

# VISIONARY

Cornea Research Foundation of America - Bringing Vision to Future Generations



May 2003

## *The Eyes Have It!* Can This Epidemic Be Cured?

Wouldn't the world be a better place if no one ever needed glasses or contacts? Today, [the most common visual problem across the world is nearsightedness](#). This is actually a recent development and was not the case just two to three generations ago. Studies are showing conclusively that increased near-visual activities, such as reading, lead to increased nearsightedness. In fact, some of the most recent studies show greatly accelerated rates of nearsightedness in various populations as the rate of education increases. Both the frequency and also the severity of nearsightedness increases as the rate of education rises.

Evidence is building that nearsightedness is indeed stimulated by reading and possibly other near work. In fact, nearsightedness has become an epidemic in Asia since many countries there have instituted mandatory education. In three generations some areas have seen the rate of nearsightedness increase from less than 20% of the population to over 90% of the young adults. In our country, where good data on nearsightedness is actually harder to obtain, the rates also seem to be rapidly increasing.

Our eyes are just like anything else. The original equipment is always better than any of today's fixatives. The longer your vision stays intact the better your chances are of avoiding visual problems. Studies have shown that as nearsightedness develops in people, it increases the incidence of glaucoma,

cataracts and difficulties with the retina.

To combat this ever-increasing problem, the Cornea Research Foundation wants to perform a pilot study to help



prevent the onset of nearsightedness in children. If the results of this study are promising, we will then seek government funding for a larger, more definitive study. We believe our proposed plan will lead to the [prevention of nearsightedness](#) in children without any surgical or pharmaceutical (drug) intervention. We view this as [one of the most important public health initiatives to be undertaken so far in this century](#). In the past, studies have primarily focused on treating nearsightedness once it has occurred using either glasses, contact lenses or surgery. The Cornea Research Foundation now wants to prevent nearsightedness from ever occurring in the first place.

We would like to [encourage](#) you to become part of [this worthy project](#) to benefit your children, grandchildren, and great grandchildren. Tax-deductible contributions towards this valuable research project will help the

Foundation preserve the sight of our future generations and eliminate a precursor to many visual impairments afflicting older adults, as well. At a time when people appear to be focusing more on self-preservation rather than bold problem solving, please help us in our quest.

Why the immediacy? Consider this: A child born today will be the same child we will be targeting to educate with the results of our study. What if a simple pair of reading glasses is all it will take to eliminate this worldwide problem? Our study is targeted to begin next year in the fall of 2004. Several area schools have shown an interest in being a part of this project. Won't you help us achieve our goal? Donate today by using the enclosed envelope. The Cornea Research Foundation of America is a not-for-profit organization that does not currently receive any government funding for this initiative and is totally dependent upon private donations. [Should we not ÷put our energy and money where they will have the greatest long-term impact÷ our children?](#)

### **“ask THE doctor”**

**Q: Is there any procedure that can reduce headlight glare after cataract surgery?**

**A:** In some cases we can use a Yag laser to open a cloudy capsule. However, we may not be able to do anything more than been done previously. A follow-up appointment is suggested so your situation can be properly reviewed.

**Cornea Research  
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## Message From The President of CRFA

Dear Friends,

Last week I found an old term paper that I had written back in high school. The assignment was to describe the role of South-East Asia in the world economy by the year 2000. It was a seemingly impossible task. Back then Mao was in the throes of his Cultural Revolution, students in Arizona were conducting "tuck and duck" drills, and my friends were beginning to receive their draft cards. Our old Jesuit priest had wisely instructed the class to hold onto their papers. "Human will can move a mountain", he said, "but the human heart decides its fate". Always have faith in the human heart. It will keep your futures bright.

Nearly 40 years later, China is now the fastest growing market in the world and soon to become the world's largest economy. The missile silos in Tucson have been decommissioned and are toured by hundreds of grade school students each year. Our teacher was wiser than ever imagined.

