



UPDATE

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THE SCIENCE OF SIGHT

ARGUS II GIVES SIGHT TO THE BLIND FDA Gives Approval



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The dream of sight after blindness is morphing into a reality for some people, thanks to the Argus II visual prosthesis and Dr. Mark Humayun, a Doheny Eye Institute research director and key leader in the development of the device. On February 14, 2013, the Food and Drug Administration (FDA) finally gave the official go-ahead to market the Argus II in the US for use in patients with vision loss caused by retinitis pigmentosa. This is a huge step forward for patients, for physicians, and for Doheny in its mission to restore eyesight.

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Argus II is lighting up the world, literally, by restoring some visual capacity to users. The device works by detecting objects in a person’s visual field and then stimulating the retina of the eye. The retina relays information about the object—say a doorway or dinner plate or a printed word—to the brain. Argus II users are trained to identify various objects based mainly on contrast, shape, and size.

“First I saw specs of light,” says 64-year-old Terry Byland, the last of six patients to receive the original Argus I device. “Later I began to detect shapes. The Doheny doctors worked with me so that eventually we re-trained my brain’s vision center to perceive different objects.” Mr. Byland takes great pride in knowing that this pioneering work paved the way for the more advanced Argus II.

The Argus II developers, Second Sight Medical Products Inc., located in Sylmar, CA, and founded in 1998, won approval from the FDA to provide, “...electrical stimulation of the retina to induce visual perception in blind patients with severe to profound retinitis pigmentosa (RP) and bare

light or no light perception in both eyes.” Mr. Byland began losing his sight to RP in 1984 and was completely blind by age 40. FDA approval is required for marketing of medical devices in the US. Argus II, from inception until now, has evolved over a 15-year time span and with a price tag of approximately \$200 million.

THE FIRST ARGUS

The very first Argus I device was implanted at Doheny Eye Institute. “Doheny has been instrumental in making this whole project possible,” says Dr. Humayun. “It is the academic hub where the translational activity—turning a scientific concept into a medical treatment—was allowed to occur.” One of the many examples of how Doheny and Second Sight worked together was in figuring out the best and safest electrical pulse that would provide visual perception.

Dr. Humayun came to Doheny from Johns Hopkins University in 2001 to advance the work along with his colleague Dr. Robert Greenberg, now Second Sight president and CEO. The Argus I series devices were all surgically



Dr. Mark Humayun

implanted at Doheny. It was at Doheny that Mr. Byland was selected to receive the Argus I, underwent surgery, and settled into the initial phases of rigorous training and testing.

“Doheny made it possible for us to advance the technology. It is amazing to have the first in the world approved retinal device,” marvels Dr. Humayun.

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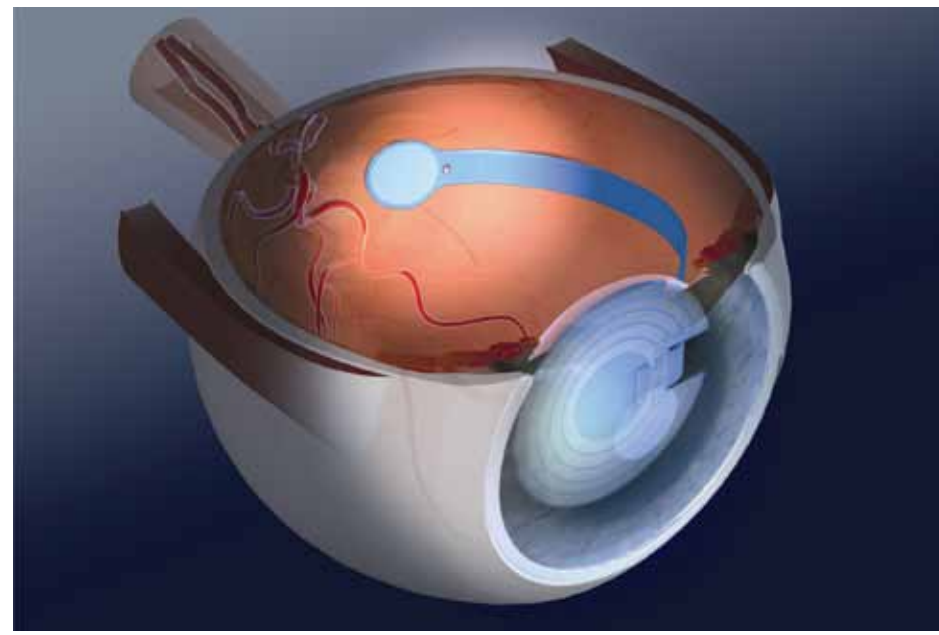
WHO WILL BENEFIT

The number of people with RP in the US is small. Only about 100,000 people have this inherited, rare retinal degenerative disorder that leads to almost complete blindness. But the market for the Argus II is potentially much larger. Many other people with severe vision loss could ultimately benefit, including those with age-related macular degeneration (AMD).

AMD is a serious eye condition and leading cause of vision loss in people over 60. A recent report made possible by the National Eye Institute (NEI) of the National Institutes of Health (NIH) shows that as many as 11 million people in the US have some form of AMD and that by 2050 the figure is likely to double. The number of people affected by AMD worldwide is vast and it is fair to say that many millions could regain some sight and independence from a retinal prosthesis. As NEI director Dr. Paul Sieving pointed out, the retinal prosthesis of today is a forerunner of the device we'll be using 30 years hence. In other words, approval of the Argus II marks the start of a revolution in restoring eyesight.

