VISIONS

Koret Vision Research Laboratories + Beckman Vision Center + Department of Ophthalmology + Francis I. Proctor Foundation **Fall Annual Report 2011** University of California, San Francisco + That Man May See

Focal Point

Dear Friends,

Providing sight for the blind is among our loftiest aspirations.

According to the World Health Organization (WHO), 39 million people are blind and nearly 245 million individuals suffer from visual impairments that make everyday tasks difficult. The WHO also reports that 80% of all visual disability can be avoided or cured. This requires access to medical care, early detection, and use of ever more advanced technology.

Our Visions newsletter illuminates what can be done today to save and restore sight that might only have been dreamed of a decade ago. UCSF's proximity to Silicon Valley and rigorous vision science collaborations across our campus greatly accelerate the speed of research breakthroughs. We are extremely proud of our faculty and staff, who are dedicated to making a difference. We hope you will enjoy reading about the groundbreaking efforts of Drs. Jacque Duncan and Alejandra de Alba Campomanes.

Please join us in welcoming new faculty members Drs. Reza Vagefi and Ying Han and new residents and fellows. These are the next generation of ophthalmology leaders.

Thank you for helping us celebrate the 40th anniversary of That Man May See. Your support through our foundation makes progress possible – as basic science and translational research rely on your early-stage investments. We are extremely grateful for your loyalty.

Sincerely,

Stephen D. McLeod, MD
Theresa M. and Wayne M. Caygill, MD, Endowed Chair
Professor and Chairman

Envision the Future
Innovation Sparks Hope

Jacque Duncan, MD, director of the Retinal Degenerations Clinic at the UCSF Department of Ophthalmology, uses a novel imaging system – a revolutionary microscope that takes pictures of the retina – to determine the impact of new treatments on patients' retinal cells. She recently demonstrated that a time-release protein therapy encapsulated in a tiny implant significantly slowed the progression of retinal cell loss in three patients with retinitis pigmentosa. Without her findings, this promising device – and decades of research – might have been discarded.

Dr. Duncan's advances in the use of retinal imaging have the potential to transform clinical trials over the next three to five years, speeding delivery of effective therapies to patients slowly losing their sight. "Novel technology is allowing us to actually see the impact of experimental treatments at the cellular level," says Dr. Duncan.

It is no surprise that Dr. Duncan, who holds the Steven G. Kramer, MD, PhD, Endowed Chair in Ophthalmology, is regarded as a visionary in retinal research. Over the past 15 years, her numerous investigations have deepened the understanding of inherited retinal diseases. Now, with her colleague Austin Roorda, PhD, she is blazing a new trail to transform how ophthalmologists assess innovative treatments. Her many awards and accomplishments provide ample support for Department Chair **Stephen D. McLeod, MD**'s praise: Dr. Duncan is among "the most accomplished and promising clinicians and scientists at work in ophthalmology today."

Continued on page 2

Ophthalmology Insight
New Technologies for Tiny Patients

One morning in 1954, David and Elva Sinai hurriedly boarded a propeller plane in Reno with their one-year-old twins. Aline and Ann had been born prematurely, and Ann had already been diagnosed with retinopathy of prematurity (ROP), a disorder of retinal development that would quickly leave her blind. The Sinai's physician had urged the family to rush the girls to UCSF Ophthalmology for specialized evaluation and treatment. Upon arrival, pediatric

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A PEEK INSIDE:

Innovation Sparks Hope

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Millions May Benefit

Dr. Duncan's patients face severe and sometimes untreatable vision loss. In the United States, age-related macular degeneration (AMD) is the leading cause of central vision loss for those over the age of 50, affecting more than 9 million Americans. Throughout the world, millions more are at risk. Some AMD patients now benefit from an approved treatment (the drug ranibizumab, marketed as Lucentis) that can slow vision loss, as well as the drug bevacizumab (marketed as Avastin). For retinitis pigmentosa (RP), a rare disorder that also causes irreversible vision loss, there are no proven treatments. RP affects approximately 100,000 Americans. The two diseases share many similarities, even though AMD is often complicated by environmental factors such as smoking and high-fat diets.

currently in human clinical trials at UCSF Ophthalmology. Dr. Duncan is the principal investigator of these two very different devices developed by renowned UCSF vision scientists **Matt LaVail, PhD,** and **Eugene de Juan, Jr., MD**.

The Neurotech implant (below, left) is designed to slow retinal degeneration. The human protein it delivers directly to the back of the eye was first identified by Dr. LaVail and his team at UCSF's Koret Vision Research Laboratories. Based on Dr. LaVail's hypothesis, the group explored eight proteins and found one that could protect retinal cones from dying. Neurotech, a biotechnology firm focused on developing sight-saving drugs and technologies for chronic retinal diseases, developed an implant that delivers a continuous dose of this protein to the retina. Dr. Duncan was chosen by

> *"Novel technology is allowing us to actually see the impact of experimental treatments at the cellular level."*
>
> – Dr. Jacque Duncan

Cones – Crucial to Central Vision

For vision to occur, light passing through the lens at the front of the eye must stimulate the retina, a highly specialized tissue covering the inside of the back of the eye. Light-sensitive retinal cells known as photoreceptors then send individual bursts of chemical messages to the brain. The brain assembles millions of these chemical messages into a visual image.

Dr. Duncan's research focuses primarily on cones, the type of photoreceptor cell that is crucial to central vision and facial recognition. Because we use facial expressions to understand and navigate personal interactions, the loss of facial recognition is among the most devastating and socially isolating aspects of blindness.

Biomedical Research Drives Solutions

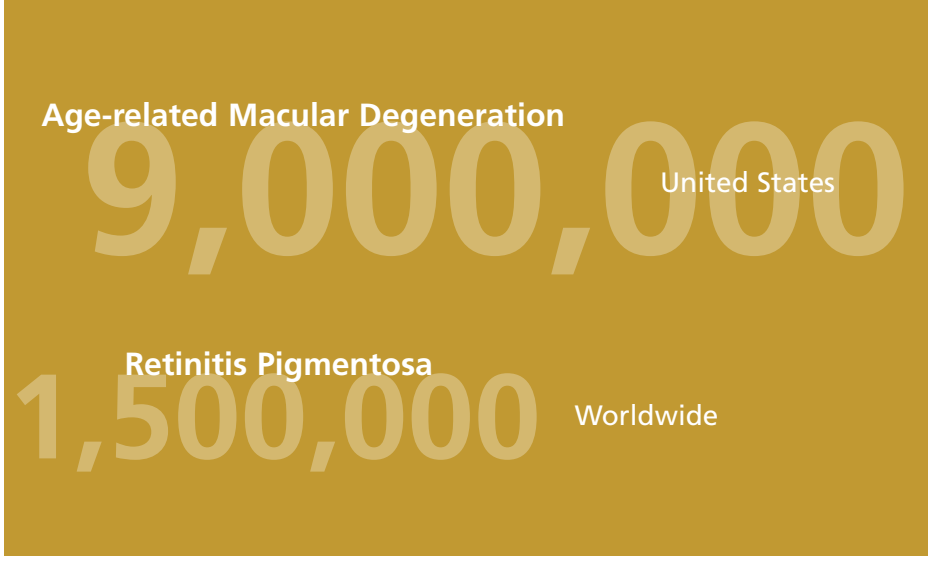
Advances in genetics and bio-engineering are opening new opportunities to help patients overcome blinding retinal diseases. Two groundbreaking retinal implants are

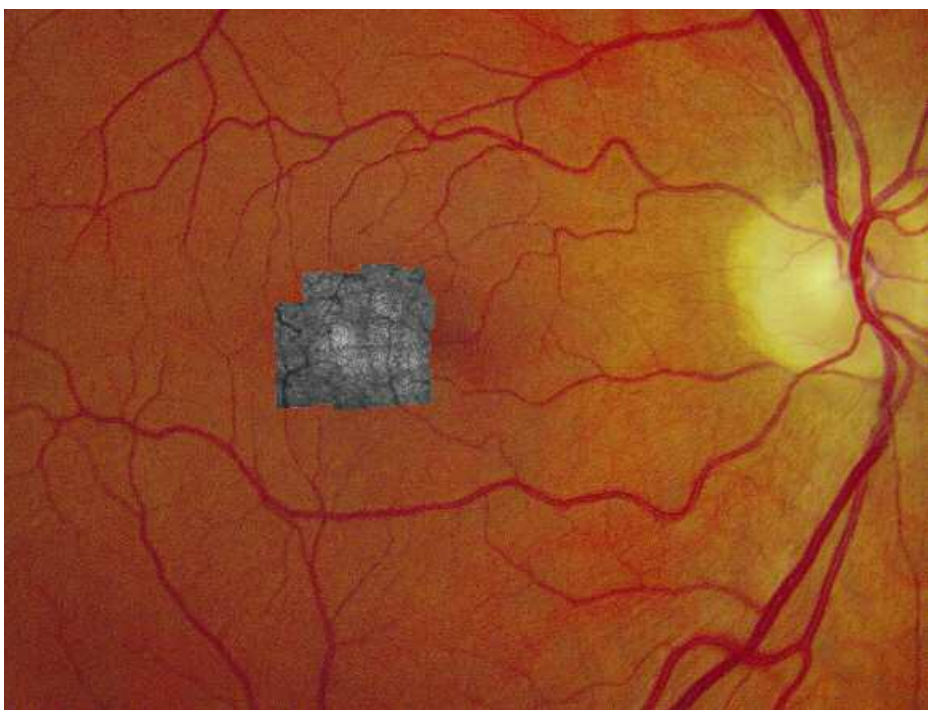
Neurotech to lead the clinical center at UCSF in two of the three large-scale trials of this protein delivery system.