Regardless of recent events, our future, and that of our children, continues to be bright and without bound. The Foundation enters the second quarter of 2003 with significant momentum. This issue of the Visionary highlights several exciting Foundation studies that I think you will enjoy learning about. Our current and continued success is due, to a large degree, to the hearts of donors and contributors, like you. Thank you for your continued support and enthusiasm. Through you we will continue with the preservation and restoration of vision.

Sincerely,  
Francis W. Price, Jr., M.D.



## A Word From Our Board...

Like any non-profit organization, CRFA relies on charitable gifts for its funding. Often, when donors think about making a gift, they picture writing a check. While this may very well be the easiest type of gift for the foundation to process, sometimes it's not the most convenient for the donor. In this edition of the newsletter, we want to take a moment to introduce some other methods and strategies of charitable giving, offering what we hope are some more convenient options for you to meet your gifting goals.

- **Gifts of appreciated property** Last fall we offered the example of giving shares of common stock with low cost bases. This makes sense from a number of perspectives, perhaps the most significant of which is that it offers the donor the chance to make a gift of property that would otherwise carry a significant tax liability. CRFA has established an account at Goelzer Investment Management to accommodate your gifts of this type to the Foundation.
- **Annual pledges of periodic gifts** Waiting until year end to write a single check might leave donors wishing that they were in a position to make a more significant contribution to the organizations they truly value. Planning for and committing to gifts in advance could well facilitate meeting your gifting aspirations.
- **Reassignment of life insurance** If you find yourself with too much life insurance coverage, you might consider making a charity the beneficiary of the policy. If you have a paid-up policy this becomes an even more attractive option in that it requires no additional contributions on your part.
- **Employer matching** Many companies offer limited matching of their employee's charitable gifts. If your firm does not offer matching gifts, perhaps the officers would respond positively to the suggestion.
- **www.cornea.org** Perhaps you are one of the increasing number of people who shop, invest, or pay bills on line. To facilitate this trend, CRFA has developed the ability to receive your credit card contributions via the foundation's web site. Scores of other organizations have made this option available as well.

***There are many ways to make gifts; the important point is that we each do. Not only do numerous non-profit organizations need our partnership, but giving is also a profoundly simple way to move from financial success to civic significance.***

*Walter Gross is a member of Goelzer Investment Management's Policy Committee with over three decades of asset management experience. Before joining Goelzer, he was a wealth management advisor for Bank One managing over 65 individual accounts representing total assets of almost a billion dollars.*



Walter Gross

## ***Ophthalmologists from Around the US Participate in Second Advanced Cornea Course***

### **CRFA Offers New Sutureless Surgical Procedure**

March 25-26, 2003 the Cornea Research Foundation sponsored the second Advanced Cornea Course for ophthalmologists wanting to enhance their surgical skills. The two-day advanced training course including live surgery and practiced in the lab, is designed to teach surgeons from across the nation a new method of cornea transplantation. This program features sutureless(no stitch) corneal transplants, posterior lamellar grafts and anterior lamellar grafts. To ensure that all attendees can get hands on experience, class size is limited. Next sessions will be held; July 29th-30th; September 30th-October 1st.



*Attendees of March 2003 Advance Cornea Course*

*Visit our new web site [www.cornea.org](http://www.cornea.org)  
Donations can now be made on  
this secured site be using your  
Visa or Mastercard!!*

## ***Study Evaluates New Antibiotic to Treat Eye Disease and Prevent Surgery Infection*** **New Medicine May Aid Cataract Patients and Children with “Pinkeye”**

CRFA recently announced the results of an important eye study testing how well a new antibiotic penetrates the eye to combat eye infection. As detailed in the *Journal of Ocular Pharmacology and Therapeutics*, the new antibiotic, Ofloxacin, penetrates the eye over twice as effectively as other older, currently used antibiotics. Ofloxacin eye drops may now be used to help prevent infection in patients undergoing eye surgery, such as cataract surgery. The improved penetration of this new antibiotic is exciting news not only for surgery patients but also because it means that this penetrating antibiotic may be more effective for treating *ōpinkeyeō*, a highly contagious eye disease that is commonly encountered in children.