"We've come a long way for this set of patients," says Dr. Humayun, referring to patients with RP. There is much more work to be done. While developers expect improvements over time, including color vision, for now they are pleased by patients' ability to locate objects, read large letters, and gain mobility. "Ultimately we hope to improve the [clarity of what users see] and include people with AMD and others who are legally blind."

Mr. Byland is able to walk down the center of a sidewalk on his own, with no cane to depend on now that he can distinguish the light-colored sidewalk from the darker grass. "One day I noticed I could even see two lines that met at an angle, which turned out to be



This schematic drawing shows how the Argus II device is placed on the retina of the eye to produce vision. The round portion contains miniaturized electrodes that stimulate vision cells.

the sidewalk abutting a driveway," he says. "I feel very fortunate to have been picked for the Argus I. Doheny, Second Sight, and especially Dr. Humayun gave me something that means so much. It doesn't get any better than what this group of scientists is doing." ■

STEPHEN J. RYAN, MD, RECEIVES LAUREATE RECOGNITION AWARD

Here at Doheny Eye Institute we know full well the extraordinary skill of Doheny President Stephen J. Ryan, MD. And his leadership in ophthalmology goes far beyond our walls. This was acknowledged recently by the American Academy of Ophthalmology (AAO) with the presentation to Dr. Ryan of its most coveted prize, the Laureate Recognition Award.

The award was bestowed at the majestic opening ceremony of the Academy's 2012 annual meeting in Chicago. Dr. Ryan was selected based on his distinguished career and exceptional scientific contributions toward preventing blindness and restoring sight worldwide. AAO is the largest membership association of eye physicians in the US and abroad.

"The Laureate Recognition Award is most meaningful since it is bestowed by the leading organization in ophthalmology, The American Academy of Ophthalmology (AAO). At the same time, I am humbled – and when I consider that I am included with true giants in ophthalmology, I accept the award on behalf of Doheny faculty, ophthalmologists, and vision scientists who over the years have greatly enhanced our field. The Doheny faculty are recognized around the world for their outstanding contributions. It is a tremendous honor and pleasure to go to work with such truly dedicated faculty and staff who have made Doheny a top 10 program. Doheny has a bright future thanks to the outstanding faculty, staff and students," says Dr. Ryan.

"I've known Steve for 50 years," says Ronald E. Smith, MD, past president of the American Academy of Ophthalmology and current chairman of USC Department of Ophthalmology, "since

"Members of the vision community recognize Dr. Ryan as the voice for the value of federally-funded vision research..."

— James Jorkasky, Executive Director, NAEVR/AEVR

we were in medical school at Johns Hopkins. His style was very much influenced by one of the greatest ophthalmologists and visionaries of our time, Dr. Edward Maumenee. Like Dr. Maumenee, Steve is devoted to excellence, patient care, and training the next generation of leaders."

One approach to achieving his goals is to share advanced research and clinical information. Dr. Ryan is the author or editor of hundreds of scientific and clinical articles and of nine books including a definitive textbook, *Retina*, now in its 5th edition.

Other awards recognizing Dr. Ryan's leadership include the Johns Hopkins University Society of Scholars Award, the Johns Hopkins University Distinguished Alumnus Award, the American Academy of Ophthalmology Senior Honor Award, and the AAO Distinguished Service Award. Dr.

Ryan has also been honored with the Association for Research in Vision and Ophthalmology (ARVO) Kupfer Award for Distinguished Public Service, the Pan-American Association of Ophthalmology (PAAO) Benjamin Boyd Humanitarian Award, the Fight for Sight/Mildred Weisenfeld Lifetime Research Achievement Award, and the American Ophthalmological Society (AOS) Lucien Howe Medal. He is USC's Distinguished Grace and Emery Beardsley Professor of Ophthalmology.

In his unflagging effort to advance vision research, Dr. Ryan has served for the past 20 years as the president of the boards of the National Alliance for Eye and Vision Research (NAEVR) and the Alliance for Eye and Vision Research (AEVR), advocating for increases in federally-funded vision research and educating lawmakers about the value of vision research. Says NAEVR/AEVR executive director James Jorkasky, "Members of the vision community recognize Dr. Ryan as the voice for the value of federally-funded vision research, so it was appropriate that he should be recognized by the American Academy of Ophthalmology for his tireless efforts."

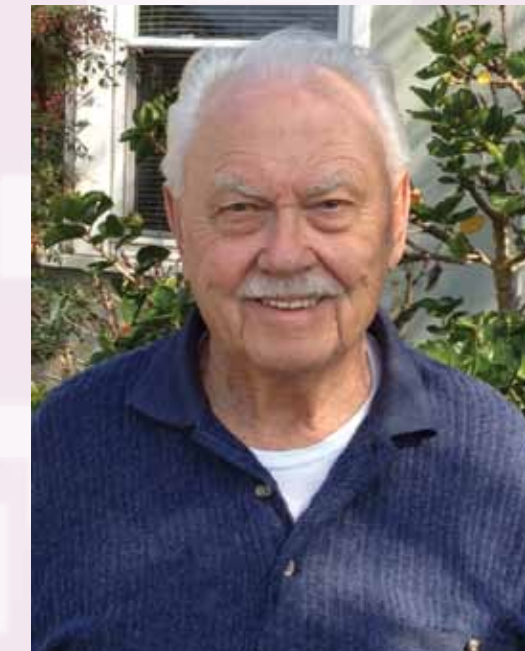
As president of Doheny, Dr. Ryan developed the Institute into a named top-10 program for patient care and in research funding. We are very fortunate to have Dr. Ryan leading Doheny at this pivotal time where new research is promising great advances for preventing, treating, and curing vision disorders. ■



