



# SCOPE

## Dr. Anderson's Eclectic Life Contributions

M. Bruce Shields, MD

If you have read the *Scope* newsletter for the past decade or so, you have most likely been delighted by the regular contributions of our colleague, W. Banks Anderson Jr., MD. With his inquisitive mind and encyclopedic fund of knowledge, not to mention a perceptive sense of humor, he has regaled us with an eclectic range of erudite discussions.

Dr. Anderson covered subjects such as the advantages of LED lighting, including for our personal safety (*"LED Light"*); the physics and value of blinders on race horses (*"Mud in the Eye,"* published online as *Why Horses Wear Blinders*), how a World War II pilot and inventor became the model for Ian Fleming's James Bond series (*"SpEye in the Sky"*), the importance of pupillary size in various mammals (*"Light Buckets"*) and the role his hometown of Durham, N.C., played in the conclusion of the Civil War (*"Endings North and South"*).

He also wrote several tongue-in-cheek essays, such as the application of ophthalmic surgical skills to remove nasal hair (*"Ectoderm"*), the perils of bamboo (*"Bamboozled"*), treating frozen eye lashes with a hot shower (*"Cryostichiasis"*) and avoiding abrasions from seams in clothing (*"The Seamy Side"*).

Those of us who have had the pleasure of knowing Dr. Anderson personally should not be surprised that he amassed such a collection of wide-ranging articles, since his entire life has been characterized by a diverse span of interests, talents and accomplishments.

Dr. Anderson grew up in Durham, where his father was an ophthalmologist and chief of ophthalmology at the Duke University Medical Center. In 1946, he left his hometown for the cold northeast and a decade of distinguished education, including Phillips Exeter Academy in New Hampshire; Princeton University, where he graduated magna cum laude and played on the varsity lacrosse team that won the national championship; and then medical school at Harvard University. He returned home long enough for an internship at Duke, after which he went back north to serve in the army, first at Walter Reed Army Medical Center in Washington, D.C., and then for a tour of duty at the army hospital in Munich, Germany, where he ran the eye, ear, nose and throat service.

In 1959, Dr. Anderson returned home to Durham for good. He completed his residency in



W. Banks Anderson Jr., MD.

ophthalmology at Duke, then joined the faculty, where he practiced and taught until his retirement in 2006. As a Duke resident in the early 1970s, I immediately became aware of what an invaluable resource Dr. Anderson was as a mentor.

Every Saturday morning, he would conduct a teaching session with the residents, which was the highlight of our didactic training. On Friday evenings, he would ask the chief resident to suggest a topic on any subject in ophthalmology (and sometimes even beyond our specialty). The next morning, he would lead us in the most comprehensive and up-to-date discussion on that topic. He was truly  
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## Dr. Anderson's Eclectic Life Contributions (Continued from page 1)

the complete ophthalmologist as a clinician, surgeon and educator.

Early in his residency years, Dr. Anderson met a lovely young nursing student by the name of Nancy Walker of Port Washington, N.Y. They married in 1960 and would raise three children, Mary Banks, Mark and Beth, each of whom have gone on to have successful lives and families. In addition to many grandchildren, Banks and Nancy have recently become great grandparents.

Along with a distinguished medical career and a devoted family, Dr. Anderson has been dedicated to the service of our profession. In addition to serving as president of the North Carolina Society of Ophthalmology and the ear, eye, nose and throat section of the North Carolina Medical Society, he has been chair of the Residency Review Committee for Ophthalmology, president of the American Ophthalmological Society and a director of the American Board of Ophthalmology and the American Academy of



Dr. Anderson and his wife Nancy.

Ophthalmology. He also served as vice-chairman of the Duke department of ophthalmology for nearly a quarter century and was the acting chairman in 1991 and 1992.

But there is more. Dr. Anderson is also a licensed amateur radio operator; an artist, with excellent oil paintings to his credit; and an accomplished violinist, a pleasure that he continues to enjoy with colleagues, including the Durham Medical Orchestra. In one

of his *Scope* articles, entitled "The Typewriter," (published online as *The Typewriter's Rat-a-Tat-a-Tat-Pling!*) he describes an orchestral piece of the same name by Leroy Anderson and then looks back nostalgically on that mechanical contraption, which inspired the piece and of which we seniors undoubtedly have our own memories, fond or otherwise.

