

SEARCHLIGHT ON GLAUCOMA

The Glaucoma Service Foundation to Prevent Blindness

Board of Trustees: Maxine Colm, EdD, President • Leonard M. Rosenfeld, PhD, Vice President
George L. Spaeth, MD, Director of Medical Research and Education • L. Jay Katz, MD, Secretary
Craig J. Firestone, CPA, MBA, Treasurer

Jesse Levy • Irvin Schorsch • Susan Schneider, MD • Richard Smoot • George Strimel
Charles Tressler, MD • Jeremiah J. White, Jr. • Ken Wong

Honorary Trustees: Charlotte Bonmartini • Steve Harmelin, Esquire • James Kim
Karen Palestini, Esquire • Zeff Lazinger, DC • Jonathan S. Myers, MD

Announcing the 11th Annual CARES Conference Please Register Now!!!!

The Glaucoma Service Foundation to Prevent Blindness is hosting the 11th Annual CARES Conferences on Saturday, May 12, 2018, at the Dorrance H. Hamilton Building at Thomas Jefferson University, 1001 Locust Street, Philadelphia, PA from 8:00 AM to 1:00 PM.

Since January 2007, the Glaucoma Service Foundation located at the Wills Eye Hospital has held a day long conference called the “CARES Conference.” CARES stands for “Committed to Awareness through Research, Education, and Support.” This is a patient directed educational conference about glaucoma. Last year, over 350 patients and their families from around the United States (primarily Pennsylvania, New



*CARES Attendee being screened
Photo: roger barone/Glaucoma Service Foundation*

Jersey, Delaware, and New York) attended this conference.

The event includes ground breaking lectures by Wills Eye Glaucoma physicians. Free glaucoma screenings are offered and encouraged for those who are at risk and have

never been diagnosed with glaucoma. In addition, educational resources and information are available at the CARES Conference to patients living with glaucoma.

Representatives from pharmaceutical companies with patient assistance programs, Associated Services for the Blind, Philadelphia Corporation for Aging, Library for the Blind, Pennsylvania’s Initiative on Assistive Technology (PIAT) Institute on Disabilities at Temple University and the Wills Eye Glaucoma Research Center will be on hand.

The conference begins with a continental breakfast. We look forward

(continued on page 2)



A Message From Our President



Dear Reader,

With the arrival of spring, I am happy to tell you that our annual CARES

Conference is scheduled for Saturday, May 12th on the campus of Thomas Jefferson University.

As in years past, this informative

conference is designed for everyone interested in seeking the latest information about glaucoma, new advances in research, and ways to make living with glaucoma as easy as possible. In a word, this is your conference. There is no cost to attend and listen to outstanding physicians from Wills Eye who can also answer your questions and concerns. Attendees also have the opportunity to be screened for glaucoma. We hope you will join us on May 12th.

The enclosed envelope will enable our physicians to continue their research efforts to eradicate glaucoma and to support community-wide activities, such as the CARES Conference. Please assist us in continuing this important work with your donation.

Thank you.
Maxine Colm, EdD
President

Announcing the 11th Annual CARES Conference

(continued from front page)

to seeing you there!

Many thanks to Aerie Pharmaceuticals, Akorn, Allergan, and Novartis Pharmaceuticals for their continued support of the CARES Conference throughout the years. A special thank you to *The Robison D. Harley Fund for Glaucoma Education and Research* for their dedication continued sponsorship.



CARES Student Volunteer
Photo: roger barone/Glaucoma Service Foundation



Dr. Danile Lee examining attendee
Photo: roger barone/Glaucoma Service Foundation

Register by e-mailing: Rita Stern
(stern@willsglaucoma.org)

Please call Rita Stern at (484) 678-4535. You will need to provide your name, address, phone number, number of guests, and email.

Website:

The following link takes you to a web page dedicated to CARES with information on registration, parking, accommodations, etc:

www.willsglaucoma.org/cares

There will be no charge to attend but space is limited, so please register NOW! ■



Ben Franklin (Robert DeVitis) and our CARES volunteers.
Photo: roger barone/Glaucoma Service Foundation



E B Spaeth Oration - February 1, 2018

The Glaucoma Service Foundation celebrated the annual E B Spaeth Oration on February 1, 2018 at the College of Physicians. John E. Crews, DPA, was the keynote speaker. His lecture was entitled "Intersection of Public Health and Vision."