Dr. Stephen Ryan was honored by the American Academy of Ophthalmology with its highest award, the Laureate Recognition Award. Here, Dr. Ryan (center) is being congratulated by his esteemed colleagues Dr. Ronald Smith and Dr. David W. Parke II, executive vice-president and CEO of the Academy.

Helping others see into the future

Glenn Patmore is a person you'd surely enjoy. At 92, he's smart, generous in his conversation, and honest about how life has treated him. You wouldn't guess sitting across from him that he can't see your face — he has learned to cope with his vision loss from age-related macular degeneration (AMD) with poise. But it wasn't always that way. Glenn's diagnosis with AMD tested his mettle, but his innate optimism prevailed.



"By giving to Doheny in this way, I can make a difference and stay involved through the research. You couldn't do any better than Doheny." — Glenn Patmore

Glenn grew up in LA's Manhattan Beach, served in the Navy, and retired from lifelong work as an instrument mechanic for Standard Oil. He's been married for 58 years to his wife Kathleen, better known as Kit, who's become his driver, bookkeeper, overall second set of eyes, and doer of the tasks that were his before AMD. They have two children and five grandchildren.

AMD is a disorder where blood vessels beneath a tiny part of the retina called the macula leak and cause cells of the region to die. The macula gives us straight-ahead vision for reading, TV watching, and the like. New treatments being developed by Doheny researchers and their colleagues worldwide are helping prevent severe vision loss from AMD.

Although Glenn knows full well that his own vision cannot be restored, he is extremely interested in research to prevent AMD and blindness in others. Since a friend introduced Glenn to Doheny in 2008, he has met scientists here and learned about

their research into restoring quality of life for people who have lost their vision. "I learned about this electronic chip that doctors put on the retina," explains Glenn. "They told me about a woman who had no vision, was fitted with the chip, and now has useful black-and-white vision." The Argus II, the device of which Glenn speaks, is not being used to restore vision in AMD, but researchers predict that someday it will (see article on page 1 about the Argus II).

Glenn wanted to do something to help people in the future avoid the anguish he experienced when he lost his vision, just like Carrie Estelle Doheny, who lost her vision to glaucoma, when she founded the Institute with her gift in 1947. After determining that the best way to achieve his philanthropic goal was to fund AMD research at Doheny, Glenn decided to fund a charitable gift annuity. "Blindness alienated me from life's activities. I've always liked being involved," says Glenn. "By giving to Doheny in this way, I can make a difference and stay involved through the research. You couldn't do any better than Doheny." ■

A BEQUEST FOR DOHENY EYE INSTITUTE

Hildegard Warren died in 1997, yet this year her generosity helped support the development of the first device that allows some people who have lost vision to see again.

A bequest for Doheny Eye Institute can advance scientific research in unimaginable ways. Please consider such a gift in your will. If you have already made a provision for Doheny, please let us know. We would like to thank you.