And so, Dr. Anderson, through his eclectic interests and talents, has made major contributions to our profession, the patients he served, the students he taught, the family he and Nancy raised and to you and me, his colleagues, whose lives he has enriched in so many ways, including his articles in *Scope*.

Sadly, Dr. Anderson has now elected to step down from his position as associate editor and regular contributor to the newsletter, but he and Nancy remain very active in their current life at The Forest at Duke. There, not surprisingly, Dr. Anderson serves on numerous committees and they both continue to enjoy life with family and friends and the new interests and experiences that each day brings.



1980's - Duke University Department of Ophthalmology.

## From the Editor's Desk



### Our Dash: How Will They Remember Us?

M. Bruce Shields, M.D.

**A**s seniors, we find ourselves attending an ever-increasing number of funerals. It is hard, as we sit listening to the eulogy of a friend or family member, not to wonder what will be said about us when that time comes.

One observation that we can count on being made is the two events that we all share: our birth and our death. Whatever else is inscribed on our eternal marker, it is a good bet that it will include those two dates. And, between those bookends of our life, there will likely be one more engraving

– a dash – which represents everything in our life, including that for which we will be remembered.

That record may be in two parts: the objective facts, such as our career, family, interests, etc., which is mostly general, public knowledge; and the more private part, such as how we lived and loved and treated others, which may be known only to a few, or maybe only to our self, but is basically who we really are – or want to be. How will they remember us as men or women, ophthalmologists, leaders, husbands or wives or parents or friends?

This is obviously not an original thought of mine, but I was reminded of it at a funeral I attended last fall, in which the eulogizer noted the significance of that humble, typically ignored symbol. The dash, he suggested, essentially represents everything in our life, from the time we are born until the day we die.

The sentiment wasn't original with him, either, but was taken from [a poem by Linda Ellis, entitled \*The Dash\*](#), the idea for which she apparently got from someone else, and who knows where it began. In any case, as we enter a new year and once again take stock of our lives and what resolutions might be in order, I thought it might be well to share her poem with you.

Dear Scope,

I read Dr. Sadun's fascinating article, "*Losing an Eye; Losing a Kingdom*" (published online as *The Eye Injury that Changed History*) in the 2017 autumn issue of *Scope*.

The history of how King Harold died, as depicted in the Bayeux Tapestry, is disputed. The arrow held by King Harold may have been a later addition to the tapestry, following a period of repair. The arrow is absent in 1729 engravings of the tapestry by Bernard de Monfaucon. Of note, it was common medieval symbolism that a perjurer dies with a weapon through the eye. Since Harold broke his oath to William, perhaps he is merely symbolically shown here dying with an arrow in his eye.

Thanks,

Lee Shahinian, MD

Dear Dr. Shahinian,

I am delighted you enjoyed the article. The controversy on how King Harold died was referred to in my article, as well as the fact that most scholars believe the Bayeux tapestries are still the best documentation available. Your point is plausible, though untestable.

Best regards,

Alfredo Sadun, MD, PhD

## BOOK REVIEWS

### What You're Reading: Of Flus, Da Vinci and Hillbillies

**S**enior ophthalmologists share the best of what they're reading this winter. Add your own favorites in the comments or send your review to [scope@aao.org](mailto:scope@aao.org).

From Samuel Masket MD

J. D. Vance's remarkable autobiography, *Hillbilly Elegy: A Memoir of a Family and Culture in Crisis* spent countless weeks on the *New York Times* bestseller list. In it, he

recounts the odyssey of a young boy growing up in Appalachia where jobs were scarce but alcoholism and opiate addiction common. Those factors had great effect on his mother, and in turn, on him. Owing to innate intelligence, support of an older sister and perhaps more to the guidance of his grandparents, his grandmother in particular, Vance found his way (Continued on page 4)



(Continued from page 3)

through school, to the military, to college and to Yale Law School.

His story alone would make the book very valued reading. However, his keen observations of the effects of factory closings, international trade pacts and failed government programs give great insight into the right-leaning politics of the rust belt and why, perhaps, Hilary Clinton fared poorly in that area during the 2016 presidential election.

