PVF Eye Institute Within Sight

Thanks to a generous investment from the Robert Wood Johnson Foundation (RWJ), the nation’s largest health philanthropy, the Pacific Vision Foundation Eye Institute is closer to reality.

The foundation has agreed to make a $10 million Program Related Investment, a very low interest loan, which will allow Pacific Vision Foundation (PVF) to further our mission of expanding eye care service to patients who cannot afford to pay. The new Eye Institute will be a unique constellation of leading doctors providing private practice and public service, first-rate medical education, and low-cost and free care for those who really need it.

According to Nancy Barrand, Senior Advisor on Program Development at RWJ, “We hope its success will lead to replication by other U.S. eye care providers as well as to serve as a model of high-value care for other specialties.” Drawing from best practice programs in other parts of the world, the Eye Institute will provide superb specialty care, affordable to all, in a single convenient location with economies of scale and financial cross-subsidies to reduce costs.

This modern facility will bring together the brightest minds who are passionate about patient care, education, research and service to collaborate for improved and more efficient care.

International Social Entrepreneur David Green was instrumental in the initial feasibility study indicating that a significant social need could be filled by the unique partnership of PVF, CPMC, Lions Eye Foundation and physicians. Calling this leadership of partners “unsurpassed,” Nancy Barrand said that it “speaks highly to the commitment to making the Institute successful.” It took years to locate a suitable building in which to house the key elements of an Eye Institute—clinic, surgery center, diagnostic services, research facilities and space for physician tenants. PVF purchased the building at 711 Van Ness in 2011, last year RWJ approved the proposal for the Eye Institute and this October, a major milestone was reached when the
PVF board voted to approve the loan. PVF has used its endowment to provide a location where integrated care can be delivered and have convened a group of likeminded partners, all wishing to expand our ability to serve:

1. The CPMC Ophthalmology Residency Program trains the young doctors who care for the patients in the Lions Eye Clinic.
2. The Lions Eye Foundation of Northern California and Nevada sponsors patients from 338 participating member clubs representing over 10,400 individual members.
3. Physicians in private practice volunteer to teach residents in the clinic and who have agreed to lease office space at the Eye Institute.

PVF plans to use the revenues from our real estate venture to help fund and expand the clinic, including providing staff physicians who will care for the volume of patients beyond the numbers that the residents can treat. Aravind Eye Hospitals in southern India, the world’s largest provider of eye care and innovator of affordable surgery in developing nations, is the model for the new eye institute. Aravind started in 1976 as an 11-bed eye hospital. Since then, the Aravind network of 5 hospitals has treated more than 32 million patients and performed more than 4 million eye surgeries, the majority either subsidized or free. Today Aravind’s excellent care and extreme efficiencies have established it as a model of business model that can be emulated.

“Aravind is a remarkable success story. It has shown that quality eye care can be provided at a low cost, and that this model can be duplicated in other countries.”

A New Day for Dr. Susan—Chair & Program Director of CPMC’s Ophthalmology Department Moves On

CPMC extends a fond and bittersweet farewell to educator, researcher and clinician Dr. Susan Day, Medical Director of Graduate and Undergraduate Medical Education. Over the past four decades, Dr. Day has worked with CPMC in a variety of roles, and has served as chair of the ophthalmology department since 1999 and program director of its residency program since 1995. She recently accepted a new position in Chicago with the Accreditation Council for Graduate Medical Education (ACGME), which regulates all U.S. medical education. Recently, it has “gone global” and responds to other countries’ requests to implement quality training programs.

As ACGME-International’s Vice President for Medical Affairs, Dr. Day will work with other countries to design educational programs appropriate for their societal needs. “Our goal is to raise global health care standards by helping medical institutions design educational programs that produce great doctors,” explains Dr. Day. “ACGME’s international pilot program started by working with organizations in resource-rich nations, but medical training is also needed in developing countries where physicians are in short supply and often lack specialty training beyond medical school. In Phase Two we’ll be working with groups in Africa, Asia and South America that have requested our assistance.”