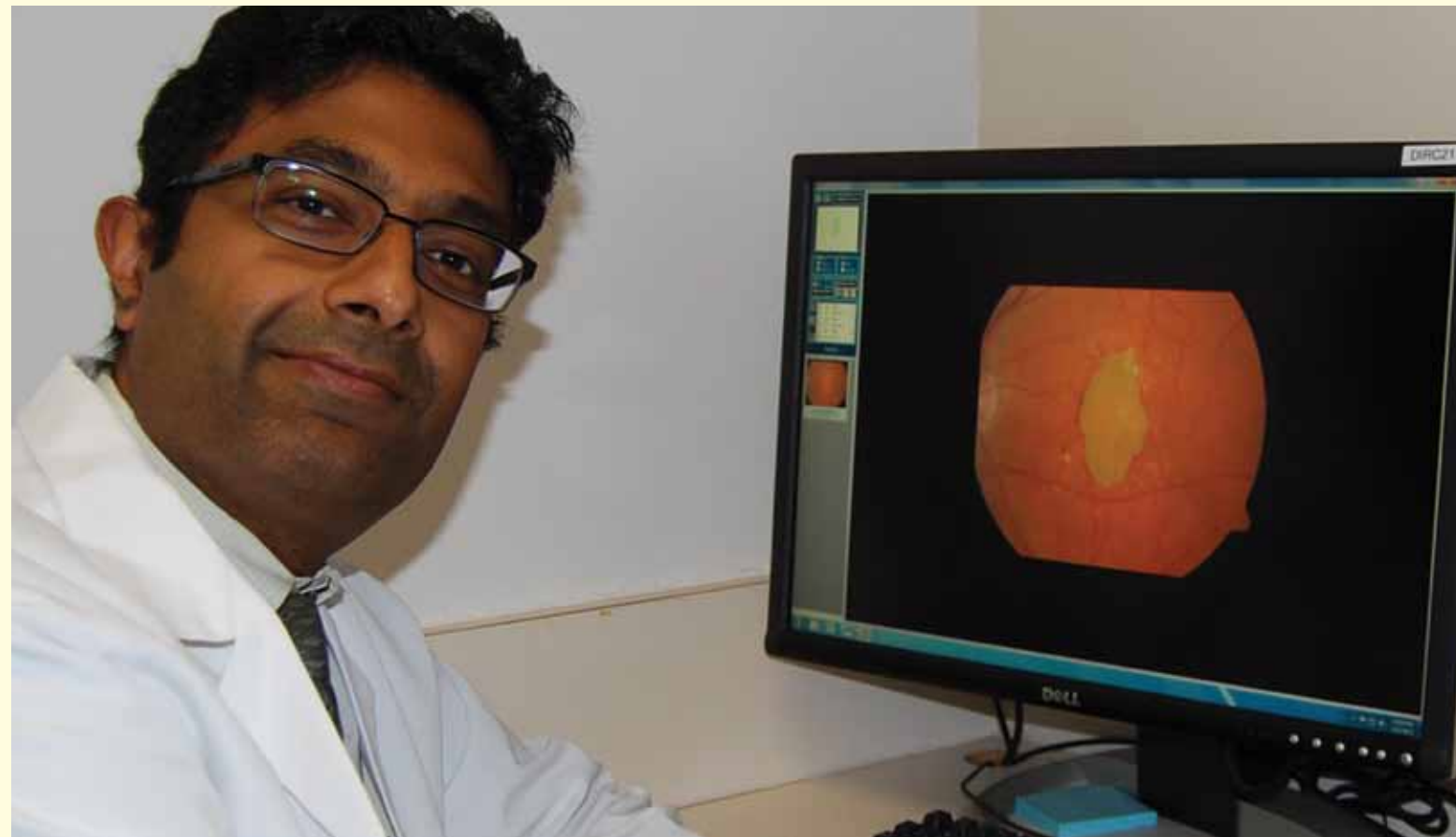
For wills and trusts, the Doheny legal name is Doheny Eye Institute and our tax identification number is 95-2916590. For more information, please contact Suzanne Zolfo, Senior Director of Development, at 323-442-7104 or SZolfo@Doheny.org.

GIFT ANNUITY RATES AS OF MARCH 1, 2013

One Life		Two Lives	
Age	%	Age	%
65	4.7	65/70	4.4
75	5.8	75/80	5.3
85	7.8	85/90	7.3
90+	9.0	90/95+	8.8
Call for rates for other ages.			

In exchange for a contribution of \$20,000 or more, the Doheny Eye Institute will pay you and/or another individual a guaranteed and fixed annuity for life. In addition, the donor receives a current charitable tax deduction. After those receiving the income pass away, the gift is used to further Doheny's mission. Charitable gift annuities can be funded with cash, marketable securities, or real estate. For a free, personalized illustration of how you and Doheny can benefit from a Doheny Charitable Gift Annuity, please complete and return the enclosed envelope or contact Suzanne Zolfo, Senior Director of Development, at 323-442-7104 or at SZolfo@Doheny.org.

Dr. Srinivas Sadda, the founder of DIRC, is director of the Medical Retina Unit, Ophthalmic Imaging Unit, and Retinal Transplantation Laboratory at Doheny. The yellowish feather-shaped feature on the screen is an area of loss of retinal cells in dry macular degeneration that was identified by the DIRC experts.



Doheny Image Reading Center Tells a Story

To some people, the eye is the window to the soul. To Dr. Srinivas R. Sadda of the Doheny Image Reading Center (DIRC), it is a portal to structural and numerical evidence about the eye in health and disease. Scientists worldwide depend on Dr. Sadda and his DIRC colleagues to find answers in the eye's deepest layers and corners. Researchers and physicians transmit sophisticated photo-images of the eye to DIRC where experts quantitate and qualitate eye disease, disease progression, effects of various treatments, and even the flaws of various eye imaging technologies.

"This is very important for us as clinicians and researchers. It assures that our evaluation of a patient's eye condition is accurate and that our colleagues everywhere are making similar assessments," says Dr. Ryan. "DIRC is also helping to confirm that the latest automated technologies are making measurements that we can depend on."

The DIRC experts are uniquely skilled at detecting changes in the eye related to diabetic eye disease, age-related macular degeneration, retinitis pigmentosa, retinal detachment, glaucoma, retinal vein occlusion, and dry eye. Their tools are experience and custom built software for analyzing images and data. They go even further by advising their colleagues on research study design, training photographers, storing data, and providing guidance about data presentation in scientific meetings and publications.

