ONE BIG QUESTION

For children born with a cataract in one eye, which treatment works best?

Closing in on myopia 8  A long road to good vision 9  Kilimanjaro and Emory 11
From the director | Transition and progress

“It is not the strongest of the species that survives, nor the most intelligent that survives. It is the one that is the most adaptable to change.”  ~ Charles Darwin

How do we manage change at the Emory Eye Center? By tapping into the knowledge base of our exceptional faculty, alumni, and advisory council. We have the great fortune of being surrounded by extraordinarily talented individuals, each willing to share ideas, expertise, and yes, resources, to help us strategically shape the future of academic healthcare at Emory. To all those who contribute to the ongoing evolution of the Emory Eye Center, we extend our sincere gratitude.

Of course, we remain focused on our core mission: to help people see as well as they can see. I recently toured “Dialog in the Dark,” an exhibit in midtown Atlanta, with the Eye Center’s Advisory Council. What a fantastic journey into, and thankfully out of, the world of total blindness—an experience that should be shared by all sighted individuals. The exhibit poignantly reminds us of the precious gift of sight and reaffirms the importance of our work at the Emory Eye Center.

Changes in our care and treatment of patients emerge most effectively through properly conducted clinical trials. The current issue of Emory Eye focuses on this process, one of our strongest areas of research. When a new and better way of treating patients is proposed, several things need to happen: A strong group of individuals must design, conduct, and coordinate the trial. The ethical and critical assessment of a given therapy must be studied with extreme caution. The study must be free of bias and outside influence. Members of the trial team must carefully acquire, record, check and re-check all data. Participants must be fully educated on the trial in order to become well-informed and willing subjects. Beginning on page 2, we highlight our team approach to the critical world of clinical trials.

At the Emory Eye Center, we welcome many kinds of positive and constructive change—conducting and participating in effective clinical trials, attracting the very best new residents and fellows in the country, and supporting strong, academic physicians who form the backbone of our faculty. Each member of our team helps to strengthen our program.

As you read about the changes that are evolving at the Emory Eye Center, we invite you to let us know what you think, share your thoughts, and become an active participant in the exciting changes going on here.

Timothy W. Olsen
**“One big question”**

For an infant born with a cataract, which treatment works best?

**Trial coordinators**

Working with superhuman qualities, they make our trials possible.

**Closing in on myopia**

A VA collaborator’s research may provide answers to a baffling question.

**Renovations**

Much-needed renovations help us better train the ophthalmologists of the future.

**From the center**

The long journey of a young man leads him ultimately to Atlanta, where he receives much-needed eye care.

**Of note, awards & rankings**

Our faculty’s noteworthy accomplishments.

**New faculty members**


---

*The truth is that most blind people simply do not ever get to the clinic or hospital for treatment—and that is the challenge we face.—Dr. Courtright*
And hundreds of people—doctors, clinical coordinators, biostatisticians, parents—who, led by the Emory Eye Center, have been daily collecting evidence that will answer: *For an infant born with a cataract in one eye, which treatment works best?*
T his question, raised by Scott R. Lambert, pediatric ophthalmologist at Emory and both the principal investigator and study chairman of the 2004-2014 nationwide Infant Aphakia Treatment Study (IATS), sounds simple.

Arriving at a conclusive answer, however, requires years of meticulous research. Twelve eye institutes throughout the United States have risen spectacularly to the challenge.

A vision-threatening condition If the word “cataract” makes you think of Niagara Falls, you’re on the right track. Originally meaning a cascade of water, it also describes the milky white area that doctors notice in the eyes of some 300 infants in the United States each year who are born with a unilateral congenital cataract.

Instead of the eye’s usual transparent lens, which focuses objects onto the retina so they become visible, these babies have a cloudy, opaque lens that doesn’t allow light to pass through to the retina. Babies with this condition cannot see out of the affected eye.

Kimberly Burkett and Lacey Weeks—the mothers of Emory IATS patients five-year-old Marvin, Jr. (M.J.) and three-year-old James, respectively—recall the day, years back, when they first learned about their sons’ vision problem:

Kim: M.J. wasn’t even two months old. In a routine follow-up, our pediatrician noticed something unusual in M.J.’s eye and immediately referred us to a children’s hospital. We learned that M.J. had a cataract and needed surgery—soon.

The next day, we were in the car driving to Emory.

Lacey: My husband and I didn’t even know that children could be born with cataracts. At James’ four-month checkup, our doctor said, “I’m going to get you an appointment with the ophthalmologist right now.”

There’s good reason for the urgency. If the cataract isn’t surgically removed within a few months, the young eye will not develop properly and the child’s vision can become permanently damaged.

Removing the cataract creates a new condition, called aphakia (from Greek a + phakos, “no lens”). So after surgery, that eye will still need help. For infants, the standard treatment has been a contact lens; increasingly, ophthalmologists have treated older children by implanting an intraocular lens (IOL) during the cataract surgery, then prescribing glasses for residual correction. In either case, to ensure that the treated eye keeps learning how to focus, doctors prevent the child’s other eye from helping out, by covering it with an eye patch.

Both treatments are safe and work well. But over the long term, which one best supports optimal visual acuity?

A model study M.J. Burkett and James Weeks became patients in the IATS trial, which has treated 114 babies across the United States. Funded by

breaking news:

Findings for the IATS study were released prior to printing of the magazine. Results show that there is not a significant difference in visual acuity in children, whether the child is fitted with a contact lens (CL) or given an intraocular lens (IOL) immediately following cataract removal. Testing these children at 1 year of age resulted in similar visual acuity outcomes for both groups.
the National Eye Institute (a branch of the National Institutes of Health) and planned to span a decade, the study is now in its seventh year.

Dr. Lambert and Emory’s Lindreth (Lindy) DuBois, senior associate in ophthalmology, who serves as the national coordinator, oversee the entire project, making sure that at each of the 12 IATS centers, every step is conducted in exactly the same way. The rigorously standardized process sets this project apart and gives the study its exemplary reliability.

Each center also has its own site coordinator. Rachel Robb, who fills that role at Emory, says, “No one has ever done a study like this before, on this scale. In the future, when a baby is born with a cataract, we’ll have a better way, a safer way, to treat that child.”

Another strong asset for Emory is the university’s own Rollins School of Public Health, specifically the Department of Epidemiology and the Data Coordinating Center in the Department of Biostatistics and Bioinformatics. “These academic groups have helped with study design and data analysis,” DuBois explains. “Right here on campus, we have the experts who are actually collecting and crunching the data.”

Starting in 2004, from Miami to Portland, Ore., from Dallas to Boston, and at other sites in between, PIs and coordinators carefully recruited patients who matched the study’s criteria. Because IATS is randomized, parents had to be willing not to know which of the two treatments their tiny baby—between four weeks and seven months old—would receive. Even the surgeons did not know, until the day of each surgery, whether they would be simply removing the cataract and prescribing a contact lens, or removing the cataract and implanting an IOL.

Throughout, the study is being monitored by numerous regulatory groups: NEI’s Data Safety Monitoring Committee, the Food and Drug Administration, and each site’s own Institutional Review Board. These groups interact with each other, scrutinizing the process in terms of patient safety and ethics. “A lot of people are observing this study,” says Dr. Lambert, “making sure that everything is in perfect order.”

**Working together** For the parents of M.J. and James, the study has progressed smoothly. Their sons’ surgeries, here at Emory, went well, with both boys receiving an IOL, glasses, and a supply of eye patches. The families enjoy close relationships with Rachel Robb, whose ongoing roles include consultant, coach, and cheerleader. Four times a year (twice a year after age five), the families return to Emory for follow-up visits. For the Burketts, who live in Jacksonville, Fla., that means a 700-mile round trip, contained in a single day.

**Kim:** M.J. and I have the trips down to a perfect routine; he’s a veteran now.
Trial coordinators: Working with mind and heart

JOB DESCRIPTION: Study and retain every facet of a complex medical study. Recruit exactly the right patients. Stay in touch with patients continually—providing information, answering their questions, helping them stay engaged and compliant with the trial’s requirements. Schedule frequent follow-up appointments, making sure patients have transportation and housing. Assist with each exam; record its details; ensure that all data is impeccably correct.

That's the short version of what the Emory Eye Center’s trial coordinators do. Oh, and did we mention that they’re probably working on multiple trials simultaneously? That they’re likely doing clinical work as well?

It’s hard to say how many Emory trials are in progress at any given time. Some principal investigators (PIs) are recruiting patients; some have begun follow-up. Other trials are being designed or awaiting funding. Beau Bruce, our medical director of clinical trials, estimates that about 20 are now under way.