The Argus II Retinal Prosthesis System (below, right) has a different goal – to restore sight to patients who have already lost their vision. Dr. de Juan is a founder of the company that develops this technology (see page 3: "Retinal Prosthesis Brings Sight to the Blind").

Making Vision History

Now, using the AOSLO imaging system, Dr. Duncan and Dr. Roorda (who is affiliated with the University of California, Berkeley) will be the first vision scientists to conduct a long-range study on the survival of rods and cones in living human eyes with retinal degenerations. The four-year investigation, funded by The Foundation Fighting Blindness and the U.S. Food and Drug Administration, follows two tracks. The first will measure the rate of retinal cone loss in RP patients' eyes treated with the Neurotech ocular implant and compare it with the rate of





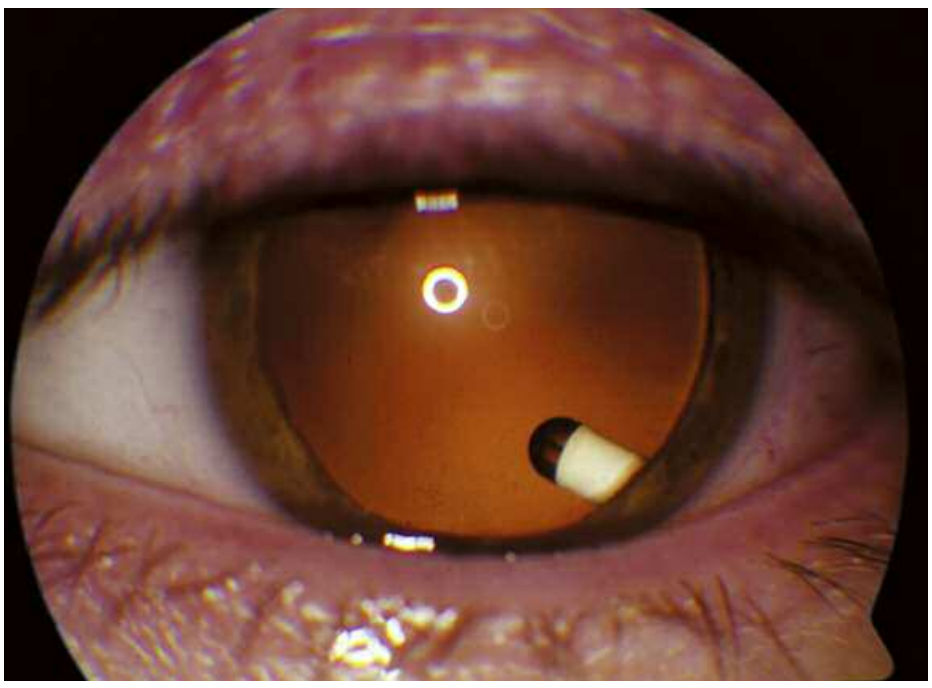
Dr. Duncan images live retinal cells with the Adaptive Optics Scanning Laser Ophthalmoscope. Here her highly detailed images are mapped onto a retinal photo.

retinal cone loss in each patients' other eye, which will receive a sham treatment. This will allow the team to document precise details of the progression of cone loss in RP and potentially demonstrate the effectiveness of a sight-saving treatment. "The lessons we learn about retinitis pigmentosa will help us advance solutions for AMD as well," says Dr. Duncan.

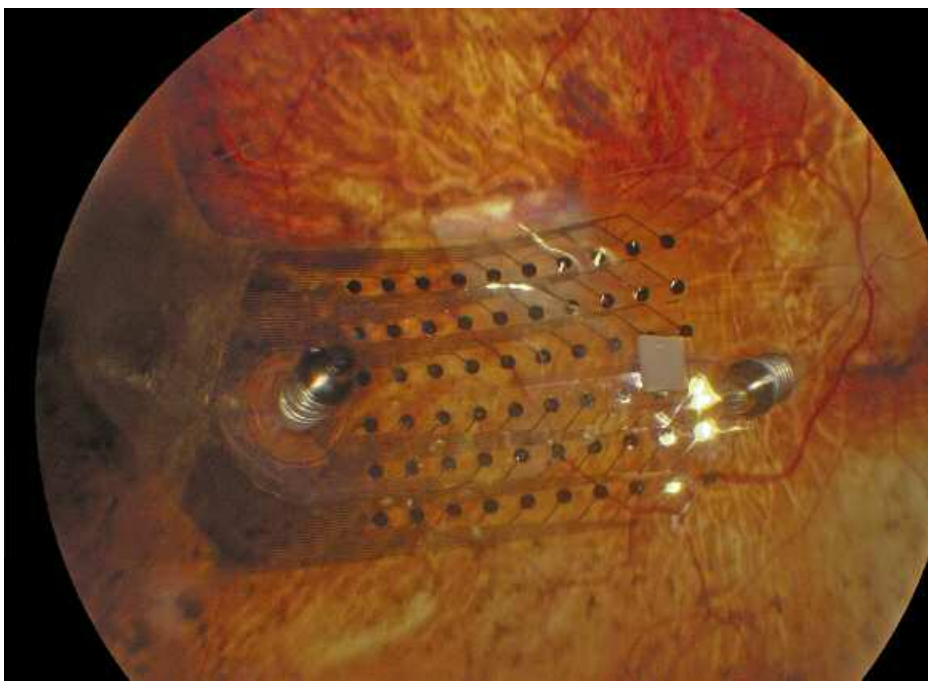
A parallel study track is designed to validate the AOSLO imaging technology, perhaps elevating it to become the new gold standard for assessment of cone survival. By accurately measuring the survival rate of retinal cones in healthy eyes, Dr. Duncan plans to document what vision scientists have believed for many years – that the number and density of cone cells remains constant in healthy eyes for about the first 70 years of life.

Opening the Field for Innovators

If the AOSLO is proven significantly more sensitive to photoreceptor survival than current measurement systems, it should shorten future clinical trials by accelerating the documentation of retinal cell survival and loss. In turn, shorter trials would decrease costs, opening the field for a wider range of researchers to pursue new approaches to desperately needed sight-saving treatments. ●



Neurotech's protein delivery device, shown implanted in the eye, is designed to protect retinal photoreceptors from dying in patients with retinal disease.



This Argus II chip, implanted in the back of the eye, is part of a prosthetic system that restores rudimentary sight to the blind.

Clinical trial patient Dean Lloyd

Retinal Prosthesis Brings Sight to the Blind

After living with darkness for two decades, 70-year-old attorney Dean Lloyd can again see primary colors and certain shiny objects. The Los Altos Hills resident can now navigate along a white line on a dark floor and locate an object on a computer screen, bringing him greater connection with the world around him.

Dean was a 24-year-old medical student when he was diagnosed with retinitis pigmentosa, a blinding inherited disease. He changed career paths to biochemistry, engineering, and finally law. His vision remained relatively stable for many years before fading and ultimately vanishing. Decades later, his disease still lacks effective treatment.

Breakthrough Technology Provides Hope

As a participant in UCSF Ophthalmology clinical studies of the Argus II Retinal Prosthesis System, Dean is one of the first 30 patients ever to benefit from the device, which is being tested at ten eye institutes worldwide. **Jacque Duncan, MD,** leads the UCSF center of this clinical trial. An experimental chip has been implanted at the back of his eye as part of a complex electrical system that gives him rudimentary vision. "I can now see edges and borders and boundaries. An eye looks like a star to me," says Dean.

The system captures images from a miniature video camera mounted on a pair of close-fitting glasses and converts the images into electronic impulses that travel wirelessly to the array of electrodes implanted in Dean's retina. Finally, the electrodes stimulate his surviving inner retinal cells (the cells that communicate visual images to the brain), resulting in a corresponding perception of patterns of light. Dean learned to interpret these visual patterns, thereby gaining some functional vision.

From Dream to Wireless Device

Eugene de Juan, Jr., MD, who holds the Department of Ophthalmology's Jean Kelly Stock Distinguished Professorship, long dreamed of finding a way to help those with the most severe vision loss to recover sight. As a founder of Second Sight Medical Products, Inc., he has doggedly pursued his goal. The Argus II recently received European marketing approval, making it the first approved treatment ever available for sightless people.

Second Sight Medical Devices is awaiting approval from the U.S. Food and Drug Administration and continues to advance its Argus technology. ●

"This is the culmination of a 24-year dream – an idea emanating from a medical student and an engineering neighbor – to restore sight to the blind by electrically stimulating damaged retina. At UCSF, I appreciate working with great doctors in a great environment to make the dream a reality."

– Dr. Eugene de Juan

Hearst Fellows Gain Mentors

Through yearlong fellowships generously funded by the George and Rosalie Hearst Endowment, UCSF Ophthalmology is providing exceptional young vision scientists with advanced training and mentorship. **Judith Espinoza-Navarro, MD,** of Mexico City and **Ricardo Lamy, MD,** of Rio de Janeiro are investigating ways to improve sight for people in their countries.

Reducing Childhood Blindness

Dr. Espinoza-Navarro is keenly aware that Latin America leads the world in rates of preventable child blindness due to retinopathy of prematurity. (See "New Technologies for Tiny Patients," page 1.) The majority of vulnerable babies in Latin America receive no screening or treatment for the disorder. With her mentor, **Alejandra de Alba Campomanes, MD, MPH,** Dr. Espinoza is initiating research that promises to help predict which Latin American infants are most at risk for severe retinopathy of prematurity.