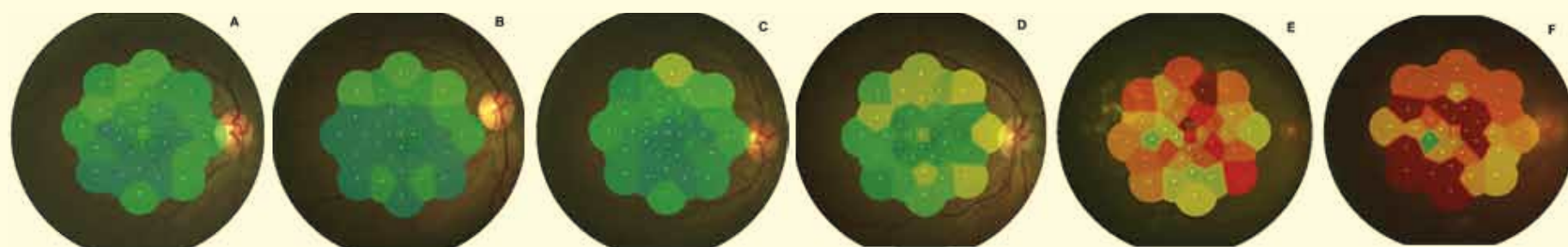
DIRC AND DIABETIC EYE DISEASE

The kaleidoscopic-looking images below show how DIRC experts can use new technologies to map the function of the retina in

patients with diabetic retinopathy. In this illustration the blues and greens denote areas of relatively good retinal function whereas the progressively hotter colors indicate areas where the retinal sensitivity is reduced in eyes with more severe disease. Notice a small island of green (an area of "preserved vision") in the map labeled "F."

A goal of science is to discover treatments that will effectively keep the color scheme tilted toward robust blues and greens. Over 75 million people in the US over the age of 40 have diabetic retinopathy. An over-represented group is Hispanic men older than 75, which in the LA area alone represents many individuals. The National Eye Institute of the National Institutes of Health projects that by 2050 the number of people living with diabetic retinopathy will be 15,000,000 unless we identify new prevention strategies and treatments. The condition can lead to blurred vision, changes in central vision, floating spots in the visual field, and even sudden vision loss. Many people with diabetic eye disease can no longer drive and read, to name a few losses.

Dr. Sadda, the founder of DIRC, has spent his career becoming an eye disease expert. That means he has seen plenty of experimental therapies try but fail to help patients with vision loss. He believes that imaging technologies will be change-makers when it comes to pinpointing eye disease and the therapies that work. Those kaleidoscopic patterns, while beautiful to the untrained eye, are absolutely remarkable to Dr. Sadda and his colleagues in what they say about eye health and disease. ■



TOP HONORS FOR DOHENY'S Alfredo Sadun, MD, PhD

Doheny's Dr. Alfredo A. Sadun recently received the highest honor in his field of neuro-ophthalmology, the William Hoyt Award, from the American Neuro-Ophthalmology Society (NANOS) and American Academy of Ophthalmology (AAO). The honor is bestowed on a clinician or researcher for lifetime clinical or research contributions to neuro-ophthalmology and unselfish service to the field. As the award recipient, Dr. Sadun delivered the Hoyt Lectureship at the American Academy of Ophthalmology 2012 annual meeting in Chicago.

"Alfredo Sadun is the consummate academic neuro-ophthalmologist," says colleague Dr. Steven Feldon, Director of the Flaum Eye Institute of the University of Rochester. "He's made seminal contributions in research, education, and patient care in the US and abroad." Among his best-known contributions to international health was in Cuba where Dr. Sadun worked with the World Health Organization to find the cause of sudden blindness in about 50,000 people living in Cuba. It turned out that folic acid deficiency and a neurotoxin in homemade rum killed mitochondria, cellular organelles that provide cells with energy, and caused blindness through damage to the optic nerve.



Dr. Sadun joined Doheny Eye Institute in 1984 from a faculty position at Harvard Medical School. As a researcher he was the first to identify several optic nerve conditions related to AIDS and Alzheimer's disease.

"Alfredo Sadun is the consummate academic neuro-ophthalmologist... He's made seminal contributions in research, education, and patient care in the US and abroad."

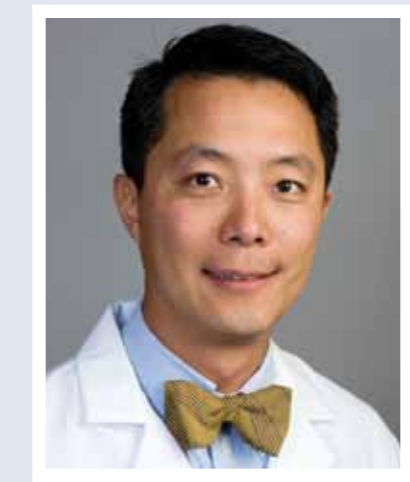
— DR. STEVEN FELDON, CHAIRMAN AND DIRECTOR, DEPARTMENT OF OPHTHALMOLOGY, FLAUM EYE INSTITUTE OF THE UNIVERSITY OF ROCHESTER

His current research involves the role of mitochondria in a rare degenerative vision disorder called Leber's hereditary optic neuropathy (LHON). The blinding condition strikes mostly men in their early adult years. LHON is related to a gene mutation within the mitochondria. Patients from all over the world come to Doheny seeking Dr. Sadun's care. "I feel very fortunate," he says, "that Doheny has provided the ideal culture and resources such that I have been free to pursue the three noble enterprises of the academic mission: research, education and patient care."

Physicians like Dr. Sadun treat patients with vision disturbances related to brain and optic nerve malfunctions. The eye is an appendage of the brain, via its optic nerve connection, and understanding how the eye, optic nerve, and brain integrate visual information is essential to providing the best treatment.

