and the other part of that is the peer review process that occurs on site. That peer review process is dependent upon the members who are present. I think people that belong to subspecialty groups rarely miss a meeting. I think anyone who belongs to the AOS should be forced to attend a minimum two out of three times, not one out of three times. Anybody who feels strongly enough about their subspecialty group goes two out of three times or three out of three times. If you do not have that commitment to this society, then it is not right and it is not fair.

EDWARD RAAB MD: There are three items for which I would like clarification. They are short. Two are for Dr. Bartley. If a trophy is not taken home by the winners, then there is still the necessity to have it engraved. Will that be then accomplished by the AOS with the historic trophy? You did not mention that. The second one, is we voted to eliminate President-elect, and you gave cogent reasons for that. I think it should be clarified that the intention to invite Membership and Program Chairs is a policy issue that was not in any way a condition of whether we passed that bylaw or not. Am I correct about that? The last one, I did not quite understand the report of the Committee on Thesis that said that there two that would be accepted pending major revisions. There were some for minor revisions, as well. I do not have a problem with that, but I think that for acceptance pending major revisions, those should not be decided until the major revisions are made.

THOMAS J. LIESEGANG MD: I might be at a better position to answer all three of those questions. With regard to the last issue, there were two theses which were judged as "accept", but they will require minor revisions.

EDWARD RAAB MD: Minor revisions are not a problem.

THOMAS J. LIESEGANG MD: There were two that were an outright "accept", but they still require minor revisions. There were others that had minor revisions that are going to take a significant amount of work that the Council and that the Committee on Theses believed the individuals could accomplish in a 30 to 45 day period, so they are given a "minor revision", but both groups have corrections to make. Those that are major corrections come back the following year as a revision.

EDWARD RAAB MD: So, they were not in the acceptance group. Thank you.

THOMAS J. LIESEGANG MD: The trophy does not need to be engraved any further. If you are looking for who won the trophies, then it will be in *Transactions* in future years.

EDWARD RAAB MD: Inviting Membership and Program Committee Chairmen to the Council Meeting was a policy issue and not a Bylaws issue?

THOMAS J. LIESEGANG MD: Correct.

DAN B. JONES, MD: Is there any new business from the floor.

STEVE WILSON MD: I would like to address the problem with double publication of the theses in other journals, other than *Transactions*. I totally support that because I think that a lot of the theses really need to be published and some of our other subspecialty or major journals, but I think there continues to be a problem with that. Mine was an example, I actually originally submitted to *Investigative Ophthalmology and Visual Science* and despite the fact that it was going to be published first in *IOVS* and that they would be the copyright holder they refused to publish it and it had to be published in *Experimental Eye Research*. I think it would a good thing for the editor to contact the boards of some of the major organizations that publish ophthalmology work and specifically address that issue. I think if it was brought before the board and the understanding was that they would be the copyright holder and it would be first published in their journal, then it would ease the problem of the new members facing this issue.

THOMAS J. LIESEGANG MD: I would like to specifically address that. I sit with other Ophthalmology journal editors and we have a yearly meeting at the time of the American Academy of Ophthalmology yearly meeting. Most editors and editorial boards are not interested in duplicate publications, specifically of AOS material. They feel it is duplicate publication and should not be done. There are exceptions and we do have major journals which will accept the articles, but we do not have any leverage to change the opinion of the Editors in Chief or other editorial boards.

STEVE WILSON MD: I can speak for the *IOVS*. The editor is controlled by the board of ARVO and I think if you vote and informed him a letter to them that there would be a chance that some of these journals would look at this a little bit differently. I believe in many cases the editors are thinking of a double publication in the traditional sense of sending it to say *American Journal of Ophthalmology* and *Ophthalmology* at the same time. I think you would have some success if you went about approaching the governing bodies of these journals.

THOMAS J. LIESEGANG MD: Just as a side light, while I was Editor of the *Transactions*, I was approached by deans of three medical schools indicating that they thought their individuals were performing duplicate publication and asked how the AOS could accept this policy. These were Promotion Committees, if you will. They were considering this a serious violation, and I explained to them what the policy was, but individuals editors, editorial boards, have sometimes have a very different view of what you just presented.

STEVEN WILSON MD: I understand that issue. I believe what you can do is to put some wording on the website about this special situation with this particular double publication. I do not believe that it is equivalent to say *American Journal Ophthalmology* and *Ophthalmology*. Maybe it has become a moot point now that we have better internet access to *Transactions*. I think that when I originally applied the access to a lot of people was not very good outside of our members and then it was really important that it would be published in another journal.

