Glaucoma, which causes damage to the optic nerve that can lead to vision loss, including blindness, continues to be a vexing disease. Its cause is not well understood, and it is often difficult to detect until significant damage has occurred. Treatment still cannot restore lost vision, although it is often able to slow or prevent further vision loss. Nevertheless, members of JSEI’s Glaucoma Division are making significant progress in the effort to address these concerns.

Seeking a Better Understanding of the Cause

Exactly what causes glaucoma remains a mystery. “There are many theories about the basic mechanisms of damage, but the exact causes are not well understood,” says Joseph Caprioli, MD, Chief of the Glaucoma Division.

Elevated intraocular pressure (IOP)—pressure within the eye—was once believed to be the cause of the optic nerve damage that occurs in glaucoma; however, it has become clear that although IOP is a risk factor for the disease, something more is involved. “We know that pressure causes damage, but we don’t know how,” Dr. Caprioli explains. “In addition, there are many glaucoma patients without elevated pressure who have optic nerve damage. It’s possible that the pressure is triggering damage or amplifying an effect that is already present.”

Several members of JSEI’s Glaucoma Division are attempting to discover what that effect might be—and in doing so, laying the foundation for the development of new treatment approaches.

Dr. Caprioli has been studying the causes of glaucoma with two colleagues in the division: Natik Piri, PhD, and Jacky M.K. Kwong, PhD. With major funding from the National Eye Institute, they are honing in on the cellular mechanisms that trigger the optic nerve damage in the disease. The study involves analyzing natural protective mechanisms of various types of cells and how they might be enhanced by different approaches to treatment.

“The degeneration of retinal ganglion cells—RGCs—is a hallmark of glaucoma,” explains Dr. Piri. “We are interested in defining the mechanisms leading to RGC death and developing strategies for preserving these cells against neurodegeneration.” The research team is currently analyzing the roles of three types of cells known in animal models of glaucoma to regulate the level of oxidative stress.

Pursuing Earlier, More Precise Diagnostic Approaches

It is estimated that of the more than 4 million people in the United States who have glaucoma, only half are aware they have it. That’s because, for the most common form, open-angle glaucoma, there are virtually no symptoms during the early stages—even as an individual’s sight is subtly deteriorating.

continued on page 2
Early detection is critical to slowing the disease for two major reasons, Dr. Caprioli explains. Because any damage to the vision caused by glaucoma is not reversible, diagnosing the disease at an early stage enables treatment to begin before too much visual loss has occurred. Moreover, Dr. Caprioli adds, "Once the disease gathers momentum and is more advanced, it's harder to stop. If we can identify patients and treat them early in the process, the likelihood is much greater that we can preserve vision in the long run."

Unfortunately, the current method for detecting glaucoma is not as effective as it could be, Dr. Caprioli notes. Routine glaucoma screening typically starts with two tests: an exam to measure IOP and the use of an ophthalmoscope to look at the shape and color of the optic nerve under magnification. If IOP in the eye falls outside the normal range or the optic nerve appears abnormal, further testing is done. "The problem is that there is a wide variety of what can be normal, and as early damage is occurring the nerve often appears normal in a routine examination," Dr. Caprioli says. "In addition, measuring pressure doesn't provide all of the answers because two patients might have the same level of pressure yet have very different levels of damage."

Faculty in the Glaucoma Division are investigating new ways to ensure that the disease is detected at an early stage. Anne L. Coleman, MD, PhD, examines the problem from an epidemiological perspective. With Dr. Caprioli and a third member of the Glaucoma Division, Simon K. Law, MD, PharmD, Dr. Coleman is conducting a study aiming to improve assessment of the optic nerve by discovering measurable signs—so-called "markers"—of early damage. They and other JSEI faculty, including a group headed by Kouros Nouri-Mahdavi, MD, MSc, are leading the way in the study of sophisticated imaging tools that can be used to detect early signs of glaucoma-related damage. JSEI Glaucoma Division faculty have also focused on developing methods to assess rates of damage based on both the appearance of the optic nerve and measurements of visual function. "Patients progress at different rates," says Dr. Caprioli. "An older patient whose glaucoma is progressing slowly might not need any treatment to have good vision the rest of his or her life, whereas a younger patient whose disease is progressing rapidly needs more aggressive treatment."