From J. Kemper Campbell, MD

**Pale Rider** by Laura Spinney is a frightening book examining how the influenza pandemic of 1918 affected the subsequent course of world history. The ramifications of this worldwide epidemic, in an era before viruses had been discovered and when public health education was minimal, lingered into the 21st century. One third of the world's population caught the flu and nearly 100 million people died. Individuals who plan to skip their annual flu vaccination should first read this book.

From Tom Harbin, MD, MBA

Ever wonder how the rich and powerful get that way? Or how the crooks and dictators get away with it? In **The Panama Papers: Breaking the Story of How the Rich and Powerful Hide Their Money**, German investigative journalists Bastian Obermayer and Frederick Obermaier tell you how. After a source in a Panamanian law firm leaked a trove of data to these journalists, they had to engage a huge team around the world to investigate. This book spells out the details. Through multiple shell companies, unknown directors and legal help from European prime ministers, international dictators, kings, celebrities, aristocrats and criminals, the conspirators deceived entire countries and robbed them of tax revenue.

The revelations in the book caused the prime minister of Iceland, amongst many others, to

resign his position. You will find respect for investigative journalists and governmental authorities who work to keep these things from happening. A fascinating book, highly recommended.

From Alfredo A. Sadun, MD, PhD

I began **Leonardo Da Vinci** by Walter Isaacson with the highest expectations. I loved Isaacson's biographies of Steve Jobs and especially of Albert Einstein. But this time, Isaacson let me down. Fundamentally, he was wrong about saying that Leonardo da Vinci was the first scientist. Trying to prove this point, Isaacson got many things wrong.

Science is about measurement and using measurement to test the hypothesis. But Leonardo, genius as he was and a great artist and broad thinker, never attempted to test his many theories with science. And his so-called engineering attempts were actually flights of fantasy propelled by his extraordinary skills as an artist (and his penchant for staging performances). His engineering never worked because he ignored the science part.

Hence, Leonardo's flying machines or his giant crossbow were physically impossible though they were very cool looking. Leonardo did not understand scaling. He once alluded to the mathematics of squares and cubes which he didn't understand. A three-dimensional object made 20 times greater in scale will weigh 8,000 times more (you have to take the cube for 3 dimensions), though the strength of its parts only increases by 400 (you take the square for the cross-sectional resilience) such that it would collapse under its own weight.

Leonardo knew some of this from bad experiences that forced him to give up building most of his large flying machines. But he did run a type of scam by getting patronage from a pope, a king and several rich autocrats, with the promise that he could build machines of war with which they could win battles. None made it to a working prototype.

Leonardo was also embarrassed by the complete failures of his water projects and other machines because of his failure to understand scaling. Leonardo was also wrong about a number of natural phenomena he sought to explain, like why the sky was blue (he incorrectly said that water mist at the horizon refracted red light to make it blue).

This is all fine as even geniuses can be wrong; especially in the 15th century. But it's a shame that Isaacson still thinks Leonardo was right, failing to understand the difference between light refraction, scattering and interference. I don't blame Leonardo, but I do blame Isaacson for trying to prove his scientific claim in a most non-scientific way. Let's celebrate Leonardo for his magnificent art, not a scientific method he failed to practice.

From M. Bruce Shields, MD

**The Last Days of Night** by Graham Moore tells the story in a historical novel that takes considerable poetic license, but is based on factual history. As such, it is both entertaining and informative and a good read.

In the final decades of the 19th century, the world was getting brighter (not socio-politically, although an argument might be made for that). It was becoming brighter especially in metropolitan areas like New York City, because gas lamps were giving way to electric lights.

Within this seminal moment of world history, two titans of industry waged a nasty patent battle: George Westinghouse and Thomas Edison. It became known as the "current wars," pitting Edison's direct-current against Westinghouse's alternating-current. A third player in the drama was the brilliant, but eccentric inventor, Nikola Tesla, who held an A/C patent that Westinghouse licensed. The basic question in the series of patent suits was who invented the lightbulb and held the right to power the country.