THOMAS J. LIESEGANG MD: I have two other comments. If you do a Pubmed search the two articles (in *TAOS* and in the other journal) will align right up to next each other and it is very obvious that they are both published and certainly could be considered duplicate publication. The specific footnote which was mentioned by Rich Parrish is extremely important must be placed in that other journal but it is very frequently missing. That piece of information is extremely important to help accept or explain your duplicate publication. The membership must make sure that it appears in the second journal, and you must communicate with the editor-in-chief of the other journal about this specific issue.

DAN B. JONES MD: Is there any other new business from the floor. If not, then the Secretary-Treasurer has a few items.

THOMAS J. LIESEGANG MD: We only have five minutes, but let me just mention some of the things that the Council is considering and some of these have been brought up here. We are considering changing the format of the meeting and this has been brought up before. We do feel that the members are not bringing their best and most cutting-edge material to the meeting. A lot of that has to do with the need for publication in the *Transactions*. So the Council is going to consider other alternatives. The Council is considering changing the requirement for submission of the paper to the *Transactions*. Another question that comes up is a continuation of CME credits. The CME credits are a good thing, but the AOS staff and the Council must go through many gymnastics to meet the ACCME requirements now, and the question is if it worth all the time and effort it takes. The Council is also going to be considering whether we should have international members or guests and whether they should have separate classification, profiles, and then consider expanding the number of members. Under the current by laws we are restricted to 250 active members. Certainly, if we have international members in the future, then the bylaws will probably have to be expanded or consideration of a second membership status. We do not have time to discuss any of those items at length, but these items are under consideration. The next Newsletter we will discuss these or expand our concepts and then we will ask for feedback. At the Fall Meeting the Council will consider some of these items and then come back probably in the spring Newsletter with some of the concepts that we have so that you can think ahead of the next executive session. I do not really believe that we have time to discuss any of these, unless the President wants to bring up any of them.

DAN B. JONES MD: I do not believe we have time to discuss any of these. Thank you, Tom. That concludes the business meeting. I would like to thank the members for attending and to thank Dr. Raab for serving as parliamentarian. The scientific program will begin sharply at 7:30 AM. Thank you.

SCIENTIFIC SESSION, SATURDAY, MAY 17

The Meeting Continued with The Following Scientific papers:

- 6. "Corneal Wound Healing Stimulation with Femtosecond Laser", James P. McCulley, MD, W. Matthew Petroll PhD
- 7. "Factors Influencing Cataract Formation After Laser Peripheral Iridotomy", James C. Bobrow MD
- 8. "Congenital Aberrant Tearing: A Re-Look", Marilyn T. Miller MD, Kerstin Stromland MD, Liana Ventura MD
- 9. "Temperature Instability of Renu with Moistureloc Contact Lens Solution: A New Theory to Explain the Worldwide Fusarium Keratitis Epidemic of 2004-2006", John D. Bullock MD, MPH, MSc, Ronald E. Warwar MD, Willliam I. Northern MS, Laurel Elder PhD
- 10. "Quality of Evidence about Effectiveness of Treatments for Metastic Uveal Melanoma", James J. Augsburger MD, Zélia M. Corrêa MD, PhD, Adeel Skaikh MD
- 11. "The Importance of Eyelid Closure (ELC) and Nasolacrimal Occlusion (NLO) Following the Ocular Instillation of Topical Glaucoma Medications and the Need for the Universal Inclusion of One of These Techniques in All Patient Treatments and Clinical Studies", Allan J. Flach MD
- 12. "Trabectome (Trabeculotomy-Internal Approach) as Surgical Therapy for Chronic Open-Angle Glaucoma or Combined with Phacoemulsification", Donald Minckler MD, Sameh Mosaed MD, Laurie Dustin MD, Brian Francis MD, MS
- 13. "HSV Keratitis: Histopathologic Predictors of Corneal Allograft Complications", Roni M. Shtein MD, Denise D. Garcia MD, David C. Musch PhD, Victor M. Elner MD, PhD
- 14. "Risk Factors for Scleral Buckle Removal: A matched, Case-Control Study", Douglas J. Covert MD, MPH, William J. Wirostko MD, Dennis P. Han MD, Jill Hammersley, Kevin Lindgren, Thomas B. Connor MD, Judy E. Kim MD
- 15. "Vision First: A Program to Detect and Treat Eye Diseases in Young Children The First Four Years", Elias I. Traboulsi MD, Heather Hasley OD, Constance Mash, Rhonda Wilson, Susan Crowe, Hilel Lewis MD

SATURDAY EVENING BANQUET MAY 17TH

CHAIR OF THE COUNCIL

Introduction of the President

GEORGE B. BARTLEY MD: Good evening, colleagues and guests. Welcome to the banquet for the 144th annual meeting of the American Ophthalmological Society.

It is appropriate that an organization known widely by its acronym -- AOS -- is led by a President who is known widely by his initials -- DBJ. Dan B. Jones is an inspirational figure in ophthalmology, recognized internationally for his contributions as clinician, researcher, teacher, leader, mentor, and friend. He is a clear and innovative thinker whose service to the AOS has made it a better, stronger, and more relevant organization.