Toward Safer, More Effective Treatments

The issue of when and how to treat patients with high IOP and early glaucoma is both important and complex. JoAnn A. Giaconi, MD, is currently studying the extent to which practitioners of eye care follow published recommendations on the treatment of such patients. Dr. Giaconi is also the lead editor of a recently published textbook, Pearls of Glaucoma Management, which includes contributions from the world’s leading glaucoma experts. Drs. Caprioli, Coleman and Law from the Glaucoma Division are also editors of the book.

Drs. Giaconi and Law have a particular interest in surgical outcomes of various glaucoma procedures; Dr. Law also specializes in angle-closure glaucoma, a less common form of the disease than open-angle glaucoma, which often goes unnoticed and is a major cause of blindness, particularly in the Asian population.

Glaucamata specialists Drs. Simon Law and Anna Coleman review a patient’s chart in the operating room. Surgery is a treatment option when eye drops designed to control or lower intraocular pressure do not help.

Glaucamata treatment typically begins with eye drops designed to control or lower IOP. For patients who are not helped by drops, the alternative treatment is surgery. Surgical techniques are evolving. Outcomes have improved, though there is still a significant risk of complications.

"The problem is that treatments are focused on lowering eye pressure," Dr. Caprioli says. "That can make a difference for some patients, but it won’t completely solve the problem—and for some patients it might not be effective at all. In addition to developing safer ways to surgically lower eye pressure, we are looking to develop new methods that directly treat the optic nerves. This effort will benefit from advances in the other areas: By learning more about the causes of the optic nerve damage we are more likely to find better treatments, and by detecting the damage earlier, these treatments are more likely to be successful.”

Early detection is critical to slowing the disease. Because any damage to the vision caused by glaucoma is not reversible, diagnosing the disease at an early stage enables treatment to begin before too much visual loss has occurred.

JSEI Faculty Publish Book on Glaucoma Management

"Pearls of Glaucoma Management," a new book by glaucoma faculty at the Jules Stein Eye Institute, provides general ophthalmologists and glaucoma specialists with valuable information and evidence-based recommendations for clinical practice. Chief editor JoAnn A. Giaconi, MD, along with co-editors Joseph Caprioli, MD, Anne L. Coleman, MD, PhD, and Simon K. Law, MD, PharmD, asked questions of the world’s experts in glaucoma. The answers provided are based on the literature and the authors’ own experiences to explain how they prefer to manage patients and specific problems in glaucoma to improve treatment outcomes.

New Ophthalmology Fellows

We are pleased to introduce the following ophthalmologists entering clinical and international fellowships at the Jules Stein Eye Institute in the 2010–2011 academic year.

**Clinical Fellows**

Vicki Chan, MD  
glaucoma

Luke Delz, MD  
pediatric ophthalmology and strabismus

Christopher Goe, MD  
vitreoretinal diseases and surgery

Lev Grunstein, MD  
comprehensive ophthalmology

David Isaacs, MD  
orbital and ophthalmic plastic surgery

Partho S. Kalyani, MD  
uveitis and inflammatory eye diseases

Kristina Kurbanany, MD  
cornea-external ocular disease and refractive surgery

Jessica Larsen, MD  
pediatric ophthalmology and strabismus

Gina Lee, MD  
glaucoma

Adriana Ramirez, MD  
vitreoretinal diseases and surgery

Jay Riddle, MD  
glaucoma

Matthew Swanic, MD  
cornea-external ocular disease and refractive surgery

**International Fellows**

Tiago Arantes, MD  
uveitis research from Brazil

Hamad Elzarrug, MD  
cataract research from Iran

Valentina Franco-Cardenas, MD  
vitreoretinal diseases and surgery research from Mexico

Hamid Hosseini, MD  
glaucoma research from Iran

Haksu Kyung, MD  
glaucoma research from South Korea

Zhijian Li, MD, PhD  
glaucoma research from P.R. China

Sasam Moghini, MD  
glaucoma research from Iran

Kento Nishida, MD  
vitreoretinal diseases and surgery research from Japan

Konstantinos Papageorgiou, MD  
orbital and ophthalmic plastic surgery research from Greece