We know for certain, though, how many coordinators work here: 9

Some 18 years ago, Lindy DuBois arrived at Emory, bringing more than a decade’s experience in clinical trial coordination. Currently the national coordinator of IATS, Dr. Scott R. Lambert’s 10-year, 12-center study on infant aphakia, DuBois has written several instructive monographs and a technician training video, and she has received lifetime achievement awards from the American Academy of Ophthalmology and the American Association of Certified Orthoptists.

Clinical trial coordinators, she explains, aren’t merely project managers: “We all are trained in comprehensive ophthalmology, so we have a background in anatomy and physiology and treatment modalities. We’ve studied different kinds of surgery and the process of eye diseases.”

At the Emory Eye Center, no one underestimates the coordinators’ work. Alcides Fernandes, our lead coordinator—who himself has worked with numerous clinical trials—says, “Coordinators have to be very attentive to detail and also very skillful with patients. Our coordinators are extraordinary on both counts.”

Dr. Bruce, another trial veteran and current PI, pinpoints the value that coordinators provide: “Much of a trial’s daily grind depends largely on the coordinators’ work. Every one of these people is critical to what we seek to achieve. We can’t do it without them.”

Within that “daily grind,” coordinators find satisfaction in performing their myriad roles with precision and efficiency—thus helping to advance medicine, save vision, save lives. Many coordinators say, though, that their best reward lies in their close relationships with patients.

Rachel Robb, Emory’s IATS site coordinator, says, “I actually see these families more than I see some of my friends, because we have scheduled visits every three months. I know when something’s bothering them. I know when they have a new puppy. Over the years of this trial, I get to watch their children grow up. And they know I care about them. These relationships have been a nice surprise for me.”

DuBois echoes, “My primary source of satisfaction is the patient contact. These people become part of my world.”

In 2008 Dr. Fernandes served as a coordinator in Emory’s compassionate trial for patients with retinitis pigmentosa. Unusual circumstances forced the trial into a dramatically compressed timeframe. With help from the entire department, he and coordinators Donna Leef and Stacey Andelman managed to schedule the 10 patients, do extensive testing and documentation, then see each patient through implant surgery—all in only two weeks. Dr. Fernandes recalls, “It was almost impossible. We worked 18 hours a day to make it happen.”

He pauses in his story, then continues, perhaps voicing the thoughts of other Emory coordinators: “And I would do it all over again.”
Beau Bruce, assistant professor of ophthalmology and neuro-ophthalmology, has taken on a new role: medical director of clinical trials.

Well acquainted with trials from his work as a principal investigator (PI), Dr. Bruce is now navigating, on behalf of the Emory Eye Center, the depths of the regulatory environment—the rules and controls that define what a trial may and may not do.

“Dr. Bruce is fabulous,” says senior associate and coordinator Lindy DuBois. “He knows everything about conducting clinical trials. Not only is he our advocate here in the department, but he’s also our liaison with Emory’s medical administration and with the university.”

Though Dr. Bruce protests that he still has a great deal to learn—“especially from the coordinators, who teach me daily about clinical trials”—he’s seriously setting out to possess the field. The year 2010 marks both his completion of a new graduate degree, the Master of Science in Clinical Research, and his entry into a PhD program in applied epidemiology.

“The face of clinical trials is changing,” Dr. Bruce explains. “Both government and industry are imposing more regulatory constraints; financial constraints are escalating, too. I’m here to help Emory PIs, physicians, and clinical coordinators find their way through an increasingly complicated system that has placed clinical trials and research under extra pressure.”

He also sees his role as “an intellectual resource: someone right here in the department to talk with about rigorous ways to perform clinical research, and about topics like study design, epidemiology, and biostatistics.”

Dr. Bruce hopes to spur growth: first, in the department’s number of internally generated, investigator-initiated research; and second, in independent sources of research funds.

“Our faculty are all experts, and they have plenty of great ideas for research,” he says. “The next step is translating those ideas into definitive studies. To do that, our physicians need time. They also need practical help; for example, good research costs money.”

Like everyone else at the Emory Eye Center, Dr. Bruce acknowledges with deep gratitude the patients who make our clinical research possible by participating in clinical trials.

“Not everyone, of course, can physically take part in such a study,” he adds. “We hope that friends of Emory with resources will want to help us in another way: by supporting our research. That’s our dream. It’s important to Emory; it’s important to every person who hopes for healthy vision. I’m here to invite that participation, and to help our faculty put it to the very best use.”

**For clinical trials: Our own “go to” expert**

**Here’s a small sampling of our recent trials within specific subspecialties. For information on all Emory Eye Center trials, please go to: http://www.eyecenter.emory.edu/clinical-trials**

**Cornea**
Topography-Guided LASIK Treatment Trial. Unique treatment based on corneal topographic measurement rather than refractive error. **PI: J. Bradley Randleman, MD**

**Glaucoma**
Advanced Glaucoma Intervention Study (AGIS) (now closed) The study evaluates the course of medically uncontrolled open-angle glaucoma by two surgical treatment sequences. Finding: Surgical treatment to lower eye pressure in patients with glaucoma has different effects in patients of different ethnic backgrounds. Successful reduction of eye pressure lowers the risk of vision loss from glaucoma. **PI: Allen Beck, MD**

**Low Vision**
Low Vision Rehabilitation Outcomes Study (LVROS): Pilot Data Collection to Evaluate the Effectiveness of Vision Rehabilitation Services This pilot study can have direct influence on evaluating the effectiveness of orientation and mobility services and use of low vision aid in the visually impaired population. **PI: Susan Primo OD, MPH**

**Pediatrics**
Nasolacrimal Duct Study (PEDIG) The study will evaluate which of two methods is optimal in treating young infants with blocked tear duct: probing immediately or waiting to see if the condition resolves on its own. **PI: Scott Lambert, MD**

**Retina**
Comparison of AMD Treatments Trials (CATT) This study, sponsored by the NEI/NIH, compares pharmaceuticals Lucentis with Avastin for treatment of wet age-related macular degeneration. **PI: G. Baker Hubbard, MD**
And I don’t mind driving a long way for my son. Emory’s the best, so that’s where I want him to be. Everything has been a plus: I love getting the newsletters. I love Rachel.

Lacey: We’re glad that James could go to a top-notch hospital and participate in a study with one of the top doctors. Dr. Lambert is wonderful. And Rachel is so understanding. She makes sure we’re top priority.

The appreciation goes both ways. “The families are the heroes of this study,” Robb says. “We ask a lot from them: all the appointments, the questionnaires, the documentation. And the constant patching. It’s hard work.”

Kim: The patch is a part of our life. For years, as soon as M.J. woke up, I’d say, “Good morning, brush your teeth, put your patch on.” His sister Kai wore a patch, to support him. We put a patch on his teddy bear, on his dad. Now that M.J. is five, he only has to patch two hours a day. We use a little timer, and he’s so excited when it finally beeps.

Lacey: Just before age one, James figured out, “Hey, I can take this off!” Year two was the biggest struggle. The IATS newsletter has given us good ideas: patch while eating, set up a chart with stickers. When we’re reading books, we always patch. The goal is to patch half of his waking hours, which is hard at this age. But it’s become second nature. We patch; that’s what we do.

Robb emphasizes that all these families would have received treatment for the babies’ cataracts even had they chosen not to enroll in the study. Participating in IATS requires a huge commitment of time and effort; in return, the children receive the highest level of individual care and attention by multiple specialists year after year.

Noteworthy outcomes In December 2009, each site completed visual acuity testing on its patients at age one. During its five-year extension, the study will test all the participants until they reach age five, when standard visual acuity testing can be performed.

Key players in IATS deem the project a remarkable success. Dr. Lambert cites particular triumphs: “First, 80 percent of the families who were eligible to be in the study agreed to participate, which is a very high rate. Furthermore, we were able to test every child in the study at one year of age. That’s extremely rare, and it reflects the relationships our coordinators have established with these families.”

DuoBois attributes the study’s achievements to “an incredible network of efficient and caring eye practitioners. With this study, Emory has set an enviable standard of documentation and teamwork. Dr. Lambert now has a machine in place that he can use for other studies.”

According to Dr. Lambert, “The whole world is watching this study. Treatment for infant aphakia is an issue that people are asking about in every country we visit, because most countries don’t have the resources to do this kind of trial. So our work will affect children throughout the world.”

Kim: Overall, M.J. has been so good through the whole process. I give him a lot of credit. Now we’re eager to hear about the results. As far as our part goes with M.J., they’re going to be accurate. We’ve dotted every i and crossed every t.

Lacey: James just turned three, and he loves putting his glasses on and looking at himself in the mirror. Watching him, I’m very grateful for this study. I feel proud, knowing that our family is benefiting others who’ll have to deal with this same condition.

Here at the Emory Eye Center, we’re feeling proud, too.

Sharing the knowledge The carefully gathered, many-layered data from IATS is already shaping further research. A preliminary paper on the study was published in January; the main report—containing the much-anticipated results from the testing of one-year-olds—will appear online in May, in print during July. Numerous ancillary papers will follow, covering particular facets of the study.