Ladies and gentleman, please join me in welcoming our President, Dr. Dan Jones, to the podium.

DAN B. JONES MD: I would like to reconvene the 144th meeting of the American Ophthalmological Society. The first item of business is to call on Jay Erie who will present the report of the Committee on New Members.

REPORT OF THE COMMITTEE ON NEW MEMBERS

JAY ERIE MD: It is my pleasure to introduce an impressive new group of ophthalmologists as new members to the AOS. This year we welcome 18 new members who were elected in 2007. The 2007 class of 18 members is the largest class in the last 26 years of the AOS. Over the past 26 years, the average class size has been 9 new members, ranging from 5 to 14 members. I encourage everyone to visit the new member biosketch on the AOS web-site, which does a wonderful job of listing the talents and accomplishments of the new members. The 2007 AOS New Members are:

Steven Archer and his wife, Carol, from Ann Arbor, MI.

Michael Brodsky and his wife, Debbie, from Rochester, MN

Edward Buckley from Durham, NC

Anne Louise Coleman and her husband, Dr. Thomas Belin, from Santa Monica, CA

Reza Dana and his wife, Azhand, from Cambridge, MA

Gary Holland from Los Angeles, CA

Andrew Huang and his wife, Dr. Liling Lai, from St. Louis, MO

Leonard Levin and his wife, Dr. Francine Wein, from Madison, WI.

Steven Newman and his wife, Sharon Heyka, from Charlotesville, VA

David Parke II and his wife, Julie, from Oklahoma City, OK.

James Reynolds and his wife, Kathleen Lindell, from Amherst, NY

Daniel Schaefer and his wife, Marlene, from Buffalo, NY

John Simon and his wife, Dr. Susan Ferrary Simon, from Albany, NY.

Mark Terry and his wife, Cindy, from Portland, OR

R. Lawrence Tychsen and his wife, Kathy, from St. Louis, MO

David Wallace and his wife, Allison, from Chapel Hill, NC

Jayne Weiss from Bloomfield, MI

John Woog and his wife, Dr. Maryanna Destro, from Rochester, MN



NEW MEMBER DAVID PARKE II AND HIS WIFE JULIE

DAN B. JONES MD: I would like to introduce Woody Van Meter who will give the report of the Athletics Awards Committee.

REPORT OF THE ATHLETICS AWARDS COMMITTEE

Woodford Van Meter MD:

TROPHIES IN GOLF

Mishima-Michels Trophy Men's Low Gross: David Wallace Canada-McCullough Cup Men's Low Net: Verinder Nirankari Truhlsen Trophy Men's Senior Low Gross: Paul Lichter

Knapp Memorial Trophy Men's Low Net Team: David Schaefer / Mark Terry

Ellsworth Trophy Women's Low Gross: **Dorene Shipley** Homestead-Calloway Cup Women's Low Net: Audrey Ing

UNOFFICIAL DUBIOUS GOLF AWARDS FROM ATHLETICS DIRECTOR

Henry Gelender Men Closest to Pin: Men Long Drive: David Wallace Senior Closest to Pin: No awardee Senior Long Drive: Paul Lichter Women Closest to Pin: Carolyn Lichter Women Long Drive: No awardee

TROPHIES IN TENNIS MEN

EVL Brown Bowl Men's Doubles Winners: Richard Lindstrom / Woody Van Meter

EVL Brown Trophy Men's Doubles Runner-up: Dennis Han / William Jarrett

Wilkinson Trophy Men's Senior Winner: Ed Raab

TROPHIES IN TENNIS WOMEN & MIXED

Lewis-Perera Bowl Women's Doubles Winners Jaci Lindstrom / Kathy Tychesen

Marguerite McDonald / Betty Van Newkirk Hughes Bowl Women's Doubles Runner-up:

Wong-MacDonald Trophy Mixed Doubles Winners: Richard Lindstrom / Jaci Lindstrom Wilson Trophy Mixed Doubles Runner-up; Devron Char / Kathy Tychesen

Minutes of the Proceedings

UNOFFICIAL DUBIOUS TENNIS AWARDS FROM ATHLETICS DIRECTOR

Men's narrow miss:

Women's narrow miss:

Alfredo Sadun
Alice Raab

Guest sandbagger award: Doug Covert / Sujit Itty

GEORGE B. BARTLEY MD I am honored to introduce Dan Albert, MD, the awardee of the 2007 Howe Medal who will provide a brief history of the Howe Medal.

DAN ALBERT MD: The Howe Medal: Its History and Significance

I have been asked by the Council to speak briefly concerning the history and significance of the Howe Medal. In doing this, I would like to consider who Lucien Howe was, what the purpose of the medal was, a consideration of its recipients, and some brief comments about its significance.