Arturo Ramirez-Medina, MD  
cornea-external ocular disease and refractive surgery research from Mexico

Geoffrey Wabulembo, MD  
pediatric ophthalmology and strabismus research from Uganda

Siamak Zarei-Ghanavati, MD  
cornea-external ocular disease and refractive surgery research from Iran

Imran Jurlazalizada, MD  
orbital and ophthalmic plastic surgery research from Azerbaijan

Residency Match

The process of selecting ophthalmology residents takes place in the fall of each year for residents who will be entering the Ophthalmology Residency Program a year and a half later. The four-month process includes the review of over 300 applications, the selection of about 50 applicants to be interviewed, and a final meeting where the applicants are ranked in order of preference. This rank order list is submitted to the nationwide San Francisco Match Service where it is compared to the participating medical students’ preferences. When both the student and ophthalmology program rank each other at the same level, a “match” has occurred and a new resident is then contracted to join the program.

In late January of last year, Residency Selection Committee Chairman Robert Alan Goldberg, MD, was informed of the results of the ophthalmology residency match for 2010. The following applicants, selected over a year ago, will serve as Jules Stein Eye Institute House Officers beginning July 1, 2010:

Wanda Hu, MD  
University of California, San Diego  
San Diego, CA

Crystal Hung, MD  
Weill Cornell Medical College  
New York, NY

Helen Lee, MD—EyeSTAR  
Loma Linda University  
Loma Linda, CA

Baochan Nguyen, MD  
University of Texas, Southwestern  
Dallas, TX

Ehsan Rahimi, MD  
Baylor College of Medicine  
Houston, TX

David Reed, MD  
Ohio State University College of Medicine  
Columbus, OH

Neeta Varshney, MD  
David Geffen School of Medicine at UCLA  
Los Angeles, CA

Sylvia Yoo, MD  
University of Alabama School of Medicine  
Birmingham, AL

12th Annual JSEI/SCCO Joint Optometric Symposium

Optometrists from across California traveled to Los Angeles to attend the 12th Annual Jules Stein Eye Institute and Southern California College of Optometry Joint Optometric Symposium focusing on Cornea and Retina. The course was held in the Institute’s RPB Auditorium on January 10, 2010. Course Chair Melissa W. Chun, OD, Associate Clinical Professor of Ophthalmology, organized the program that included lectures by featured speakers:

- Anthony J. Aldave, MD
- George W. Comer, OD
- Sophie X. Deng, MD, PhD
- Steven G. Ferrucci, OD
- Colin A. McCannel, MD
- Kevin M. Miller, MD
- Lawrence R. Stark, PhD
- Barry A. Weissman, OD, PhD

Comprehensive Ophthalmology Review Course

The Jules Stein Eye Institute and the Doheny Eye Institute teamed up to sponsor the fifth Comprehensive Ophthalmology Review course on March 11–14, 2010. Course co-directors David Sarraf, MD, Associate Clinical Professor of Ophthalmology at the Jules Stein Eye Institute, and John Irvine, MD, Professor of Ophthalmology at the Doheny Eye Institute, organized a program concentrating on the epidemiology, clinical presentation, diagnosis and management of ophthalmological disease. The collaborative effort to develop this intensive four-day review, serving ophthalmology training programs in Southern California, proved to be an overwhelming success.
Established in 1920 in Sylmar, California, as a tuberculosis sanatorium for Los Angeles County, Olive View Hospital has evolved into much more. In 1970, it became a teaching hospital affiliated with the UCLA School of Medicine and, shortly after, UCLA was incorporated in its name. Today, Olive View-UCLA Medical Center is a 377-bed facility, serving the health care needs of low income and indigent patients as well as the surrounding middle class community. It is also a training site for the UCLA Department of Ophthalmology’s residency program.

“Olive View-UCLA Medical Center is a sister institution to UCLA, and we focus on providing clinical and surgical care to patients as well as teaching to the UCLA ophthalmology resident doctors and retinal fellows. We have excellent faculty, superb nurses and staff, and appreciative patients. It’s the perfect balance for an ideal resident rotation,” says Uday Devgan, MD, Chief of Ophthalmology at Olive View-UCLA Medical Center and Associate Clinical Professor of Ophthalmology at the Jules Stein Eye Institute (JSEI).