“In a workshop this past April, at the annual meeting of the American Association of Pediatric Ophthalmology and Strabismus,” says Dr. Lambert, “we shared videos from some of the surgeries, which are helping us make this knowledge broadly transferable.”

WORKING TOGETHER
Closing in on myopia—and more

When you’re not wearing your glasses or contact lenses, do you find yourself scrunching up your eyes, craning your neck, and squinting to see objects in the distance? If so, you (along with 70 million other Americans) probably know that you are nearsighted—or, as ophthalmologists say, myopic.

Myopic eyes are longer than normal, and this seemingly simple variation in eye size is responsible for billions of healthcare dollars being spent on corrective lenses and refractive surgery. Many myths exist about the cause of myopia: reading too many books in childhood, reading in dim light, sitting too close to the television.

Machelle Pardue, PhD, would like to discover the facts and dispel the myths. In her laboratory at the Veterans Affairs Medical Center, a partnership institution with Emory, Dr. Pardue is studying how myopia occurs—and why. Understanding the causes of myopia can help scientists develop innovative treatment strategies to slow or prevent this condition.

Tracking the problem. Most often, myopia occurs in people of Asian descent. The number of people both in Asian countries and in the U.S. who become myopic is increasing, and scientists are not sure why. Is the impetus for myopia environmental or genetic? It’s likely a combination of both.

What makes some eyes—the myopic ones—become larger and longer than normal eyes? Dr. Pardue speculates that complicated interactions between environmental factors and genetic defects alter the way the visual signal is processed by the eye. Emory and the National Institutes of Health are funding her investigation to examine how the retina’s detection of visual signals may lead to myopia.

Emory/VA partnership.

Dr. Pardue notes that the VA Rehabilitation Research and Development (RR&D) Center of Excellence, which houses her lab, attracts the brightest minds from medicine to the VAMC. “Our job here,” she says, “is to improve the health of veterans.” Specifically, these experts seek research solutions that address the needs of veterans with disabilities and diseases—including vision problems.

Like other VAMC research centers around the country, the Atlanta VA augments its strengths through affiliation with an academic institution. Emory, nationally known for its research and located conveniently nearby, is a natural partner for the VAMC.

From this combining of expertise, not only the veterans but also both Emory and the VA stand to benefit. Dr. Pardue explains, “The VA provides a rich teaching source for university medical students, giving them a unique population of aging veterans to work with.”

Conversely, the prestige of its affiliation with Emory helps the VA attract top-notch physicians to work in the clinics that serve this country’s veterans.

Having collaborated for the past decade with colleagues at the VA and also at Emory, Dr. Pardue is an enthusiastic proponent of collective expertise. “Research proceeds most proficiently,” she says, “when it draws on the talents of many specialists—clinical, engineering, molecular, and imaging, to name a few. Increased collaboration between Emory and the VA will lead to more productivity in all our work.”
Renovations help us better train upcoming ophthalmologists

When Timothy Olsen joined the Emory Eye Center as director in 2008, his vision included updating the physical space dedicated to our educational efforts—which represent a vital part of our three-fold mission, along with patient care and research. That physical space, recently renovated, is the Cyrus Stoner Learning Resources Center, originally encompassing a library and an auditorium.

“Emory Eye Center deserved a better educational area,” says Dr. Olsen. “When I interviewed for the chair position at Emory, Dean Lawley and the School of Medicine agreed to help support the reconstruction cost. We were fortunate to work with architect Maurice Yates and an excellent construction company to make this happen. Our Calhoun Auditorium and LRC are now something to be proud of!”

He continues, “After a year of negotiations for additional space, we successfully added two rooms to the mix, to round out our usable space. The additional rooms provide us an extended area for book stacks and a small conference room, neither of which was part of our previous footprint. Now, for the first time, all of our educational programs are housed in one attractive space. Our residency and fellowship programs truly have a home.”

On multiple levels, this year has brought progress in Emory Eye’s efforts to strengthen that educational focus. Not only can we point with pride to our newly crafted spaces, we can be sure that they serve both an internal and external need. Tailored to the training of our residents and fellows, they are equally beneficial for those who join us from time to time as speakers and participants in Grand Rounds, seminars, and regional conferences.

According to Dr. Olsen, the renovations offer far-reaching advantages: “The most productive academic centers are those that have a space dedicated to collaboration and open discussion.”

Branching out on the north side

Emory Eye Center patients living on the north side of Atlanta can access eye care with new convenience. Emory Vision, our existing refractive surgery center in the north metro area, now includes experts in retina, cornea, and oculoplastics.

Located within The Emory Clinic, Perimeter, our specialists in retina serve on Mondays; our oculoplastics specialists, on two Tuesdays each month; and cornea specialists, several days each month. Our north side location at 850 Johnson Ferry Road is adjacent to SR 400. As always, to make an appointment, please contact our Call Center: 404-778-2020.

Members of the Emory Eye Center advisory council, an engaged group of Eye Center supporters, made a trek to midtown Atlanta in April to experience firsthand what it’s like to be totally blind—for one hour.

“Dialog in the Dark, “which has been in this country since 2008, has hosted more than 5 million visitors worldwide. The experience not only helps visitors understand the world of the blind, it also requires them to depend on the blind, who serve as their guides through the totally dark exhibition. After his hour of simulated blindness, Timothy Olsen commented, “Puns aside, this was truly an eye-opening experience.”
From Nepal to Emory: a long road to good vision

Recently 18-year-old Birendra Odari visited the Emory Eye Center and received an examination from pediatric ophthalmologist Amy Hutchinson. The visit might have seemed unremarkable; many young patients are examined at Emory clinics each day. One thing, however, was quite remarkable: the long path this young man had followed to get the help he needed for better vision.

Odari’s journey began in his homeland of Bhutan (near India), when his people were exiled in an ethnic cleansing. After living for 17 years in the refugee camps of Nepal—where a medical examination was an unattainable luxury—the Odari family came to Atlanta in 2008, ready to rebuild their life.

With help from the U.N., more than 1,600 Bhutanese refugees have now immigrated to Atlanta, and thousands more are expected over the next five years.

These “forgotten people” often struggle to make a living. Here in Atlanta, their basket making—a craft practiced by older members of the group, who use abundant Southern kudzu vines—is legendary. On weekends, Odari and his school friends sell the elaborate basketry at various farmers markets and bazaars. An A-student at Druid Hills High School, Odari has been the leader and organizer of this endeavor, which has caught the attention of local media.

“We were glad that Birendra Odari had come to us for treatment,” says Dr. Hutchinson. “He had severe astigmatism and hyperopia (farsightedness).” Both conditions were untreated, and because Birendra had never worn glasses or contact lenses before coming to the United States, he had developed amblyopia (decreased vision in both eyes).

“Before visiting Emory Eye, Birendra had been seen by an optometrist in Atlanta. We advised him to continue wearing the contact lenses prescribed by that doctor,” Dr. Hutchinson says. “His vision continues to improve. That’s a welcome situation for this bright and ambitious young man.”

Friends Craig Gilbert and Tamar Orvell, both volunteers with the Atlanta Bhutanese Refugee Support Group, accompanied Odari to the Emory Eye Center last fall.

Orvell noted that Dr. Hutchinson immediately established a caring relationship with Odari. “After the exam, she asked him about his life up until now,” he reports. “She explained that she could relate in some ways to his experiences in the Nepal refugee camps, because she volunteers her professional services in third-world countries and sees many difficult situations there.”

Gilbert added, “Birendra’s mother felt so much relief when we returned home. It was almost overwhelming for her to know that after 18 years of no medical help and no vision correction, her son has had the best possible care. She is thankful to Dr. Hutchinson for her top skills and gracious, gentle ways.”

Emory Eye in Troup County

In addition to her duties at Emory Eye and the Veterans Administration Medical Center, retina specialist Jiong Yan now sees patients at Emory Clark-Holder Clinic in LaGrange, Ga. Dr. Yan will see patients on every other Thursday, enabling the residents of Troup County (southwest of Atlanta, on the border of Alabama) to access an Emory Eye retinal specialist with expert medical, diagnostic and surgical skills.

Dr. Yan’s interests include diabetic retinopathy, macular disease, retinal detachment, and age-related macular degeneration. The director of the inherited retinal disease unit at the Emory Eye Center, Dr. Yan also has been involved in eight clinical trials, serving as either the principal investigator or the co-investigator. She has published nearly 20 papers.

“Often our retina patients must have a family member drive them to their clinic appointment,” says Dr. Yan. “It’s a pleasure to extend more convenient service to patients in the LaGrange community.”
A walk for sight On a chilly Sunday at Centennial Olympic Park, nearly 700 participants—including a team from the Emory Eye Center—walked in a Fight for Sight fundraiser. The fourth annual Atlanta VisionWalk, held on March 14 and coordinated by Foundation Fighting Blindness (FFB), brought in more than $100,000, say FFB folks.