In 2011, US News and World Report named Dr. Sadun a "Top Doctor" in neuro-ophthalmology and optic nerve disorders. ■

J. Martin Heur, MD, PhD WINS RPB AWARD



Meet Doheny Eye Institute physician-scientist J. Martin Heur, MD, PhD. Dr. Heur is a recent recipient of the prestigious "Career Development Award" from Research to Prevent Blindness (RPB), the leading source of private funds for vision research in the country. The award goes to promising junior ophthalmology faculty. Dr. Heur is an Assistant Professor who specializes in disorders of the cornea.

The cornea is the clear portion of the eye overlying the colored iris. Certain medical conditions and injuries harm cells of the cornea and Dr. Heur is studying ways to repair the damage and preserve vision. He is one of the few researchers studying the zebra fish cornea, which has structural features similar to the human cornea, and he is positioned to break new ground in corneal cell regeneration. "RPB's grant review panels immediately recognized Dr. Heur as an outstanding candidate working in a dynamic and resource-rich environment at Doheny," says Matthew Levine, Director of Communications at RPB. "His work could eliminate the need for corneal transplantation in the treatment of some corneal diseases. That is precisely the kind of game-changing breakthrough we're seeking to invest in."

"This is a very competitive grant with numerous applicants from around the country each year," says Ophthalmology Department Chairman Dr. Ronald Smith. "We are extremely proud of Martin's accomplishments." Dr. Heur was recognized earlier by the National Eye Institute of the National Institutes of Health with its own career development award for junior faculty pursuing careers in basic science. Dr. Heur earned his PhD and MD from the University of Cincinnati and completed his ophthalmology residency at the Cleveland Clinic. He joined the Doheny Eye Institute in 2009.

Dr. Heur joins James Tan, MD, a glaucoma clinician-scientist at Doheny who also received the NIH award and the RPB award two years ago. Drs. Heur and Tan make a dynamic team of young clinician-scientists who are the future of ophthalmology.

The RPB grant of \$250,000 over four years supports key parts of Dr. Heur's ongoing research. ■

"His work could eliminate the need for corneal transplantation in the treatment of some corneal diseases. That is precisely the kind of game-changing breakthrough we're seeking to invest in."

— MATTHEW LEVINE, DIRECTOR OF COMMUNICATIONS AT RPB

"TO FURTHER THE CONSERVATION, IMPROVEMENT AND RESTORATION OF HUMAN EYESIGHT."

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UPDATE

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NEWS



THE DOHENY SOCIETY OF SCHOLARS WELCOMES ITS 2013 INDUCTEES

The Doheny Society of Scholars program was established in 2008 to recognize the professional contributions of fellows, residents, faculty, and international scholars who trained at Doheny Eye Institute and have become major leaders in US and international ophthalmology. The elite group is composed of department chairs, presidents of national and international ophthalmological societies, and other key leaders in vision science and education who are driving eye-related research for overcoming vision disorders.

At a formal ceremony on February 8, 2013, Doheny President Dr. Stephen Ryan welcomed two distinguished

physicians and researchers as the 2013 inductees to the Doheny Society of Scholars. They are Taiji Sakamoto, MD, PhD, and Paul P. Lee, MD, JD.

"Dr. Sakamoto and Dr. Lee are models of excellence for the next generation of ophthalmologists who aspire to academic careers in medicine. They have excelled as educators, researchers, and in patient care," says Dr. Ryan.

Dr. Sakamoto, professor and chair of ophthalmology at Kagoshima University in Kagoshima, Japan, was a visiting research fellow at Doheny from 1993-94. He is a retina specialist whose research has led to improvements in surgical and medical treatments for a range of eye disorders in adults and children. One of his many projects is a 10-year study of the ocular effects of volcanic eruptions in Japanese schoolchildren. He is also expert on an unusual condition called Vogt-Koyanagi-Harada disease, author of more than 200 scientific articles and nearly 50 books and book chapters, and the owner of two patents for technologies for improving the delivery of therapies to the retina. Dr. Sakamoto has received numerous academic honors including the Research to Prevent Blindness Foreign Scholar Fellowship and the Silver Medal of ARVO (Association of Research and Vision in Ophthalmology) Fellowship.

"Dr. Sakamoto has made significant contributions to the practice of ophthalmology in many ways, including his clinical research that compares technologies and treatment approaches," according to Dr. Ryan. "His excellent early work at Doheny was a clear harbinger of his success today."

Dr. Sakamoto earned his MD and PhD degrees from the Faculty of Medicine at Kyushu University.

Dr. Lee is professor and chair of the Department of Ophthalmology and Visual Sciences at the W.K. Kellogg Eye Center of the University of Michigan Medical



Dr. Lee was associate professor of ophthalmology at Doheny/USC, from 1991-97. His ophthalmic specialty is glaucoma, a condition that damages the optic nerve and can lead to severe vision loss.

"We all know Paul Lee because of his cutting edge research in glaucoma and health policy. Doheny was extraordinarily fortunate that Paul chose Doheny for his first faculty position. The University of Michigan will go to even greater heights because of his leadership. Paul is recognized around the world for his leadership and remarkable contributions. He is an excellent leader and physician," says Dr. Ryan. "I am proud to count him among my friends and colleagues."

While at Doheny, Dr. Lee became one of the few academic ophthalmologists in the country to specialize in health policy. He conducted the first eye care work force study, a landmark study in the field of health care policy and in eye care. His current research focuses on understanding the route by which effective health care is delivered, a process that extends from the laboratory to the home of patients.