Olive View-UCLA Medical Center is one of four medical centers affiliated with UCLA’s ophthalmology training program. Other affiliates are Harbor-UCLA Medical Center in Torrance, and two Veterans Affairs Greater Los Angeles Healthcare System facilities at West Los Angeles and Sepulveda.

Serving Local Needs

Located about 30 minutes away from UCLA, at the north end of the San Fernando Valley, Olive View-UCLA Medical Center has a diverse and multilingual patient population; approximately 50% of the patients are Hispanic with dozens of other cultures represented as well. As is true with most county facilities, many patients present with acute, untreated illnesses. There is a large diabetic population and many of them develop eye disease.

The Ophthalmology Service at Olive View-UCLA is extremely busy, managing 20,000 patient visits and more than 2,000 operating room surgeries and clinic procedures each year. Subsidiary care is provided in all areas of ophthalmology, including cataract, refractive, cornea, retina, orbital and ophthalmic plastics, uveitis, glaucoma, pediatrics and strabismus, and neuro-ophthalmology. Attending physicians and residents have access to an operating room that is dedicated for eye surgeries and equipped with new, state-of-the-art equipment.

Dr. Devgan elaborates, “We perform a large volume of cataract surgery. In fact, JSEI ophthalmology residents do the lion’s share of their total surgical volume during their rotation at Olive View. We also perform a lot of retina surgery, particularly for the diabetic population. And we are the primary receiving facility for severe eye trauma for the entire San Fernando Valley, so we see many emergency patients as well. It’s a busy place where the residents learn by doing, under the supervision of the attending staff.”

Training the Next Generation

The ophthalmology program at Olive View-UCLA integrates hands-on clinical experience, research, and teaching for a beneficial exchange between seasoned ophthalmologists, trainees, and the patient community. Dr. Devgan attributes the success of the program to the eye clinic’s nursing and administrative staff, the eagerness of the trainees, and the dedication of more than a dozen UCLA contracted and volunteer clinical faculty ophthalmologists, who provide care for patients at Olive View several hours each week and supervise residents and fellows.

“A superb team of attending surgeons is present in the clinic and operating room to supervise and mentor ophthalmology residents, during their rotation through our clinic. Four retina faculty members are available to work with our retina fellows. We also have electives for medical students and residents in other specialties who want hands-on experience with eye patients,” Dr. Devgan explains. With such a large volume of patients and surgeries, those pursuing clinical research can collect data and publish their results in a relatively short time.

Ophthalmology residents consider Olive View-UCLA Medical Center a favorite location for learning surgery—only one of seven rotations per year for the residents, it accounts for more than half of their overall surgical volume. In 2007, the ophthalmology residency program at Olive View was the first in the nation to offer basic Generation I presbyopia-correcting intraocular lenses for cataract surgery. The Ophthalmology Service continues to partner with manufacturers to donate these expensive lens implants to patients in need.

Posed for Growth

Dr. Devgan points out that managing the high volume of patients and surgeries in the Olive View-UCLA Medical Center eye clinic is a challenge. Fortunately, JSEI has addressed the situation by increasing the current number of three residents per rotation at Olive View to four by July 2010, and possibly, to five by July 2011. “Once we have more residents we will be able to schedule routine surgeries five days a week, providing more timely care for patients and more training opportunities for residents. Everyone benefits—the patients, the community, the medical center, and our trainees,” says Dr. Devgan.

Olive View-UCLA Medical Center
Ophthalmology Residents Speak

Residents spend eight weeks during each academic year at the Olive View-UCLA Medical Center as part of their UCLA ophthalmology residency training rotation. We asked residents about their Olive View experience.

Monica Ralli Khitri, MD
Third-Year Resident

“The Olive View rotation is one of the gems of the Jules Stein Eye Institute residency. To me, the best part is that, as residents, we have a good deal of autonomy in treating our patients while still receiving great support from the attending doctors. Also, because of the population that we serve, we see a tremendous variety of pathology and advanced stages of disease—conditions that most ophthalmologists don’t regularly encounter. Last, but certainly not least, the nursing staff at Olive View is exceptional and makes our clinic run smoothly and happily.”

