

EYE

JULES STEIN EYE INSTITUTE UCLA

Empowering Patients with Impaired Vision

The UCLA Vision Rehabilitation Center occupies a somewhat unique position at the Jules Stein Eye Institute. Unlike other specialties that offer medical and surgical options to address conditions and diseases that threaten sight, vision rehabilitation empowers patients who have exhausted these options to take control of their lives and function independently despite their visual impairment.

“Jules Stein Eye Institute has earned world-wide recognition for leading advances to preserve vision and prevent blindness. However, sometimes nothing further medically or surgically can be done. For such patients, vision rehabilitation can greatly improve quality of life, by helping them to better utilize the vision they *do* have,” says **Melissa W. Chun, OD**, director of the UCLA Vision Rehabilitation Center.

What is Low Vision?

“Low vision” is a term used among eye care professionals to mean partial sight or sight that is not fully correctable with glasses, contact lenses, pharmaceuticals or surgery. It includes moderate vision impairment (best-corrected vision 20/70 or less in the better eye). It also includes legal blindness (20/200 or worse and/or certain visual field restrictions).

Dr. Chun explains, “We tend to look at low vision in terms of acuity levels. But, for the patient, that may not mean much. In practical terms, when you use your best-corrected eyeglasses or contact lenses and you’ve tried all of the medical treatments and surgical procedures but you still have difficulty performing everyday activities, that’s low vision.”

Living with Low Vision

Because vision loss not only affects what one can and cannot see, but every aspect of one’s life along with the ability to remain independent, it can be very debilitating. People with low vision may not be able to drive, read or view a television or computer screen, causing them to feel shut off from the world. They may lose their jobs or not be able to shop for food, making them depend on others for basic necessities. For some, vision loss may be traumatic, leading to frustration and depression.

Dr. Chun notes that it is essential to recognize all the ways that vision loss affects lives, and encourages patients to address them by seeking rehabilitation services. “Vision rehabilitation is so important for patients with low vision because it addresses not only their visual needs, enhancing remaining sight, but also provides emotional support and living strategies to move them from dependence to independence, diminishing the risk of depression,” she says.

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Dr. Melissa Chun
Director
Vision Rehabilitation Center

Patient Profile

Leo Williams “A New Lease on Life”

Leo Williams was a civil engineer in the U.S. Navy when he began having serious difficulty reading plans and charts. He went to sick call thinking that he needed an adjustment in his contact lens prescription. The medical staff quickly realized that a stronger prescription would not correct his condition. Mr. Williams was 28 years old, and he had macular degeneration.

During the years following his honorable discharge from the Navy, Mr. Williams got along in the real world as best he could. PowerPoint presentations at work were a particular challenge. He couldn’t read the slides, so he would plan way in advance and memorize them. “It’s OK when you’re doing a dozen slides,” he says, “but when you’re doing 30 or 40 slides, that’s hard!”

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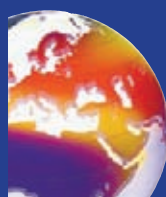
These hands-free magnifying glasses are useful for distance activities. The optical device provides 2.1x magnification; a wide field of view and focus can be adjusted for each eye.

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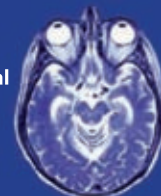
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Mr. Leo Williams, a patient of the UCLA Vision Rehabilitation Center, wearing his vision-enhancing “scopes”

One day he heard about a clinical trial at the Jules Stein Eye Institute for people with macular degeneration. Although not a candidate for the trial, he was directed to the UCLA Vision Rehabilitation Center for help. Mr. Williams comments, “It was the first time that someone said they could help me. It was fantastic, because up to that point, I had just thought that it was hopeless—I mean, I had learned to adjust and to work with my limited vision, but I never thought that I’d be able to deal with it from the standpoint that I do now.”

When Mr. Williams saw the full spectrum of apparatus available for people with impaired vision at the Center, he felt “like a kid in a candy shop.” The vision rehabilitation team recommended that he try a number of devices, including a small, light-weight telescope that hooks on to eyeglasses. He remembers the day that he first tried it. “My vision went from 20/100 corrected without the scope to 20/25 with it. It was like night and day. I went from barely seeing the large E on the eye chart to speed reading every letter in every row. I shouted ‘This is it!’ I just couldn’t believe that I would ever be able to do this.”

Today, Mr. Williams takes full advantage of the technology and services available to assist people who have low vision. He wears the scopes pretty much all the time, took driving classes for the visually impaired and, in his office, uses special computer software to enlarge print and read to him.