Dr. Day sees tremendous potential in globalizing the U.S.’s exemplary medical residency model, which includes supervision provided by practicing physicians, direct access to patients, graduated responsibility, team-oriented care for patients, assessment of clinical outcomes and an emphasis on patient safety. Based on her previous involvement with national organizations in the U.S. that stress quality care and professionalism, she is convinced that these standards must be inculcated during residency. She has also seen various
facets of international education and has benefitted from the experience of others at CPMC in international arenas. The Department of Ophthalmology’s international outreach efforts illustrate the benefits of such cross-cultural cooperation—from helping modernize a Guatemalan eye clinic to conducting HIV research in Asia and sending residents to Aravind in India.

These and other successful collaborations highlight the value of a residency program that effectively prepares young physicians for practice in the real world. Dr. Day points out that CPMC’s ophthalmology residency provides unique advantages that foster learning within a flexible but highly disciplined educational structure. “We offer residents a smorgasbord of career opportunities by exposing them to a variety of clinical environments, from our Lions Eye Clinic in San Francisco and Highland Hospital in Oakland to faculty practice rotations throughout the Bay Area. These experiences help residents get a feel for what different career options exist and enable us to personalize the learning experience for each resident. We also serve the community while mentoring future leaders by having PVF as our own eye foundation, and a longstanding partnership with the Lions Eye Foundation.”

The results of CPMC’s training approach are apparent in the contributions that alumni of this program have made to science. For example, Drs. Otto and Hans Barkan were the first to definitively distinguish childhood glaucoma from its adult form, and Dr. Alan Scott invented Botox as an ophthalmological treatment long before it became famous for its cosmetic applications. But running an exceptional residency program poses significant difficulties, as well. Many education funders, for instance, remain unaware of how expensive it is to provide high quality graduate medical education beyond medical school.

Dr. Day believes that PVF’s new Eye Institute is needed to train the next generation of ophthalmologists. “Our current facility is neither large nor modern enough to meet the needs of either our residents or their patients,” she asserts. “The Eye Institute will allow physicians to treat more patients in an aesthetically pleasing atmosphere that facilitates optimal treatment outcomes. Its design starts with the patients’ needs, which coincidentally have the potential to significantly enhance the educational mission as well.”

“The old apprenticeship system of residency training is rapidly being replaced by a far more effective community approach to learning,” says Dr. Day. “The most extraordinary aspect of the Eye Institute is that its close proximity to CPMC’s new main campus will foster collaboration between residents, teachers, clinicians and researchers in various medical fields. This mixing of the minds is sound from all perspectives—patient, teacher, and learner.”

Looking back on her legacy at CPMC, Dr. Day is gives full credit to her colleagues. The residency program earned a national reputation for training high-quality physicians and promoting collegiality among department members. Each of the residents has spread our model of giving and caring to all four corners of this country. The program also affectively adapted to dramatic changes in the educational model and in evolving health care environments.

“I can’t imagine a better place than CPMC to have spent the past 41 years,” Dr. Day reminisces. “It’s been a privilege to work with such an extraordinary group of individuals and institutions. But this is the right time for me to move on,” she says. “Change is good for all, and tomorrow’s leaders here will be terrific.”

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Dr. Kevin Denny, the newly appointed Acting Chair of the Department of Ophthalmology at CPMC, has a long track record in clinical practice and community service, two hallmarks of a CPMC medical education. A Harvard College Bachelor of Arts undergraduate with Honors, he received his M.D. degree from New York University and arrived at CPMC in 1980 for his internship and residency.
chair,” said Dr. Denny, who has been appointed to fill the rest of Dr. Susan Day’s term until a search is completed. “She was so excellent at building a team, reminding us how we’re better together, and is also beloved locally and nationally. She’ll be a tough act to follow but everyone who came before me had to step into the shoes of someone who was excellent in their own way. I’m eager to demonstrate that there’s another generation of ophthalmologists who are eager to benefit the program and carry the torch.”

