Preface

In the early 1970s, Clair M. Kos, the Academy’s executive secretary-treasurer, and W. Howard Morrison, the editor-in-chief, suggested that I research the Academy’s past and write a few articles on its history. None of us knew what, if anything, would turn up. This was a peripheral project, and almost a year passed before time allowed perusal of the archives.

As I sifted through old documents and minutes, I was at first entertained by the ornate print and language, then intrigued by the emerging picture of specialization as seen through the eyes and actions of the Academy, and finally hooked by the fact that the Academy had been no ordinary organization. Its development paralleled the development of specialization in medicine, and its achievements included introduction of Board certification for specialists, central pathology registries, instruction courses at medical meetings, and correspondence courses for physicians (the home study and now continuing education concept).

The story of these ideas merited telling and belonged not merely to the Academy’s history but to medical history. Each innovation was aimed at counteracting the sorry condition of education for a specialty, and this condition was not unique to Academy specialties. Specialization developed first in medical practice, and only later were educational underpinnings provided.

Articles on the Academy’s early history ran as a series in the society’s news bulletin, PERCEIVER. The series was so well received that, in 1975, work began to complete the history.

While the book was in preparation, the American Academy of Ophthalmology and Otolaryngology separated, first into divisions and then into independent societies. Changes came so fast that chapters were often obsolete before they were completed. The book chronicles the history of the Academy through its last year, 1978, and depicts policies and customs as they existed when the Academy was dissolved and the American Academy of Ophthalmology and the American Academy of Otolaryngology succeeded it to carry on the work.

Any story of an organization is really a story of the men and women who compose it, run it, make it what it is, and I came to know many wonderful people in ophthalmology’s and otolaryngology’s past. It is with regret that I cannot pass on all of their stories but with deep respect that I pass on some of their stories.

Sharon A. Bryan