

Dr. McCrARY. Yes, sir. I have read the bill and in its present form, Mr. KYROS, we are afraid that optometrists will not be integrated into the programs of the institute unless specific statutory language is provided in the bill.

Mr. KYROS. In an appendix to your remarks you have included amendments. For example on page 2, line 11 you propose that before the word "and" insert "including optometric procedures for the improvement . . ."

Also on page 2 line 24 you also want an insertion that the council shall include one or more members who have a Ph. D. in physiologic optics and one or more members who are licensed optometrists.

Can you explain again so we can have it clearly why you feel these inclusions should be made to include optometrists in this kind of institute or a council working toward a national institute.

Dr. McCrARY. The council which would be established in this piece of legislation performs a very important function. They would exert a great deal of influence with regard to determining the course which research activity will take. Optometry is a separate and distinct profession. It is not a part of medicine, dentistry or any other profession. It has an area of knowledge which is unique and an area of expertise which is unique, and we feel that optometry must be involved at every strata, including the council which will be involved in setting policy and perhaps in determining research directions and trends, that an optometrist—at least his knowledge—should be available and on tap as a member of that council in order to get a fair hearing for this profession in terms of strengthening the research program within our profession.

Mr. KYROS. On page 4 of this bill under section 453, the last page of the bill, it talks about the eye institute maintaining trainingships and fellowships in relation to diagnosis, prevention and treatment of blinding eye diseases. Now, in the area of prevention, do you think that is where optometry could serve a greater role than anywhere else—prevention?

Dr. McCrARY. In terms of the total concept of the institute our profession can play a role in all aspects of the operation of the institute in both the intramural and extramural research programs.

Certainly in prevention we play a primary role throughout the United States since we see the majority of the patients who originally seek eye care, so prevention, yes, in terms of early detection of various types of eye diseases and disorders or ocular signs and referral to the proper person whether it be to an ophthalmologist or neurologist or whoever the proper person may be.

(The following table was subsequently submitted by Dr. McCrary:)

Optometry's role in functional vision care

Total population-----	200, 000, 000
Persons with some form of eye trouble-----	100, 000, 000
Persons with functional vision problems (other than those involving disease or serious pathological conditions) whose needs can be met entirely by optometrists-----	46, 500, 000
Persons with disease or serious pathological conditions requiring medical or surgical treatment-----	3, 500, 000
Persons with functional vision problems involving disease or serious pathological conditions whose needs can be met by optometrists following medical treatment or surgery-----	1, 750, 000