Out of Africa: Kilimanjaro and Emory

In April the Emory Eye Center hosted Paul Courtright, PhD, co-director of the Kilimanjaro Centre for Community Ophthalmology (KCCO) in Moshi, Tanzania. Serving several countries within Africa—primarily in the eastern portion of the continent—KCCO seeks to eliminate avoidable blindness through programs, training, and research. Its primary focus is on creating sustainable community ophthalmology services.

Speaking to Emory physicians, Dr. Courtright described community ophthalmology as a way of considering blindness-related problems in a community context. This approach, for example, asks why, within a group of 10 blind persons, only one person makes it to the doctor for treatment. Multiple reasons for this situation exist, he explained.

Both access and attitude limit those who may need to have a treatment such as cataract surgery. Cataracts are the number-one cause of blindness in the world, primarily because they go untreated in so many underdeveloped regions. According to Dr. Courtright, crucial steps include screening potential patients thoroughly and then making sure they actually get to the hospital.

The cost of treatment typically is not the primary impediment. Even when surgery is offered free of charge, Dr. Courtright noted, patients may not receive the needed surgery. Typically these patients do not mind paying a fair price for their surgical procedures, and they often pay via a combination of money and goods.

Throughout the developing world, he continued, women have an unfairly high rate of blindness—two-thirds of the blindness in the world—because they don’t have the same access to medical care as the males in their societies.

A widespread misconception holds that in developing countries, there aren’t enough physicians to provide health care. Dr. Courtright corrected that assumption: “In fact,” he said, “many hospitals in poor countries are not very busy and do not work to their full capacity. The truth is that most blind people simply do not ever get to the clinic or hospital for treatment—and that is the challenge we face.”

For his impressive contribution to the field of international ophthalmology, Dr. Courtright was recently recognized with the International Blindness Prevention Award, presented by the American Academy of Ophthalmology.

“Dr. Courtright has left a lasting legacy in East Africa, building the region’s capacity to treat avoidable blindness. In the process, he has transformed countless lives,” says Hunter Cherwek, an Emory Eye Center alumnus and medical director of ORBIS International.

The ORBIS Flying Eye Hospital trains eye care professionals and treats underserved patients in developing countries throughout the world. In the future, the Emory Eye Center hopes to share this group’s evolving participation in our International Vision Project.
Nancy Newman, Valérie Biousse publish neuro-ophthalmology text

With a combined 40 years of experience, Emory Eye neuro-ophthalmologists Nancy J. Newman and Valérie Biousse have collaborated to write “Neuro-Ophthalmology Illustrated” (Thieme Verlag), a book that they hope will de-mystify the perceived complexity of neuro-ophthalmology.

While the book is aimed at medical students, residents, and practicing ophthalmologists and neurologists, it also can be a valuable resource for neurosurgeons, neuroradiologists, and otolaryngologists.

Comprising 640 pages and containing nearly 900 unique images, “Neuro-Ophthalmology Illustrated” covers topics ranging from anatomy and pathophysiology to diagnosis and management. It provides an original approach to thinking about, assessing, and treating neuro-ophthalmic disorders.

“The book has the flavor of an atlas,” says Dr. Newman, “but it also offers a comprehensive approach to neuro-ophthalmology. Our goal is to make this field accessible and understandable for all practitioners who deal with disorders of vision or the brain.”
**AWARDS**

**P. Michael Iuvone,** Sylvia and Frank F. Ferst Professor and director of research at the Emory Eye Center, has received from Research to Prevent Blindness (RPB) a $75,000 Senior Scientific Investigator Award. The award supports nationally recognized senior scientists who are conducting eye research at medical institutions in the United States. Dr. Iuvone is one of a select group of scientists—from 56 institutions—to be honored with this award since its origin in 1987.

**Thomas M. Aaberg, Sr.**, M.L. Simpson Distinguished Professor and Chair Emeritus of the Emory Eye Center, received the prestigious Schepens Lectureship Award through the American Academy of Ophthalmology. The lectureship honors Charles L. Schepens, MD, widely recognized as “the father of modern retinal surgery.” Along with this high award, Dr. Aaberg received $35,000, plus $15,000 for research funding.

**Hans E. Grossniklaus,** F. Phinizy Calhoun Jr. Professor, director of the L.F. Montgomery Pathology Laboratory and the Section of Ophthalmic Pathology/Ocular Oncology, received AAO’s 2009 Secretariat Award, which recognizes ophthalmologists for special contributions to the Academy and ophthalmology.

At the Joint Commission on Allied Health Personnel in Ophthalmology (JCAHPO) and Association of Technical Personnel in Ophthalmology (ATPO) ACE 2009 meeting, which ran concurrently with AAO meeting, the following Eye Center associate faculty members were honored:

**Lindy DuBois** received the prestigious Lancaster Medal, an award bestowed to an excellent orthoptist by the AACO (American Association of Certified Orthoptists) in recognition of meritorious contributions to orthoptic excellence. It is a lifetime achievement award.

**Donna Leef** was presented with the JCAHPO Statesmanship Award for a Commissioner, granted to a person who has manifested leadership through the support, training, and use of allied health personnel in ophthalmology and whose career has demonstrated dedication to the finest ethics and ideals of the ophthalmology profession.

**J. Bradley Randleman,** associate professor in the section of cornea, external disease, and refractive surgery at the Emory Eye Center, has been selected as the first recipient of the American Society of Cataract and Refractive Surgery (ASCRS) Foundation’s Binkhorst Young Ophthalmologist Award.

**RANKINGS**

**Emory Eye Center** ranks again in top ten of *U.S. News & World Report*

Emory Eye Center continues to stand among the Top Ten U.S. eye institutions, as ranked by *U.S. News & World Report* in July 2009. Now in its second year as #9 nationally, the Emory Eye Center also joins, once again, the prestigious ranks of America’s top medical institutions in the magazine’s annual guide to “America’s Best Hospitals.”

**Emory Eye Center** ranks in top ten in *Ophthalmology Times* annual survey

Along with nine other distinguished U.S. academic eye institutions, the Emory Eye Center has secured one of the Top Ten slots—again—in the annual survey of ophthalmology programs conducted by *Ophthalmology Times*. The October 15, 2009 issue ranks Emory Eye as #8 in the “Best Residency Program” category, two places higher than its 2008 listing at #10. *Ophthalmology Times*, a news publication written by and for physicians, regularly ranks eye centers across the country.
**Rashidul Haque, PhD** joined the research section in fall 2009, bringing more than 20 years of experience in molecular biology research. Dr. Haque earned his doctoral degree in genetics at St. Petersburg State University, Russia, where he also did a fellowship. In 1996 he completed a postdoctoral fellowship at Emory University. Before joining Emory (Pharmacology faculty) in 1998, he served in the Department of Zoology, University of Rajshahi, Bangladesh; worked as a WHO scholar at the CDC; and held a senior research scientist position at Emory University. His research focuses on both retinal circadian biology andocular microRNA. A member of ARVO, Dr. Haque is interested in characterizing microRNA molecules and investigating their role in the expression of genes related to ocular diseases such asAMD, diabetic retinopathy, and retinal vascular diseases.

**Joseph D. Walrath, MD** joined the section of oculoplastics, orbital and cosmetic surgery in May. He received his medical degree in 2003 from the College of Physicians & Surgeons, Columbia University. After completing an internal medicine internship at The Mount Sinai School of Medicine, he served an ophthalmology residency at Columbia University, where he was chief resident during his final year. He practiced for a year in New York, then completed a two-year oculoplastics fellowship at the Emory Eye Center. Dr. Walrath’s clinical interests include surgical and nonsurgical cosmetic eyelid, forehead, and midface treatments, as well as management of adult and pediatric diseases of the eye sockets, tear drains, and eyelids. Dr. Walrath will see patients at the Emory Eye Center’s main campus and at The Emory Clinic, Perimeter.

**Steven Yeh, MD,** will join the vitreoretinal diseases and surgery section in September 2010. He attended medical school at the Baylor College of Medicine and completed his internship and ophthalmology residency at the Cullen Eye Institute, Baylor College of Medicine Affiliated Hospitals system, where he served as chief resident.

During residency, Dr. Yeh performed research in ocular immunology and retinal diseases. He completed a clinical and research fellowship in uveitis, ocular immunology and medical retina at the NEI. While there, he conducted research in diagnostic imaging for posterior uveitis and immunotherapies for uveitis, as well as translational research investigating the mechanisms of rare autoimmune eye diseases. Most recently, Dr. Yeh completed his vitreoretinal diseases and surgery fellowship at the Casey Eye Institute, Oregon Health and Science University and the Devers Eye Institute, Legacy Good Samaritan Hospital. During fellowship, he acquired advanced medical and surgical retina training in macular diseases, pediatric retinal disorders, ocular tumors, uveitis, retinal degenerations, retinal detachment repair, and ocular trauma.