Who was Lucien Howe?

Lucien Howe was born in 1848 in the home of his grandfather, Dr. Ebenezer Howe, in Standish, Maine, and graduated from Bowdoin College in 1870. He studied medicine at Harvard, when Oliver Wendell Holmes was teaching anatomy there, continued his medical studies at Long Island College Hospital, and received his medical degree from Bellevue in 1872. On completing his medical studies, one of his mentors said to him, "There is a man in Edinburgh named Lister who thinks that fevers are caused by some sort of germ. I think there may be something in it. I advise you to go over and see." Howe studied under Lister and then worked in various clinics in France, Austria, and Germany, finally spending time as a student under Hemholtz. In 1874, Howe became a pioneer ophthalmologist in Buffalo, New York, then a comparatively small but growing city, where he practiced eye, ear, nose, and throat. Two years later, he founded the Buffalo Eye and Ear Infirmary and in 1879 became professor of ophthalmology at the University of Buffalo. Fifty years later, when Howe left Buffalo for Boston, he had treated 100,000 patients at the Buffalo Eye and Ear Infirmary. His monumental contribution to combating eye disease, for which he mobilized the AOS to give support, was for passage of the "Howe Bill" in the New York State legislature and subsequently in other state legislatures, which required prophylaxis for ophthalmia neonatorum. In addition, he wrote a monumental two-volume monograph, published between the years 1906 and 1908, entitled *Muscles of the Eye*, which remained the leading English text on that subject for the next quarter of a century.

With a great capacity for leadership, Howe rose to become chair or president of each of the major medical or ophthalmic societies he belonged to. He was convinced of the fact that, "Medals and prizes for original work in medicine tend to promote healthy rivalry and to advance our science." In addition, he was convinced of the fact that while young physicians coveted cash prizes, "Gold medals are more appreciated by investigators ripe in years and experience as lasting evidence of distinguished professional service." Accordingly, on becoming president of the New York State Medical Society in 1906, president of the AOS in 1919, chair of the section on ophthalmology of the American Medical Association in 1924, he gave each of these organizations a gift of \$1,500, to stimulate and reward original investigation of some phase of ophthalmology or allied sciences or allied branches of surgery; or for the discovery of some new method of examining or treating the eyes. Each of these medals eventually became known as the Howe Medal, as did a fourth medal established by the University of Buffalo and the Buffalo Ophthalmological Society in 1928, following Howe's death that year, to honor his memory. The Howe Medal of the AOS became the most celebrated of these awards. Howe himself chaired the first committee on the prize medals (1919) and served on the committee that proposed the initial awards (1922-1924). He oversaw the investment of his gift in 4.5% Liberty bonds and with the medal costing in the neighborhood of \$25 throughout the 1920s and 1930s, Howe envisioned that the income of the fund might eventually provide a cash prize as well as the medal.

A loyal alumnus of Harvard Medical School, in 1926 Howe funded the laboratories of ophthalmology at that university with a gift of \$250,000, and additionally he left several hundred thousand more dollars in his will. Howe became the first director of the laboratory and was active in its organization at the time of his death in 1928.

What is the medal intended to recognize?

By the time the first medal was awarded in 1922, the criteria had been broadened. The medal could be given for one or more of the three following reasons: "a) an appreciation of discoveries so notable as to advance suddenly the progress of ophthalmology in all parts of the world. b) in recognition of less brilliant but still conspicuous service as a writer or teacher, during long years of devotion to our science. c) to encourage investigation among the younger ophthalmologists, in order that this recognition of their efforts may promote them to a higher and well-recognized place among their fellows, the reason for such an award being usually based on the result of research. The award may be made to any ophthalmologist in any country."

Lucien Howe envisioned that, in keeping with the academic awards in the late 18th and early 19th centuries, the medal would promote a healthy rivalry among the members of the AOS, and candidates would submit an essay and reprints to the committee selecting the Howe medalist as a basis for the award. Frank Newell, in his 1989 history of the AOS, notes: "The committee selecting the Howe medalist carefully considers the conditions established by Lucien Howe. Whether a medal or a prize promotes a healthy rivalry and advances ophthalmic science, as suggested by Howe, is open to debate. As far as can be determined, an essay has neither been submitted nor considered as the basis for the award. No one has ever sent reprints to the chairman of the committee on prizes for consideration...There have been few discoveries since Koller 'so notable as to advance suddenly the progress in all parts of the world.' An award has never been made 'to encourage investigation among younger ophthalmologists'"...Thus most awards have been made in recognition of 'less brilliant but still conspicuous service as a researcher or teacher, during long years of devotion to our science."