R. Duncan Johnson, MD
Second-Year Resident

“The clinical experience at Olive View is exceptional. We see a large quantity of patients with a wide range of pathology, and receive quality teaching from well-known, experienced clinicians in all subspecialty areas. The weekly lectures on neuro-ophthalmology from Dr. Gene Pawlowski are very helpful. The surgical experience is also phenomenal. Having the opportunity to learn cataract surgery directly from world-renowned surgeons such as Dr. Uday Devgan is perhaps one of the best perks of training at Olive View and the Jules Stein Eye Institute.”

Joanne C. Wen, MD
First-Year Resident

“During our rotation at Olive View, we experience a broad range of subspecialty clinics including retina, cornea, oculoplastic, uveitis, and glaucoma. The clinics are staffed by excellent attending physicians, and I feel that I am receiving great teaching in the various subspecialty areas. The surgical experience is also outstanding. Even as junior residents, we are encouraged to do cases early on. Finally, the ancillary staff is extremely helpful. Everyone assists with the paperwork and loading patients into exam rooms, so the clinic runs efficiently despite the large number of patients that we see.”

Uday Devgan, MD, FACS, FRCS
Associate Clinical Professor of Ophthalmology
Chief of Ophthalmology, Olive View-UCLA Medical Center

Dr. Uday Devgan is passionate about his profession. A 2000 graduate of UCLA’s residency training program and a member of the clinical faculty at the Jules Stein Eye Institute, Dr. Devgan is extremely involved in the ophthalmic community, dividing his time between Devgan Eye Surgery, a private practice specializing in cataract, lens, and LASIK surgery; his academic responsibilities as chief of ophthalmology at Olive View-UCLA Medical Center; and numerous consulting endeavors. He is also an outstanding instructor of ophthalmology residents, honored twice with the Institute’s faculty teaching award.

Dr. Devgan took time from his busy schedule to answer questions about his professional and personal life.

What attracted you to the field of ophthalmology?
I love the technical aspects of microsurgery, the mathematics behind refractive and lens calculations, the advances in ophthalmic devices, and the seemingly magic ability to give the gift of sight to patients. I am so fortunate to have found ophthalmology because I don’t think that I could find this level of happiness in any other field.

What do you most enjoy about your career?
I take pride in all aspects of my work, from treating patients and performing surgery; to teaching residents and writing articles. However, the single biggest thrill is performing a technically challenging surgery to restore sharp vision to a patient, who was previously legally blind. I enjoy performing these vision correction surgeries in my private practice, with the UCLA resident surgeons, and with colleagues on mission trips to underserved countries.

What is your greatest challenge?
Balancing my private practice, academic work, consulting endeavors and my personal life is a challenge. As part of the Jules Stein Eye Institute’s clinical faculty, I spend time every week teaching oculary surgery techniques to ophthalmology residents, but I keep a private practice where I see my own patients and perform my own surgeries. With private practice locations in Los Angeles, Beverly Hills, and Newport Beach, I spend a lot of time driving! Life would be simpler if I focused on my private practice. But I’ve had great teachers throughout my life, particularly during my residency training at UCLA’s Jules Stein Eye Institute. Instructing the new generation of surgeons allows me to have an active role in shaping our profession and provides me with personal satisfaction, particularly when they go on to teach their own students.

What do you consider to be your most important professional contribution?
I have a passion for oculary surgery and I enjoy teaching other doctors. One surgeon can only do so many surgeries, but if you teach other surgeons, a far greater volume of surgery can be accomplished. I’ve instructed Jules Stein Eye Institute resident surgeons for the past 10 years and I’ve lectured and performed live surgical demonstrations at more than 200 meetings all over the world. To extend my teaching even further, I write dozens of teaching articles, book chapters, and clinical ophthalmology guides each year, and my teaching videos on the internet have already exceeded 100,000 views. My most important professional contribution is when a former resident goes on to become a successful surgeon and mentor, such as Dr. Richard Ou (JSEI Class of 2003), who is an award-winning teacher at Baylor University.