Building on these recent findings, a second study is slated to begin soon to evaluate another new antibiotics, Zymar. This new antibiotic, developed by Allergan, is anticipated to have even higher penetration in the eye and combat a broader range of bacteria than available in current eye drops. Anyone who is considering cataract surgery and who would like to be considered for this new study, may contact the Cornea Research Foundation of America at 1-800-317-EYES.

Who does CRFA believe will benefit the most from this study? People who will be having eye surgery, contact lens wearers, and children. These groups are at the highest risk for developing eye infections and will be among those who benefit the most from this type of research.

## ***6th Annual Cornea Golf Classic Tees-off June 4th***

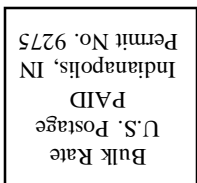
It's that time of year again! The temperatures are warming, the sun is shining and our thoughts turn toward the great outdoors. That could only mean one thing ō time for the annual Cornea Golf Classic. The Cornea Golf Classic is the main fundraiser of the year for the Cornea Research Foundation of America. One hundred percent of the proceeds generated from this outing go toward funding of research.

This first-class golf outing will be held on Wednesday, June 4<sup>th</sup>, at the Golf Club of Indiana. Registration starts at 11:30 AM and fees include lunch, green fees, cart and a wonderful dinner provided by Jugō. Everyone walks away with a nice gift, plus there will be a very exciting silent auction and raffle featuring many valuable items. A TV/VCR combination, a jersey signed by Peyton Manning, a football signed by the Notre Dame coaching staff and a basketball signed by ?? were a few of the items featured in last year's ō auction and raffle. Indianapolis ō own Jeff Pigeon of WIBC radio will preside over the silent auction, raffle and awards ceremony.

If you would like to enjoy a great day while contributing to a worthwhile cause, please contact Sherry Levy at 317-814-2823, fax 317-844-5590 or email [sherrylevy@pricevisiongroup.net](mailto:sherrylevy@pricevisiongroup.net).

Thank you to the sponsors who have supported us in the past, and special thanks to Jim Harper, National City Bank, CRM Group, Wallington Assets, Great Frame Up, Starbucks, St. Elmo, Some Guys Pizza, and Conner Prairie who have shown their continued support as of April 1, 2003 for this year's ō 2003 Golf Classic.





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## ***Foundation Named US Medical Monitor Site for Artificial Iris Unique Solutions to Surgical Challenges***

Phase 1 of the Oculaid® Iris Reconstruction (artificial iris) clinical trial is underway. CRFA was honored to have our President, Dr. Francis W. Price, Jr. named the U.S. medical monitor for the study. Dr. Price performed the first surgery in the study in August 2002.

The Artificial Iris Implant is made of, PMMA, the most common type of plastic used to make contact lenses and artificial intraocular lenses to replace the natural lens. Until now, this plastic has been primarily used in cataract surgeries. The artificial iris comes in blue, green and brown. This new iris can block excess light from entering the eye so that patients are not as easily incapacitated by glare and light sensitivity as they were before, when they did not have a complete iris.

Our first artificial iris patient had a traumatic injury to his left eye in 1999. He was left with a small rim of iris, no lens, and his vision could only be corrected to 20/100 at best. (Figure 1) He complained of constant glare and photophobia. In August 2002, a blue artificial iris with IOL was placed. (Figure 2) He has noticed a marked improvement in photophobia and glare. Visual acuity is now correctable to 20/60.

Who does CRFA believe will most likely benefit from this procedure? People with a missing iris or an iris defect, or people whose iris has endured some type of trauma will benefit tremendously. To date most patients have been over the age of 21. However, as Dr. Price pointed out, we have done the procedure on a 14 year old boy who lost his iris in an accident, and it has been very beneficial for him, both from a functional and from a cosmetic standpoint.



*Fig 1. Before*



*Fig. 2 After*