In addition to his own practice, Denny Eye and Laser Center in San Francisco, Dr. Denny has done considerable international work, also a core focus of the CPMC faculty. He volunteered frequently in Guatemala along with other CPMC faculty and was joined by son Matt on a recent trip to Aravind Eye Care System in India, a longtime partner, and the largest and most productive blindness prevention organization in the world. “They’ve done some remarkable things in their part of the world, and the challenge for us is to take their great ideas, expertise and hard work and turn it into something that can function in a different environment in San Francisco.”

What was most impressive about Aravind, he said, is that “they are not content with what they are doing; they are constantly looking to be better. They would show me something quite superb and then ask, ‘how can we make this better?’ It’s a wonderful lesson on how to be good—and how to be great.” As a medical student, he said, Matt was particularly taken by “the spirit of Aravind, the leadership and cohesion, devotion to their mission and the difference they make in people’s lives.”

Aravind is one of the inspirations for the new Pacific Vision Eye Institute, which is being developed in collaboration with several local partners including CPMC and the Lions Eye Foundation of California-Nevada. “What we’re trying to do is increase access to the underserved population, and we hope to do that with increased efficiency and philanthropic support.”

“I see the Eye Institute as a triple win-win-win,” said Dr. Denny. “It is going to be fabulous for the residents to be in the geographical vicinity of the attending physicians, which is great for resident education. The second win is for faculty who use the center to have a state-of-the-art facility that enables us to share equipment and collect ideas that benefit us all. And the biggest win is for the patients, who will be able to get timely care, prompt consultation and a great facility in which to have their procedures done—all centrally accessible by public transport and a parking garage.”

He added: “With all this, I feel that I’ve been lateraled the ball on the 10-yard line and my job is to get it into the end zone.”

Meet CPMC’s New Residency Program Director—Dr. Taliva Martin Succeeds Her Mentor, Dr. Susan Day

After finishing her internal medicine internship at Loma Linda University Medical Center in 2004, Dr. Taliva Martin was looking for an ophthalmology residency. She was drawn to CPMC’s program because it is based on a training model that is embedded in the community. It also gives residents a unique opportunity to be part of a team guided by practicing physicians who are volunteering their time to teach new doctors and provide free care to those who need it most. “The spirit is very personal,” says Dr. Martin, who joined CPMC’s faculty in 2009. “The free exchange of ideas between residents and physicians makes all of us better.”

Dr. Martin’s mentor during her three year residency was fellow pediatric ophthalmologist Dr. Susan Day—who
RESEARCH ROUND-UP

New Smartphone App—Designed by CPMC Resident to Simplify Information and Care

CPMC resident Dr. Ako Takakura knows firsthand about the many details eye surgery patients must keep track of both before and after medical procedures. So she’s developing a high-tech solution called Pre & PostApp—a web-based platform that patients can access from a mobile phone, tablet or computer to help them stay organized and informed. Pre & PostApp allows users to watch preoperative videos, test their vision, track their symptoms, set medication reminders, contact their doctor’s office, schedule appointments, add family members and friends to their online social network for virtual support, and more.

Dr. Takakura believes that having easy access to these resources in one centralized place will increase compliance with treatment plans, facilitate patient-physician communication and ultimately improve clinical outcomes. “The app is specifically designed for patients undergoing cataract or oculoplastic surgery,” she says, “but the design structure could be adapted to other chronic eye diseases such as glaucoma and macular degeneration.” There are currently about 180 ophthalmology apps on the market, but about three-quarters of them are designed for physicians, so Pre & PostApp will help fill that gap. Indeed, another CPMC resident is currently adapting the app specifically for the needs of diabetic retinopathy patients.

Dr. Takakura is developing the app with the technological assistance of programmers from Self Care Catalysts, the analytic startup company where her husband Jared works. In fact, the idea for Pre & PostApp was originally inspired by one of their mobile products currently under development. The team is also exploring potential investment partnerships with pharmaceutical companies and venture capitalists to expand the app’s scope and marketing outreach.