2008 HOWE MEDALIST PAUL R. LICHTER

The Awardees

Since 1922, 73 ophthalmologists have received the Howe Medal of the AOS. The first, in 1922, was Karl Koller, who had been a member of the AOS since 1889. While serving as an intern and house surgeon at the Allgemeine Krankenhaus in Vienna, in 1884 he was the first to report the local anesthetic action of cocaine in the eye, which essentially marked the inception of anesthetic eye surgery. In 1892, Koller described to the Society the use of subconjunctival cocaine in ophthalmic surgery. Newell states that the Howe Medal in 1922, in Koller's 65th year, was the first recognition he received for his momentous contribution. In fact, Derek Vail, Sr., in his biography of Howe, speculated that Howe may have established the medal specifically to honor Koller. The second awardee of the Howe Medal was Alexander Duane, remembered today for his classification of motor anomalies affecting the eye. Ernst Fuchs, professor at the Second Eye Clinic of the University of Vienna, became the third Howe medalist. Fuchs was the first at the University of Vienna to provide graduate instruction in English, and more than 700 North American physicians attended his courses. Following Fuchs, Edward Jackson, Priestly Smith, Theodor Axenfeld, Frederick Verhoeff, George de Schweinitz, Sir John Herbert Parsons, and Arnold Knapp were the subsequent awardees. Newell notes, "In the first 25 years of the Howe Medal, between 1922 when awarded to Karl Koller and 1946 when awarded to Sir Stewart Duke-Elder, there were 13 recipients. Of these, one was from Austria, one from Germany, and three from England. Of the remaining eight recipients, all but Karl Koller had served as president of the Society.

"After 1946, the medal has been awarded every year, and the recipients include but one ophthalmologist, Ida Mann, from outside the United States." And here for your rapid perusal [show slide] is a list of the recipients of the Howe Medal to the present and here are the faces of recipients I think you will recognize who have received the award during the time Ralph Eagle has been taking pictures.

What is the significance of the Howe Medal?

The Howe Medal denotes distinguished service to ophthalmology, and the medal is gratefully received and proudly worn by the recipient. It is viewed as a meaningful honor and generally the individuals who have received it have done credit to the AOS and to the award. There is a considerable subjective element to the selection of the medalist, although in my experience and in that of others who have served on the committee, the committee strives conscientiously to make the best choice it can.

Although Lucien Howe intended the medal to promote a healthy rivalry, to my mind the most beautiful aspect of the award is the pleasure and good feeling the membership take in seeing one of their own so honored.

REPORT OF THE COMMITTEE ON PRIZES

DENNIS M. ROBERTSON MD: I am pleased and honored to be able to introduce the Howe medalist for 2008. My thanks go to Doug Anderson and Dan Albert who served with me on the selection committee this year.

You have just heard about the history of the Howe medal from Dan Albert. If you look at the names of the medalists who have been selected in past years, it is easy to understand why they have been selected; that is because these are individuals who have made powerful marks on our ophthalmic heritage. In general, besides contributing major advances in the science of our profession, most have been passionately and continuously involved in education, and, in our professional societies. These many attributes certainly profile our 2008 medalist.

How does one introduce one of our members as the next Howe medalist? As all of you know the committee makes a decision and tries to keep the selection confidential and a secret from the person who is to receive the medal. Traditionally one shows a baby picture of the medalist, and it is almost certain that only two people in the audience will recognize the person in the picture; one is the person who supplied the picture, and the other is the person who is in the picture.

Our medalist for 2008 was born just the other day. At an early age our medalist showed a penchant for sports and oration. Still at an early age, he is seen here taking one of his first photographs, this being of his parents during the World War Two years. He credits his parents for his life-long interest in science, art, music, and philanthropy. Photography became one of his passionate hobbies as exemplified by this prize winning photograph taken of a Galapagos hawk.

His first scientific publication in 1967 involved photography. He described a simplified technique for taking photographs of the angle of the eye. His interest in photography continued and his first formal participation at the American Academy of Ophthalmology was as a member of the Audiovisual Committee in 1971. Little did he know at that time that he would later become President of the American Academy of Ophthalmology during its centennial year.

Our medalist has been active as a leader in many professional societies and organizations; ARVO –since 1969- the AMA in 78-80. He was the chairman of the American Board of Ophthalmology in 1987. He served successively in a whole host of activities with the AAO before becoming president of the AAO in 1996. He was president of the Pan American Society in 2000-2001 and he became the Chairman of a University Department of Ophthalmology; he also is a past president of the AOS. But wait, I have gotten ahead of myself. Who is this leader?

Our medalist for 2008 received his high school diploma in 1956 from Cranbrook School in Broomfield Hills, Michigan. He obtained much of his education at the University of Michigan; his BA, MD, and residency in Ophthalmology all at the University of Michigan.. Here he is at his college graduation with his college sweetheart and guess what? They were married in 1960 and this young woman has continued to actively support our medalist throughout his career.