Dr. Yeh’s research on uveitis and retinal diseases has resulted in more than 70 peer-reviewed publications and abstracts, many of which have been presented at national meetings, including the Association for Research in Vision and Ophthalmology, the American Academy of Ophthalmology, the American Society of Retinal Specialists, and the Retina Congress. The recipient of awards both as a Heed Ophthalmic Foundation Fellow and from the Ronald G. Michels Fellowship, Dr. Yeh brings clinical expertise in advanced diagnostics for the management of infectious and noninfectious uveitis, local and systemic immunosuppression for uveitis, age-related macular degeneration, diabetic retinopathy, and retinal detachment surgery. Dr. Yeh will see patients at the Emory Eye Center.

**Suma Shankar, MD, PhD** joined the Ophthalmology Department in April. She holds a primary appointment in Human Genetics at Emory University and is affiliated with the Emory Children’s Center, Children’s Hospital of Atlanta and the Emory Eye Center. Dr. Shankar received her medical degree at Bangalore Medical College in India, completing a residency in ophthalmology in the United Kingdom and obtaining membership in the Royal College of Ophthalmologists, London, as well as fellowship in the Royal College of Surgeons in Edinburgh, UK. She received her PhD in molecular genetics and also completed a fellowship in pediatric ophthalmology at the University of Iowa, followed by a second fellowship in medical genetics at UCSF. Dr. Shankar’s clinical interests include genetic disorders of the eye, ophthalmic manifestations of neurofibromatosis, Ras /MAPK pathway disorders, and metabolic disorders such as lysosomal storage disorders. She will see patients at the Emory Eye Center and the Emory Genetics Clinic.
Endowment is the lifeblood of any academic eye institute. The following are the named funds which endow specific needs and provide the ongoing financial support for the Eye Center’s work.

Emory Eye Center Endowment Funds

- Thomas M. Aaberg Sr. Chair
  Currently held by George Baker Hubbard, III, MD
- Thomas M. Aaberg Sr. Fellowship
- Earl Wills Anderson Memorial Fellowship
- F. Phinizy Calhoun Jr. Lectureship
- F. Phinizy Calhoun Jr. Professorship in Ophthalmic Pathology
  Currently held by Hans E. Grossniklaus, MD, MBA
- Grady Clay Memorial Fund
- Frederic Stowe Davis, Mayme Bordeaux Davis, Catherine Louis Davis ’51G, and Mary Frances Davis Memorial Endowment Fund
- H. Talmage Dobbs Lectureship
- R. Howard Dobbs Retina Research Fund
- R. Howard Dobbs Professorship
  Currently held by Scott R. Lambert, MD
- Sylvia Montag Ferst and Frank W. Ferst Chair
  Currently held by P. Michael Iavone, PhD
- Pamela Humphrey Firman Professorship
  Currently held by Anastasios Costarides, MD, PhD
- Fund for Vision Care
- John H. Hughes and Helen S. Hughes Fund
- Reunette Harris Chair
  Currently held by Paul. W. Wong, PhD
- LeoDelle Jolley Chair
  Currently held by Nancy J. Newman, MD
- Kuse Professorship
  Currently held by Ted H. Wajos, MD
- Lebos Fund in Neuro-ophthalmology
- Herman Lewis Research Fund
- Henry Y. McCord Sr. Endowment
- L. Dean and Irene McMath Eye Research Endowment
- William & Clara Redmond Professorship
  Currently held by Allen Beck, MD
- Eugene Reichard Lectureship
- Frances and Leroy Rogers Fund
- M.L. Simpson Chair
- Paul Sternberg Jr. Retina Lectureship
- Cyrus H. Stoner Professorship
  Currently held by Valérie Bousse, MD
- Lila Mae Stanton Walthour and Lena Stanton de la Perriere Chair
  Currently held by Geoffrey Broocker, MD
- Louis Stanley Whitaker Endowment
- Louis A. Wilson Fund
- Ned S. Wilkin Fund

Emory Eye Center Donors

September 2007 – August 2009

The Calhoun Society
$100,000 - 1 million
- Abraham J. & Phyllis Katz Foundation
- Foundation for Fighting Blindness
- Jack and Anne Glenn Foundation
- Research to Prevent Blindness

Lifetime Lamplighters
$25,000 - 100,000
- Alimera Sciences, Inc.
- Bernard E. & Edith B. Waterman Charitable Foundation
- CIBA Vision Corporation
- Dr. and Mrs. Timothy W. Olsen
- Fraser-Parker Foundation
- Georgia Lions Lighthouse Foundation, Inc.
- Jack Zwecker
- Knights Templar Educational Foundation

2008-2009 Individual Donors
Although gifts of any amount are gratefully received, only gifts totaling $50 and more could be listed in this report. These gifts were received in the past two years.

Benefactors
$10,000+
- Mrs. Mary Gellerstedt
- Mrs. Marilyn Gardner Mann
- Dr. and Mrs. Timothy W. Olsen

Lamplighters
$1,000 – 9,999
- Dr. & Mrs. Thomas M. Aaberg Sr.
- Dr. Maria E. M. Aaron
- Mr. Jeff R. Arent
- Dr. & Mrs. Chang M. Bang
- Dr. & Mrs. Allen D. Beck
- Dr. & Mrs. J. Chandler Berg
- Drs. Chris S. Bergstrom & Marisa Alane Feliciano
- Ms. Wendy H. Bicknell
- Dr. Valérie Biousse
- Dr. & Mrs. Geoffrey Broocker
- Dr. Ronald R. Buggage

Patrons
$500 - 999
- Dr. and Mrs. Phil Cecil Alabata
- Dr. Claxton Allen Baer
- Drs. David Haworth Bowen and Carol F. Boerner
- Mr. William J. Brown III
- Dr. and Mrs. Philip D. Campbell
- Dr. and Mrs. Antonio Capone Jr.
- Dr. and Mrs. Andrew C. Davis
- Mr. and Mrs. Leslie W. Dow
- Dr. Edward N. Duncan
- Mr. and Mrs. Stanley P. Steinberg

* Every attempt has been made to verify the accuracy of this list. Please accept our apologies for any errors or omissions.
Giving Back | Friends of the Emory Eye Center

Dr. and Mrs. Lewis R. Gaskin
Drs. Hans Edwin Grossniklaus and Daurice Ann Grossniklaus
Drs. David J. Harris Jr. and Patricia L. Harris
Dr. Susanne M. Hewitt and Mr. Sean T. Hewitt
Dr. and Mrs. George Baker Hubbard
Dr. Bruce E. January
Dr. Joung Y. Kim and Mrs. Gloria K. Song
Dr. and Mrs. Thomas H. Mader
Dr. and Mrs. Daniel F. Martin
Dr. and Mrs. John M. Nickerson
Dr. James Bradley Randleman
Dr. and Mrs. Wayne A. Solley
Dr. and Mrs. Cameron McClure Stone
Dr. and Mrs. Kearfott M. Stone
Mr. Kenneth G. Tarnawsky
Dr. and Mrs. John T. Cobb
Dr. and Mrs. John A. Wells III
Dr. Paul Wong
Mr. David R. Woolf

Sponsors
$250 - 499
Dr. Fulya Y. Anderson and Mr. Christopher M. Anderson
Dr. and Mrs. Bradley A. Bertram
Dr. and Mrs. Douglas Mountjoy Blackmon
Mr. and Mrs. Earle Blomeyer
Dr. and Mrs. Daniel H. Chang
Ms. Beatrice C. Conolly
Ms. Rhonda S. Curtis
Dr. and Mrs. John M. Dixon
Drs. Charles V. Duss and Dawn Maxwell Duss
Dr. and Mrs. Henry F. Edelhauer
Ms. Jane A. Everett
Drs. Andrew Steven Feinberg and Whitney L. Feinberg
Mr. John E. Felth
Mr. Myron E. Gellman
Dr. Garnett J. Giesler Jr.
Mr. and Mrs. Charles Benjamin Ginden
Dr. and Mrs. Peter Alfred Gordon
Mr. and Mrs. Michael George Hamner
Dr. Lindsey DuFour Harris