# William H. Coles, MD: Ophthalmologist and Novelist

M. Bruce Shields, MD

**T**he profession of ophthalmology has contributed its share of accomplished writers of fiction. Two of the more well known are Sir Arthur Conan Doyle and Robin Cook, MD. There are many others who have not achieved their level of acclaim, yet are probably no less talented. One of those is our contemporary colleague, William H. Coles, MD.

Dr. Coles has enjoyed a distinguished career in ophthalmology, having served as chair of the department of ophthalmology at SUNY, Buffalo; as president of the Association of University Professors of Ophthalmology and as a regent of the American College of Surgeons. But, if you were to meet him for the first time at a cocktail party, it is likely that you would learn more about his literary accomplishments than his contributions to medicine.

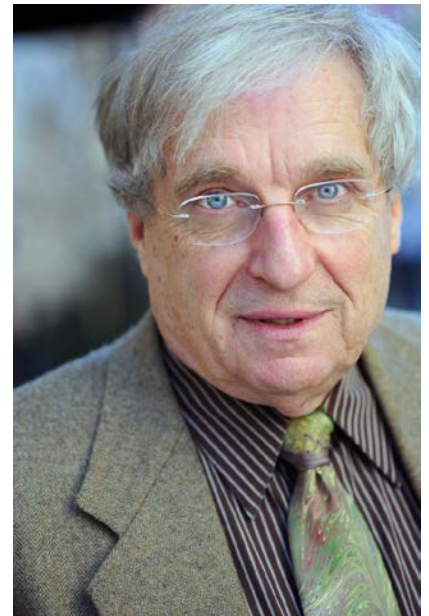
His desire to write literature of superior and artistic merit,

especially fiction, began early and paralleled his ophthalmic career. Like any good ophthalmologist, Bill took a very methodical approach to honing the skills to achieve his goals. Over a 20-plus year span, he studied in more than 100 workshops and courses and interviewed more than 30 prominent authors, editors and educators of fiction writing.

And then he went to work, writing five novels, three collections of short stories, two graphic novels, 38 essays and 29 interviews — so far. For his efforts, he has received 34 awards for short stories and seven for novels, including the Flannery O'Connor Award for Short Fiction, the William Faulkner Creative Writing Competition and the Sandhill Competition.

But, also like any good ophthalmologist, he has made it his goal to share with others what he has learned by providing teaching material specifically, and mostly uniquely, for serious character-based storytellers in literary fiction. He has established a [web-site to teach creative writing](#) with resources for the aspiring novelist. He also has an interactive online workshop and tutorial.

His primary goal is not to sell books, but to have his stories read by as many readers as he could reach, embedding them in the collective consciousness of readers of the English language. The basic theme of his writings is “what it means to be human,” some of which he hopes will carry forward into future generations in the way of authors that he especially



William H. Coles, MD.

admires: Austen, Flaubert, Chekhov, Hawthorne and the like.

Dr. Coles is clearly a credit to our profession. Not only has he made major contributions to ophthalmology, but he has distinguished himself (and made us proud) by a dedication to literary fiction with a purpose to engage, entertain, enlighten and teach, as well as to provide resources for aspirant writers. I encourage you to go to his website or visit him on Facebook to learn more about his accomplishments and to enjoy reading his many outstanding works.

