perhaps for administration. Do you consider that a great sum in this day of great spending in the United States?

Dr. STEWART. Any unnecessary expenditure is excessive.

Mr. CARTER. Compared to what more might be accomplished in the establishment of a National Institute of Eye Diseases and so on, I think it very little.

I notice that many of our teaching institutions throughout the country have difficulty in getting trained ophthalmologists. Are you doing much to help them along this line at the present time?

Dr. STEWART. You are quite right, they do have difficulty, Dr. Carter, in getting trained ophthalmologists. I will ask Dr. Masland what we are doing in the training program for ophthalmologists.

Dr. MASLAND. As I mentioned a little earlier we are supporting 53 research training programs. Again, I must point out that the responsibility and the authority of the Institute do not include the training of individuals to provide patient services. This, by law is not included in our responsibilities.

Mr. CARTER. Of course, we know that, but know that is gotten around. We know the way to help medical schools is through research grants but I am quite sure much of this money is used for promotion of medical school programs. I think we realize that 50 percent I believe of the cost of most medical schools are paid through HEW; is that not true?

Dr. STEWART. It is quite true the research fund from NIH are a major source of funds for all of the medical schools in the country; that is correct.

Mr. CARTER. It is my feeling we could better integrate the services in this particular field and treat them with a national institute since it is a division of medicine, and from what I hear from deans of medical schools, particularly, there is a sad lack, an inability to get trained men in these fields to establish good departments of ophthalmology.

I think we need an Institute or group that will press this more aggressively.

Dr. MASLAND. I would like to emphasize the fact that we have been pressing for the training of research ophthalmologists and academicians.

Mr. CARTER. I regret it is without avail. We recognize the eye is the mirror of many diseases, and the skilled ophthalmologist can tell right off what is involved, from the eye.

Hypertension, nephritis, all these various things can be seen in the eye by the ophthalmologist. We realize the study of the eye must be integrated with the study of the body as a whole. But still there is no reason why this can't be integrated, can't be set up as a separate agency or Institute and still be integrated with other fields of study which it of necessity must be, just one part of a general program.

I believe you mentioned heart, cancer, and stroke. It seems to me in comparison with this, we appropriated some $340 million for this a year or so ago and of course that should be very helpful along that line. We have just $15 million to $18 million I believe for diseases of the eye.

There are in truth many stumbling blocks which have been thrown out today but I feel we should certainly turn them into stepping stones