How do you like to spend your time when you’re not working?
I enjoy traveling to exotic countries, experiencing different cultures, making new friends, and dabbling in local customs and cuisine...and then I like coming back home to play video games with my kids, fly kites on the beach, and watch Sopranos reruns. I’ve been to 40 countries and hundreds of cities across the globe and still, my favorite spot on the globe is Southern California!”
Frances Lasker Brody, Philanthropist and Arts Patron,
Leaves Gift to Benefit JSEI

Frances Lasker Brody was known for many things: her patronage and advocacy of the arts, her sense of style, and her inquisitive mind. For the Jules Stein Eye Institute (JSEI), she will be remembered as a friend and supporter. Mrs. Brody has long been affiliated with UCLA, and she left an extraordinary gift to benefit JSEI upon her passing on November 12, 2009, at the age of 93. Mrs. Brody’s bequest will be used to support programs under the supervision of Joseph Caprioli, MD, David May II Professor of Ophthalmology and Chief of the Glaucoma Division, and Melissa Chun, OD, FAAO, Associate Clinical Professor of Ophthalmology and Director of the Vision Rehabilitation Center.

Frances Lasker was born in Chicago in 1916 to Flora and Albert Lasker, who was a titan of the advertising world. She studied political science, English, and history at Vassar College, where she graduated in 1937. During World War II, she met Sidney Brody while serving in a volunteer ambulance corps, and they were married in 1942. After the war, the couple moved to Los Angeles, where Mr. Brody had a successful career as a real estate developer.

The Brodys became influential members of the Los Angeles community as advocates of the arts, education, and health. As the population of Los Angeles boomed, Mr. and Mrs. Brody played an important role in the development of Los Angeles’s cultural institutions. They were founding benefactors of the Los Angeles County Museum of Art, which opened in 1965. Mrs. Brody helped found and served as president of the UCLA Art Council and spent time as a board member and overseer of numerous organizations dedicated to the arts. Under her leadership, important exhibitions were presented to the public. In 1961, she assisted in organizing a major Pablo Picasso exhibition at UCLA to celebrate his 80th birthday and, in 1966, a Henri Matisse retrospective, which was exhibited at the UCLA Art Galleries and the Boston Museum of Fine Arts.

In addition to her activities as a champion of the arts, Mrs. Brody was involved with education and health-related causes and was on the board of the American Red Cross Southern California Chapter. She was honored by many over her lifetime. Among her honors were the Boy Scouts of America Annual Award, the UCLA Distinguished Service Award, and the Los Angeles Times Woman of the Year. Mrs. Brody was also known for her impeccable style, for which she was named the Los Angeles Times Best Dressed for Her Life.

Mrs. Brody is survived by her son Christopher Brody and daughter Susan Lasker Brody, a daughter-in-law, two grandchildren, and a great-grandchild.

David and Laraine Gerber have supported JSEI for more than 35 years. In 1998, they endowed the Laraine and David Gerber Chair in Ophthalmology and, in 2007, made an additional pledge to convert the Gerber Chair to a permanent appointment chair. Their remarkable philanthropy will be used to create the Laraine and David Gerber Genetic Eye Research Center at JSEI. Mr. and Mrs. Gerber recognized the need to coordinate current and future genetic eye disease research and integrate it with gene therapy. Their investment will translate into improved treatments for and, it is hoped, the eventual cure of degenerative and hereditary eye diseases.

Bradley J. Mondino, MD, JSEI Director, reflected, “David’s achievements are innumerable. His contributions to the television industry and his extraordinary philanthropy will provide an enduring legacy. We, at the Jules Stein Eye Institute, are grateful to have been associated with him.”

Martin H. Webster, Attorney and President of The Karl Kirschgessner Foundation for 30 Years

Martin H. Webster passed away on December 9, 2009, at the age of 92. Through his affiliation with The Karl Kirschgessner Foundation, he supported JSEI for more than 30 years.

The Karl Kirschgessner Foundation was organized in 1979 with the mission to support institutions actively engaged in providing services in the field of vision, principally to underserved populations, such as the young, elderly, and disabled. Mr. Webster served as the Foundation’s president from 1980 until 2009 and continued to provide guidance as a board member until his death. With his leadership, the Foundation underwrote the operations of the UCLA Mobile Eye Clinic, created The Karl Kirschgessner Foundation Chair in Vision Science to further basic science investigations, and established The Karl Kirschgessner Foundation Ophthalmology Endowment Fund to foster promising areas of vision science research. In 1998, Mr. Webster oversaw the launch of the Foundation’s Scientific Advisory Board, whose mission is to identify promising but underfunded researchers as candidates for Foundation support.