Advancing Corneal Care

Dr. Lamy divides his fellowship time between research and learning opportunities with corneal patients. **Jay Stewart, MD,** mentors Dr. Lamy's investigation of new ways to increase the stiffness of the cornea for those with diseases that cause progressive corneal thinning and distortion, such as keratoconus. He also observes **Bennie Jeng, MD,** as he treats patients with complex corneal cases in the clinic and operating room. Dr. Lamy will perform these advanced surgical techniques when he returns to Brazil, where they are currently unavailable.

Bridges to Excellence

The Hearst Fellowships, now in their fifth decade, help UCSF Ophthalmology fulfill its mission of outreach to underserved communities. Hearst Fellows are invited to return to UCSF Ophthalmology at the tenth anniversary of their fellowship to share what they have learned and news of their current projects in a lecture to UCSF Ophthalmology's alumni association.

UCSF vision scientists continue to nurture relationships with Hearst Fellows long after they return home, often to major eye centers at universities where they pass on what they learned from top-ranking specialists. "I am very much looking forward to strengthening collaborations after I return to Brazil, through joint research and clinical projects," says Dr. Lamy. ●

Judith Adriana Espinoza-Navarro, MD

Birthplace: Cuernavaca, Mexico

Medical School: National Autonomous University of Mexico

Internship: Hospital Manuel Gea Gonzalez, Mexico City

Residency: Fundacion Hospital Nuestra Señora de la Luz, Mexico City

Personal Interests: Guide dogs and pet dogs (a giant schnauzer is waiting in Mexico), food from the Yucatan peninsula, dancing, and music

Ricardo Lamy, MD

Birthplace: Rio de Janeiro, Brazil

Medical School, Residency, Cornea Fellowship, Masters, and Doctorate: Federal University of Rio de Janeiro

Personal Interests: Science and physics books, documentary films, soccer, golf, and the beach

Saving Young Sight

Dr. Alejandra de Alba Campomanes

To avert blindness, baby Maya is screened weekly to monitor a retinal disorder caused by prematurity.

Alejandra de Alba Campomanes, MD, MPH, leads UCSF efforts to prevent vision loss from retinopathy of prematurity (ROP). The disorder occurs in babies born prior to proper retinal development *in utero*, and those born more than eight weeks early or weighing less than 1,500 grams are at particular risk. ROP is a leading cause of child blindness and visual impairment in the United States and around the world.

Lasers and Teams Improve Outcomes
In the United States, as late as the 1980s, nearly 60 percent of babies with ROP suffered blindess or a detached retina. Cryotherapy, which freezes parts of the retina, was introduced for ROP in the late 1980s; it reduced that number to 25-30 percent. Today's laser surgery has reduced the incidence of these severe outcomes to less than 15 percent. "ROP intervention is one of the most cost-effective procedures we do, as it prevents a lifetime of vision impairment," says Dr. de Alba.

Dr. De Alba monitors retinal blood vessel development in the highest risk infants on a weekly basis. When she identifies an infant whose ROP progression necessitates surgery, she must perform the laser procedure within a 72-hour window. Rapidly scheduled laser surgery stops the erratic growth of blood vessels but sacrifices part of the peripheral vision to allow normal development of the central vision. Most infants with ROP will not require this surgery, but they remain at risk for vision loss, severe near-sightedness, strabismus, and amblyopia far into childhood.

Dr. de Alba teams with neonatologists to ensure better outcomes for premature infants with myriad health problems, and research for better ROP solutions continues. New therapies, such as the ocular injections approved for age-related macular degeneration, may prove effective and safe for infants over the long term.

Support for Struggling Families
Women with few resources are more likely to deliver their babies early, and they face more barriers to attending weekly screenings. At San Francisco General Hospital, Dr. de Alba's efforts have increased awareness of ROP in the nursery, and a new ROP Coordinator stays in touch with parents, monitors hospital exams, and supports follow-up in the weeks, months, and years after baby goes home.

To improve pediatric vision care at San Francisco General Hospital, a dedicated pediatric ophthalmology unit is under development, supported by the fundraising efforts of That Man May See. "Having the appropriate equipment and a calm clinical setting makes the exams easier on overwhelmed families," Dr. de Alba says.

Reducing Disparities in Blindness
Through her ROP research and advocacy, Dr. de Alba addresses unanswered questions and works to improve outcomes for those most at risk. In the United States, babies of African American, Latino, recent immigrant, and low-income populations are all at greater risk of poor ROP follow-up care and thus for damaged sight. In developing countries, at-risk infants routinely become blind simply because they were never screened for ROP. And many hospitals, communities, and even countries lack the knowledge and tools to reduce life-long blindness from ROP. Two-thirds of children blinded as a result of ROP live in Latin America.

San Francisco General Hospital is ideal for Dr. de Alba's investigation of why ROP behaves differently in certain populations. Dr. de Alba also partners on efforts to improve ROP screening and treatment in her home country of Mexico, where she advocates for resource sharing among rural communities. ●

New Technologies for Tiny Patients

Continued from page 1

ophthalmologists found that Aline, too, was suffering from ROP. Thus began the family's long relationship with UCSF Ophthalmology – a relationship that would save Aline's sight more than once.

Aline Sinai's Journey
Carefully monitored at UCSF, Aline had correctable sight as a child. But ROP left her vulnerable and, at age 13, she lost use of her right eye to acute glaucoma. Yet Aline counts herself lucky - her later surgeries came on the cusp of research breakthroughs and technological advances, allowing UCSF's retinal team to preserve sight in her left eye despite the challenges. "It's amazing how the timing of my surgeries allowed me to benefit from new procedures and tools," she says.

Alexander Irvine, MD, twice repaired retinal tears in Aline's eye using laser surgery, a new development at the time (1987 and 1988). When she developed a cataract, **Jorge Alvarado, MD,** replaced her lens (1992). Dr. Irvine later repaired her retina yet again, using a procedure he helped pioneer - the vitrectomy (1995). Aline has now been surgery free for more than 16 years. She retains 20/30 vision, which allows her to read small print and retain an active lifestyle.

The Sinai Family Legacy
The Sinai Family remains involved with UCSF Ophthalmology both through Aline's vision care and the philanthropic activities of the foundation her father established. "I'm fascinated by what we can do for young children today," says Aline.

Aline Sinai and her twin sister Ann were born with retinopathy of prematurity before modern treatments were available. Her family has long supported UCSF initiatives to improve pediatric ophthalmology.

> *"I'm fascinated by what we can do for young children today."*
>
> – Aline Sinai

In the early 1970s Aline's father David became a founding board member of That Man May See, the public charity that raises private support for UCSF Ophthalmology. As an attorney, David supported That Man May See throughout his life.

Aline is proud that her family's foundation is a leading contributor to pediatric initiatives at UCSF Ophthalmology. The Visual Center for the Child on the Parnassus campus serves many low-income families from California, Nevada, and beyond. A Contact Lens Fund assures that babies who undergo cataract surgery receive the artificial lenses they need to develop normal sight. And now the Sinai Foundation is helping San Francisco's most vulnerable families with a major gift to create a new pediatric ophthalmology unit at San Francisco General Hospital.

The Sinais continue to ensure that today's young patients benefit, much as Aline did, from UCSF's commitment to innovation and excellence in treating blinding childhood disorders. Saving children's sight is a family tradition. ●

Major contributors to the new pediatric ophthalmology unit at San Francisco General Hospital include the David and Elva Sinai Foundation, the Bernard A. Newcomb Foundation at the Silicon Valley Community Foundation, the Kimball Foundation, the Herbst Foundation, Kern Family Fund, the Koret Foundation, and Morgan Stanley Foundation.

ANNUAL REPORT 2010-2011

Dear Friends of That Man May See,

This annual report for That Man May See for fiscal year 2010-2011 coincides with the celebration of our 40th anniversary as a support foundation. So much has happened in these four decades: from breakthroughs in vision research made possible by generous private contributions to the launching of our new website (www.thatmanmaysee.org) developed with the pro bono help of our Taproot Foundation team. Our founders could not have imagined that we now communicate instantaneously in this way!

I am tremendously proud of the work of our board and the faculty we support. We appreciate hearing the gratitude of patients who benefit. Your gifts offer more than hope. You provide tangible advancements that relieve the burden of those suffering from the most complex conditions of the eye.

Supporting one of the finest eye institutes in the country motivates our efforts. Contributions increased this year, despite a challenging economy. We continue to be cautious in our spending and careful stewards of the investment you make.

Your gifts to That Man May See inspire progress at UCSF's Department of Ophthalmology and Francis I. Proctor Foundation for Research in Ophthalmology. I want to thank you again for your loyalty and commitment to our cause.

Sincerely,

Daniel Benatar
Chair, Board of Directors
That Man May See, Inc.