Dr. Lee earned his law degree from Columbia University and his medical degree from University of Michigan followed by advanced training at Harvard University and Johns Hopkins University.

"These leaders continue the deep commitment that was the founding principle of the Doheny Eye Institute—to further the conservation, improvement, and restoration of human eyesight," remarked Dr. Ryan. "We all take great pride in their accomplishments." ■

(From left) Dr. Stephen Ryan, Dr. Paul Lee, Dr. Taiji Sakamoto and Dr. Ronald Smith at the Doheny Society of Scholars induction event.



#8 Nationally

U.S. News & World Report
Raises Doheny Rank to

Once again the BEST HOSPITALS edition of *U.S. News & World Report* named the Doheny Eye Institute as a top-ranked program, rising from ninth position to #8 among 100 major US ophthalmology programs. Doheny has been a *U.S. News & World Report* top-10 ranked program since the mid-1990s.

"The *U.S. News & World Report* ranking reflects the skill and dedication of the entire Doheny staff," says Dr. Stephen Ryan. "Our patients have access to the most innovative treatments anywhere. Year after year we seek to make advances that benefit our mission, patients, and community."

The Doheny mission was crafted in 1947 by Carrie Estelle Doheny when she envisioned and funded the organization. As she so aptly stated, the Doheny mission is to "... further the conservation, improvement and restoration of human eyesight."

True to its mission, Doheny became a premier vision research and education institute; a center

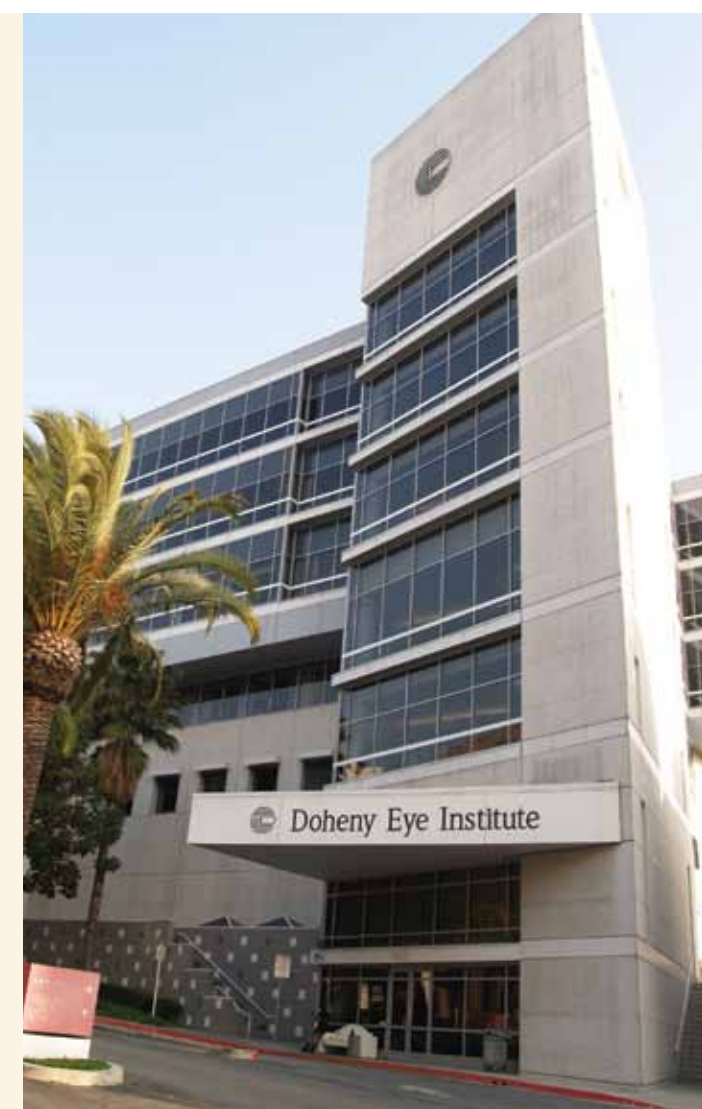


of knowledge and innovation; and a hub for training ophthalmologic world leaders.

The Institute's research programs continually result in new discoveries, including in areas related to:

- Artificial vision
- Dry eye
- Diabetic eye disease
- Cell and gene therapies for age-related macular degeneration and other vision disorders
- Prevention of common eye conditions
- Optic nerve repair
- Treatments of rare eye disorders like Leber's hereditary optic neuropathy (LHON)
- Advanced cornea transplant techniques

The Doheny Eye Institute began in two small rooms at St. Vincent Hospital in 1947. Today, as a major institute and world leader, Doheny is proud to have the trust and acknowledgement of its patients and peers. ■



IN MEMORIAM

Remembering JOHN HODGKINSON, MD

Bernard J. Hodgkinson, MD, better known as Dr. John Hodgkinson, helped shape Doheny Eye Institute in important and lasting ways starting in the 1970s as adjunct professor of ophthalmology and eventually becoming chair of Macular Degeneration Research and Clinical Care at the Doheny Eye Institute in Rancho Mirage. Dr. Hodgkinson was a key figure in the opening of the Rancho Mirage location.

"He was a great clinician, eye surgeon, and supporter of Doheny," says Dr. Ronald Smith, chair of the USC Department of Ophthalmology. "For many years he would drive weekly to Doheny from his office in Palm Springs to teach residents and conduct research, all as a volunteer."