In Memoriam

Bartly J. Mondino, MD, JSEI Director, noted, “Martin fulfilled his deeply held sense of duty to his profession and community through his service and philanthropic support. Countless patients received vision care and numerous research projects were conducted due to the work of Martin and The Karl Kirschgessner Foundation. For this dedication, JSEI will always be grateful, and Martin will be dearly missed.”

In Memoriam

Frances Lasker Brody with Founding Director of the Jules Stein Eye Institute, Dr. Bradley Straatsma

Bradley R. Straatsma, MD, JD, JSEI Founding Director, observed, “It was a delight to know Frances Brody. She was an elegant lady who contributed greatly to the arts, sciences, and humanity.”

Mrs. Brody is survived by her son Christopher Brody and daughter Susan Lasker Brody, a daughter-in-law, two grandchildren, and a great-grandchild.

JSEI is grateful for donors, such as Mrs. Brody, who remember the Institute in their will or trust. A bequest is the ultimate gift and provides an opportunity to create an enduring personal legacy that will benefit JSEI for years to come.

Charitable gifts made through your estate are a wonderful way to provide lasting support for UCLA’s Jules Stein Eye Institute. For more information on bequests, gifts of life insurance, charitable remainder or lead trusts, charitable gift annuities, and other gift planning strategies, please contact the Development Office at (310) 206-6035 or visit our website at www.jsei.org.
Dr. A. Eugene Washington Leads UCLA Health Sciences

A. Eugene Washington, MD, an internationally renowned clinical investigator and health policy scholar whose wide-ranging research has been instrumental in shaping national health policy and practice guidelines, has been appointed Dean of the David Geffen School of Medicine and Vice Chancellor of Health Sciences at UCLA, effective February 1, 2010.

Dr. Washington comes to UCLA after a long and distinguished career at the University of California, San Francisco, where he served since 2004 as Executive Vice Chancellor, Provost and Professor of Gynecology, Epidemiology and Health Policy. In his new role as Dean and Vice Chancellor, Dr. Washington intends to build on UCLAs success in educating the next generation of public health leaders, in advancing health care of the highest quality, and providing knowledge through vigorous investigation, delivering health care of the highest quality, and providing public service that improves the state of communities.

The Jules Stein Eye Institute welcomes Dr. Washington to the campus. We also take this opportunity to thank Gerald S. Levey, MD, for supporting our Institute and its programs during his 15 years of service as Dean and Vice Chancellor.

JSEI Faculty Recognized by Vision Research Association

The Association for Research in Vision and Ophthalmology (ARVO) has inducted several faculty from the Jules Stein Eye Institute at UCLA into its 2010 class of distinguished Fellows. Utilizing a point system for awarding a gold or silver level of fellowship, the prestigious honor recognizes its members for their accomplishments, leadership and contributions to the association.

2010 ARVO Gold Fellows: Joseph Horwitz, PhD, Oppenheimer Brothers Professor of Ophthalmology
2010 ARVO Silver Fellows: Suraj P. Bhat, PhD, Associate Professor of Ophthalmology, Anne L. Coleman, MD, PhD, Fran and Ray Stark Foundation Professor of Ophthalmology, Gabriel H. Travis, MD, Charles Kenneth Feldman Professor of Ophthalmology

These individuals join several other faculty members who were inducted into the inaugural class of Fellows in 2009.

Pioneering Ophthalmologist Receives Lifetime Achievement Award

Leonard Apt, MD, Professor of Ophthalmology Emeritus (active), was honored with the Castle Connolly National Physician of the Year Award for Lifetime Achievement, in an awards ceremony held in New York City on March, 22, 2010. The first physician to be board-certified in both pediatrics and ophthalmology, Dr. Apt came to UCLA in 1961, where he helped create pediatric ophthalmology as a new subspecialty in medicine. He is a founding member of UCLA’s Jules Stein Eye Institute and is recognized as the founder of academic pediatric ophthalmology. He has made sweeping contributions to medicine, including the “Apt test” to differentiate fetal from adult hemoglobin in newborns and the development, with Dr. Sherwin Isenberg, of an inexpensive antiseptic eye drop that has dramatically decreased the incidence of pediatric blindness in developing countries.