Last year, Dr. Takakura won the prestigious Erdbrink Award at the annual Barkan Scientific Symposium for her Pre & Post App which will be released in 2015 in both English and Spanish versions with additional languages to follow and will be offered to patients for free.
Seeing Is Relieving—PVF-Funded Research Seeks Scotoma Solutions

People suffering from a binocular scotoma (a characteristic of age-related macular degeneration, or AMD) cannot see what is literally right in front of them because when the retinas of both eyes are damaged in the same places, they create a blind spot that blocks visual input from reaching the brain. Dr. Preeti Verghese, Senior Scientist in the Smith-Kettlewell Eye Research Institute’s Psychophysics Lab, explains it like this: “If a person with binocular scotoma was looking at a grassy field with a tree in it, and the tree happened to fall within their scotoma, they would not see it: they’d just see a plain grassy field. There would be no hole or black spot in their vision though, because their brain would fill in the space where the tree is with the grassy surroundings that the eyes can see.”

Dr. Verghese specializes in studying how visually impaired people interact with objects in the physical world. She and her post-doctoral fellow Dr. Christian Janssen have co-designed a yearlong pilot project funded by Pacific Vision Foundation (PVF) to help people compensate for the effects of binocular scotoma. Their innovative approach focuses on “visual search” techniques that they are the first to scientifically test.

“Researchers have conducted studies to teach scotoma patients how to read,” Dr. Verghese says, “but only a few have attempted to help people cope with everyday real-life tasks at home and out in the world.”

Mobility and ability to function normally are often severely curtailed for those who suffer from scotoma. It can rob people of their ability to enjoy reading, watching television and even socializing because they may not be able to see people’s expressions during conversation or even recognize the faces of friends they pass on the street. Scotoma can be extremely dangerous as well: safely navigating stairs and crossing roads is hazardous when you can’t see solid objects that can trip or hit you—and driving is completely out of the question. So teaching people to effectively deal with scotoma has far-reaching implications that can dramatically improve their overall quality of life.

There is no medical, surgical or pharmaceutical cure for scotoma, so Drs. Verghese and Janssen are pioneering a therapeutic approach based on teaching people to know where their scotoma is located within their field of vision. They
can then learn to move their eyes and look towards that area—thus uncovering information that might be hidden there. They do this by showing patients images on a large screen, then using advanced imaging technology to track their eye movements and take retinal photos on which they functionally and anatomically map the scotomas’ location.

Dr. Janssen will hold five training sessions with each subject over the course of the study, and he and Dr. Verghese continually analyze the results together. Preliminary data suggests that patients retain the specific seeing skills they learn in the lab over time, but the research partners are still determining whether these abilities effectively transfer to real-life tasks.

“We are testing the effectiveness and potential of these therapeutic techniques,” Dr. Verghese points out, “and the data are compelling enough to continue exploring and developing the training method.” She and Dr. Janssen therefore hope to secure a bigger federal grant to conduct the same study on a much larger scale. “A longer investigation with a much larger pool of subjects would allow us to ask and answer new questions,” Dr. Verghese says, “while developing our techniques to benefit even more scotoma sufferers.”

Optimizing DMEK Grafts for Corneal Transplant

A corneal transplant replaces damaged corneal tissue with healthy tissue from an organ donor, a sight saving surgery performed more than one million times since the early 1960s. Over the past decade, endothelial keratoplasty has rapidly become the most dominant method of corneal transplant, and today it accounts for more than half. A technique called Descemet’s Stripping (DSEK) is performed in the vast majority of cases—even though the other form of endothelial keratoplasty, known as Descemet’s Membrane (DMEK), is associated with superior visual outcomes, higher graft acceptance rates and faster post-operative recovery.

Technical challenges are the main reason DMEK hasn’t been widely adopted: but Cornea Faculty Chief Dr. Margaret Liu and ophthalmology resident Dr. Adrian Dokey hope to overcome them. DMEK grafts are only about eight millimeters in diameter and less than 100 micrometers thick, making implantation difficult. Before surgery, grafts are typically soaked in Trypan blue solution, then rolled up and injected into the eye through a tiny incision, along with an air bubble that helps the graft unfold and float into position against the patient’s own cornea. Based on her personal experience performing endothelial keratoplasty procedures, Dr. Liu says that “Grafts have a consistency similar to cellophane and are curled up like little scrolls, so getting them to face in the correct direction on the inside of the eye is challenging. We figure surgeons could more easily move the grafts into place if they were less tightly wound and easier to unfold.”