## Selected List of Books by William Coles, MD

*McDowell*

*Guardian of Deceit*

*The Spirit of Want*

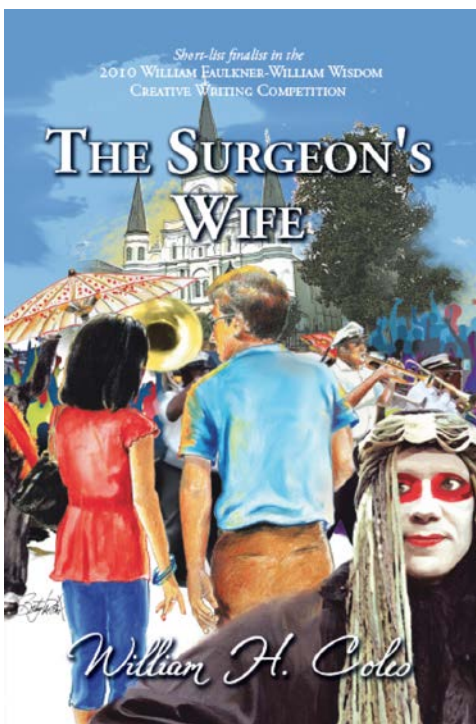
*The Surgeon's Wife*

*Illustrated Short Fiction of William H. Coles: 2000-2016*

*Sister Carrie*

*Creating Literary Stories:  
A Fiction Writer's Guide*

*Story in Literary Fiction: A Manual  
for Writers*



## Lester T. Jones, MD: An Early Expert on Orbits Both Human and Animal

John Wobig, MD

**L**ester T. Jones, MD (1894-1983), was an international authority on the anatomy of the head and neck who became known as one of the best surgical anatomists in ophthalmic plastic surgery. One key to his expansive knowledge: a lifelong fascination with and practice of dissecting orbits, both human and animal.

Born in Danville, Ky., Dr. Jones attended high school and Pacific University in Oregon after the family moved to Forest Grove in 1906. Dr. Jones was the last known survivor of the University of Oregon medical school class of 1921. Medicine was a strong family tradition as his brother, Arthur Jones, MD, and two sons, Warren L. Jones, MD, and Richard T. Jones, MD, all became doctors.

Dr. Lester Jones was an active teacher of medical and dental students, ophthalmology residents and ophthalmologists in practice. He conducted classes both locally and nationally.

To better understand the fine structure of orbital muscles, he often conducted hours and hours of lab dissections with the tissues under water. This demonstrated fine structures that had previously been underappreciated.

He was widely known for his comparative anatomy studies and his application of this knowledge to his orbital surgery work. Even the orbit anatomy of seals (Figure 1) and giraffes (Figure 2) held valuable lessons in understanding usual human anatomy along with variants.

Dr. Jones' son, Richard T. Jones, MD, PhD, was chair of biochemistry and acting president of the University of Oregon Health Sciences Center. Richard Jones recalled that his father "worked in medical school. He was a diener in the anatomy department, and the bodies that were donated were brought to him, and he would embalm them and get them prepared for the anatomy classes.

For internship he went back to Philadelphia to the Polyclinic in Philadelphia. (Along the way he earned extra money from Portland to Chicago by working as a shepherd. He transported a herd of sheep and would let them out at the various stops to graze in pastures. Rounding them up was then a chore.)"

In the 1920s, the Polyclinic in Philadelphia was a major center for eye, ear, nose and throat, connected with both the University of

Pennsylvania and Wills Eye Hospital faculties and had distinguished teachers from both institutions. It had descended from David Hayes Agnew's school of anatomy, which subject remained one of its

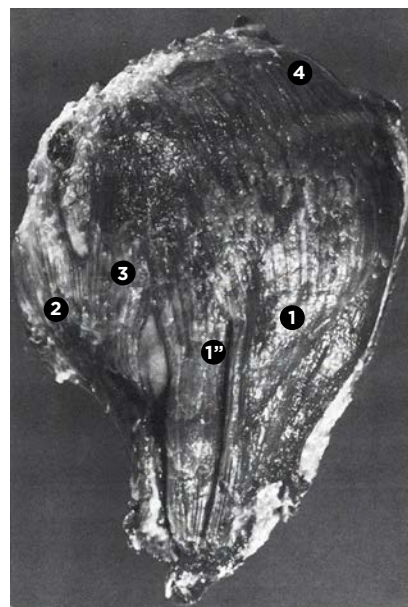


Figure 1: The seal's right superior capsulopalpebral head: (1) part completely separated from rectus muscle; (1') part partially separated; (2) medial capsulopalpebral head with part; (3) fusing with the superior muscle; and (4) Müller's muscle.

strengths. Perhaps his time there added to Dr. Jones' love of the study of anatomy.

While in Philadelphia, Dr. Jones' son said his father took an internship and perhaps did some work at New York's Bellevue Hospital as well. "Then he got a job as a ship's doctor on a freighter going to South America and went down there. And then, after that stint, he came back to Portland and started in general practice group. But they needed somebody in eye, ear, nose and throat; they didn't have a specialist.