Mr. Williams feels that vision rehabilitation has given him a new lease on life and is surprised not to see more people with impaired vision wearing vision-enhancing devices. “I understand that many have vanity issues about wearing these (pointing to his scopes), but it’s a shame that people choose to suffer with so many things on the market that work. Dr. Chun and her team are always on top of the changes in this field—that’s one of the things that sets this place apart.”

Empowering Patients

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Rehabilitating Vision, Giving Back Lives

The UCLA Vision Rehabilitation Center has been working since its formation in 1996 to help visually impaired people of all ages to lead independent and productive lives. The Center’s team of optometrists, low vision specialists and volunteers offers a comprehensive program that includes evaluation and consultation, training with optical and non-optical devices, counseling for the patient and family members, and referral to outside agencies for occupational therapy, driver training or other services when necessary.

“Evaluating the state of the patient’s vision and identifying specific visual and activity goals is the first step,” explains Dr. Chun. “What does the patient need or like to do that they now have difficulties doing? We must know what patients want to accomplish, so that we can guide them to devices and provide instruction to be able to perform those activities.”

Educating and training patients to use their remaining sight more effectively are essential parts of the Center’s program. Personalized rehabilitation plans may include practical home modifications such as positioning lighting for enhanced illumination and labeling food containers for easier identification, as well as recommendations for non-optical adaptive aids such as large-face printed materials, audio tapes and signature guides for writing checks. Low vision specialists may also prescribe and train patients to use appropriate optical aids such as magnifiers, telescopes and video magnifiers to facilitate reading and writing.

Dr. Chun is enthusiastic about the various aids now available to assist patients with low vision. “With the development of new technology, low vision devices that have come to market in the last couple of years are lighter, more comfortable, more cosmetically acceptable and more portable. For example, there are now small battery-operated video magnifiers that people with impaired vision can take to the restaurant to assist with reading menus or to the market to read labels. Developing skill and ease in using these devices can truly change a person’s life,” she observes.

“Evaluating the state of the patient’s vision and identifying specific visual and activity goals is the first step. What does the patient need or like to do that they now have difficulties doing? We must know what patients want to accomplish, so that we can guide them to devices and provide instruction to be able to perform those activities.”

Continuing the Quest

Because vision rehabilitation is labor and equipment intensive and not fully covered by insurance, funding the Vision Rehabilitation Center’s innovative programs can be challenging admits Dr. Chun. A matching gift campaign by the JSEI Affiliates, the Institute’s volunteer support group, recently enabled the Center to update low-vision aids in its popular lending library, and two magnanimous grants, one from the Cynthia and Edward Lasker Fund through the California Community Foundation and the other anonymous, made it possible to commence a promising new study to evaluate internet access on the quality of life of patients with visual impairment and macular degeneration. “We’re going to teach elderly patients with low vision resulting from age-related macular degeneration, how to use email. Computers are such an important part of our lives and most of my patients have been left behind in that area,” says Dr. Chun.

Training patients to use other parts of the retina for vision—parts that are not necessarily designed for detailed viewing but are still functional, and determining the best reading training techniques for the visually impaired are other areas that the Center hopes to explore in the near future. “We’re always looking for new avenues to empower our patients,” Dr. Chun states.



The UCLA Vision Rehabilitation Center team reviews new optical devices for the visually impaired. (Front row, from left) Anthony Chinn, low vision trainer; Dr. Jennie Kageyama, optometrist; Dr. Melissa Chun, optometrist and VRC director; Roxy Tolmoyan, administrative assistant; and Larry Miller, low vision volunteer; (back row, from left) Anna May Yang, Tarevik Abaryan and Connie Lam, administrative staff; (not shown) Andy Mu, low vision volunteer; and Joey Hsia, administrative staff member

JSEI Faculty and Alumni Address World Blindness

Surgical Eye Expeditions (SEE) International, Inc.

Harry S. Brown, MD, FACS, founder of Surgical Eye Expeditions (SEE) International, Inc. became interested in international ophthalmology during his residency training at Jules Stein Eye Institute (JSEI) in the early 1970s. Setting out with his family—wife, four children and mother—on a fellowship year to work with ophthalmologists in their clinics around the world, he experienced first hand ophthalmology in second- and third-world countries. His work with eye surgeons in Africa and Asia gave him a good idea about the state of ophthalmic care in a number of countries and inspired him to create an organization that would link volunteer ophthalmologists in the United States with disadvantaged blind patients in developing countries. “It became apparent to me that the delivery of sight-restoring eye surgery would never be able to cope with the tremendous number of blind patients. This led me to found SEE International, an international health agency of eye surgeons,” says Dr. Brown.