It was the 41st year of the event which honors Edmund B. Spaeth, who was a busy, internationally respected physician and teacher. Edmund Spaeth passed away at age 86 in 1976. The evening, devoted to celebrating great teaching and great teachers, brings together fellows, residents, and medical students from Wills Eye Hospital, Temple, Thomas Jefferson University, Salus University, Scheie



John E. Crews, DPA (center) and Dr. George L. Spaeth (left)

Photo: Howard Piktow Photography

Eye Institute, Drexel, Children's Hospital of Philadelphia, and Philadelphia College of Osteopathic Medicine and ophthalmologists from all over the Greater Delaware Valley. Representatives from Aerie Pharmaceuticals, Akorn Pharmaceuticals, Allergan, Cherry Hill Medical Recruiting Center, Glaukos and Novartis

Pharmaceuticals were also in attendance and joint sponsors for this wonderful informative evening. Dr. Crews spoke passionately about the need for more oversight and investigation of vision and its impact on quality of life of individuals and of society. He brought full circle the current situation with that of his Father in the early part of the century. The intent of this unique event is to broaden and deepen ophthalmologists' understanding of the art and science of medical practice. It is an educational evening both academically and socially. The event is also part of the Greater Philadelphia Ophthalmic Society's series of programs. ■

Support the Glaucoma Service Foundation through Amazon

Support Glaucoma Service Foundation

When you shop at smile.amazon.com

Amazon donates.

[Go to smile.amazon.com](http://smile.amazon.com)

amazon smile

We are excited about a new fundraising initiative that we have set up called AmazonSmile. Amazon may already be an online source that you use for purchases. By entering the following link (<http://smile.amazon.com/ch/23-2106693>) into your browser, 0.5% of your eligible purchases will support the Glaucoma Service Foundation. You need only set this up one time and your AmazonSmile account will remain linked to the Glaucoma Service Foundation.

Please consider supporting the Glaucoma Service Foundation to Prevent Blindness by using this link for your future Amazon purchases.



Who is the Expert: You or the Doctor?

by George L. Spaeth, MD

Marian Filar was among the greatest interpreters of Chopin's piano music. Filar was born in the Polish countryside, and imprisoned in Buchenwald during World War II. Vigorous and magically musical, he played with most of the great orchestras, but his time in a concentration camp took its toll. Nevertheless he lived to be 95. At every one of my lessons with him somewhere along the way he would say "If you want to live a long time drink red wine and stay away from doctors!"

There is scientific evidence that drinking red wine is healthy. But the evidence is controversial. There is no doubt that drinking lots of red wine is NOT healthy. Regarding staying away from doctors, there has never been a study to show benefit or harm. My hunch is that he is both right and wrong. He is wrong for some people, because there is little doubt that a person with meningitis or appendicitis or many other illnesses is likely to be helped by seeing a competent doctor. But those types of conditions are relatively rare. There is also little doubt that the many people who have self-limited conditions - and this accounts for most illnesses - are better off if

they never see a doctor.

Do people with glaucoma need to see an MD? Balantray Chauhan, PhD has recently shown that majority of people who have the commonest form of glaucoma get worse so slowly that treatment may be unnecessary for them. Because physicians order treatments routinely, and ordering a treatment is often what pays the doctor's rent, the default position of most physicians is "when in doubt treat." The importance of this is physicians are or should be, in doubt most of the time. So the majority of people being treated for glaucoma probably do not need treatment, But the treatments cost money and have side effects: all treatments cost money and have side effects.

I wonder whether, on balance people would be healthier if they followed Professor Filar's advice. I know that getting a few baseline evaluations is wise: it is wise because noting a change is often the only way a condition can be diagnosed when it is early enough that treatment is beneficial I also know that the presence of certain signs and symptoms should lead to an examination. For example, if a person notices a black "mole" on

his forearm that suddenly appeared and it is getting larger he should definitely see a doctor, to learn whether it should be removed or not. It is believed that when a person has a malignant melanoma removed when the melanoma is small the person almost never dies from a melanoma, but if left alone death is usual. But for a condition that develops slowly and is usually not going to cause a problem, such as glaucoma, I wonder if my music teacher was probably right. ■

**I hope you
enjoy the GSF's
*Searchlight
on Glaucoma*
newsletter**

**If you do, please be sure
to visit our website at
www.willsglaucoma.org
and our FaceBook page
*Glaucoma Service
Foundation to Prevent
Blindness***

Thanks,
L. Jay Katz, MD
Secretary, Glaucoma Service
Foundation



Look Before You Leap

by George L. Spaeth, MD

A doctor's daughter (a high school friend) called me because she was concerned about her persisting fatigue and "shakiness." She had been told she had "Mono" eight months earlier, but she still felt awful and was worried. I asked her if she was taking any medications, and she said "About 20." I asked her to name the medications, "Metformin", "Why do you take that?"

