house. We have advocated a policy of non-exposure for optometry; we have harassed our colleagues (if we deign to call them colleagues) who attempt to present themselves to the public as optometrists.

RAISING THE COST OF EYE CARE

We have been talking of higher fees, of raising the cost of eye care to the public. This is the same thing medicine has been doing over the past years—to the point where the public has begun to rebel. Witness the advent of Medicare and other government and private plans to defray the direct cost to the public. We have been doing this and condemning optometrists who attempt to bring the cost of eye care down. And all this time medicine is attempting to destroy us.

Do not misunderstand me. I am not saying that all optometrists who advertise, who practice commercially, or who organize union vision plans, are doing so primarily for the best interests of the profession. Of course, their prime motives are financial remuneration. But, in their own way, they have made known to the public that a profession of optometry exists, that it is not necessary to see a physician for an eye examination, that optometrists are qualified to furnish visual care.

Optometrists in discount houses, in union plans, and in store-type offices can, and in most cases do, give adequate visual care; at the same time, they promote optometry to the public. Physical surroundings do not indicate the quality of care the patient will receive and neither does the method used to get the patient into the office. It is about time we stopped equating only a "professional" office with ethical and professional treatment.

Ophthalmology and optometry have been at war for a long time, but we still keep arguing among ouselves. It is time we recognized our real enemy; make no mistake, medicine is our enemy and a state of war exists.

In this war, any time an optometrist gains a patient who was formerly an ophthalmologist's patient, that is a small victory—*regardless of the method used to bring the patient into his office.*

Any time an organization contracts with an optometrist to provide visual care for its members, that is a victory.

We must make very effort to increase the percentage of patients who receive optometric care vs. those who receive medical refractions (including those furnished by optometrists in an ophthalmologist's office).

We must obtain *effective* optometric representation in any and all eye care programs, whether they are promulgated by the government or by private plans.

We must institute an aggressive public relations program exploiting the superiority of optometric care over medical refractions.

We must press for a complete divorce in the public's mind between visual care and medical and surgical eye care. In doing so, we must maintain the concept of complete visual care—including the proper selection and fitting of eyewear, contact lenses, orthoptics and other facets of our profession which we have been tending to delegate to groups not under our control.

TIME FOR THE INITIATIVE

It is time that optometry decided to raise its head high in its relations with the public and with medicine. For years, we have taken strictly a defensive position. Now is the time to take the initiative. Medicine has found that its public image has become tarnished and the physician is trying to restore that image to its former brightness. But now is the time for optometry to make its move. Actually, it is now or never.

6222 Anthony Avenue

VOYEUR

He was so shy, he looked askance
If anyone dared say "romance,"
When at a pretty girl by chance
He'd happen just to cast a glance.
Yet faithfully his eyes did serve,
And look he would, at every curve.
Despite his shyness and reserve,
He had a lot of optic nerve!

GERTRUDE LEIGH