George B. Primbs, MD, another JSEI alumnus and co-founder of SEE International was the attending physician at Jules Stein Eye Institute during Dr. Brown’s residency. He, along with other Santa Barbara ophthalmologists, supported Dr. Brown’s vision to start an organization that would attack the problem of correctible world blindness. Dr. Primbs observes, “There are currently 40 million in the world with blindness from cataract and about the same or more when SEE was started in 1974. In those 33 years, SEE’s missions abroad have restored vision to 330,000 victims of correctible blindness.”

SEE International accomplishes its vital work by arranging for ophthalmologists to perform sight-restoring surgery on patients in medically-underserved areas. SEE organizes the clinics and provides most of the equipment and supplies. Affiliate ophthalmologists donate their time and pay for their own expenses. Today, there are over 500 eye surgeons from 75 countries associated with the organization.



Armenian Eye Care Project (AECF)

Volunteer work is extremely important to **John A. Hovanesian, MD**. Since 2003 he has raised hundreds of thousands of dollars and served as Vice President of Program for the Armenian Eye Care Project (AECF), a California nonprofit organization providing medical training and supplies to the developing nation of Armenia. Dr. Hovanesian’s interest in this humanitarian mission began when he was a resident in 1996, and visited the Republican Eye Hospital in Yerevan, the capital city of Armenia. “I found an incredible pool of talent among their ophthalmologists. What they lacked were basic resources and modern ophthalmic training,” he says. During his two-year fellowship at Jules Stein Eye Institute, Dr. Hovanesian joined a group of ophthalmologists that later became known as AECF, and since that time he has traveled to Armenia twice yearly to teach and perform surgery.

AECF now fulfills its mission through a comprehensive program of patient care, medical training and public education. To date, the organization has screened over 135,600 of Armenia’s poorest people, performed 6,200 major surgeries and laser procedures, and provided 3,500 pairs of eye glasses. In 2003, the group launched a fully functional mobile eye hospital that travels country-wide screening and delivering eye care to the medically underserved in outlying areas of the nation. Three years ago the U.S. Agency for International Development (USAID) recognized AECF’s effectiveness, by awarding the Project a three-year grant for public and medical education in Armenia.

Commenting about the personal rewards of his involvement with AECF, Dr. Hovanesian says, “It’s incredibly rewarding to see how much patients in Armenia appreciate our help. I’ll never forget Aram, a 47 year old man who was blinded in both eyes by shrapnel only days after his wedding. Fourteen years later I performed a corneal transplant. He had never seen the faces of his three children until he removed his eye patch the day after surgery. ‘Thank God! Thank God! Thank God!’ he could not stop saying. Those of us who have been to Armenia have countless stories like this.”



SEE International, Inc., addresses the problem of correctible world blindness by providing supplies and sending volunteer eye doctors and their staff teams to medically-underserved countries around the world. SEE co-founder Dr. Harry Brown with a SEE patient (middle photo).

Harry S. Brown, MD, FACS, is a retired ophthalmologist currently residing in Santa Barbara, California, where he established a private practice in 1971. In addition to founding SEE International, he was Medical Director at Santa Barbara Cottage Hospital EYE Center and Scientific Director at the EYE Injury Registry of California. He was both a resident and fellow at Jules Stein Eye Institute from 1966–1971.

John A. Hovanesian, MD, serves on the clinical faculty of Jules Stein Eye Institute and is in private practice in Laguna Hills, California, specializing in refractive and lens implant surgery, cornea and external disease. He completed two years of fellowship training (1997–1999) in cornea, external disease and refractive surgery at the Institute before entering private practice.

George B. Primbs, MD, retired from ophthalmology practice in 1995. He is Chairman of the Board of Directors and co-founding member of SEE International. He served on the clinical faculty of Jules Stein Eye Institute, and participated in research programs at Miravast, UCLA, UCSB and the Sansum Diabetic Institute. He was a resident at the Institute from 1956–1957 and 1959–1961.

(Top) Dr. John Hovanesian and UCLA ophthalmologist Dr. Anthony Aldave, who performed the first artificial cornea procedure in Armenia in 2005, examine a patient following implantation of an artificial cornea; (middle) patient entering the Armenian Eye Care Project’s mobile eye hospital; (bottom) Dr. Hovanesian examines a young girl in the AECF clinic.

HIV/AIDS-related eye disease

The Elizabeth Taylor AIDS Foundation

The Elizabeth Taylor AIDS Foundation recently made a \$100,000 contribution to support the Jules Stein Eye Institute's Herb Ritts, Jr. Memorial Vision Fund. Established in 2004 by Herb's family and friends, this fund provides moneys to support HIV/AIDS-related vision care, research and education at UCLA.