Some surgeons have reported that grafts immersed in lower-concentration mediums for shorter periods unroll more readily in the eye’s anterior chamber.

So for their control grafts, Drs. Liu and Dokey followed the standard DMEK immersion formula (0.06 percent Trypan blue for one minute), and submerged their experimental samples in liquid solution of half that chemical concentration for half that time. They then compared grafts to test whether the second set was larger and more pliable.

The result: average growth of the experimental group was only 0.065 millimeters. While not statistically significant, the 0.24 percent size increase shows that soaking grafts for less time in less-concentrated solutions does not make them any more difficult to implant. Another potential upside is that doing so may reduce toxic effects from Trypan blue contamination on the corneal endothelium. The research also suggests scroll size variation estimates that could be useful to future studies of DMEK grafts. This pilot study holds great promise to corneal surgeons seeking a method to improve their patients’ sight.

(Above) Corneal surgery, unfold and center graft

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Travel can open people’s eyes to new ways of looking at the world—and bring the power of modern ophthalmological science to the far corners of the Earth. Here are three stories of how PVF’s dedicated faculty and residents are making a difference globally.

Dr. David Heiden: Combatting CMV Blindness

In 1981, the year San Francisco became ground zero for the AIDS epidemic, Dr. David Heiden was an internist and emergency room physician in the city by the bay. “Back then, being HIV-positive was a death sentence,” Dr. Heiden remembers. “Patients also suffered terribly because their compromised immune systems couldn’t defend against opportunistic infections.” One of these was CMV retinitis (or cytomegalovirus): it attacks the retina, eventually causing blindness—and Dr. Heiden saw it rob many AIDS patients of their sight.

Since the first effective AIDS treatment—highly active antiretroviral therapy (HAART)—made its medical debut in 1995, CMV has essentially vanished: at least in developed countries where the treatment is widely available. In 2004, Dr. Heiden therefore decided to go where his special skills are most needed: low-resource countries where CMV still afflicts millions. He has since visited India, Cambodia, Uganda, South Africa, Thailand, Laos, China, and Russia. Over time, he developed a four-day workshop to train overseas AIDS doctors to both diagnose and treat CMV using modern medical techniques. Dr. Heiden worked most recently in Burma, where the 43 physicians he’s trained have conducted hundreds of CMV screenings since November 2006—up from zero prior to that date.

Dr. Heiden, Director of CPMC Department of Ophthalmology’s International Ophthalmology program since 2001, used his teaching stipend from PVF as critical early seed money. “This kind of training hasn’t been done anywhere before, so it’s innovative as well as effective,” says Dr. Heiden. “I’m thankful to PVF for the many ways they’ve helped make this project a reality and a success.”

Dr. Donald Fletcher’s Low Vision “Road Show”

When Donald C. Fletcher, M.D., the Director of CPMC’s Frank Stein and Paul S. May Center for Low Vision Rehabilitation, started his medical career in 1986, he was one of a very few low vision specialists in the world, and its only full-time practitioner. Low vision rehabilitation has since become a more established ophthalmological subspecialty in America: it basically helps people with
permanent unfixable visual impairments (like macular degeneration, diabetic retinopathy and glaucoma) use their vision effectively so they can read, work and live full lives. Yet many countries around the world don’t have any low vision rehab specialists at all.

Dr. Fletcher has made it his mission to remedy that by partnering with hospitals in different countries to train their staff in low vision rehab treatment techniques. Since the 1990s, he has hosted clinics in China, the Philippines, the Caribbean, Zimbabwe, Brazil, and most recently in Chile. Dr. Fletcher belongs to the Mormon Church, which financially sponsored his week-long humanitarian trip in August of this year to help the University of Chile launch the country’s very first low-vision clinic. “We taught about fifteen clinicians how treat low-vision, and gave them magnifiers for their patients,” reports Dr. Fletcher, “Now they can train their residents and help thousands of patients in the coming years.”