Dr. Hodgkinson died on March 24, 2011, at the age of 75. At the time, Dr. Hodgkinson and Doheny were working on the expansion of Doheny services into the Coachella Valley.

Dr. Hodgkinson was born in Melbourne, Australia, where he lived and earned a medical degree before heading off to London in 1961 for post-graduate training. His passion for learning then took him to Johns Hopkins University School of Medicine, Yale University School of Medicine, and Harvard Medical School Massachusetts Eye and Ear Infirmary where he was first a Verhoeff Fellow in Ocular Pathology (1968-69) and then a retina fellow pursuing a specialty in disorders of the retina.

He was a man of commitment to his profession and the world community. In 1970 he served as a professor of ophthalmology at the Saigon Medical School. He subsequently sponsored Vietnamese medical students in the US and supported US adoption programs for Vietnamese children.

In 1975 Dr. Hodgkinson opened his ophthalmology practice in Palm Springs and shortly thereafter began his association with the Doheny Eye Institute. John Hodgkinson will be greatly missed by patients, friends, and colleagues. ■



"He was a great clinician, eye surgeon, and supporter of Doheny."

— DR. RONALD SMITH

Remembering WILLIAM H. TILLEY

William H. Tilley, MBA, a member of the Doheny Eye Institute Board of Trustees, died on January 4, 2013, at the age of 73. Mr. Tilley served on the board of Doheny beginning in 1986 and later as a life member. He is remembered for his business leadership and devotion to the Institute.

"The skills that made Bill a highly successful businessman also made him a key member of the Doheny Board," explained Dr. Stephen Ryan. "He consistently provided great advice to me and Doheny. Bill and his wife Nadine were most generous to Doheny and other causes as part of their personal philanthropy, and exemplified what it means to care deeply for an organization. Bill will be sorely missed."

Bill Tilley studied at USC as an undergraduate and graduate student, earning an MBA with honors in 1963. Soon after, he and a colleague founded the accounting firm Tilley & Roth, which subsequently merged with Main LaFrance and ultimately into Peat, Marwick. In 1971, upon the death of his father (Jack J. Tilley), Mr. Tilley assumed control of The Jacmar Companies, launched in 1938 by the elder Tilley. Today, Jacmar is a residential, commercial, and industrial real estate development and property management company with additional interests in Shakey's USA, BJ's Restaurants, and Jacmar Foodservice Distribution. In other words, Bill Tilley was a man of vision and productivity.

In addition to attending USC as a student, Mr. Tilley also taught business and finance at the USC Marshall School of Business and the USC Gould School of Law, from 1963 to 1966. He was known as a mentor who loved to grow businesses and as a generous philanthropist. His goodwill also extended to the Congressional Medal of Honor Foundation, Natural History Museum of Los Angeles, Peterson Automotive Museum, and Boys Republic, among others.

William H. Tilley was born in Los Angeles on October 22, 1939. His wife Nadine and two children, Jon and Nicole, survive him. ■

"The skills that made Bill a highly successful businessman also made him a key member of the Doheny Board."

— DR. STEPHEN RYAN





UPDATE



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— Ask the EXPERT —



Dr. Srinivas Sadda

Dr. Srinivas Sadda is an expert in age-related macular degeneration (AMD). He knows more than nearly everyone about technologies being developed to detect, classify, and treat AMD. Dr. Sadda is director of Doheny’s Medical Retina Unit, Ophthalmic Imaging Unit, and the Doheny Image Reading Center (DIRC).

AMD is a degenerative eye disorder. It affects about 1.75 million people in the US. Many people with AMD lose their ability to see “straight ahead,” which we need for activities like reading, driving, and TV watching. New, injectable drug treatments can stop AMD progression in some people and even restore portions of lost vision. Doctors and patients are calling it a major breakthrough.

Dr. Sadda is among a handful of researchers working on ways to recognize early AMD and to develop treatments based on the different stages of disease.

We interviewed Dr. Sadda to learn more:

Q: Who qualifies for this amazing new treatment?

A: The patients who benefit from these new injectable treatments are those with “wet” macular degeneration where abnormal blood vessels develop under the macula and can bleed and damage vision. The new drugs can stop the bleeding and make the abnormal blood vessels disappear.

Q: What can you tell us about the genetics of AMD? Should family members be tested?

A: There are at least two major genes and several other minor genes that appear to be important in increasing the risk for developing macular degeneration. Research is ongoing to determine the functions of these genes and how abnormalities in the genes lead to the disease. I do not routinely recommend genetic testing. It does not currently affect how we treat the disease. Eating a good healthy diet, avoiding smoking, and generally promoting good cardiovascular health seem to be helpful for lowering the risk for AMD. I would recommend everyone (all family members) work towards these goals regardless of their genetic risk.

Q: What will be the next big treatment breakthrough?

A: We have effective treatments for the manifestations of wet AMD. However, many people still go on to lose vision slowly over time due to progressive “dry” AMD where retinal cells are gradually lost over time (a process called atrophy). I expect the next big breakthrough will be a treatment that slows or stops this progression. This will be the first step in developing an actual cure for AMD.

Q: Is it easy to get an appointment to be seen by you?

A: Absolutely. You simply need to call the main appointment number (323-442-6522) and ask for an appointment with me. I would be delighted to see you and do my best to help. ■

FAQ