Eye problems affect the majority of people with HIV/AIDS at some point during their illness, and problems such as cytomegalovirus (CMV) retinitis, can result in blindness. In 1981, **Gary N. Holland, MD**, Vernon O. Underwood Family Professor of Ophthalmology and Director of the UCLA Ocular Inflammatory Disease Center, was the first to describe the ophthalmic manifestations of AIDS, including CMV retinitis. Ongoing investigations and patient care activities at the Jules Stein Eye Institute (JSEI) have created one of the premier centers of expertise dealing with AIDS-related ophthalmic disease in the country.

Generous past support from The Elizabeth Taylor AIDS Foundation has allowed Dr. Holland to expand his research, ultimately providing new insights into CMV retinitis and new therapies for patients. The Fund to which she contributed her most recent gift honors the late **Herb Ritts**. As a world-renowned photographer, Herb was keenly aware of the importance of vision and the devastating effect of vision loss on people with HIV/AIDS. He began working with Dr. Holland in the late 1990s to raise awareness about HIV/AIDS-related eye disease and the need for continued support of patient care and research in this area. **Dame Elizabeth Taylor** was also involved in these efforts. She and Herb co-hosted an event organized by Dr. Holland in 2000 to highlight the importance of identifying and treating HIV-related eye disease in the Los Angeles community.

After Herb's untimely death in 2002, a fund was established in his honor at JSEI to help people with CMV retinitis and other eye conditions associated with HIV/AIDS. Friends and family gave generously to build this important resource. The recent Lead Gift from The Elizabeth Taylor AIDS Foundation has allowed the Herb Ritts, Jr. Memorial Vision Fund to be converted to a permanent endowment. The ultimate goal is to build the endowment's principal to \$1,000,000, enabling a substantial amount to be utilized annually, in perpetuity, for patient care, research and educational programs related to HIV/AIDS and vision.

JSEI is grateful to Dame Elizabeth Taylor and the friends and family of Herb Ritts for their meaningful support of HIV/AIDS related eye disease programs. Additional contributions should be directed to the JSEI Development Office, (310) 206-9701.

IRA Roll Over

New Law Brings New Opportunities

Between now and the end of 2007, individuals who are 70 ½ years of age and older and have either a traditional IRA or Roth IRA will be able to contribute at least part of their IRA to charity without paying the income tax.

Individuals who qualify can donate up to \$ 100,000 per year, regardless of income. There will be no income tax charitable deduction, but neither does one pay income tax on the withdrawal.

For information about ways to take advantage of this opportunity and support Jules Stein Eye Institute programs, please call the UCLA Office of Gift Planning, (800) 737-UCLA, or the JSEI Development Office, (310) 206-9701.



The Harold and Pauline Price Chair in Ophthalmology

Michael B. Gorin, MD, PhD, Professor of Ophthalmology at the Jules Stein Eye Institute, has been appointed as the Harold and Pauline Price Chair in Ophthalmology. Dr. Gorin joined the Jules Stein Eye Institute (JSEI) faculty in September 2006 and will divide his time among patient care within the Retina Division, research into the genetics of inherited eye disease and medical student education.

The Price Chair was established in 2000 with a generous gift by The Louis and Harold Price Foundation. The late **Pauline** and **Harold Price** were loyal supporters of JSEI for more than 40 years. Through the Price Foundation, Mr. and Mrs. Price also created the Price Retina Research Fund and the Harold and Pauline Price Fellowship. The Price Foundation made an additional pledge in 2004 to convert the Price Chair, originally established as a five-year term chair, to a permanent chair. Dr.

Gorin will continue to be the Harold and Pauline Price Professor of Ophthalmology while on faculty at JSEI.

The Price family's dedication to the vision sciences at UCLA continues with daughter **Linda Vitti-Herbst** and granddaughters, **Lisa Beshkov, PhD**, and **Bonnie Vitti**. **Bartly J. Mondino, MD**, JSEI's Director, stated, "Harold and Pauline would be so proud that their long-standing connection with Jules Stein Eye Institute now spans three generations."

On February 22, 2007, which would have been Harold Price's 99th birthday, members of The Louis and Harold Price Foundation joined faculty from the Retina Division to congratulate Dr. Gorin on this highly prestigious position. Dr. Mondino presented Dr. Gorin and the Price Foundation with the David Geffen School of Medicine at UCLA recognition "chairs" (created by The Franklin Mint).



(Left to right) Timothy Jones, President of The Louis and Harold Price Foundation, Bonnie Vitti, Dr. Michael Gorin and Dr. Lisa Beshkov. Both Bonnie and Lisa are the granddaughters of Pauline and Harold Price and serve on the Price Foundation Board.