"So Lester and his wife decided that he ought to go to Vienna to study eye, ear, nose and throat. And so they went to Vienna. They left my older two brothers with my grandparents — my mother's parents who had come out from Nebraska — to take care of them, for somewhere between six months and a year, that's how long it took to specialize in those days. And that was in 1928."

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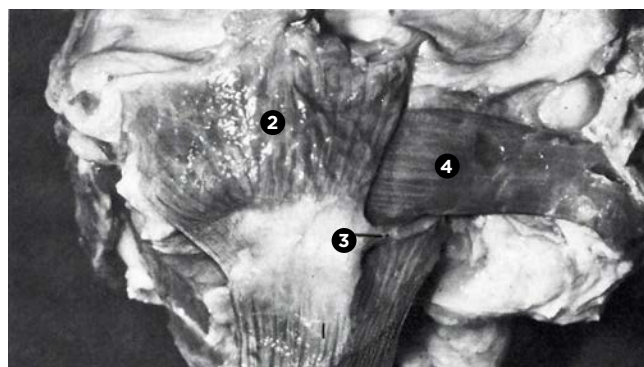


Figure 2: The giraffe's inferior rectus: (1) inferior rectus muscle; (2) Müller's muscle; (3) tendinous fascia; and (4) inferior oblique muscle.



## Lester T. Jones, MD

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When he got to Vienna, in 1928, Ernst Fuchs (1851-1930) was still actively teaching in Vienna and lecturing in both German and English.

After these studies, Dr. Jones returned to combat in World War II, rising to the rank of captain in the Navy (during World War I, he had served as an orderly in the army). At the end of the war, he was the executive officer of the Bremerton Washington Naval Hospital. After World War II, he returned to Portland to practice ENT and ophthalmology.

Dr. Jones was committed to perpetuating the “whole physician” — a dedicated professional whose primary concern focused on the patient; one who conducted research to create better diagnostics and treatment methods, and then shared the fruits of that research through publications as well as a wide variety of educational forums. Physicians who showed any interest in surgical anatomy knew he would spend as much time as needed to teach them and show them subtle inter-connections and variants of orbital structures.

Dr. Jones was boarded in eye, ear, nose and throat. This allowed him to develop significant research in the lacrimal system. He was the first to recognize how tears pumped through the lacrimal tract. This was followed by tests to diagnose obstructions in the lacrimal system.

The Jones I test consisted of placing dye in the tear film and looking to see if it appeared in the nose at the end of the tear duct. The Jones II test was done following a negative primary dye test. One slowly injected a small syringe with 1 mm of normal saline solution through the lacrimal cannula. No fluid coming out of the nose

was evidence of complete obstruction. If dye appeared, the obstruction was in the lacrimal duct.

The development of the conjunctivodacryocystorhinostomy was one of his significant achievements for the tearing patient. This evolved into the development of a tube (Figure 3) that would carry tears to the nose for those who had no canalicular system.



Figure 3: Jones Tube.

After many trials, his son Dr. Richard Jones, suggested he work with Gunther Weiss, a scientific glass blower. This resulted in a pyrex tube, since it had capillary attraction. The procedure was a DCR followed by placing the pyrex tube through the caruncle into the nose. At the beginning other colleagues criticized Dr. Lester Jones, but the pyrex tube proved successful. It is still used around the world.

Dr. Jones also re-introduced the levator aponeurosis repair for acquired myogenic ptosis. This procedure lends itself to local anesthesia and anatomical defects that leave the conjunctival surface intact. It may be combined with blepharoplasty. Post-operative modification is easiest with this ptosis repair.

Dr. Jones traveled worldwide, demonstrating and teaching his procedures. He served on the volunteer faculty of the Oregon

Health Sciences University School of Medicine and retired as an emeritus professor at the age of 82. In addition he was president of the staff of Good Samaritan Hospital and Medical Center in Portland, Ore.

Malcolm Marquis, MD, met Dr. Jones during his ophthalmology residency from 1964 to 1966. He remembers that Dr. Jones' father was a minister, and the whole family (father, brothers, sons) were “remarkable people,” “strong minded, opinionated” and talented. Dr. Jones was “always honest and open” and a “perfectionist.”