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Professor and Director, Francis I. Proctor Foundation for Research in Ophthalmology

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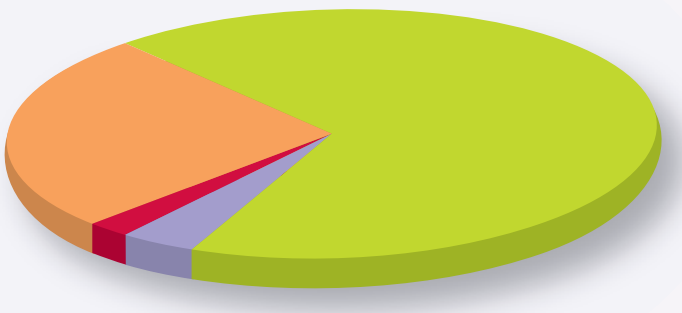
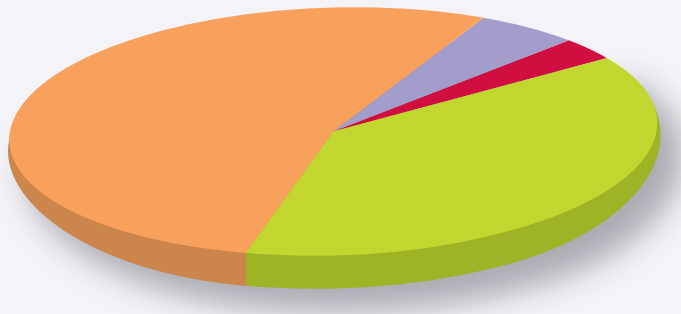
***In Process*

Fundraising Review: That Man May See Generated Funds





Sources of Funds	Direct to TMMS	Via Other UCSF Entities*	Total	%
Donations and new pledges from Individuals	$1,731,043	$130,000	$1,861,043	26%
Donations and new pledges from Corporations and Foundations	$4,693,400	$148,000	$4,841,400	68%
Bequests and Trusts	$27,256	$292,108	$319,364	4%
Earnings on Deposited Funds**	$141,541		$141,541	2%
Total	**$6,593,240**	**$570,108**	**$7,163,348**	**100%**

Application of Funds	Actual	%
Research, Education, Patient Care, and Community Services:		
Dispersed Funds	$2,743,397	38%
Committed Funds	$3,818,469	53%
Fundraising	$366,211	5%
Management and Administration	$235,271	3%
Total	**$7,163,348**	**100%**

*Board of Regents & UCSF Foundation
**Includes fee reimbursements from UCSF

"UCSF Ophthalmology is a world-class technological leader. I see it as a jewel, an asset to be nurtured for the long-term good of our community."

– John P. Rohal, Vice Chair, That Man May See Board of Directors

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Welcome New Faculty

Dr. M. Reza Vagefi
Oculoplastic, Reconstructive, and Orbital Surgery

M. Reza Vagefi, MD, is thrilled to return to the UCSF Department of Ophthalmology, where he completed his residency before accepting a two-year fellowship at the Center for Facial Appearances in Salt Lake City. He particularly values his UCSF mentors: **Jorge Alvarado, MD, Brooks Crawford, MD, Creig Hoyt, MD, Stephen McLeod, MD, Daniel Schwartz, MD,** and **Stuart Seiff, MD,** and the breadth of experience he received in his training.

His most recent post was at the Scheie Eye Institute at the University of Pennsylvania, where he served as Assistant Professor within Oculoplastic and Orbital Surgery and as Director of the Oculoplastic Service at the Philadelphia Veterans Administration Medical Center.

> *"Dr. Vagefi adds tremendously to our oculoplastics team."*
>
> – Dr. Stephen D. McLeod

Department Chair **Stephen D. McLeod, MD,** notes that the Department of Ophthalmology "immediately recognized Reza as a supremely talented surgeon during his time as a resident. The University of Pennsylvania provided him with a great environment for developing his expertise in the challenging cases we see at UCSF."

Dr. Vagefi clearly holds a special place in his heart for UCSF and San Francisco. "It is great to be able to find a home at an institute of such high caliber," Dr. Vagefi says. "I am excited to be able to work with such an outstanding team of physicians and especially to have **Dr. Robert Kersten** as an oculoplastics partner."

"With the addition of Dr. Vagefi, we now have an extremely strong team in oculoplastics that does justice to the legacy of UCSF Ophthalmology, considered the birthplace of modern oculoplastics under **Crowell Beard, MD,**" adds Dr. McLeod.

Dr. Vagefi brings clinical and surgical expertise in disorders of the eyelid, lacrimal system (the eye's tear drainage system), orbit (the bony cavity that contains the eye and its associated muscles, vessels, and nerves), eyelid malignancies and reconstruction, blepharospasm, rehabilitation of the anophthalmic socket, and cosmetic surgery. His research interests include orbital inflammation and implant design.

A foreign film aficionado and gourmand, the new faculty member enjoys time with his wife Joy, his newborn son Jasper, and their dog Mochi. "We feel fortunate to move back to a beautiful area that has so much to offer," he says.

The department's philosophy of teaching the next generation of leaders resonates with Dr. Vagefi, who wishes "to be a preserver" of this commitment. "I look forward to training residents and fellows who rank among the world's best," he adds.

Dr. Vagefi passionately believes that teamwork leads to the best patient outcomes possible. "I enjoy being able to provide excellent care while interacting not only with my colleagues in ophthalmology but also with those in neurosurgery, head and neck surgery, facial plastic surgery, and other areas as we coordinate surgical treatment of some very complex patient conditions," he says.

Dr. Ying Han
Glaucoma

Inspired to enter the field of medicine by her grandfather, a primary care physician in China, Ying Han, MD, PhD, enjoys combining her compassionate care for glaucoma patients with research and teaching. She divides her time between the San Francisco Veterans Administration Medical Center and the UCSF Parnassus campus.

At the Veterans Administration, Dr. Han plays a critical role in providing expert glaucoma care, as well as teaching and supervising residents. At the Department of Ophthalmology, she joins a team of expert clinicians and surgeons, including mentors **Robert Stamper, MD, Jorge Alvarado, MD,** and **Shan Lin, MD.**

> *"Dr. Han brings new energy to an outstanding team, and we are very excited about the trajectory of our glaucoma program."*
>
> – Dr. Stephen D. McLeod

With a practice that serves patients ranging from infants to veterans and the elderly, Dr. Han handles all areas of glaucoma management and surgery. She is well prepared for these challenges, having completed residency training and a glaucoma fellowship at UCSF. In her pediatric practice, Dr. Han has special compassion for families whose infants are diagnosed with glaucoma. "Visual outcomes for infants are more guarded than for adults, and it is difficult to break that news to parents," she says. Dr. Han and her husband are parents themselves and spend as much time as possible with their one-year-old daughter Ruqing (pronounced Roo-ching).

For her doctoral research at the University of California, Berkeley, Dr. Han used advanced diagnostic tools to map and model early functional abnormalities in the vision of diabetes and glaucoma patients. Currently, she is interested in creating sensitive, cost-effective glaucoma screening and monitoring protocols. Because this disease so often begins to steal sight before a patient notices, screening is crucial.

Glaucoma is the second leading cause of blindness worldwide. Dr. Han's work has important implications for detection and effective treatment in rural areas with few medical resources, such as those in developing countries, as well as for structured health care systems such as the Veterans Administration. Her broad research interests also include novel surgical approaches and innovative ways of delivering medicines directly to the eye.

"We are tremendously fortunate at UCSF to have been able to recruit someone with the rare combination of surgical talent, clinical acumen, enthusiasm for teaching and sophisticated research skills that Dr. Han has developed through her extensive clinical and research training," says **Stephen D. McLeod, MD.** "Dr. Han brings new energy to an outstanding team, and we are very excited about the trajectory of our glaucoma program."

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Robotics Hastens Biomedical Breakthroughs

"Last year our lab technicians processed 20,000 tissue samples by hand for DNA genotype analysis, an investment in excess of 2,500 hours," reports vision research scientist **David Sretavan, MD, PhD.** Now that is changing. A new robotics inoculation and processing system - supported by a generous gift from Don and Judy McCubbins and Judy's mother Ermina Dykstra - is expected to reduce processing time by 70 percent - from about seven days to just two.

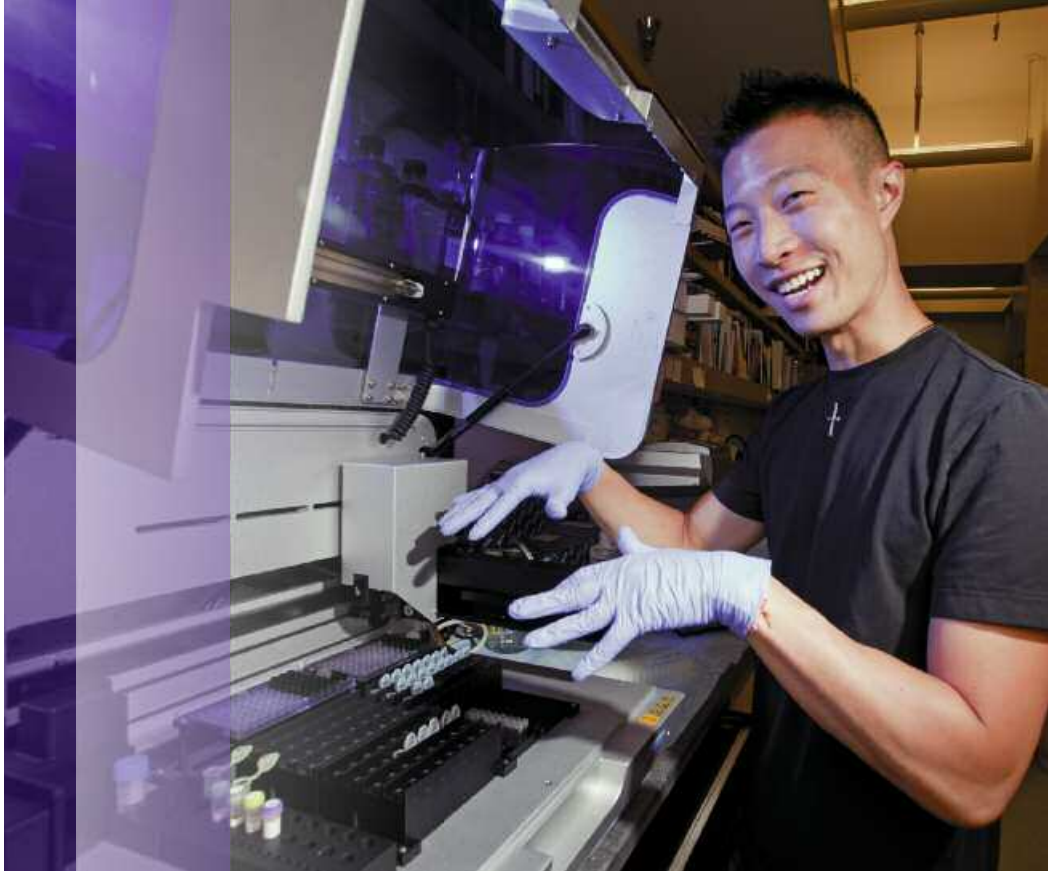
Genotyping, a process that identifies the genetic makeup of a cell, pinpoints minute defects caused by ancestral inheritance, disease, injury, and environmental factors. Its precision makes it the gold standard for biomedical research today and allows clinicians to accurately diagnose a wide variety of vision disorders. Today's patients will benefit, but the greatest gains will accrue to research efforts focused on developing new solutions to eye disease.