After completing a glaucoma fellowship in San Francisco with Bob Shaffer, a former Howe medalist, our current medalist served in the Navy and was stationed in Bethesda from 1969-1971. After completing his tour of duty he joined the faculty at the University of Michigan. Since 1978, he has been the Chairman of the Department of Ophthalmology and Visual Sciences, and also, as part of his duties, he functions as the Director of the Kellogg Eye Center. Of course, this is Paul Lichter.

Paul's research interests have been concentrated primarily in the field of glaucoma. Initially much of his research centered on therapy. One of his early very clever studies revealed how a group of glaucoma experts, given the same photographic information, greatly differed in their grading of the optic cup-disc ratio. Throughout his career he has been committed to studying glaucoma within the fabric of clinical trials many of which were NEI funded. His leadership and tenacity, helped spearhead a number of these studies including one that was uniquely dear to his heart involving Quality of Life issues among glaucoma patients enrolled in one of the randomized trials. Especially during the recent 15 years, he and his coworkers have developed strong research interests in the genetics of glaucoma, studying and mapping genetic abnormalities of juvenile open angle glaucoma and evaluating other genetic variations in different glaucoma populations. His contributions regarding the Nail-Patella syndrome represent just one of these pursuits. He has investigated advanced laser technologies in the treatment of glaucoma, and 2 years ago, he was one of the authors in a collaborative study on the implantation of miniature telescopes in the eyes of patients with end-stage macular degeneration. Paul has over 200 publications. He has given numerous named lectures including the 50th Edward Jackson Memorial lecture and the Centennial Address at the American Academy of Ophthalmology Meeting in 1996. He has received numerous awards.

In addition to all these activities he has served on the editorial board of several journals and from 1986-1994 he was the editor in chief of *Ophthalmology*. It was during that time that he began to regularly write some very thought-provoking editorials.

Those of you, who have read the dozens of editorials Paul has written, probably marveled, as I have, at their timeliness and insightfulness. He has never been afraid to speak out on controversial or sensitive issues. Look at just some of his carefully crafted titles that lure you as a reader to want to read and explore the content of the editorial. I will not read all of these, but you can see some of the titles reflecting the many issues he has tackled.

Free enterprise and health care: should the buyer beware?

Ban boxing?

A wolf in sheep's clothing

Is anybody home?

Medicine, Society, and Aids

The medical-industrial complex and the excimer laser

Biomedical research, conflict of interest, and the public trust

Scrutinizing peer review

Qualifications and responsibilities of authorship

Authors, reviewers, and editorial bias

No jump balls in journal editing

How the golden egg of Medicare may help cook ophthalmology's goose Clear the smoke
Sutures, cylinders and straw men
Paying bounty for patients
Physician's income----what's fair

Back to our leader who has been a devotee of golf. He has won golf trophies in the AOS competitions and he is seen here at one of the AOS meetings at the Homestead with wife Carolyn and golfer Sam Sneed. Paul has maintained his relationships with his students and has always appreciated his mentors. He has been strongly devoted to his family. He is seen here with his two daughters, Laurie and Susan and here in a halcyon moment with Carolyn.

I want to make some final comments about the flourishing eye Department at the University of Michigan. Under Paul's leadership the department has continued to grow, not only with the addition of outstanding personnel, but also in the expansion of research space. Paul's leadership has been described by his Michigan colleagues as not only selfless, but visionary. In keeping with a visionary style, beginning with the challenge to "Dream Big", a plan for the Eye Center Expansion was conceived in the 1980s. On November 8 of this past year, the fruits of his persistent labors, fund raising, and many meetings, were realized with a Topping Out ceremony. This was held on the occasion of completing the steel skeleton structure expansion of the Kellogg Eye Center.

In addition to this landmark expansion and ceremony, it is worth noting that the 125th anniversary of the eye department was celebrated a few years ago with a special concert performed by the Ann Arbor Symphony. Paul, always the leader, not to be outdone by the Maestro, Samuel Wong, took up the baton and led the symphony in a rousing rendition of the University of Michigan Fight Song, *Hail to the Victors*.

Dan and Doug, Would you please escort our former president of the AOS, Paul Lichter, to the podium to receive the 2008 Howe medal.

PAUL L. LICHTER MD: Many thanks to the Awards Committee and to the membership of the AOS for selecting me to receive the Howe Medal. Carolyn was especially secretive about any dealings she had with Dr. Robertson regarding his presentation and I had not the slightest idea that I was receiving the award. I owe much to Carolyn as my life's partner for providing a family environment that allowed me the opportunity to contribute what I have in ophthalmology.