Contributors
$100 - 249
Col. W. J. Adams
Dr. and Mrs. Saeed A. Al-Ghamdi

Dr. and Mrs. Christopher L. Haupert
Mr. and Mrs. David Hertling
Dr. and Mrs. Barry N. Hyman
Dr. and Mrs. Floyd C. Jarrell Jr.
Dr. and Mrs. Stefan E. Karas
Mr. Roger E. Kline
Ms. Ursula J. Landsrath
Mr. and Mrs. William G. Layton
Drs. Jeffrey H. Levenson and Ilene S. Levenson
Dr. and Mrs. Robert E. Livingston III
Dr. Ole J. Lorenzetti
Drs. Reay H. Brown and Mary G. Lynch
Mr. Luis Maza
Mr. and Mrs. Patrick J. McGahan
Mr. and Mrs. W. A. Moscoco
Dr. and Mrs. Saxton Thomas Moss
Mr. Robert A. Myles
Dr. K. M. Nardelli-Oikowska
Dr. Robert S. Nelson and Mrs. Anne Minter
Dr. and Mrs. Alvin W. North
Dr. James P. Pressey and Ms. Susan Thomas
Dr. Susan A. Primo and Mr. Roosevelt Davis
Dr. and Mrs. James R. Putham
Mr. and Mrs. Jack Redwine
Dr. and Mrs. John C. Rieser
Mr. and Mrs. Donald L. Robinson
Dr. Kenneth John Rosengren
Dr. Jennifer T. Scruggs
Mr. and Mrs. Dallas H. Sexton, USN (RET)
Dr. and Mrs. Samuel C. Spalding
Dr. and Mrs. James I. Suit
Dr. and Mrs. David N. Ugland
Dr. Steven Ira Urken
Dr. Thao Mai Vu
Dr. Stanley D. Walker
Dr. and Mrs. R. Trent Wallace
Mr. and Mrs. Michael A. Ward
Dr. and Mrs. John A. Wells Jr.
Dr. Ted H. Wojno

Drs. Victor J. Weiss and Nicole J. Anderson-Weiss
Dr. and Mrs. John G. Azzi
Dr. Steven T. Bailey
Dr. and Mrs. Kyle Balch
Dr. and Mrs. Christopher S. Banning
Mr. and Mrs. William N. Barfield
Dr. and Mrs. James J. Bedrick
Dr. and Mrs. Michael A. Behforouz
Mr. and Ms. Mike Bell
Dr. and Mrs. Michael D. Bennett
Ms. Patricia Y. Bennett
Dr. and Mrs. Currell V. Berry
Dr. Asha Bhoomkar
Dr. Rebecca S. Braverman and Mr. Jon Braverman
Mr. and Mrs. Edward Gregory Brekke
Dr. and Mrs. William Z. Bridges
Mr. and Mrs. Ulrich H. Brinkmann
Mrs. Judy L. Brower
Ms. Carol Joan Brown
Ms. Sandra L. Brown
Dr. Beau Benjamin Bruce
Drs. David Paul Carlton and Mary Shackelford Carlton
Mr. and Mrs. Kenneth Cash
Mr. Bill Chan
Dr. Margaret A. Child
Dr. and Mrs. Robert L. Church
Ms. Mary L. Clarke
Dr. and Mrs. F. Michael Cornell
Drs. Blaine Edward Cribbs and Sushma Komakula Cribbs
Ms. Regina F. Cross
Dr. and Mrs. Hal Holland Crosswell III
Drs. William Fort Crosswell and Caroline Gibbes
Dr. H. Tim Crow
Dr. John Brandon Davies
Drs. John P. Denny and Susan Davenport Denny
Dr. and Mrs. Carlos E. Diaz
Dr. and Mrs. Paul J. Dickinson
Dr. and Mrs. Terrence James Doherty
Mrs. Mildred R. Elliott
Mr. James R. English
Mr. John C. Findlan

Drs. George Demetrios Fivgas and Mary V. Stringfellow
Dr. and Mrs. Carl E. Flinn
Mr. George E. Foster
Dr. and Mrs. John C. Frandsen
Dr. and Mrs. Richard Scott Freeman
Ms. Daria Ann Fremstad
Mr. and Mrs. Thomas E. Fullilove
Dr. and Mrs. Lewis R. Gaskin
Mr. Yongjun Geng
Dr. Annette L. Giangiaco Storno
Mr. and Mrs. Joseph M. Golub
M. Douglas Gossman, MD, PLLC
Dr. Emily Bedrick Graubart and Mr. Noah C. Graubart
Dr. and Mrs. John C. Hagan III
Dr. Robert Frederick Hand
Dr. and Mrs. Michael L. Haney
Sadee B. Hannush, MD
Dr. and Mrs. Thomas S. Harbin Jr.
Ms. Stephanie L. Hassel
Mr. and Mrs. Douglas B. Hawks
Dr. and Mrs. Brent Richard Hayek
Dr. and Mrs. Charles S. Hill
Dr. Gary N. Holland
Mr. and Mrs. L. David Holmes IV
Dr. and Mrs. Ronald M. Hughes
Dr. and Mrs. Harold N. Jacklin
Mr. and Mrs. Robert E. Jarrett
Dr. and Mrs. Jeffrey Stuart Kay
Mr. Chris Patrick Kelley
Dr. Deborah S. Kelly and Mr. Paul Kelly
Dr. and Mrs. T. Eugene Kennedy
Dr. and Mrs. Charles G. Kirby
Dr. Scott B. Kleber and Mrs. Nancy Habif-Kleber
Dr. and Mrs. Stephen H. Knight
Mr. and Mrs. Harford E. Knowles
The Honorable Phyllis A. Kravitz
Dr. and Mrs. Scott R. Lambert
Mr. and Mrs. Carl D. Lancaster
Mr. and Mrs. John D. Lee
Dr. Phoebe Dean Lenthart and Mr. Scott McKown Lenthart
Drs. Jeffrey H. Levenson and Ilene S. Levenson
Mr. and Mrs. Nathan R. Light
Dr. and Mrs. Thomas H. Mader
Drs. Malcolm J. Magovern and Linda Magovern
Mr. Eric J. Mandel
Dr. and Mrs. James W. McCann Jr.
Mr. and Mrs. William E. McGiboney
SFC Ret. and Mrs. Johnny L. Mills
Dr. and Mrs. Jonathan A. Mines
Mr. and Mrs. Roger F. Moonen
Mrs. Arlene T. Morey
Dr. and Ms. Matthew W. Morris
Ms. Marjorie K. Myers
Mr. Robert A. Myles
Mr. and Mrs. Ted Negas
Dr. and Mrs. Philip E. Newman
Mr. Edward W. Nickerson
Miss Margaret Norris
Mr. and Mrs. Loyd P. Norton
Dr. David G. O’Day and Mrs. Ann H. Spencer O’Day
Dr. and Mrs. John Stewart O’Keeffe
Mr. and Mrs. Edwin L. O’Rourke
Mr. and Mrs. Bruce E. Patterson
Dr. and Mrs. John H. Per-Lee
Dr. and Mrs. Arthur C. Perry
Dr. and Mrs. Dante Joseph Pieramicci
Dr. and Mrs. Sean Pieramicci
Mr. James C. Platt Jr.
Dr. and Mrs. John Pope Jr.
Dr. and Mrs. James R. Putnam
Dr. Kathryn Lea Reed
Mr. John E. Roller
Mr. and Mrs. Robert A. Rose
Dr. and Mrs. Thomas S. Rowe
Dr. Jeffrey H. Boatright and Ms. Claudia S. Saari
Mr. and Mrs. Hoyle B. Saye
Dr. and Mrs. Jonathan E. Sears
Mr. Robert Y. Shapiro
Dr. and Mrs. Jeffrey Sheridan
Dr. and Mrs. Fumio Shiraga
Dr. Scott W. Sieagner
Paul S. & Carolyn A. Simon
Ms. Joyce H. Smith
Dr. and Mrs. Marc Jason Spinn
Ms. Donna M. Spiteri
Mr. and Mrs. Hugh S. Spruill
Dr. Norman F. Stambaugh Jr.
Dr. Reginald J. Stambaugh

Dr. Thomas W. Stone
Dr. R. Doyle Jr.
Ms. Lori M. Sumray
Dr. Larry R. Taub
Mr. and Mrs. John J. Thomas
Drs. W. Kevin Thomas and Carol A. Kranig
Dr. Debra Ann Thomas-Weible
Dr. Jerald B. Turner
Dr. Ann M. Van Wie and Mr. Jeffrey C. Van Wie
Dr. and Mrs. Woodford Spears VanMeter
Dr. M. Angela Vela
Dr. and Mrs. Eric T. Voseok
Mr. and Mrs. Charles F. Waite Sr.
Ms. Iris N. Wallace
Dr. and Mrs. Phil V. Walters
Dr. Matthew Waile Wilson
Dr. and Mrs. William R. Wilson
Mr. and Mrs. Ronald D. Wood
Mr. and Mrs. Warren Wooff
Dr. and Mrs. James Robert Wright Sr.
Mrs. Joan L. Yaney
Dr. Lucy Lo-Hwa Yang and Mr. Carl R. Gerdes
Mr. and Mrs. Lewis Zellner