Marc O. Yoshizumi, MD, Retires



Dr. Marc Yoshizumi

Marc O. Yoshizumi, MD, Professor of Ophthalmology, Director of the UCLA Eye Trauma and Emergency Center and Director of Jules Stein Eye Institute's Medical Student Education in Ophthalmology Program, has retired after 29 years of dedicated service to UCLA.

Born in Honolulu, Hawaii, Dr. Yoshizumi received his medical degree at the Yale University School of Medicine in 1970 and completed an internship in Medicine at the Johns Hopkins University and Hospital in Baltimore, Maryland. He was awarded the Knight Memorial Fellowship in Nervous and Mental Diseases at Oxford University, England, and a fellowship in neurology and neuropathology in the Department of Neurology at the University of California, San Francisco. He completed his residency in ophthalmology at the Harvard Medical School and Massachusetts Eye & Ear Infirmary in Boston, Massachusetts, staying on to pursue a fellowship in vitreoretinal diseases and surgery under the mentorship of **Charles Schepens, MD**, "the father of modern retina surgery."

Dr. Yoshizumi joined the Jules Stein Eye Institute (JSEI) faculty in 1978, and throughout his distinguished career, served on numerous Department and campus committees including the UCLA Academic Senate (1986–2007). Since 1982, Dr. Yoshizumi has been Director of the

UCLA Eye Trauma Unit. He became Chairman of the Peer Review and Quality Assessment Committee of the UCLA Department of Ophthalmology in 1990 and he directed JSEI's Medical Student Education in Ophthalmology program since 1991.

Bartly J. Mondino, MD, JSEI Director, stated that "Teaching medical students the fundamentals of ophthalmology has been a part of our mission since ophthalmology was established as a division in UCLA's medical school. Under Marc's leadership, this commitment has been fulfilled, and he has instructed and mentored thousands of medical students."

Dr. Yoshizumi's research efforts have focused on retinal detachment, vitreoretinal surgery, diabetic retinopathy, macular degeneration, endophthalmitis and eye trauma. He authored numerous publications and lectured and participated in courses throughout the United States and around the world.

Friends, faculty, students and patients paid tribute to Dr. Yoshizumi at a retirement dinner in The Adam Room on February 15, 2007, and thanked him for his loyal service and lasting contributions to ophthalmology and medical student education at UCLA. Dr. Yoshizumi will be retiring to his home in Honolulu, Hawaii. (See retirement reception photos on last page.)

Gerry Cullen, MD, Retires from the UCLA Mobile Eye Clinic

Gerry Cullen, MD, joined the UCLA Mobile Eye Clinic (MEC) staff in February 1985. At that time he had no idea that his career with the MEC would span 22 years and that he would provide 75,000 free eye examinations in underserved communities to patients ranging in age from three to 103 years old.

Dr. Cullen found great enjoyment in helping schoolchildren receive ophthalmologic care. "We've taken children who seemed to be slow learners and affected their entire being by correcting their vision, which is often their only impediment to getting a good start in school. We'd get letters and drawings from grateful parents and children, and it really helped me remember why I'd gotten into this field in the first place and why I'd stayed at it."

He sometimes found the MEC adventurous beyond words: "One day a patient sat in my chair for an examination with an exposed gun in his belt. Another day, there was a mini-riot outside my door on San Julian Street. It was never dull."

Above all, Dr. Cullen found the MEC to be soul-satisfying work. "The way I see it, on Saturday afternoons in the fall, UCLA, represented by its football team, is marching down the Rose Bowl in those magnificent blue uniforms with the crowd roaring. That's one part of UCLA. But at the same time, with less fanfare, UCLA is down on San Julian Street, providing eye care to the downtrodden. That's what makes for a well-rounded university."

Originally from Canada, Dr. Cullen completed his ophthalmology residency at the University of British Columbia and a fellowship at Wills Eye Hospital in Philadelphia. Before joining the UCLA MEC, he was in private practice and was an adjunct assistant professor at UC Irvine.

Dr. Cullen is grateful for his years with the MEC and is looking forward to this new phase of his life. He and his wife of 40 years, Philomena, are planning to travel, and he'll spend much more time with the pride of his life, his two grandchildren, McKenna and Michael.