Dr. Fletcher hopes this will be the first of many trips to Chile: he plans to return next summer for follow-up training. But next on his itinerary is El Salvador, then Dubai. “The funding I receive from the Stein-May gift, combined with PVF’s financial support, has enabled me to contribute my time for these philanthropic projects,” says Dr. Fletcher. “And for that I am very grateful—as are the people we’ve been able to help.”

Aravind: A Resident’s Adventures in India

Many religious Indians consider cows sacred, so it’s somewhat strange that the largest eye care provider in India—and the world—was originally inspired by McDonalds. In 1975, when Dr. Govindappa Venkataswamy (Dr. V for short) first saw the ubiquitous fast food chain’s golden arches, he had a vision. Back then, McDonalds’ signs would have read “Over 99 billion served,” meaning they’d sold billions of hamburgers (i.e., processed cow meat patties). But Dr. V figured: millions of people suffer from debilitating eye diseases, so why not repurpose the potent cost-efficient, high-quality production methods pioneered by McDonalds “to eradicate needless blindness” on a mass scale?

Today Dr. V’s vision is a reality, with Aravind a thriving network of eight hospitals spread throughout India that have helped over 30 million patients. In addition to being a beacon of eye treatment, Aravind is also a center of education where ophthalmology practitioners and students from around the globe come to learn and be inspired—including CPMC ophthalmology residents, who all have the opportunity to spend time there as part of their education. The most recent of these was Chief Resident Dr. Michael Clamp, who spent three weeks this past August working at Aravind and was awed by the experience.

“Aravind is an exceptional place where people are incredibly skilled, hard-working and completely committed to their mission and patients,” Dr. Clamp says. “I was absolutely astounded by their efficiency. Last year alone they performed almost 100,000 cataract surgeries—without machines! If we in America could match their level of organizational efficacy, we could eliminate cataracts in this country in under a decade.” Looking back on the experience from home half a world away, Dr. Clamp says “The trip was spiritually revitalizing and helped me reconnect with medicine’s core values: compassionately caring for people and relieving their suffering.”
Dr. Bruce Spivey Retires as ICO President—Ophthalmology Pioneer Continues to Serve as PVF Chairman

After eight years as President and twelve years as Secretary General of the International Council of Ophthalmology (ICO), Dr. Bruce Spivey officially concluded his term of office from the position on April 7, 2014. Dr. Spivey will continue to serve on the group’s Board of Trustees, but relinquished the presidency to his successor, Dr. Hugh Taylor, at the ICO’s 2014 World Ophthalmology Congress (WOC) in Tokyo, Japan. At the conference, which attracted over 20,000 attendees, Dr. Spivey’s fellow board members honored his service by establishing the Bruce Spivey Ophthalmic Education Award to recognize “an ophthalmologist, who through innovation, development or application has significantly advanced ophthalmic education in a manner that enhances eye care and preservation of vision.” The first winner will be announced at the 2016 WOC in Guadalajara, Mexico.

Founded in 1927, ICO is the world’s first and only truly international ophthalmological organization. During his tenure, Dr. Spivey spearheaded the expansion and improvement of ICO’s education, eye care and leadership programs. He also increased its membership base, which is now comprised of ninety-two national and thirty-six international subspecialty societies representing more than 200,000 ophthalmologists around the world.

The ICO’s main focus is on education in developing countries, reflecting Dr. Spivey’s lifelong commitment to raising medical education standards around the world and increasing underserved populations’ access to affordable eye care. The ICO has helped hundreds of medical students become ophthalmologists by organizing fellowships in low-resource nations. The organization also creates ophthalmology curricula for medical schools, offers continuing medical education (CME) credits and administers a highly respected ophthalmology examination program that is taken by over 2,000 medical students worldwide every year.

Dr. Spivey is especially proud of ICO’s “teaching the teachers” campaign to improve the quality of ophthalmology residency programs in developing nations. “We’ve taught 26 courses to more than 1,100 program training directors,” he says, “and we present webinars and other online programs through our educators’ website.”