**Friends**

**$50 - 99**

Anonymous
Mr. and Mrs. Wendell H. Armstrong
Ms. Juanita J. Banks
Mr. Robert J. Beck
Ms. Odelle K. Berkowitz
Dr. and Mrs. Bruce I. Bodner
Mrs. Judy L. Brower
Mr. and Mrs. Robert E. Brown
Ms. Elizabeth Aiken Burt
Mr. and Mrs. Robert O. Colby
Ms. Betty L. Dailey
Mr. and Mrs. David Darby
Mr. and Mrs. John P. Dean
Mr. and Mrs. Adalberto DeThomas
Mr. and Mrs. Harley F. Drury Jr.
Mr. William C. Dunbar
Mr. and Mrs. William F. Finn
Mr. Paul French
Mrs. Mary Cathryn Gemmill
Mr. and Mrs. William M. Gibbs

Ms. Mussie B. Habtemariam
Ms. Margareta Hammerstrom
Ms. Linda Hammond
Mr. and Mrs. Thomas B. Jackson
Mr. and Mrs. James K. Jennings
Mrs. Sara Anne Johnson
Mr. Christopher W. Kellen
Mrs. D. J. Lambert Jr.
Mr. and Mrs. Frank C. Lambert
Ms. Donna L. Leef
Mr. and Mrs. Bernard Liberman
Mr. and Mrs. Peter R. Maltese
Mr. and Mrs. Dale G. Miley
Ms. Lois A. Miller
Mr. John S. Monies Jr.
Mr. William V. Mogan III and Mrs. Susan G. Morgan
Mr. and Mrs. Robert Nadrofsky
Ms. M. W. O’Dell
Dr. Machelle T. Pardue and Mr. Jeffrey D. Pardue
Mrs. J. P. Park
Mr. and Mrs. Phillip Parrish
Mr. and Mrs. James Lane Perry
Dr. and Mrs. Edward A. Peterson
Mr. and Mrs. Stanley J. Raciak
Ms. Cicely Angela Ross
Ms. Jennell Sewell
Mr. and Mrs. Kais F. Shahi
Mr. Richard Sidwell
Mr. and Mrs. Edward M. Smith
Ms. Sara B. Smith
Mr. Leonard Steed
Mr. Jim Nieds and Ms. Marion N. Steffy
Mr. and Mrs. Richard H. Stock
Mr. and Mrs. Peter J. Stumpo Jr.
Mr. and Mrs. Grady H. Summer
Dr. and Mrs. Myron Tanenbaum
Mrs. Terri Trotter
Mr. and Mrs. G. Wallace Turner Jr.
Mr. and Mrs. Ray Ulrich
Dr. and Mrs. Bruce F. Walker
Mrs. Linda G. Wilkins
Ms. Brenda G. Williams
Mr. and Mrs. Robert L. Williams Jr.
Mr. and Mrs. T. W. Wilson

**Foundations and Other Organizations**

Abraham J. & Phyllis Katz Foundation
Barbara Jo Noto Trust
Bernard E. & Edith B. Waterman Charitable Foundation
Charles and Mary Ginden Fund
Dorothy M. Harrington Trust
Foundation for Fighting Blindness
Fraser-Parker Foundation
Georgia Lions Lighthouse Foundation, Inc.
Jack and Anne Glenn Foundation
John C. Hagan III Trust
Jules and Carol B. Green Foundation
Knights Templar Educational Foundation
Loeb Family Foundation
Mildred E. Culpepper Trust
The Clark Foundation
The Gallagher 312 Foundation
Warren & Elizabeth Bicknell Family Fund
William L. & Linda H. Olmsted Charitable Fund
Yellowwees Family Fund

**Corporations**

Affinity Health Group
Allergan, Inc.
American Glaucoma Society
Anderson Eye & Ear Associates
Anderson Ophthalmology, PC
Arizona Cotton B.C.O. & Associates Inc.
Associated Retinal Consultants, PC
Atlanta Metro Lions Club
Atlanta Ophthalmology Associates, PC
Austin Retina Associates
Bay Area Retina Consultants
Bergen Management Services LLC
Berk’s Eye Physicians and Surgeons, Ltd.
Byron Lioness Club
Byron Lioness Club
Calhoun Lions Club
California Retina Consultants, PC
Center for Sight, PC
Charles Wang, MD PA
Chicago Cornea Consultants, Ltd.
Chick-fil-A, Inc.
Clark Eye Clinic, PC
Collins Vision
Columbus Eye Clinic, PA
CooperVision
Cone Associates of Texas
Corneal Consultants of Colorado, PC
Delaware Eye Clinic
Diaz Vision Center, PA
Envision EMI, LLC
Eye Associates, LTD.
Eye Physicians of Pinella, PA
First America Bank
Friedberg Eye Associates, PC
Georgia Institute of Technology
Griffin Eye Clinic
Horizon Eye Care
The 1836 Society
A Special Way to Give

Emory University’s 1836 Society recognizes our friends who have made gifts to support eye research and clinical programs through bequests and deferred gifts.

To join, a donor simply informs the Eye Center that a gift or bequest has been arranged. Because Emory is a tax-exempt, nonprofit institution, taxpayers who make gifts realize important benefits.

Financial planners often recommend charitable giving as a method of reducing estate taxes. A bequest to the Emory Eye Center reduces the size of your estate for tax purposes. Other forms of deferred gifts, such as charitable gift annuities, can provide significant deductions on estate and income taxes as well as guaranteed income during the life of the donor.

But more important than the tax advantages of planned gifts is the wonderful feeling that making an 1836 Society gift brings to the donor. A donor may specify a particular area of eye research or treatment to be supported by the bequest or gift, or the donor may state that it be used at the discretion of the chairman or for the department’s greatest need.

No gift will make a greater difference as an investment in the future of the Eye Center and its programs. For information about the 1836 Society, please contact the Eye Center development office at 404-778-4121.

1836 Society Donors

Anonymous Donors
Mr. & Mrs. Roy Black
Dr. & Mrs. F. Phinizy Calhoun Jr.
Miss Mary Frances Davis
Mrs. Francis Edmondson
Mrs. Frances Gardenhire
Hans E. & Daurice A. Grossniklaus
Mrs. Martin Hultander
The James J. Jerazol Family
Mrs. LeoDelle Jolley
Virginia & Leo Lebos
Timothy & Virginia Olsen
Ms. Eva Powell
Dr. & Mrs. William B. Redmond
Larry O. & Jean O. Richardson
John C. Rieser, MD
Mr. & Mrs. Lefroy Rogers
Margaret Louise Simpson
Mr. & Mrs. Howard Stein
Cyrus H. Stoner, MD
Mrs. Albert Vest
Lucille Geddings Walker

Tribute Gifts

<table>
<thead>
<tr>
<th>Gift given in honor of:</th>
<th>Given by:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Thomas M. Aaberg Sr.</td>
<td>Ms. Patricia Y. Bennett</td>
</tr>
<tr>
<td>Dr. Thomas M. Aaberg Sr., Dr. R. Doyle Stutting, Dr., and Daniel F. Martin</td>
<td>Warren &amp; Elizabeth Bicknell Family Fund</td>
</tr>
<tr>
<td>Dr. Thomas M. Aaberg Sr., Mrs. Judith Aaberg</td>
<td>Paul S. &amp; Carolyn A. Simon</td>
</tr>
<tr>
<td>Dr. Maria E. M. Aaron</td>
<td>Mr. Stanley P. Steinberg</td>
</tr>
<tr>
<td>Dr. Allen Dale Beck</td>
<td>Dr. John C. Frandsen</td>
</tr>
<tr>
<td>Dr. Henry F. Edelhauser</td>
<td>Ms. Patricia Y. Bennett</td>
</tr>
<tr>
<td>Mr. Shaun Habif Kleber, Mr. Chase Kleber, and Dr. G. Baker Hubbard</td>
<td>Warren &amp; Elizabeth Bicknell Family Fund</td>
</tr>
<tr>
<td>Dr. Mark E. Silverman</td>
<td>Mrs. Arlene T. Morey</td>
</tr>
<tr>
<td>Mrs. Barbara Kleber</td>
<td>Mrs. Ida A. Timpson</td>
</tr>
<tr>
<td></td>
<td>Mrs. Terri Dianne Wood</td>
</tr>
<tr>
<td></td>
<td>Dr. Ole J. Lorenzetti</td>
</tr>
<tr>
<td></td>
<td>Mr. Bernard Liberman</td>
</tr>
<tr>
<td>Dr. Daniel F. Martin</td>
<td>Mildred E. Culpepper Trust</td>
</tr>
<tr>
<td>Dr. John M. Nickerson</td>
<td>Mrs. Mary Jean Hertling</td>
</tr>
<tr>
<td>Dr. Rein Saral</td>
<td>Mrs. Linda G. Wilkins</td>
</tr>
<tr>
<td>Dr. Sunil Srivastava</td>
<td>Mr. Maxwell W. Young</td>
</tr>
<tr>
<td>Dr. R. Doyle Stutling Jr.</td>
<td>Mrs. Phillip Parrish</td>
</tr>
<tr>
<td>Mr. Michael A. Ward</td>
<td>Knights Templar Educational Foundation</td>
</tr>
<tr>
<td>Dr. Ted H. Wojno</td>
<td>Dr. Nancy J. Newman</td>
</tr>
<tr>
<td>Dr. Jiong Yan</td>
<td>Remax of Georgia, Inc.</td>
</tr>
<tr>
<td></td>
<td>Jack and Anne Glenn Foundation</td>
</tr>
<tr>
<td></td>
<td>Mrs. Mary Jean Hertling</td>
</tr>
<tr>
<td></td>
<td>Barbara Jo Noto Trust</td>
</tr>
<tr>
<td></td>
<td>Ms. Audrey L. Gable</td>
</tr>
<tr>
<td></td>
<td>Ms. Jane Redwine</td>
</tr>
<tr>
<td></td>
<td>William L. &amp; Linda H. Olmsted Fund</td>
</tr>
<tr>
<td></td>
<td>Dr. Beatrice R. Keappler</td>
</tr>
<tr>
<td></td>
<td>Mrs. William E. Keappler</td>
</tr>
<tr>
<td></td>
<td>Mrs. Lillian O. Satterfield</td>
</tr>
</tbody>
</table>
### Memorial Gifts