He described Dr. Jones as “crusty” but modest and correct. Despite “many traumatic things in his life,” including the death of a son and his first wife, he retained a “good sense of humor” and went on to have a happy second marriage. Punctuality was extremely important to him, as he was always on time himself and expected it from residents and others.

Dr. Jones had an arrangement with the Portland zoo whereby, when an animal died, it was decapitated and Dr. Jones dissected it (presumably concentrating on the orbit) in the basement of his home. Dr. Jones' knowledge of the anatomy of the orbit was based in large measure on his personal dissections and exceeded what was available in papers or books. “He relished minor points.”

When he operated, the OR always had a number of “visitors and spectators” and these were teaching sessions. He would often pause to allow visitors to take pictures, even though this slowed his surgery. He loved to “pass on knowledge” and cared little about compensation for his books or lectures.

Although highly regarded by his peers, Dr. Jones was most active in local ophthal- (Continued on page 8)

## Lester T. Jones, MD

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mology affairs. Even so, he received national recognition by societies and institutions. In 1974, the American Society of Ophthalmic Plastic and Reconstructive Surgery set up The Lester T. Jones Surgical Anatomy Award to be given to an individual who has made an outstanding contribution to ophthalmic plastic and reconstructive surgery. The first award went to Marvin H. Quickert, MD, for his application of anatomy to surgical approaches.

The American Academy of Ophthalmology also chose Dr. Jones to write the Academy's booklet on the anatomy of the orbit.

Dr. Jones received many other awards and some were also given in his honor. In 1980, the board of trustees of Lewis and Clark College honored Dr. Jones for his research and professional work by presenting him their annual Aubrey R. Watzek award.

Oregon Health Sciences University named the first endowed chair at Casey Eye Institute after Dr. Jones. The Lester T. Jones Chair extends the concerns and interest of this extraordinary man, but saluting his belief in the importance of healing, teaching and discovery. (Figure 4) (*Editor's Note:* John Wobig, MD, was the first physician chosen for this position.)

I should point out that Dr. Jones had other interests and skills as well as medicine. While a student at Pacific University, he played guard on the football team. At his home, in Portland he maintained a well-kept landscaped yard, had a beautiful rose garden and it was not unusual to find him picking plums and walnuts at his farm in Wilsonville, Ore. Dr. Jones' grandson Gary also became a physician.

Among many fond family memories, one stood out: "My grandfather was quite the gardener. He ... had great pride in his blueberry bushes. I always remember the blueberry bushes, if for no other reason because, when it was blueberry season, the birds would come down from everywhere. It was like something out of Hitchcock, you know, all the birds coming in. So he had to put these big nets over it. So it was always this fantastic, huge, huge hedge of blueberries, all in netting, and you'd kind of crawl inside there and pick these fantastic, luscious blueberries."

Down through the history of the ophthalmic community in the Northwest, Dr. Jones' accomplishments and contributions, as well as his moral character, will be held in high esteem by fellow colleagues, physicians of other countries and all his many students and patients.



Figure 4: Dr. Jones on the right and Dr. Wobig on the left.

## 3 Pearls From the Past

Donald Blanchard, MD, and Daniel Albert, MD, compile quotes and wisdom from medicine's long history. Add your own favorite timeless pearls for ophthalmology in the comments or send your quote to [scope@aao.org](mailto:scope@aao.org).

*"It has been said that 'when a medical man begins to write on the history of his subject it is a sure sign of senility.'"*

— E. Treacher Collin's preface to *The History and Traditions of the Moorfields Eye Hospital* (1929, pg. viii)

*"In old churches are dark windows."*

— Proverb quoted by Georg Bartisch in *Ophthalmodouleia* (1583), translated by Donald Blanchard, MD. Among other things, the book suggested that pills of gold helped decreased, faint, dim and cloudy vision, as did the best theriac available either at the apothecary shop at the foot of Venice's Rialto Bridge or carefully prepared by Bartisch in Dresden with all its over 100 ingredients.

*"To cure sometimes, to relieve often, and to comfort always."*

— Folk saying dating at least to the 15th century. Also inscribed on a statue of the tuberculosis specialist, Edward Livingston Trudeau, MD, (died 1915) at Saranac Lake, New York.