New efficiency is expected to accelerate research findings for 16 UCSF vision scientists.

Reproducible Results

The complex, repetitive, and labor-intensive process of genotyping requires an extremely high level of focus. "One mistake often requires the better part of a day to track down and correct," Dr. Sretavan says. The most tedious part of the process - the Polymerase Chain Reaction - is automated by a thermal cycler. Test tubes containing tissue must be inoculated with minute quantities of as many as six chemicals before being precisely heated and cooled. The cycler can inoculate up to 96 test tubes at a time with the exact quantity and combination of chemicals required for each tube.

Human intelligence remains crucial for proper processing. Laboratory technicians Ryan Sze and Geoffrey Chu program and manage several components that comprise the genotyping system. They pursue other research tasks with time saved, and the new equipment churns out faster and more reproducible results.



Lab technician Ryan Sze demonstrates the newly efficient processing of tissue samples for genotype analysis.

Accelerating Research

The new efficiency is expected to accelerate research findings for 16 UCSF vision scientists. Clinician scientists use genotyping in studies that help transform raw research findings into patient therapies and to assess new treatments for glaucoma, uveitis, and other diseases.

Basic scientists, who explore the fundamental processes of vision and disease, employ genotyping to broaden their understanding of a wide range of biological phenomena, from the development of the eye in utero to the neuroscience of vision to the natural immunity that protects our eyes from environmental injury. ●

$2.4 Million to Impact Global Epidemics

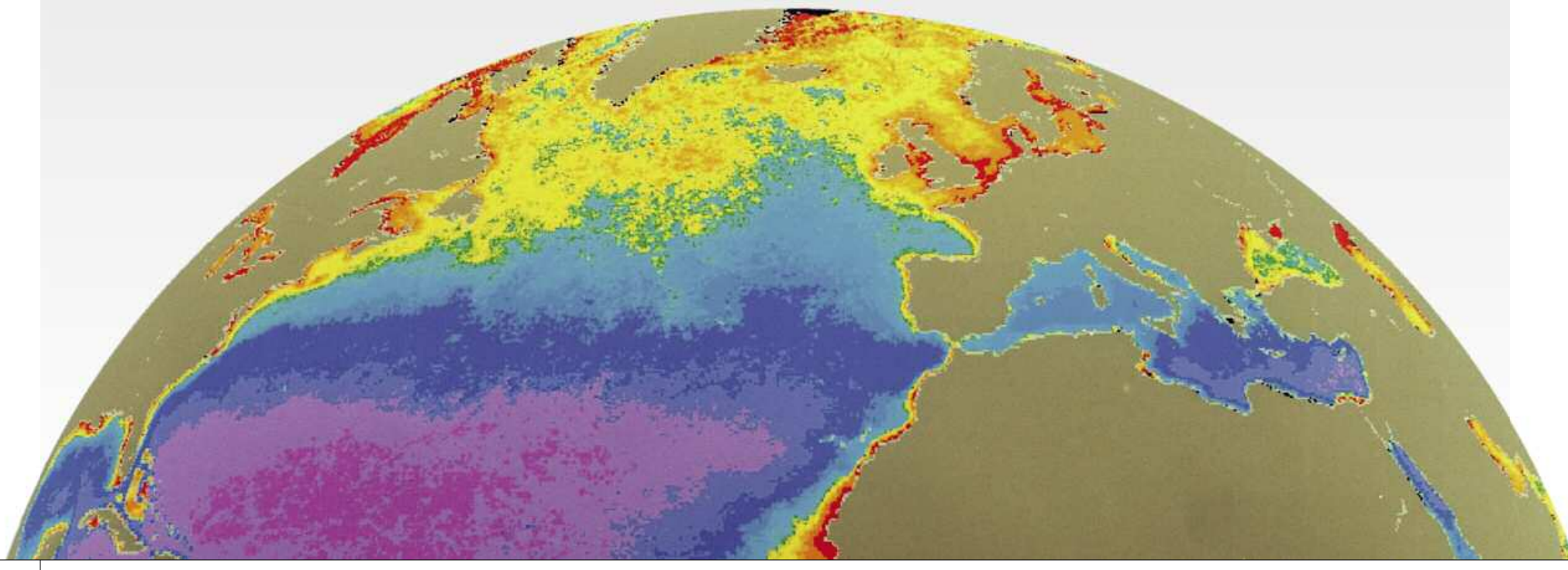
Imagine a world free of the most common cause of preventable blindness. Worldwide, an estimated 4.9 million people suffer from blindness due to trachoma, a bacterium easily treated with antibiotics. **Travis Porco, PhD, DPH** (Doctor of Public Health), is passionate about creating a way to predict and respond to devastating epidemics of infectious disease, including trachoma.

Now a $2.4 million grant from the National Institutes of Health is allowing Dr. Porco and his colleagues at the UCSF Francis I. Proctor Foundation for Research in Ophthalmology to pursue this dream. The ambitious project, called the Models of Infectious Disease Agent Study (MIDAS), harnesses the efforts of ten research teams across the country that are developing different aspects of a mathematical model for understanding epidemics such as trachoma and tuberculosis.

UCSF Proctor Foundation pursues a dream.

Dr. Porco serves as principal investigator of the UCSF-UC Berkeley-Stanford research team. It is developing exquisitely complex computer models for determining the types of information to collect from people exposed to an infectious disease and how to use that information to design effective intervention strategies. The scientists begin with basic assumptions about how people interact and how a particular disease spreads. They then layer variables such as geography, climate, social patterns of the population, birth and death rates, disease life cycle, and current infection rates to further determine how a disease is likely to behave.

Once the model is complete, researchers plan to evaluate the effectiveness of simulated health interventions such as vaccination or quarantine. The MIDAS scientists are creating a powerful tool that can guide doctors, politicians, public health agencies, governments, and charitable organizations toward the best strategies for reducing the spread and impact of diseases that debilitate and reduce the life spans of millions of people. ●



Confocal Microscope Speeds Diagnosis and Treatment

Patients with painful corneal infections are now getting faster diagnosis and treatment at UCSF's Francis I. Proctor Foundation for Research in Ophthalmology, thanks to a new super high-tech microscope. Goodbye surgical biopsy. Goodbye ten- to fourteen-day wait for lab diagnosis.

With the confocal microscope, Proctor clinicians can scan individual layers of the cornea to produce highly magnified images of individual, infected cells during the patient exam. Corneal specialist **Jeremy Keenan, MD,** says that, in many cases, he can prescribe the correct medication immediately following a confocal scan. "Typically, patients with corneal infections are in severe pain. Being able to correctly diagnose the cause of the infection during the exam and immediately start treatment is an immense benefit to the patient," says Dr. Keenan.

This application of laser technology makes it possible to diagnose painful corneal infections without a biopsy, allowing Dr. Keenan (background) to prescribe treatment immediately.

True to its role as a world leader in clinical care and research, UCSF is one of only two institutions in Northern California - and just a few nationwide - to employ this microscope for patient eye care. Although it was invented in 1955, advances in laser technology and high-resolution image processing in the 1990s made the confocal microscope adaptable to clinical use. A lead gift from the Peierls Foundation made the purchase possible.

How the Technology Delivers

You can't do an eye exam with a conventional microscope, partly because light bouncing off the eye makes it impossible to focus properly. The confocal microscope is designed to work around this and other obstacles, generating crisp images of infected corneal cells that allow for quick analysis.

A Clear View of Cells: Consider, for a moment, the tooth fairy's dilemma. She must sneak into a dark room, locate a small hard object (typically under a pillow) and replace it with a round shiny object without being caught. If she uses a flashlight, she risks scattering light in the eyes of the sleeping beauty who hopes to catch a glimpse of her magic. The wise fairy chooses a penlight, creating only a small circle of illumination on the pillow. When Dr. Keenan needs to visually diagnose a corneal infection, even his narrow-beam laser causes too much reflection to get a clear view of the cells of interest.

Goodbye surgical biopsy. Goodbye ten- to fourteen-day wait for lab diagnosis.