**Gift given in memory of:**
- Ms. Ruby J. Allred
- Mr. Jack Battle Jr.
- Mr. Marvin N. Bridges
- Mrs. Patricia Deady Brooks
- Mrs. Lillian Cipinko
- Dr. Stanley G. Childers
- Mrs. Rosemary Elizabeth Britt Darby
- Mrs. Helen Hames Dixon
- Ms. Alma C. Everett
- Mrs. Elaine Felth
- Mr. Arnold E. Gardner
- Mrs. Ruth C. Gardner
- Mrs. Goldie Gellman

**Given by:**
- Byron Lioness Club
- Dr. Alcides Filho Fernandes
- Mr. Richard S. Dulaney
- Mrs. Deborah M. Maltese
- Mr. Christopher W. Kellen
- Ms. Sara B. Smith
- Ms. Marion N. Stefy
- Mr. John E. Felth
- Dr. Bruce F. Walker
- Mr. Myron E. Gellman
- Bergen Management Services LLC
- Dr. Homer S. Nelson
- Mr. Paul Marshall Larson
- Mrs. Emily Drury
- Ms. Jane A. Everett
- Mr. John E. Felth
- Mr. Myron E. Gellman

---

### Gift given in memory of:

**Given by:**
- Mr. Irving Gellman
- Dr. Sidney Z. Gellman
- Mrs. Nadine Chesser Johnson
- Ms. Leona Leef
- Mrs. Patricia M. Jones
- Ms. Sara B. Smith
- Mrs. Karen G. Lambert
- Mrs. J. P. Park
- Mrs. Ammarie C. Wilson
- Mrs. Gloria A. Raciak
- Mrs. Emily Drury
- Ms. Jane A. Everett
- Mr. John E. Felth
- Mr. Myron E. Gellman
- Mrs. Mary Anne Nadrofsky
- Dr. John M. Nickerson
- Dr. Michelle T. Pardue
- Mr. Robert Y. Shapiro
- Mrs. Kristen A. Stumpo
- Dr. Paul Wong
- Dr. Robert P. Tucker Jr.
- Mrs. Charles Benjamin Ginden
- Mr. Edward Gregory Brekke
- Mr. Leroy W. Fettermann
- Mrs. Mary B. Kennedy
- Mrs. Patricia M. O’Rourke
- Dr. Jeffrey D. Zwieren

---

### Eye Center Advisory Council

- Mr. Bickerton Cardwell
- Mr. Bradley N. Currey Jr.
- Mr. Charles Darnell
- Dr. Randy Dhalwal
- Mr. Brian G. Dyson
- Mr. Edgar Forio, Jr.
- Mr. Russell R. French
- Mr. Gardiner Wingfield Garrard III
- Ms. D. Gayle Gellerstedt
- Mrs. Mary Gellerstedt
- Mr. Charles B. Ginden
- Mr. W. Gordon Knight
- Mr. Myron E. Gellman
- Mrs. Margie E. Jackson
- Mrs. Kelly C. Leath
- Dr. Allen D. Beck
- Ms. Joyce H. Bell
- Ms. Patricia Y. Bennett
- Ms. Carol Joan Brown
- Ms. Elizabeth Aiken Burt
- Dr. Anastasios Peter Costarides
- Ms. Regina F. Cross
- Mrs. Cynthia A. Dean
- Dr. Claudia C. Evans
- Dr. Alcides Filho Fernandes
- Mrs. Melanie K. Fowler
- Mrs. Daria Ann Fremstad
- Ms. Linda Hammond
- Dr. Thomas S. Harbin Jr.
- Mr. L. David Holmes IV
- Mr. Chris Patrick Kelley
- Mr. Paul Marshall Larson
- Mrs. Patricia A. Light
- Mr. Robert Alan Myles
- Ms. Donna M. Spiteri
- Mr. David R. Woolf
- Mrs. Julie M. Wright
- Ms. Edna B. Newman
- Mr. Edward W. Nickerson
- Mrs. Mary Anne Nadrofsky
- Dr. John M. Nickerson
- Dr. Michelle T. Pardue
- Mr. Robert Y. Shapiro
- Mrs. Kristen A. Stumpo
- Dr. Paul Wong
- Dr. Robert P. Tucker Jr.
- Mrs. Charles Benjamin Ginden
- Mr. Edward Gregory Brekke
- Mr. Leroy W. Fettermann
- Mrs. Mary B. Kennedy
- Mrs. Patricia M. O’Rourke
- Dr. Jeffrey D. Zwieren

---

### Other Contributors

- Mrs. Rosemary Elizabeth Britt Darby
- Dr. Alcides Filho Fernandes
- Mrs. Melanie K. Fowler
- Mrs. Daria Ann Fremstad
- Mr. L. David Holmes IV
- Mr. Marvin N. Bridges
- Mr. Richard S. Dulaney
- Mrs. Deborah M. Maltese
- Mrs. Kerrie E. Miley
- Mrs. Joan Katherine Smith
- Mr. Wernher Swart
- Mrs. J. P. Park
- Ms. Jane A. Everett
- Mrs. Emily Drury
- Mrs. Elaine Felth
- Mr. John E. Felth
- Mr. Myron E. Gellman
- Mrs. Karen G. Lambert
- Miss Margaret Norris
- Dr. Allen D. Beck
- Ms. Joyce H. Bell
- Ms. Patricia Y. Bennett
- Ms. Carol Joan Brown
- Ms. Elizabeth Aiken Burt
- Dr. Anastasios Peter Costarides
- Ms. Regina F. Cross
- Mrs. Cynthia A. Dean
- Dr. Claudia C. Evans
- Dr. Alcides Filho Fernandes
- Mrs. Melanie K. Fowler
- Mrs. Daria Ann Fremstad
- Ms. Linda Hammond
- Dr. Thomas S. Harbin Jr.
- Mr. L. David Holmes IV
- Mr. Chris Patrick Kelley
- Mr. Paul Marshall Larson
- Mrs. Patricia A. Light
- Mr. Robert Alan Myles
- Ms. Donna M. Spiteri
- Mr. David R. Woolf
- Mrs. Julie M. Wright
- Mrs. Mary B. Kennedy
- Mrs. Patricia M. O’Rourke
- Dr. Jeffrey D. Zwieren
EVA POWELL learned early the value of work. Growing up with 12 brothers and sisters on a Georgia farm, she became the only member of her family to graduate from college. She has raised four children, worked for 20 years at Georgia’s Fort Gordon military base, survived a stroke, and lost her husband to cancer.

Last year she decided to invest the money she’s saved over the years in eye research at Emory. At the suggestion of her eye doctor in Augusta, she has made a bequest to the Emory Eye Center.

“I want my money to do something that will help a lot of people,” she says.

To learn more about the programs at the Emory Eye Center, call 404.778.4121 or visit www.eyecenter.emory.edu.

Plan for your money to work.
Our 12th annual RB Kids Day, celebrating the lives of our young retinoblastoma patients, saw the largest gathering ever. Here, young RB patient Marley gives a hug to a “Happy Tails” dog, one of several therapy dogs who join this special event.

Emory Eye Center
Uncommon knowledge.
Uncommon sharing.