Many faculty from our department are AOS members, several of whom are here this year. Without a strong and supportive faculty, little of my organizational work would have been possible. I cannot thank my faculty enough for all they have done and continue to do for me.

Carolyn and I love the AOS. It is a wonderful organization that represents much of what is good about our profession. This meeting is our favorite of all the medical meetings we attend, and I think we've missed only 3 or 4 in our 32 years in the AOS.

Thanks again, for this humbling honor in selecting me among so many outstanding candidates.

PRESIDENTIAL REMARKS AND INTRODUCTION OF THE PRESIDENT-ELECT, SUSAN DAY, MD

DAN B. JONES MD:I want to thank the Council and members of the American Ophthalmological Society for the honor and privilege of serving as President. It has been an extremely rewarding and enriching experience for me for which I am forever grateful. I would also like to thank Lisa Brown and Stephen Moss for their expert administrative leadership and help and support in making this meeting such a huge success.

I know that some of you got squirrely when you did not see the name of the new President in the list of next year's appointments which George Bartley presented at the Business Meeting. We intentionally left the presidential appointment off of his slide to bring the group to fever pitch tonight about my forthcoming announcement. So it is my honor and pleasure to introduce the next President of the AOS, Susan Day. She comes to you after five years on the Council, including a year as Chair. She has had an immense impact on the AOS. You heard her on Friday morning in the Knapp Symposium. She brought us the spotlight session for new members. She created the Chair's "Fireside Chat", which opened dialogue among the Council and members about new developments and opportunities within the organization.

Susan is a die-hard Bengal Tiger. She grew up in Shreveport, received her undergraduate degree from LSU in Baton Rouge and MD Degree from the LSU School of Medicine in New Orleans. She then went west and has stayed there ever since. She completed her ophthalmology residency at what was then Pacific Presbyterian Medical Center, subsequently renamed California Pacific Medical Center, and follows two other AOS Presidents from that same institution, Bruce Spivey in 1975 and Bill Spencer in 1997. After fellowship training in pediatric ophthalmology and strabismus at the Hospital for Sick Children in London and at the University of Iowa, she joined the faculty at California Pacific Medical Center. She rapidly rose to stardom, was appointed Chair and became highly visible and involved in key organizations in ophthalmology. Just like Big Brown, she has completed two legs of her triple crown. She was the first woman President of the American Academy of Ophthalmology, second woman President of the AOS, and on track to be President of the Association of the University Professors of Ophthalmology. In addition, she served as a Director of the American Board of Ophthalmology, Chair of the Ophthalmology Residency Review Committee, and President of the American Association for Pediatric Ophthalmology and Strabismus. In addition to it all, she is a world-class flautist and, when not involved in ophthalmology and other things, spends quality time with her dear dog, Maggie.

I am pleased and honored to introduce to you the 112th President of the American Ophthalmological Society, Susan H. Day.

SUSAN H. DAY MD: Danny, your words are kind, indeed. You have served the AOS and all of ophthalmology so beautifully. It is indeed an honor to follow in your footsteps. The AOS is such a wonderful organization, and each of you in the audience brings your special talents.

CLOSING REMARKS AND ADJOURNMENT

DAN B. JONES MD: I hereby adjourn tonight's meeting. The 144th meeting of the American Ophthalmological Society will reconvene tomorrow morning at 7:30 a.m.

SCIENTIFIC SESSION, SUNDAY, MAY 18

The Meeting Continued with The Following Scientific papers:

- 16. "Long-term Keratometric Changes after Penetrating Keratoplasty for Keratoconus and Fuchs' Endothelial Dystrophy", Jay C. Erie, MD, Matthew E. Raecker, Sanjay V. Patel MD, William M. Bourne MD
- 17. "Analysis with Relevance Vector Machine Shows HIV-Positive Subjects without Infectious Retinitis Have mfERG Deficiencies Compared to Normal Eyes", Michael H. Goldbaum MD, Irina Falkenstein MD, Igor Kozak MD, Dirk-Uwe Bartsch PhD, Jiucang Hao MS, Te-Won Lee PhD, Terrance J. Sejnowski PhD, William R. Freeman MD
- 18. "Drug Delivery to the Posterior Segment via Thermo-reversible Hydrogels", William F. Mieler MD, Jennifer J. Kang Derwent PhD
- 19. "Retinal Flavoprotein Autofluorescence as a Measure of Retinal Health", Susan G. Elner MD, Victor M. Elner MD, PhD, Matthew G. Field, Seung Park MD, Dongli Yang PhD, John R. Heckenlively MD, Howard R. Petty PhD

Members registered for the 2008 meeting. Eleven professional guests are at the end of the list.