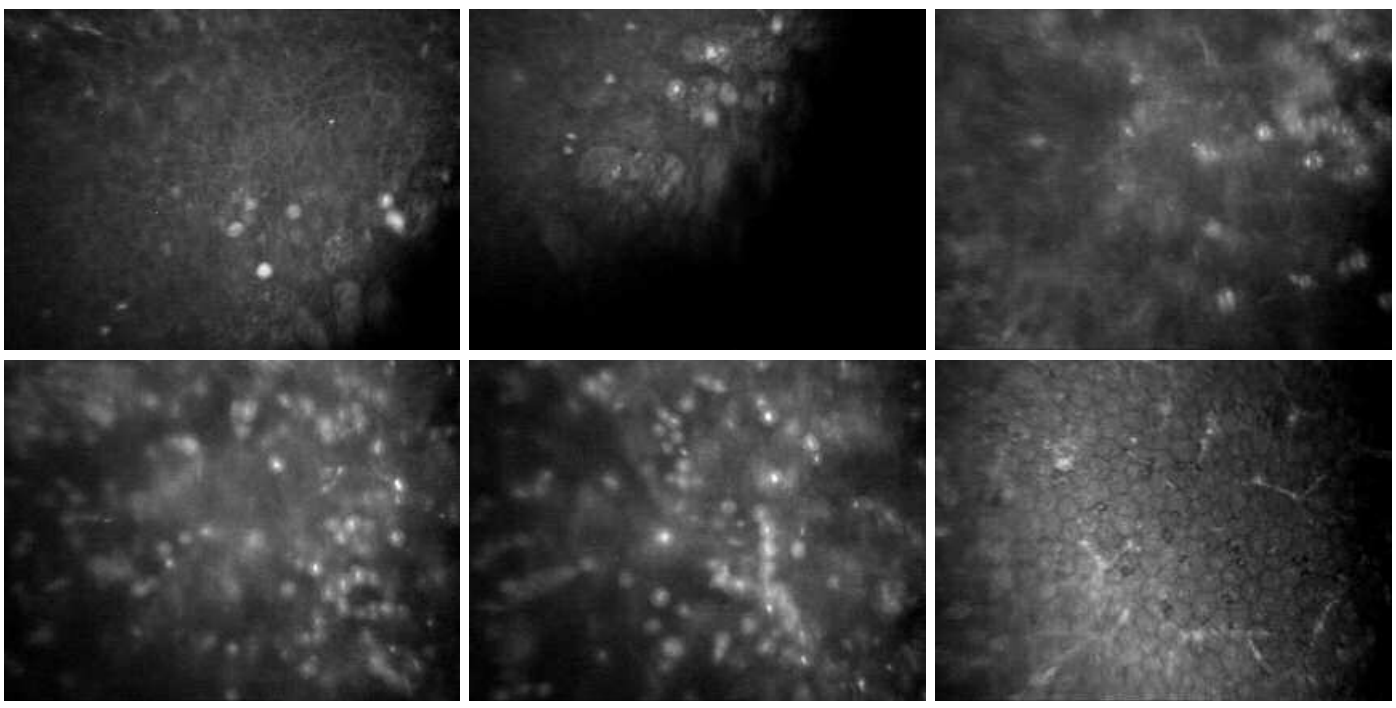
Through the Keyhole: What's needed is something like a keyhole, a very small opening that screens out the scattering light and reflections that interfere with viewing the individual cells in the infected layer. Considering how small cells are, that keyhole must be very small indeed.

This is exactly how a confocal microscope works: it uses a highly specialized keyhole - a mere pinhole - to restrict the light from a narrow laser beam. A powerful condensing lens then focuses this point of light onto the plane of interest in the cornea. Light is reflected off the cells and focused by a parallel lens onto the microscope's photo sensors. The result is an image of individual cells, with excellent resolution (as good as 1 micron).

Research Will Benefit

Vision scientists at the Proctor Foundation also are using the confocal microscope for research to help future generations. Dr. Keenan will lead a three-site research project to compare the accuracy and effectiveness of the confocal microscope to four older methods of diagnosing eye disease. His team will focus on a painful infection of the cornea known as acanthamoeba keratitis that can result in severe vision loss if not rapidly diagnosed and treated. According to **Thomas Lietman, MD,** who leads international research at the Proctor Foundation, "Dr. Keenan's work aims to provide more rapid diagnosis both here and in South India, where we collaborate."

Dr. Keenan expects that diagnosis aided by the confocal microscope will preserve sight for many patients, a priceless achievement. ●



Images from the confocal microscope reveal individual corneal cells suspended in tiny constellations.

Faculty News

American Academy of Ophthalmology President

Dr. Richard Abbott

Richard L. Abbott, MD, *serves as president of the prestigious American Academy of Ophthalmology. Holder of the Thomas W. Boyden Endowed Chair in Ophthalmology, Dr. Abbott is a leader in international education and corneal and external diseases of the eye. Below are his reflections on being Academy president.*

> *"I'm inspired by the commitment of so many colleagues to hold the profession to the highest standards."*
> *– Dr. Richard Abbott*

Having been a volunteer on a multitude of committees for over 30 years, I am honored to have been elected to the Academy's highest position. Representing and leading more than 31,000 ophthalmologists worldwide to improve vision care through innovation and research, improve professional education, and to communicate to governmental leaders and the public the importance of ophthalmology are all aspects of the job that I deeply value.

Traveling to international and domestic meetings and hearing and discussing ophthalmologists' views and ideas for improving patient care, as well as ways to improve our effectiveness and efficiency, have been extremely beneficial. I'm inspired by the commitment of so many colleagues to hold the profession to the highest standards.

The most exciting news in ophthalmology right now is the increasing involvement of our younger colleagues to more actively engage in efforts to improve access and quality of care as the population ages. Ongoing research, innovation, and incorporation of new technologies assist their efforts. I would like to thank my UCSF colleagues, students, staff, and patients for their gracious support, encouragement, and understanding during this

Nisha Acharya, MD
Appointment: Executive Committee of the American Uveitis Society

This society is committed to promoting optimal care of uveitis by formulating treatment guidelines, providing a list of uveitis specialists on its website, and organizing conferences to educate ophthalmologists.

Alejandra de Alba Campomanes, MD, MPH, and **Tina Rutar, MD**
Joint Faculty Publication: Joseph N. Martel, MD, **Tina Rutar, MD,** Brandon J. Lujan, MD, and **Alejandra de Alba Campomanes, MD, MPH.** Chorioretinal architecture in Aicardi syndrome: An optical coherence tomography and fluorescein angiography study," *Journal of the American Association of Pediatric Ophthalmology and Strabismus*, 2011, 15(3): 308-310.

This paper describes the use of state-of-the-art technologies such as handheld portable optical coherence tomography and portable fundus camera (a gift from the Wayne and Gladys Valley Foundation) to gain better knowledge of pediatric retinal disorders.

Jorge A. Alvarado, MD
Invited Lecturer: "Selective Laser Trabeculoplasty stimulates trabecular meshwork endothelial cells to release factors that upon binding onto the endothelial cells lining Schlemm's canal induce an increase in aqueous outflow," Glaucoma Think Tank, Tel Aviv, Israel

The glaucoma procedure called selective laser trabeculoplasty improves the functioning of the drainage system at the front of the eye, thereby reducing intraocular pressure. The procedure may reduce or eliminate the need for topical glaucoma medications, which have systemic side effects.

Cynthia S. Chiu, MD, FACS
Invited Lecturer: "Aspects of Cataract Surgery," Lancaster Course in Ophthalmology, Waterville, Maine

Organized by Harvard University, this course trained residents from Canada, Kuwait, and the northeast United States. Dr. Chiu also introduced residents to micro implantable devices for advanced cataract surgery in a hands-on dry lab.

Jacque L. Duncan, MD
Publication: **Duncan JL,** Talcott KE, Ratnam K, Sundquist SM, Lucero AS, Day S, Zhang Y, Roorda A. "Cone structure in retinal degeneration caused by mutations in the peripherin/RDS gene." *Investigative Ophthalmology and Visual Sciences*, 2011; 52(3):1557-1566.

This paper demonstrated the structure of retinal cones in macular degeneration patients with vision loss caused by a mutation in a gene called peripherin/RDS.

Douglas B. Gould, PhD
Publication: Labelle-Dumais C, Dilworth DJ, Harrington EP, de Leau M, Lyons D, Kabaeva Z, Manzini MC, Dobyns WB, Walsh CA, Michele DE, **Gould DB.** "COL4A1 mutations cause ocular dysgenesis, neuronal localization defects, and myopathy in mice and Walker-Warburg syndrome in humans," *PLoS Genetics*, 2011: 7(5):e1002062.Epub, 2011 May 19.

The eyes of patients with Walker-Warburg syndrome or Muscle-Eye-Brain disease often present with optic nerve hypoplasia and ocular anterior segment dysgenesis, putting them at high risk for glaucoma. Dr. Gould's team discovered that mutations of the type IV collagen gene COL4A1 are one cause of Walker-Warburg syndrome and Muscle-Eye-Brain disease, opening new questions about the role of COL4A1 in ocular development and disease. The paper was also highlighted in *Disease Models and Mechanisms* and *Faculty of 1000*, a postpublication peer review of recommended readings (http://f1000.com/11352956).

Bennie H. Jeng, MD
Invited Lecturer: "All Aspects of Medical and Surgical Cornea,"13th Annual Kuwait International Ophthalmology Symposium, Kuwait City

Dr. Jeng delivered 11 lectures and performed a corneal transplant and an intracorneal ring segment implantation for the conference audience, demonstrating use of the femtosecond laser (the newest technology for performing corneal surgery).

Matthew M. LaVail, PhD
Invited Lecturer: Ninth Bradley R. Straatsma Lecturer at the Jules Stein Eye Institute at University of California, Los Angeles

Dr. LaVail was chosen to give this prestigious lecture, which honors one of the most outstanding clinicians, scientists and administrators in the field of ophthalmology.