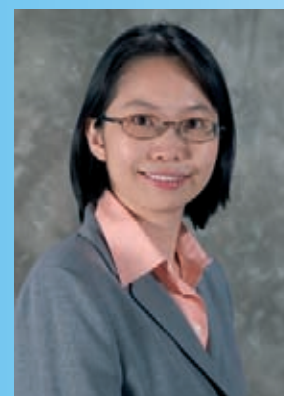
Dr. Gerry Cullen

EYELINES

UCLA Department of Ophthalmology Association Research Award

We are pleased to announce the recipients of the annual UCLA Department of Ophthalmology Association Research Award, recently renamed the **Robert E. Christensen, MD, Research Award of the Department of Ophthalmology Association** in honor of the late founding Chief of the Glaucoma Division, **Dr. Robert Christensen**. The grant, made possible by funding from annual UCLA Department of Ophthalmology Association dues, is awarded each year to an outstanding JSEI resident or fellow to help underwrite research expenses.

2006–2007 Award Winners



Lucy Q. Shen, MD

Dietary Vitamin Intake and Open Angle Glaucoma: A Case Control Study



Alex Yuan, MD, PhD

Gene Therapy Using Embryonic Stem Cells



UCLA vision scientist Wayne Hubbell enjoys the excitement of exploring uncharted territory.

Wayne L. Hubbell, PhD

Jules Stein Professor of Ophthalmology
Professor of Chemistry and Biochemistry
Associate Director of the Jules Stein Eye Institute
Co-Chief of the Vision Science Division

On May 3, 2005, Jules Stein Professor of Ophthalmology and Distinguished Professor of Chemistry and Biochemistry **Wayne L. Hubbell, PhD**, was elected into the National Academy of Sciences (NAS), one of the highest honors that can be awarded to a U.S. scientist or engineer. Dr. Hubbell, who joined the UCLA faculty in 1983, is one of a very small number of outstanding physical scientists whose research focus is the visual system. His laboratory's particular focus is on understanding the molecular details of the chemical processes in the eye that lead to vision. He and his wife Cherie, who serves as his laboratory manager at the Jules Stein Eye Institute, are avid cyclists, owning 13 bicycles between them. He is also keen on exploring and photographing the desert, and has extensively modified a four-wheel drive vehicle to indulge this passion.

We asked Dr. Hubbell to tell us about his work, accomplishments and what he still hopes to achieve.

What do you enjoy most about your work?

I guess I most enjoy the excitement of exploring uncharted territory and the chance of discovering something that's completely new, something that nobody expected. Monumental discoveries don't happen very often, but smaller ones that appear more regularly keep you hooked on science.

What is the most challenging aspect of your work?

Doing science is like having a conversation with nature. You need to learn how to ask the correct questions. The way the questions are asked is through experiments. Probably the most challenging part of my work is to get the questions right, that is, to design proper experiments so that you get a clean answer and can interpret the results.

What do you think has been your most important contribution to date?

Exploring an unknown territory in science often requires new technology to make progress. One contribution that has really pleased me is the development of a technology, site-directed spin labeling (SDSL), which utilizes electron paramagnetic resonance spectroscopy to examine the behavior of protein molecules. With this new tool, we discovered unanticipated mechanisms that underlie the detection of light by the retina. These include the nature of the "molecular switch" that activates the photoreceptor protein rhodopsin upon receiving a light signal, and the process by which the signal is passed from activated rhodopsin to another protein called transducin. This molecular relay ultimately gives rise to an electrical signal that is sent to the brain and processed to produce a perceived image. As it turns out, this basic scheme is common to the detection of many kinds of signals in biology (smell, taste, hormonal), and the molecular details discovered first in vision may turn out to be a paradigm for signal detection in general.

What else would you like to achieve professionally?

As we complete the physiological and biochemical description of the visual system, the research frontier is inevitably pushed to the molecular level. It's here that we will learn how proteins work and what causes malfunctions. Proteins are basically mechanical nanomachines that move to function. Our goal is to develop the SDSL technology to a point where we can use it to watch proteins in action during function and determine which parts are moving and why. We have a rudimentary capability in this area, as illustrated by the above examples, but there is a lot yet to be done. Basically, we hope to provide a dynamic image of protein molecules of any degree of complexity, and I believe that it's possible.

JSEI/DEI Collaborative Efforts

The UCLA Bruins and USC Trojans may be cross town rivals, but the ophthalmologists at Jules Stein Eye Institute (JSEI) and Doheny Eye Institute (DEI) have teamed up to sponsor two highly successful educational programs.

The Institutes joined forces for the Second Annual Comprehensive Ophthalmology Review course on March 2-4, 2007. The course co-directors, **David Sarraf, MD**, Assistant Clinical Professor of Ophthalmology at Jules Stein Eye Institute, and **John A. Irvine, MD**, Professor of Ophthalmology at Doheny Eye Institute, organized a program concentrating on the epidemiology, clinical presentation, diagnosis and management of ophthalmic disease. The collaborative effort to develop this intensive 3-day review serving ophthalmology training programs on the West Coast proved to be an overwhelming success filling JSEI's RPB Auditorium to capacity.

