Last, the optometrist I am describing most often cannot, due to his corporate relationship, refer his patients for other needed professional help. To my thinking . . . and I hope you will agree . . . he has no motivation, professional or otherwise, to send the child with a reading disability to someone—optometrist or another—who can help the child. And what greater problem, social or economic, do we have today than a child with a reading disability?

Mr. Chairman, an optometrist whose sole motivation is to make his salary by selling a pair of glasses makes no contribution to the visual welfare of the community.

As to the glasses these "discount" operations sell, there is a strong chance that something will be wrong with them. While that "something" could be minor enough to make little difference to the wearer, it could be enough so that glasses would aggravate rather than correct a vision problem, or even create totally new problems which in extreme cases could result in serious permanent damage to vision.

The prescription may not be filled accurately. For example, in a pair of $7.25 glasses, while one lens may meet prescription specifications, the other lens may be so inaccurate that it fails to give the needed correction. Additionally, the lenses themselves frequently are other than first quality. Cut-rate operations often rely on inferior foreign-made lenses or on rejects and second or third-quality American-made lenses which can have various defects which may seriously affect light transmission.

Anyone operating as an eyeglass merchant simply cannot devote more than minimal time to fitting the eyeglasses. As stated in one of the "Yellow Pages" ads, "We keep our costs low by volume." And volume depends on heavy traffic and fast turnover. A proper fitting cannot be accomplished in the minute or two allotted by the "volume" operator. The optical center or main point of focus on the lens, must be positioned properly in the frame for subsequent positioning to the eye. If either fitting is careless, the eyeglasses could fail to provide full benefit even though the lenses might meet the prescription.

I should also note that cheap, inferior frames lose shape rapidly. In their effort to keep costs down, eyeglass discounters cut costs wherever possible, including the use of cheap and inferior frames. If glasses slide down your nose, you no longer see through the correct, intended optical center without strain. Should frames need adjusting or servicing, the discounter frequently cannot take the time to provide such service. In fact, it is not unsual for the patient to find that the optometrist employed by a firm of this type has moved on * * * either to another discounter or into his own practice somewhere * * * and that patient's records have either been removed from the location where the original examination was done, or that the records have been "lost" or "mislaid" so that another examination is necessary.

I'd like to call your attention at this time to attachment number 5, which will give you some idea of the quality of materials frequently purchased by eyeglass merchandisers. You will note that some of these materials are available to the eyeglass peddler at 30¢ a pair, when purchased in lots of 100 pairs. The suppliers of these ophthalmic materials are so sure these factory seconds are defective, they say "Guaranteed usable or replaced"—which obviously means that if the particular pair fitted to a patient's face is so unsatisfactory that patient complains, the lenses can be returned and some with less noticeable defects will be supplied to replace them.

The cut-rate operator's objective is to sell glasses, not to provide service. Service is minimal at best. Optometric care includes more than refractive services. It includes examination of the eye for detection of pathological conditions. It includes visual training. The commercialist cannot afford to offer visual training services because they require time which he can ill afford to spend if he is to maintain his high-volume business.

In recent years research has shown that visual training can lessen some vision problems or eliminate them entirely. Not infrequently school children experience reading disabilities many of which can be overcome through visual training. Considerable attention is currently being given by various health care practitioners and educators to dyslexia, a condition which causes letters or words to appear backwards to the reader. I know of no way the discount operator could offer visual training services even if he were qualified to offer them. The mercantile setting does not lend itself to professional services. Flashing signs indicate selling; not servicing in a professional manner.