Thomas	Aaberg, Sr.	Emeritus Member	Victor	Elner	Member
Richard	Abbott	Member	Jay	Erie	Member
Daniel	Albert	Emeritus Member	R. Linsy	Farris	Member
Douglas	Anderson	Member	Steven	Feldon	Member
Steven	Archer	Member	Stephen	Feman	Member
James	Augsburger	Member	Allan	Flach	Member
George	Bartley	Member	John	Flynn	Member
J. Bronwyn	Bateman	Member	Robert	Frank	Member
Jules	Baum	Emeritus Member	Mitchell	Friedlaender	Member
William	Benson	Member	Bartley	Frueh	Member
David	Berler	Member	Thomas	Gardner	Member
Eliot	Berson	Member	Henry	Gelender	Member
Albert	Biglan	Member	William	Godfrey	Member
Bradley	Black	Member	Michael	Goldbaum	Member
Norman	Blair	Member	Evangelos	Gragoudas	Member
James	Bobrow	Member	M. Gilbert	Grand	Member
Michael	Brodsky	Member	Ronald	Gross	Member
Edward	Buckley	Member	Hans	Grossniklaus	Member
John D.	Bullock	Emeritus Member	Froncie	Gutman	Emeritus Member
Joseph	Caprioli	Member	Barrett	Haik	Member
Ronald	Carr	Emeritus Member	Dennis	Han	Member
Devron	Char	Member	John	Heckenlively	Member
James	Chodosh	Member	Edward	Holland	Member
Gerhard	Cibis	Member	Gary	Holland	Member
John	Clarkson	Member	Andrew	Huang	Member
David	Coats	Member	David	Hull	Member
Anne	Coleman	Member	W. Jackson	Iliff	Member
D. Jackson	Coleman	Emeritus Member	Malcolm	Ing	Member
Reza	Dana	Member	Henry	Jampel	Member
Susan	Day	Member	Lee	Jampol	Member
Donald	Doughman	Member	William	Jarrett, II	Emeritus Member
Robert	Drews	Emeritus Member	David	Johnson	Member
Daniel	Durrie	Member	Mark	Johnson	Member
Ralph	Eagle, Jr.	Member	Dan	Jones	Member
Susan	Elner	Member	James	Kelley	Member

Minutes of the Proceedings

Jane	Kivlin	Member
Douglas	Koch	Member
Jay	Krachmer	Member
Allan	Kreiger	Member
Peter	Laibson	Emeritus Member
Vinod	Lakhanpal	Member
Leonard	Levin	Member
Richard	Lewis	Member
Paul	Lichter	Member
Thomas	Liesegang	Member
Richard	Lindstrom	Member
Don	Liu	Member
Irene	Ludwig	Member
Malcolm	Mazow	Member
James	McCulley	Member
Marguerite	McDonald	Member
Marilyn	Mets	Member
William	Mieler	Member
Marilyn	Miller	Member
Richard	Mills	Member
Donald	Minckler	Member
John	Morrison	Member
Steve	Newman	Member
Verinder	Nirankari	Member
T. Michael	Nork	Member
Samuel	Packer	Member
David	Parke, II	Member
Richard	Parrish, II	Member
Evelyn	Paysse	Member
Irvin	Pollack	Emeritus Member

Mark	Terry	Member
Elias	Traboulsi	Member
Lawrence	Tychsen	Member
Woodford	Van Meter	Member
Mylan	Van Newkirk	Member
David	Wallace	Member
Robert	Weinreb	Member
Jayne S.	Weiss	Member
Jacob	Wilensky	Member
Kirk	Wilhelmus	Member
Pat	Wilkinson	Member
David	Wilson	Member
M. Roy	Wilson	Member
Steven	Wilson	Member
Thomas	Wood	Member
Terri	Young	Member
Marco	Zarbin	Member

Professional Guests

Frotessionai	Guesis	
Michael	Camilleri	Professional Guest
Jordan	Cohen	Professional Guest
Douglas	Covert	Professional Guest
Raymond	Douglas	Professional Guest
Sujit	Itty	Professional Guest
Jerome	Kassirer	Professional Guest
Silvia	Orengo-Nania	Professional Guest
Zaher	Sbeity	Professional Guest
Roni	Shtein	Professional Guest
Ronald	Warwar	Professional Guest

Irvin Pollack Emeritus Member

Zane Pollard Member Jose Pulido Member Edward Raab Member Rao Member Narsing Christopher Rapuano Member James Reynolds Member Rich Larry Member Robert Ritch Member Dennis Robertson Member

Emeritus Member Melvin Rubin Paul Runge Member Stephen Ryan, Jr. Member Alfredo Sadun Member Schaefer Daniel Member Oliver Schein Member John Simon Member Ronald Smith Member Alfred Sommer Member Rand Spencer Member

Bruce Spivey Emeritus Member Robert Stamper Member

Tim Stout Member

Bradley Straatsma Emeritus Member

Alan Sugar Member C. Gail Summers Member