Shan C. Lin, MD
Publication: Murakami Y, Lee BW, Duncan M, Kao A, Huang JY, Singh K, **Lin SC.** "Racial and Ethnic Disparities in Adherence to Glaucoma Follow-up Visits in a County Hospital Population," *Arch Ophthalmology,* 2011 Jul;129(7):872-8. http://www.ncbi.nlm.nih.gov/pubmed/21746977

Dr. Lin's new study investigates barriers to patient follow-up. Lack of knowledge regarding glaucoma and black and Hispanic ethnicities were all correlated with poor follow up, showing the need for greater public education about the dangers of untreated glaucoma and ethnicity-specific strategies to improve patient outcomes.

Yvonne Ou, MD
Publication: **Ou Y,** Goldberg I, Migdal C, and Lee PP. "A critical appraisal and comparison of the quality and recommendations of glaucoma clinical practice guidelines." *Ophthalmology*, 2011 Jun;118(6):1017-23.

This paper examined for the first time in ophthalmology the quality and recommendations of clinical practice guidelines. Also, Dr. Ou presented the paper at the Editors' Choices Symposium at the American Academy of Ophthalmology.

Robert L. Stamper, MD
Invited Lecturer: World Glaucoma Congress, Paris

Dr. Stamper presented five lectures on glaucoma, including new surgical approaches, new ways to measure intraocular pressure, and how to measure progression in advanced glaucoma.

Erik M. Ullian, PhD
Publication: Selina M. Koch, Cassandra G. Dela Cruz, Thomas S. Hnasko, Robert H. Edwards, Andrew D. Huberman, and **Erik M. Ullian.** "Pathway-specific genetic attenuation of glutamate release alters select features of competition-based visual circuit refinement," *Neuron*, http://www.sciencedirect.com/science/article/pii/S0896627311005058, online publication date: July 27, 2011.

This *in vivo* investigation furthers our understanding of how the brain's primary relay center for visual information develops in mammals, particularly how each eye's optic nerve establishes its own territory in early adolescence. Various conditions, including astigmatism, can cause abnormalities in formation and retention of these brain connections, leading to vision disorders such as amblyopia.

Training Tomorrow's Leaders

Clinical Fellows 2011-2012

JOHN GONZALES, MD
Uveitis Fellow
Mentor: Nisha Acharya, MD
Born: Harbor City, California
MD: University of Southern California
Internship: University of Southern California
Residency: University of Texas Medical Branch (Chief Resident)

H. JANE KIM, MD
Oculoplastics Fellow
Mentors: Robert Kersten, MD, and Reza Vagefi, MD
Born: Seoul, South Korea
MD: New Jersey Medical School
Internship: Atlantic Health System, Morristown, NJ
Residency: New Jersey Medical School
Previous Fellowship: Wills Eye Hospital (Ocular Oncology)

CHARLES LIN, MD
Cornea Fellow
Mentor: Bennie Jeng, MD
Born: Taipei, Taiwan
MD: UCSF
Internship: Cedars Sinai (Internal Medicine)
Residency: UCSF

"I'm learning how much we have yet to discover in cornea and external diseases."

– Charles Lin, MD

"I have the benefit of learning from faculty who are movers and shakers in the field of cornea, external disease, and international ophthalmology."

– Ying Qian, MD

YING QIAN, MD
Uveitis Fellow
Mentor: Bennie Jeng, MD
Born: Tangshan in Hebei Province, China
MD: University of Pennsylvania
Internship: Crozer-Chester Medical Center, Upland, PA
Residency: Cole Eye Institute, Cleveland Clinic
Previous Fellowship: UCSF Francis I. Proctor Foundation (Uveitis)

USHA RAO, MD
Glaucoma Fellow
Mentor: Robert Stamper, MD
Born: Chennai, India
MD: Vanderbilt University
Internship: Georgetown University; Inova Fairfax Hospital, Falls Church, VA
Residency: Baylor College of Medicine
Previous Fellowship: Cullen Eye Institute, Houston

SORAYA ROFAGHA, MD, MPH
Retina Fellow
Mentors: Robert Bhisitkul, MD. Daniel Schwartz, MD, and Jay Stewart, MD
Born: Columbus, Ohio
MD: Ohio State University
Internship: Riverside Methodist
Residency: UCSF
Previous Fellowship: UCSF (Retina)

Save the Date: Friday, March 9, 2012
Cordes Annual Scientific Meeting

The Frederick C. Cordes Eye Society looks forward to the spring scientific symposium and announces a new annual lecture, the Steven G. Kramer, MD, PhD, Endowed Lectureship, made possible by fellow Cordes member and past Cordes president David Chang, MD. This new lecture joins our illustrious program of special lectures including the Michael J. Hogan, MD, Memorial Lecture and the Fred C. Williams, MD, Memorial Lecture. The first Kramer lecturer will be Sharon Solomon, MD.

Roster of Current Members

Richard L. Abbott, MD
Anthony K. Agadzi, MD
Gary L. Aguilar, MD
Pierre R. Alfred, MD
Jorge A. Alvarado, MD
Robert R. Anderson, MD
Joe F. Arterberry, MD, FACS
Michael E. Barricks, MD
Timothy J. Batchelder, MD
Richard A. Beller, MD
Melvyn D. Bert, MD, FACS
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Roderick Biswell, MD
Edwin E. Boldrey, MD
John B. Bosetti, MD
Michelle Trager Cabrera, MD
Michael A. Callahan, MD
Nieca D. Caltrider, MD
Arnett Carraby, MD
Susan R. Carter, MD
William J. Casey, MD
David F. Chang, MD
Lisa Chang, MD
Devron H. Char, MD
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Thomas M. Dixon, MD
James E. Dowling, MD
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Jacque L. Duncan, MD
James F. Eggert, MD
Allan J. Flach, MD, PharmD
Brian E. Flowers, MD
Daniel S. Foreman, MD
Douglas R. Fredrick, MD
Francisco A. Garcia, MD
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S. Samuel Gelbart, MD
Douglas D. Gerstein, MD
Leonard Goldschmidt, MD
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William F. Hoyt, MD
Agnes S. Huang, MD
Alexander R. Irvine, MD
Andrew G. Iwach, MD
Nancy A. Jameson, MD
Bennie Jeng, MD
Eli Kaczynski, MD
Yousuf M. Khalifa, MD
Man K. Kim, MD
Bruce Kirschner, MD
Terence G. Klingele, MD
Michele Knox, MD
Heinrich Konig, MD
J. Michael Lahey, MD
Paul Langer, MD
Lillian C. Lee, MD
Robert T. Lee, MD
Julie F. Leigh, MD
Robert A. Levine, MD
Mary Lou Lewis, MD
Phoebe Lin, MD, PhD
Lawrence Lonn, MD
Bruno D. Lumbroso, MD
Michael Kelly MacDonald, MD
Todd P. Margolis, MD, PhD
Robert J. Masi, MD
Brian Richard Matas, MD
Thomas R. Mazzocco, MD
John D. McCann, MD, PhD
David L. McCartney, MD
Eugene B. McLaurin, MD
Stephen D. McLeod, MD
Nancy A. McNamara, PhD, OD
Stacy R. Mettier, Jr., MD
Thomas F. Minas, MD
J. Fraser Muirhead, MD
Raymond S. Mullen, MD
George J. Nakano, MD
Robert E. Nasser, MD
Ted R. Nehrenberg, MD
Denis M. O'Day, MD
James J. O'Donnell, MD
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Mark Pennesi, MD, PhD
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R. Douglas Wayman, MD
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D. Randall Wolfe, MD
Paula Wynn, MD
Marielle Young, MD
Alejandro A. Zaffaroni, MD

To renew membership or make a connection, please contact Ann Hertelendy at 415.476.4016 or hertelendya@vision.ucsf.edu.

In Memoriam

Marilyn Moore Pratt
Caring Friend

Generous friends have established the Marilyn Moore Pratt Fund for Vision Research through That Man May See in honor of the life of a wonderful leader for our cause.

During her tenure on That Man May See's board of directors, Marilyn Moore Pratt's grace, intelligence, and strength brought a decade of excellence to UCSF Ophthalmology. She provided wise and caring leadership, first serving on the development committee, then as chair of the board, then as co-chair of board governance. No task for Marilyn was left undone.

Marilyn came to That Man May See with an interest in macular degeneration research, and she loved the physicians, the researchers, and their breakthroughs. She worked tirelessly to help UCSF's vision scientists seek support to save and restore sight throughout the Bay Area, the country, and the world. She succumbed to a four-year fight against ovarian cancer and left her legacy of courage and a model for community service.

Marilyn leaves her devoted husband David and three daughters - Becky Bleich, Jennifer Arnett, and Amy Stratton - and their husbands, as well as eight grandchildren.

Dr. Steven P. Shearing
Medical Pioneer

Steven P. Shearing, MD - one of the finest alumni of UCSF Ophthalmology's residency program - is dearly missed. For many years a special friend of the department, Steve served as a member of That Man May See's Honorary Board (having served on the active board from 1997 to 2003). Dr. Shearing was best known as the inventor of the first widely implanted intraocular lens, which restored vision to millions of cataract patients throughout the world. But his renown as a surgeon and medical innovator were only one part of his remarkable career.

Prior to medical school, he pursued an education in history and political science, including a year in Berlin as a Fulbright scholar. His interest in conditions around the world led him to spend time after his UCSF residency caring for indigent patients in Karachi, Pakistan. After returning to the United States, he opened an ophthalmology practice in Las Vegas, which eventually grew into The Shearing Eye Institute, a world-famous medical center that attracts patients from around the globe.

