On Tuesday afternoons, I see adult glaucoma patients in the 20-foot lanes our group practice also uses for our pediatric patients. My (most-ly) older patients often remark on the colorful drawings on display in a special area that children have made for their doctors. My favorite is of a girl with green hair and her stick-figure ophthalmologist with wild yellow hair holding a direct ophthalmoscope. Occasionally, one of my patients comments on the fact that there are specialists who also treat children with eye diseases and notes the positive impact those doctors will have on the children’s entire lives. Indeed, our pediatric ophthalmologists are highly skilled and the work they do has immeasurable value. But we don’t have enough of them.

Academy President Jane Edmond, a pediatric ophthalmologist and chair of the Department of Ophthalmology at Dell Medical School, University of Texas at Austin, points out that pediatric ophthalmologists care for the youngest and most vulnerable population. But she is deeply concerned. She said, “We must continue our efforts to increase the pediatric ophthalmology workforce to ensure that children have timely access to ophthalmic care—care that is uniquely in the pur-view of pediatric ophthalmologists.”

One challenge we need to address is the perception that pediatric ophthalmologists have lower compensation compared to their colleagues in other subspecialties. Rahul Bhola, Medical Director of Ophthalmology at Children’s Hospital of Orange County and Associate Clinical Professor at the University of California, Irvine, commented that “while this is historically accurate, pediatric ophthalmologists can make a competitive income, especially now.” Rahul said that high demand has significantly enhanced the negotiating power of those just entering the field and may result in higher starting salaries and benefits.

While Rahul stressed that many pediatric ophthalmologists in private and academic practices have competitive compensation packages, he said it’s not just compensation that makes pediatric ophthalmology an attractive subspecialty. “This is one of the few specialties where one can literally pick any geographic location nationally and establish a busy, flourishing practice right away,” he said.

What’s more, many large health systems recognize that pediatric ophthalmologists are essential for retinopathy of prematurity care, pediatric trauma coverage, and in-patient consults. These institutions are highly motivated to recruit ophthalmologists who have done a peds fellowship.

Cultivating interest in pediatric ophthalmology requires education and awareness. Pediatric ophthalmologists Rupa Wong, at Honolulu Eye Clinic, and Julius Oatts, Associate Residency Program Director in the Department of Ophthalmology at the University of California, San Francisco, are managing complementary Leadership Development Program (LDP) projects. They developed a mentoring program for medical students called Pediatric Ophthalmology Mentorship (POM), which is modeled after the Minority Ophthalmology Mentoring Program, an initiative of the Academy and the Association of University Professors of Ophthalmology. POM serves medical students who have received a Knights Templar grant to attend the American Association for Pediatric Ophthalmology and Strabismus annual meeting. The program pairs them with clinical mentors who provide shadowing opportunities in pediatric ophthalmology and offers resources to help strengthen residency applications.

While POM focuses on medical students interested in pediatric ophthalmology, another LDP project they manage aims to increase interest among ophthalmology residents. Julius surveyed ophthalmology program directors about residents’ exposure to clinical and surgical pediatric ophthalmology. He said preliminary results suggest that the strongest predictor of a resident choosing a pediatric ophthalmology fellowship is the number of pediatric ophthalmologists on the core faculty where that resident works. “This is a difficult problem to address but speaks even more to the importance of increasing representation in our field,” Julius said.

If the combined LDP projects are as effective as the Minority Ophthalmology Mentoring program has been, more medical students will apply for ophthalmology residencies and more residents will seek peds fellowships.

I love seeing the drawings in our peds lanes. They are a reminder that pediatric ophthalmologists are skilled at creating an environment that puts children and their families at ease. Our children need their surgical and medical expertise, and so do the rest of us in ophthalmology.