professional activities. When 58 percent of our population has some visual deficiency—the productivity of our Nation must reflect the burden civilization has placed on our eyes.

We are looking at general visual problems which afflict most of our people and specific problems which seriously affect millions.

For reasons we have yet to comprehend there are more malfunctions of the eye than any other organ of our body. We have over 450,000 blind persons in the Nation, a figure which is increased by one every 15 minutes. Four thousand people go blind every year from one eye disease alone, glaucoma. An estimated 1 million Americans over 40 years of age have glaucoma and don't even know it. Early detection and treatment can control the progress of this disease for most of these 1 million people; we are discouraged, however, that a great many of them will not be treated until it is too late to prevent damage and ultimate total or partial blindness. Cataracts, degenerative changes in the eyes and brain, and a host of generally nonblinding infections and disorders complete the list of conditions which damage the intricate visual instruments which nature has so carefully constructed. It is our aim to learn how to prevent, alleviate, or cure these afflictions and do so for as many of those affected as possible.

The prospects for giant strides in this critical area of our Nation's health have been significantly upgraded in recent advances in the field. It is interesting to note that the contribution to scientific understanding of the visual process by two American physiologists, Drs. George Wald and Haldan Keffer Hartline, was recognized recently by the Nobel Prize Committee. This recognition as well as the eminence of other eye researchers in our Nation, suggests that we possess a competence for understanding of which we should take full advantage.

It is the potential of this national leadership which the proposed legislation is all about. Section 453 of H.R. 908 specifically authorizes the Surgeon General to provide training and instruction and establish and maintain traineeships and fellowships, in the National Eye Institute and elsewhere, in matters relating to diagnosis, prevention, and treatment of blinding eye diseases and visual disorders with such stipends and allowances (including travel and subsistence expenses) for trainees and fellows as he deems necessary, and, in addition, provide for such training, instruction, and traineeships and for such fellowships through grants to public or other nonprofit institutions. This emphasis on training is not to the exclusion of the conduct and support of research on new treatment and cures for blinding eye diseases and visual disorders.

Mr. Chairman, I have purposely not provided elaborate statistics on the visual problems of our people in my remarks. These are pitiful and frightening. We know the dimensions of the problem—let us get on with the solution.

The public is growing impatient with our inertia on this matter. There is a growing interest, a stimulated scientific community, and a new sense of optimism stemming from research which has already yielded results with promise of new breakthroughs in the future.

It is time to identify and focus our fiscal and manpower resources which are consistent with the national need in this area. A new rallying point is required; the National Eye Institute will provide this and it will succeed just as similar organizations have succeeded in the solution of equally complex problems.