## New Year, New Ways to Give Back

Christie L. Morse, MD  
Chair, Foundation Advisory Board

I'd like to kick off the new year with a huge thank-you to everyone who made a gift to the Foundation last year. Because of you, we can set the bar higher every day and move important programs forward. I look forward to updating you throughout the year on all the exciting things we're accomplishing with your support.

Check out our 2016-2017 annual report at [aao.org/foundation](http://aao.org/foundation) to see the impact we're making on education and patient care worldwide.

### The Orbital Gala Honors H. Dunbar Hoskins Jr., MD

Our 14th annual Orbital Gala on Nov. 12 in New Orleans was a memorable evening of good friends and great fun. Nearly 400 guests let the good times roll at Mardi Gras World, enjoying cocktails, dinner, live entertainment and a silent auction in support of the Foundation's mission.

The undeniable highlight of the evening was our tribute to H. Dunbar Hoskins Jr., MD, the Academy's executive vice president from 1993 – 2009. Among

his many exceptional achievements was the launch of the Ophthalmic News and Education (ONE®) Network, which celebrated its 10th anniversary last year. This state-of-the-art educational resource is now used by ophthalmologists in nearly 200 countries, and has changed the way we learn and practice.

To further honor Dunbar's legacy, Academy CEO David W. Parke II, MD, had the pleasure of announcing the launch of the Hoskins Center IRIS® Registry Research Fund. Established with a generous lead gift by Ann and Dunbar Hoskins, this new fund will support groundbreaking clinical studies that will analyze the IRIS Registry's immense database to

*(Continued on page 10)*

Bravo, Dunbar! Dr. Hoskins was joined onstage by (l – r) Foundation Advisory Board President Tony McClellan; Foundation Advisory Board Chair Christie L. Morse, MD; Ann Hoskins; and Orbital Gala Chairs Ruth D. Williams, MD, and Stephen C. Gieser, MD, MPH.



## Academy Foundation Update

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uncover new knowledge to prevent blindness and visual impairment.

“The IRIS Registry provides a wonderful opportunity to advance quality of care. We need to train ophthalmologists to extract pearls from the data to broaden our understanding of eye diseases and improve patient care,” said Dr. Hoskins.

In support of the new fund, gala guests participated in our first-ever Fund a Need paddle raise, bringing in more than \$650,000 – including a generous \$500,000 pledge from OMIC. To contribute, visit [aao.org/donate](http://aao.org/donate) and designate your gift to the Hoskins Center.

I hope you'll join us in Chicago on Oct. 28 for the 15th annual Orbital Gala at the Chicago Cultural Center, home of the world's largest Tiffany stained glass dome. Look for more information in the coming months.

### 1896 Legacy Society and New Planned Giving Resources

I'm excited to announce the launch of the 1896 Legacy Society, named in honor of the year the Academy was founded. Members of this prestigious group have included the Foundation in their estate plans through cash gifts, bequests or other planned gifts.

1896 Legacy Society members are invited to our annual donor reception and other events, receive year-round acknowledgment and are given personalized support from the Foundation.

I encourage you to consider establishing a legacy gift and join



Louis B. Cantor, MD.

the ranks of this great group. It's a convenient, meaningful way to support the Academy programs you care about, and may also provide tax benefits. To help you get started, the Foundation has recently launched a new website with a host of great tools and helpful tips for establishing your estate plans. Visit [aao.org/planmylegacy](http://aao.org/planmylegacy).

Senior Secretary for Clinical Education and Board of Trustees member Louis B. Cantor, MD, shares why he decided to include the Foundation in his estate plan: “The Academy provides the education and professional support necessary to achieve the highest quality of patient care nationally and globally. Working with professional colleagues in support of the Academy's mission continues to be a highlight of my professional career. My wife and I are pleased to be able to make a planned gift to help secure the future of our profession.”

Here's to a healthy, productive 2018! I always welcome questions or feedback from you. Please feel free to drop me a line any time at [cmorse@aao.org](mailto:cmorse@aao.org).

## SCOPE

The Senior Ophthalmologist Newsletter

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