Never reluctant to share his knowledge and expertise, Dr. Shearing went on to train doctors throughout the world in the surgical techniques he had pioneered. In addition to his many contributions to the medical field, Steve never hesitated to help those in need, never asking for anything in return, always guided by a deep compassion and a keen sense of justice. Dr. Shearing is survived by his wife Justice Miriam Shearing, son Robert, daughters Laurie Shearing and Leslie Shearing, their husbands, and five grandchildren.

Our next issue of Visions *will include a memorial tribute to That Man May See's honorary board member* ***John P. Stock****, who passed away in September. He established a family legacy of compassion and generosity that continues today. Gifts in memory of John may be made to That Man May See, 10 Koret Way, Box 0352, San Francisco, CA 94143-0352.*

Recent Gifts to That Man May See

Thank you for generous contributions and pledges for vision research, teaching, patient care, and community service received between July 1, 2011, and October 14, 2011.

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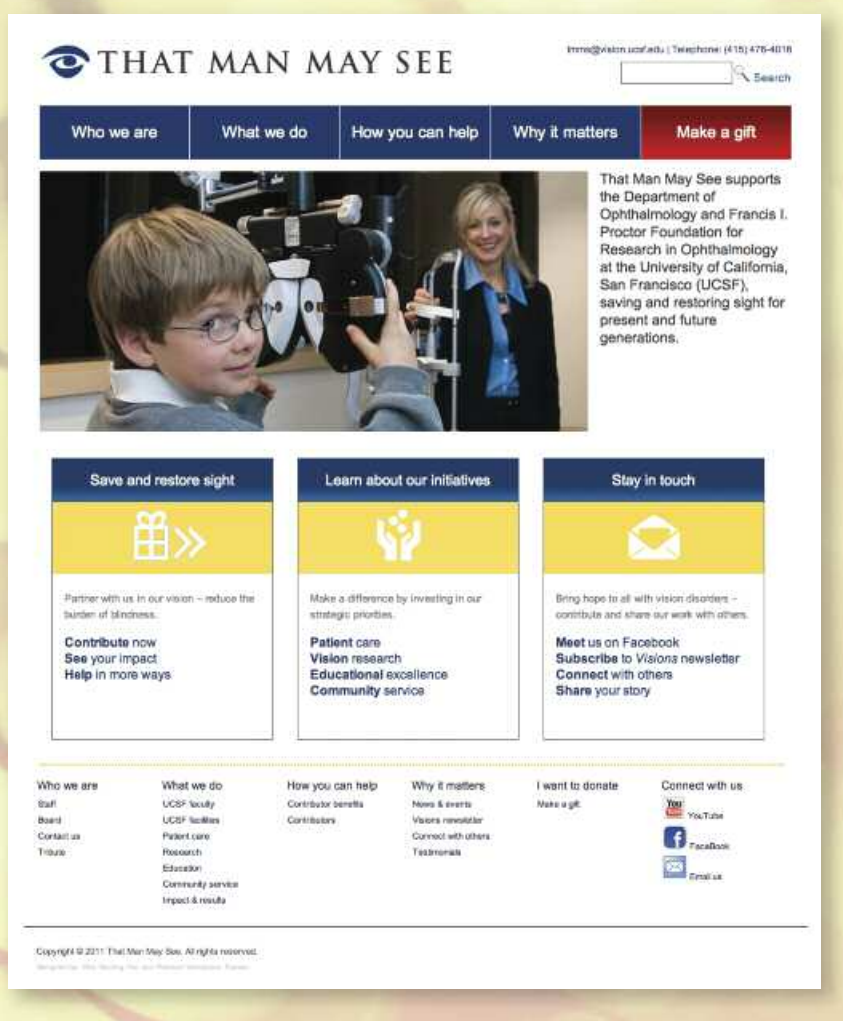

Check Out Our New Website www.thatmanmaysee.org

To better serve contributors and patients with information about eye health, research to combat eye disease, and to stay connected, That Man May See has a new website!

Thank You Taproot Team

That Man May See owes thanks to The Taproot Foundation for its partnership in creating the new website. Taproot makes grants of professional pro bono consulting services by a team of business professionals who volunteer their time and expertise to help nonprofits in their communities. Special acknowledgement for That Man May See's new website goes to **Shawn Ardaiz, Lochan Chhetri, Shilpa Deshpande, Pratibha Pandit, Jennifer Randolph,** and **Joni Sugimura.**

"That Man May See is grateful for the enormous creativity – from a super board to talented teams of volunteers – connecting our vision with a broad community of friends. We thank you!"
– Kathleen Rydar
President, That Man May See

Meet Our Newest Directors

That Man May See welcomes its newest board members:

Lorie I. Hirson, founder of PR Select, advises companies in their recruitment of PR agencies. She previously served as vice president of MS&L San Francisco, a marketing communications firm. She and her husband Ron have two young sons. The Hirsons have a particular interest in the research of **Jacque Duncan, MD.**

Ron Hirson is president and cofounder of BOKU, a Silicon Valley mobile payments company. He was vice president of product at AT&T Interactive and served as entrepreneur-in-residence at Khosla Ventures. Ron has spent over 15 years advising companies in the consumer Internet space.

Sean A. Johnston serves as Genentech's senior vice president and general counsel, with responsibility for the company's Corporate Law and Intellectual Property groups. Earlier in his career, Sean was law clerk to Judge William Matthew Byrne, Jr., in the U.S. District Court in the Central District of California. Prior to becoming an attorney, he was a research scientist at International Genetic Engineering/Xoma. He holds a doctorate in molecular biology from the University of California, Los Angeles, and a law degree with honors from Stanford Law School. He is most interested in basic and clinician research projects.

John P. Rohal is the managing member of Makena Capital Management and was involved in its startup. Prior to Makena Capital, John served in numerous leadership capacities at a range of firms. He completed his MBA at the Wharton School of Finance at the University of Pennsylvania and attended law school at Georgetown University. John and his wife Venetta are particularly interested in the priorities of **Stephen D. McLeod, MD,** Chair of the Department of Ophthalmology.

J. Michael Jumper, MD, completed his ophthalmology residency at UCSF and a vitreoretinal fellowship at Duke University. His holds an academic appointment as assistant clinical professor at UCSF, helping with the training of new residents. He is currently Retina Service Chief at California Pacific Medical Center and a member of West Coast Retina Medical Group in San Francisco. Dr. Jumper is now in his second term as president of the Frederick C. Cordes (Alumni) Eye Society of the UCSF Department of Ophthalmology and serves on the board in that capacity.

Maris Meyerson is a lifelong Californian who feels fortunate to have volunteered for causes she cares about for more than 20 years. Her son Harry's diagnosis of uveitis at the age of eight brought the family to UCSF for treatment, where they have become supporters of That Man May See. Maris and her husband Ivan are particularly enthusiastic about the uveitis programs of **Nisha Acharya, MD,** and the glaucoma research of **Shan C. Lin, MD.** They also support the mission of the new Visual Center for the Child.

James Mitchell is a retired architect, working most recently with the firm of Backen, Arrigoni, and Ross. He resides in Belvedere with his wife Janet. Jim previously served on the board of advisors for the National Center of Excellence in Women's Health at UCSF. Jim has been an invaluable guide to Dr. McLeod in deepening and expanding understanding of That Man May See and UCSF Ophthalmology in Marin County.

Nita Subramanian, MBBS, DOMS, received her medical education in ophthalmology from Gandhi Medical College in India. She and her entrepreneurial husband Mani raised a family and share a dream of ending world blindness. They are particularly supportive of the work of **Robert L. Stamper, MD.**

Jonathan R. Wolter is a financial executive with more than 30 years in corporate finance and operations. His expertise ranges from managing high-growth organizations to building reporting and control systems, improving liquidity, and managing and integrating acquisitions. Currently with FLG Partners consulting services, he works with Silicon Valley companies and those with roots in the valley. Community service has been a strong personal value for Jon – he has served on other nonprofit boards that benefit sight, as well as those that promote success for at-risk youth. Jon chairs the board's audit committee. ●

That Man May See is a 501(c)3 public charity. Its mission is to raise funds for the dedicated faculty of UCSF Ophthalmology to make possible breakthroughs in vision research, state-of-the-art patient care, educational opportunities for residents and fellows, and community service.

To make a gift of cash or securities, go to www.thatmanmaysee.org/donate or contact Ann Hertelendy at 415.476.4016 or hertelendya@vision.ucsf.edu. Checks are payable to That Man May See.

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Meet Our New Residents

Class of 2014 Begins Training

Michael J. Geske, MD

Birthplace: Ames, Iowa

College: University of Michigan: BS, Economics and Math

Medical School: Washington University, St. Louis (MA also)

Internship: Department of Surgery, UCSF

Ian R. Gorovoy, MD

Birthplace: Fort Myers, Florida

College: Brown University: AB, Economics

Medical School: University of Pittsburgh

Internship: University of Pittsburgh Medical Center Shadyside

Noelle M. Layer, MD

Birthplace: Mineola, New York

College: Yale University: BA, History of Science & Medicine

Medical School: Harvard Medical School

Internship: Greenwich Hospital/Yale New Haven Health

Allison R. Loh, MD

Birthplace: Palo Alto, California

College: Stanford University: BA, Human Biology

Medical School: University of Pennsylvania

Internship: California Pacific Medical Center

Shivali A. Menda, MD

Birthplace: Nashville, Tennessee

College: University of Washington: BS, Neurobiology

Medical School: Oregon Health and Sciences University

Internship: Providence Portland Medical Center

New doctors who entered the UCSF Ophthalmology residency program in Fall 2011 are (left to right) Noelle Layer, Michael Geske, Allison Loh, Ian Gorovoy, and Shivali Menda.