The inaugural event provided a dynamic platform for discussion, education and scientific collaboration among members of the retina community.

Steven D. Schwartz, MD, Chief of the Retina Division at Jules Stein Eye Institute and Dr. Sarraf collaborated with **Dean Elliott, MD**, Director of Clinical Affairs and **Amani A. Fawzi, MD**, Assistant Professor at Doheny Retina Institute to produce the Los Angeles Imaging Conference for Retina Specialists (LAICRS). This new and exciting forum provided an opportunity for Los Angeles-area retina specialists to share interesting cases and clinical experiences. The inaugural event was held on January 23, 2007, at Doheny Vision Research Center and provided a dynamic platform for discussion, education and scientific collaboration among members of the retina community.



Second Annual Comprehensive Ophthalmology Review course co-directors, Drs. David Sarraf (left) and John Irvine

Residency Match

In late January of last year, Residency Selection Chairman **Robert Alan Goldberg, MD**, was informed of the results of the ophthalmology residency "match" for 2007. The following applicants will serve as Jules Stein Eye Institute House Officers beginning July 1, 2007:

Vicki K. Chan, MD
Johns Hopkins University
Baltimore, Maryland

Gina L. Yoo, MD
University of California,
Los Angeles
Los Angeles, California

Heather Chang, MD
University of California,
San Diego
San Diego, California

Le Yu, MD
University of Michigan
Ann Arbor, Michigan

Seongmu Lee, MD
University of California,
Los Angeles
Los Angeles, California

Alex Yuan, MD, PhD
Washington University
in St. Louis
St. Louis, Missouri

Monica Ralli, MD
University of California,
Los Angeles
Los Angeles, California



Glaucoma Summit IV

Yosemite National Park was the setting for the Fourth Biennial Glaucoma Summit on February 8–11, 2007. The meeting brought together an elite group of distinguished scientists and clinicians from campuses throughout the University of California system, as well as the Oregon Health Sciences University, University of North Carolina, University of Washington and Dalhousie University in Halifax, Canada.



Dr. Joseph Caprioli and his wife Angela (center) share a social moment at the Glaucoma Summit with Dr. Claude Burgoyne (right) and his wife Vicki Smith (left). Dr. Burgoyne is director of the Optic Nerve Head Biomechanical Laboratory at Devers Eye Institute, Portland, Oregon.

Joseph Caprioli, MD, Chief of the Glaucoma Division at the Jules Stein Eye Institute was the course director for this year's event, which promoted animated and extensive discussion on contemporary issues and controversies related to glaucoma. Topics included novel methods for early detection, results of recent clinical trials, emerging surgical techniques and new avenues for treatment such as neuroprotection. Fellows in training also attended, affording them an opportunity to be involved in high-level discussions among distinguished leaders in the field.

The success of the meeting has attendees looking forward to the Fifth Biannual Glaucoma Summit in February 2009. Corporate support was provided by Alcon Laboratories.

UCLA Neurosciences Clinical Conference

Members from the Departments of Neurology, Neurosurgery and Ophthalmology filled the RPB Auditorium on March 21, 2007, for the UCLA Neurosciences Clinical Conference.

Organized by **Anthony C. Arnold, MD**, Chief of the Neuro-Ophthalmology Division, the conference featured **Arthur L. Day, MD**, Director of the Cerebrovascular Center and Division of Cerebrovascular Surgery in the Department of Neurosurgery at Brigham & Womens Hospital in Boston, MA, who presented the keynote lecture "*Parasellar Aneurysms: Neuro-Ophthalmologic Presentations and Response to Therapy.*"

A member from each participating department presented a case related to the keynote lecture topic, sparking interesting discussion amongst conference attendees.



(Left to right) Drs. Neil Martin, Arthur Day and Anthony Arnold

The Macular Telangiectasia (MacTel) Project

The Macular Telangiectasia (MacTel) Project concluded its Second Annual Review Meeting at the Jules Stein Eye Institute on March 12, 2007, with the J. Donald Gass Lecture presented by **Connie L. Cepko, PhD**, Professor of Genetics and Howard Hughes Investigator, Harvard Medical School.

Idiopathic juxtafoveal macular telangiectasia is a potentially blinding condition of the retina about which little is known. Only limited information has emerged about the condition since its clinical features were first well described by **J. Donald Gass, MD**, in 1982. The purpose of The MacTel Project is to identify the natural history, causes and most appropriate treatments for the condition. Sponsored by the Lowy Medical Research Institute, The MacTel Project has assembled an international group of distinguished scientists and clinicians to work together to better understand the disease, to raise its profile and to search for treatments.