"I don't know but the doctor told me to take it." "What else?"

"Acyclovir." "Why?" "I think it has something to do with a virus." She knew the names of a few of the others, but had little idea why she was taking them.

I was concerned. The symptoms of mononucleosis don't last eight months. And almost anybody who is taking 20 medications is going to feel sick and shaky. "Did you ask for a consultation?" "He said I would not get an appointment for six months." "I will get you a consultation."

I called one of my prior fellows, now practicing in a large city near her home. He called back the next day. She was seen the next week and was told "You did have mononucleosis, but at this time you are seriously anemic - I believe due to a B12 deficiency - and I

advise injections of Vitamin B-12. The B-12 pills you are taking don't get absorbed."

She called later to say she was feeling better. But not great. And SHE WAS STILL TAKING THE 20 MEDICATIONS. She was not going to get well. "See your doctor and tell him you will not take any medication unless he can tell you with certainty that you will be sick if you don't take it, and that the sickness will be worse than the side effects you will probably get from the medications. If he does not tell you that STOP the medication."

This story comes in various forms, but common to all is the failure of the people to consider themselves responsible for their own well being. After all "the doctor knows best." The doctor should know things that a person who has not been medically trained doesn't know. But the person is the ONLY one who knows how he or she feels and for what she hopes. That she, the daughter of a well known doctor, had no idea how to care for herself was not surprising: most doctors don't want people to care for themselves - apparently her father didn't.

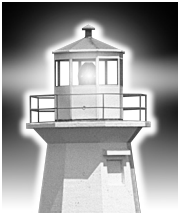
People are sick or well because of the inter working of their genes (the building blocks) with their environment - the classic nature and nur-

ture. We are stuck with the genes we were given. But how we live influences how those genes act. How we live turns some genes on and others off. In reality who we become is who we create ourselves to become. Important aspects of how we live include the doctors we chose and how we interact with those doctors. The more accurately and completely we honestly tell them how we feel and what we want, the better they can do their jobs well. If they don't know how we feel and what we want they will guess. If they suggest a treatment, it is our responsibility to ask "Why?" and if the answer does not make sense to say "That doesn't make sense to me."

When we buy a new home we make sure to inspect it carefully so we KNOW what we are buying, because we know WE are responsible for the home we get. Yet we don't think that way about ourselves regarding our state of health, our most important "home".

Our well-being and our illnesses are almost never considered to be of our own making. We rarely congratulate ourselves for feeling great and try to figure out why that is. We almost never consider ourselves to be the one most responsible for feeling sick, and figure out why that

(continued on back page)



GLAUCOMA SERVICE FOUNDATION TO PREVENT BLINDNESS

Editor: Rita Stern
Rita@mrs-stern.com

840 Walnut Street
Philadelphia, PA 19107-5109
215-928-3190
www.willsglaucoma.org

Printing and distribution of the Searchlight are made possible through generous contributions from our donors.

Look Before You Leap

(continued from page 5)

is, which may require consulting one who knows more about somethings than we do. Our job is to use “experts”, such as doctors to get what we want, not to have them tell us what they think we want.

It is easy to blame other people or conditions over which we feel no control. Those who are overweight frequently blame their “hormones;” but, except for rare conditions, the truth is that one is overweight because one eats more than one needs. If we wish to be as well as our building blocks (our nature) will allow us to be, we have to want that to happen, learn how to make that happen and then do what is necessary to have it happen. This is often difficult, especially for those on limited incomes and those with little practice or access to learning. It is our community responsibility to make it possible for those who want to be accountable for their own health to do so.

If we lived in a world in which people held themselves responsible for being sick or well, and in which society made it possible for people to do what they needed to do to be well, we would all be happier and healthier.

Please support the Glaucoma Service Foundation by making a donation today in the enclosed envelope

GLAUCOMA SERVICE STAFF AT WILLS EYE HOSPITAL

Mary Jude Cox, MD
Elizabeth Dale, MD
Scott Fudenberg, MD
L. Jay Katz, MD
Daniel Lee, MD
Anand Mantravadi, MD
Marlene R. Moster, MD
Jonathan S. Myers, MD
Rachel Niknam, MD
Jody Piltz-Seymour, MD
Michael J. Pro, MD
Jesse Richman, MD
Courtland Schmidt, MD
Geoffrey Schwartz, MD
George L. Spaeth, MD
Monisha Vora, MD
Rebecca Walker, MD