Throughout his extensive career, Dr. Spivey has held many prominent positions in various ophthalmological organizations and medical centers. In addition to being ICO President and PVF Chairman, he was the chief of Ophthalmology at CPMC in 1971-1987, the first physician CEO of CPMC in 1976-1992, and he was the founding CEO of the American Academy of Ophthalmology, which now has 30,000 members. He was the world’s first doctor to earn a master’s degree in medical education after becoming an ophthalmologist, a credential which has enabled him to promote collaboration between educators and doctors at both the national and international levels. Dr. Spivey is proud of his service in the U.S. Army during the Vietnam War, including a one year tour of duty as Chief of Ophthalmology at the 85th Evacuation Hospital, and was awarded the Bronze Star for serving his country.

PVF is fortunate that Dr. Spivey will continue as the foundation’s Chairman, especially during this critical phase when our new Eye Institute is under development and his leadership is so crucial to the project’s completion. “PVF supports the only residency program in the U.S. with volunteer faculty training medical students in ophthalmology that also serves the community by providing free first-class vision care,” he notes. “The new Eye Institute will improve both training and treatment by bringing eye surgery and education centers together within walking distance of one another.”
In addition, by emulating the Aravind example, PVF and its partners already provide free care for about 3,600 patients per year, but Dr. Spivey believes that the new Eye Institute will enable PVF to greatly increase this number.

“Developing economically self-sustaining systems will become increasingly essential as the U.S. continues to undergo financial stress,” Dr. Spivey observes. “Just as Aravind has served as a prototype for PVF by offering free and affordable treatment, our Eye Institute can be a model for health care providers in all medical fields across the country to follow.” Similarly, Dr. Spivey’s legacy of compassionate care, visionary leadership and outstanding accomplishment will continue to inspire educators and physicians to greater heights of achievement for years to come.

Generosity and Gratitude—Grateful Alum’s Gift to PVF’s Eye Institute Honors His Mentor

The year: 1991. Dr. Wonsuck Kim had just finished his ophthalmology residency in Ohio and arrived in San Francisco for a one-year career-changing fellowship at CPMC. There he met Dr. Bob Webster: the man who would become his teacher, mentor, role model and lifelong friend.

“Dr. Webster was more than just a consummate physician,” says Dr. Kim. “He was the ultimate gentleman. He set a great example for me to follow in how he interacted with patients, students, staff and colleagues—whether he was in the classroom or the operating room. The respect and compassion he showed for those under his care was especially inspiring to me. He taught me things they just don’t teach in medical school—the stuff you can only learn by actually living life fully in the moment.”

The plaque on the desk in Dr. Webster’s office reading “carpe diem” (meaning “seize the day” in Latin) embodied this philosophy. It was at that desk that Dr. Webster imparted some of his most profound pearls of wisdom—not only about cornea surgery, which is the subspecialty of both doctors, but about what it really means to be a healer. “Dr. Webster didn’t just discuss medical matters with me,” Dr. Kim remembers. “He also asked how I was doing, and about my family. I really appreciated that concern and the deep personal connection we shared.”

Today, Dr. Kim practices ophthalmology in Florence, Alabama. Dr. Webster, meanwhile, is retired and living in Novato, California, but still serves on the PVF board and is passionate about resident training—and therefore PVF’s Eye Institute. When Dr. Kim visited San Francisco in June 2013, Dr. Webster gave him a personal tour of the new building currently under construction. That was when Dr. Kim presented PVF Executive Director Jo Burnett with a substantial donation for the foundation’s Eye Institute in Dr. Webster’s honor.

“Supporting a great cause that is important to Dr. Webster is my way of thanking him for enriching my life and career,” says Dr. Kim. “I was fortunate to be able to stand on Dr. Webster’s shoulders and follow in his footsteps. The Eye Institute will go a long way toward letting the next generation of ophthalmologists carry on the vital work to which he has dedicated his life.”