In Memoriam

Michael Danciger, PhD, research ophthalmologist at the Jules Stein Eye Institute (JSEI), passed away on January 4, 2010, after a 20-month long battle with cancer. Dr. Danciger was a member of JSEI for almost 25 years, beginning in the late 1980s. A brilliant and hard-working basic scientist, his work in the laboratory of Deborah B. Farber, PhD, Dphilc, greatly added to the study of retinal degeneration. In addition to his activities at JSEI, Dr. Danciger had his own laboratory in the Biology Department at Loyola Marymount University, where he served as chairman for many years. He is survived by his wife, Jan, his son, Jeffrey, and his daughter, Meryl.

James F. Sharp, MD, Associate Clinical Professor of Ophthalmology Emeritus, passed away on November 29, 2009. Dr. Sharp was appointed to the teaching faculty in 1971. He participated in the ophthalmology-training program at Harbor-UCLA Medical Center with distinction for a number of years. He was considered to be an extraordinary and dedicated instructor, who favorably influenced a large number of students, residents and fellows. He was granted a change to “Senior Status” in 1999.

Nancy S. Wang, MD, Assistant Clinical Professor of Ophthalmology, passed away on March 14, 2010. Dr. Wang completed her ophthalmology residency training at the Jules Stein Eye Institute, David Geffen School of Medicine at UCLA, in 1991. She then joined the Santa Monica Eye Medical Group. She opened her own ophthalmology practice in Santa Monica, California, in 2005. Dr. Wang was admired for her intelligence, wit and professionalism. She is survived by her daughter, Kyla Moss; parents, JC and Ellen Wang; sister, Lucy Wang; brother, Ken Wang; and her nieces and nephews.
JSEI Affiliates Celebrate the Anniversary of the Preschool Vision Screening Program

JSEI Affiliates President Cherie Hubbell hosted the Jules Stein Eye Institute volunteer organization’s 10th annual holiday luncheon on Monday, December 7, 2009, at The Regency Club in Westwood. The event honored JSEI Affiliates program volunteers, advisory board members, and special guests.

It also celebrated an important Affiliates milestone—the 10th anniversary of its flagship Preschool Vision Screening program, which provides free screenings to preschoolers throughout Los Angeles. “This program exists today because of two very important individuals, Mrs. Glorya Kaufman and Dr. Leonard Apt,” noted Institute Director, Bartly J. Mondino, MD. “Glorya’s initiative, enthusiasm, and financial support, combined with Leonard’s expertise, leadership, and guidance created an essential service for children in our community,” said Dr. Mondino. He also thanked Gail and Jerry Oppenheimer and the Jules and Doris Stein UCLA Support Group for underwriting this and other important Affiliates programs.

Ms. Hubbell recognized Affiliates volunteers, who have screened more than 7,500 young children for refractive errors and eye muscle problems since the program’s inception on March 17, 1999.

If you would like information about joining or volunteering with the Jules Stein Eye Institute Affiliates, please contact us at (310) 825-4148, affiliates@jsei.ucla.edu, or www.jseiaffiliates.com.

Important JSEI Phone Numbers

<table>
<thead>
<tr>
<th>Patient Care</th>
<th>Fund Raising</th>
</tr>
</thead>
<tbody>
<tr>
<td>JSEI Ophthalmology Referral Service</td>
<td>JSEI Development Office</td>
</tr>
<tr>
<td>(310) 825-5000</td>
<td>(310) 206-6035</td>
</tr>
<tr>
<td>JSEI Ophthalmology Emergency Service</td>
<td>JSEI Affiliates</td>
</tr>
<tr>
<td>(310) 825-3090</td>
<td>(310) 825-4148</td>
</tr>
<tr>
<td>after hours</td>
<td></td>
</tr>
<tr>
<td>(310) 825-2111</td>
<td></td>
</tr>
</tbody>
</table>

JSEI Affiliates President Cherie Hubbell (right) celebrates the season with Affiliates Advisory Board member Linda Valliant (left) and Gail Oppenheimer.