Professor Emeritus of Ophthalmology and Founding Director of the Jules Stein Eye Institute **Bradley R. Straatsma, MD, JD**, and Dolly Green Professor of Ophthalmology and Professor of Neurobiology at UCLA **Dean Bok, PhD**, serve on the Oversight Committee of the Project. The Institute is one of the Project's clinical research sites with **Steven D. Schwartz, MD**, Associate Professor of Ophthalmology and Retina Division Chief, serving as Principal Investigator.



Donald Gass Lecturer Dr. Connie Cepko with Dr. Alan Bird, Chief Scientist for the MacTel Project

Special Events

David Gerber Receives Star on the Hollywood Walk of Fame

Congratulations to long-time Jules Stein Eye Institute (JSEI) supporter and television icon **David Gerber** on receiving his star on the Hollywood Walk of Fame on January 11, 2007.

David's illustrious career has spanned five decades, and he continues to bring compelling stories to the small screen. An Emmy and Peabody Award winner, David earned the unique distinction of success as both a producer and studio executive (at times simultaneously). His more than 70 producing credits include the recent Emmy-nominated "Flight 93," "Seven Brides for Seven Brothers," "The Lindbergh Kidnapping Case," "Police Story," "Police Woman," and "thirtysomething."

Born and educated in Brooklyn, New York, David moved to Northern California where he earned a Bachelor of Arts degree at the University of the Pacific. He started his career as a television supervisor at the ad agency BBD&O and then quickly moved to sales and production. In addition to his own production company, David revitalized two major television companies, Columbia Pictures Television and MGM/UA Television. Despite his busy professional responsibilities, David and his wife Laraine own and operate a winery in the Sierra Foothills and dedicate much of their time to several philanthropic interests.

The Gerbers have been involved with JSEI for more than 25 years and have a deep commitment to helping children. David says "We have to take care of the next generation." Their remarkable philanthropy has established an endowed chair in pediatric ophthalmology and the future Laraine and David Gerber Genetic Eye Research Center. In 2006, the Gerbers made an additional pledge to convert the Gerber Chair from a five-year term, to a permanent appointment chair.



Photo by Amir Kojjory

Retirement Reception

On Thursday, February, 15, 2007, faculty, friends and donors honored **Marc O. Yoshizumi, MD**, Professor of Ophthalmology on his retirement from the Jules Stein Eye Institute. **Bartly J. Mondino, MD**, Jules Stein Eye Institute's Director, thanked Dr. Yoshizumi for his lasting contributions to vision sciences and medical student education.

JSEI faculty, staff and students extend their very best wishes to Dr. Yoshizumi for a happy retirement in Hawaii. Aloha! (See article on page 5.)



Dr. Marc Yoshizumi was presented with a token of appreciation in recognition of his 29 years of service to UCLA.



(Left to right) Norman Abrams, Acting Chancellor of UCLA; Dr. Bartly Mondino, Director of the Jules Stein Eye Institute; Dr. Yoshizumi and Gerald Oppenheimer, JSEI Trustee

(Left to right) Pirjo Wong, Dr. Yoshizumi, Margaret and Dr. Bernard Churchill, Drs. Carol Takami and Ben Glasgow enjoy the festivities at the retirement reception



Dr. Yoshizumi (center) with William M. Keck II and his wife Nicole

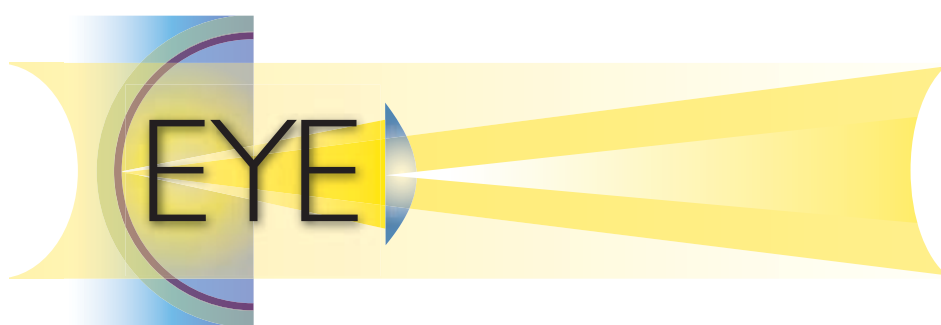
Important JSEI Phone Numbers

Patient Care

JSEI Ophthalmology Referral Service (310) 825-5000
 JSEI Ophthalmology Emergency Service (310) 825-3090
 (310) 825-2111 after hours

Fund Raising

JSEI Development Office (310) 206-6035
 JSEI Affiliates (310) 825-4148



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