A Symbiotic Collaboration—PVF, CPMC and Lions Eye Foundation Partner to make Eye Institute a Reality

For more than half a century, the Lions Eye Foundation of California-Nevada (LEF) has generously helped to provide free and low-cost eye care to needy people who could not otherwise afford it. At the Lions Eye Clinic located on CPMC’s San Francisco campus, board-
certified ophthalmologists volunteer their time and expertise to supervise residents who perform surgical procedures. The Lions Eye Foundation refers patients to the program and contributes needed funds to CPMC every year to cover medications and related medical care.

The Lions Eye Clinic and has had over 167,000 patients visits since its founding in 1959, and the support of LEF’s 338 clubs and more than 10,400 members have been essential to its success. For over three decades, Don Stanaway passionately promoted the clinic as LEF’s Executive Director. When he retired from this position in 2013, he passed the torch to his friend John Schroeder, a former Commissioner of the Superior Court of California, Santa Clara County, who started volunteering by joining a lions club in 1977. He served as LEF’s President from 1991 to 1993.

Since becoming LEF’s ED, Schroeder has prioritized the organization’s Capital Campaign to raise money for completion of the new PVF Eye Institute through social media campaigns on Facebook, and giving slideshow presentations to Lions Clubs and other groups. LEF’s Board of Directors, President Dennis Noble and First Vice President John Posey are also actively engaged in the campaign along with past President Fred Sommer who is Chairman of the Capital Campaign.

PVF’s Mission

Pacific Vision Foundation was founded in 1977 with the mission to prevent blindness and to improve vision for those who see imperfectly by fostering the highest level of eye care for the public. This is to be accomplished through contributing to excellence in patient care, improving eye care education of both medical professionals and the public, and supporting innovative ophthalmic research.

GIVING OPPORTUNITIES

Why your support matters.

Philanthropic contributions to PVF make an incalculable difference in people’s lives by helping to provide ophthalmology residents with training of unsurpassed quality. During clinical rotations these young physicians deliver exemplary care and, upon graduation, dedicate their careers to patient care, education and service—throughout Northern California and beyond. PVF was created to support this residency program and the work of the Lions Eye Clinic, along with researchers who are bringing ophthalmic innovations to patients in need.

While many of us enjoy access to superb eye care specialists, there are countless impoverished children and adults, whose sight is slipping away. For them, the existing system of community care is too fragmented, inefficient and costly. Your gift makes it possible to purchase the equipment and train the professionals to give them the priceless gift of sight—right here in the Bay Area.

Have a favorite ophthalmologist? A physician who may have treated you or your family members? Supporting PVF with a gift in her/his honor is a great way to exhibit your appreciation for the care you have received.

Please make a difference now by helping us train the doctors whose careers will be dedicated to serving more people with eye disease and by giving the gift of sight to many in the Bay Area.

Your support matters! PVF receives no state or federal tax dollars or university funds for its programs, and greatly depends on charitable donations from individuals who believe in our mission.

The Pacific Vision Foundation is a 501(c)(3) corporation.

There are many ways to support PVF’s mission.

• Annual Gifts sustain our ongoing programs of treatment, research and education. You may designate your contribution to advance the study of a particular eye disease or condition or make an unrestricted gift to be used where the need is greatest.

• Matching Gifts through your employer will increase the amount of your gift. Speak with your company representative to see if a gift to PVF qualifies for a corporate match.

• Gifts of Stock, which have appreciated in value and have been owned for at least a year, may be transferred by your broker to PVF’s brokerage account #33L093540 at First Republic Bank, 415-296-5884. Please also call or write us with the details of your gift.

• Planned Gifts allow you to make a more substantial contribution to PVF as part of your long-term financial and estate planning, and also permit you to keep control of your assets during your lifetime. Options include irrevocable bequests, charitable remainder trusts and charitable gift annuities.

How to Give:

• You may give by credit card online: go to http://pacificvisionfoundation.org/pages/donate

• Credit card or check by mail to:

  Pacific Vision Foundation
  711 Van Ness Avenue, Suite 500
  San Francisco, CA 94102

• Call Jo Burnett, Executive Director, 415-393-1225, for information or to discuss including PVF in your estate planning.

Thank you!