

of ophthalmology so he will have the interest and the zeal to go ahead in this.

Mr. KYROS. If I remember Dr. Stewart's testimony, his argument to that point is you can't separate the eye from the rest of the nervous system, that it is an integral part of it and having it in the family of allied neurological problems was the best place to have it and if you remove just the Ophthalmologic Branch from the whole field of neurological diseases and blindness, you would dilute the efforts that would be available.

How do you answer that argument?

Dr. RYAN. I will agree there are certain phases of research in which there is need for collaboration between the ophthalmologist and the neurologist and the neurosurgeon but I think in present-day ophthalmology there is probably even greater need for collaboration between the ophthalmologist and the man in internal medicine and in the other fields of medicine.

When I was there I can't recall a single bit of research that we did—of course, this was early in the Institute—in which we collaborated with the other branch of our Institute.

Instead, nearly all of our collaboration was with other Institutes.

Actually, the eye is a tract of the brain and while the visual tracts are a portion of the brain and the visual cortex, the function and the nature of the situation is such that it becomes a whole field in itself.

It is entirely different from all of the other sensory parts of the body as I tried to bring out in my first paragraph here and it is of such importance that I think it warrants complete consideration by itself.

Regardless of the fact that it happens to be related to the nervous system, it is related just as much to the general systemic body by such diseases as hypertension, diabetes, and many others as it is to the brain.

For research purposes, I think a separate institute is extremely important.

Mr. CARTER. Would the gentleman yield?

Mr. KYROS. I would be very pleased to.

Mr. CARTER. The eye is a mirror of many, many diseases; is it not?

Dr. RYAN. That is true.

Mr. CARTER. By looking at the retina we can tell if a person has diabetes or hypertension and we can see arteriosclerotic changes and, also, we can tell about brain tumors if there is increased pressure, and so on.

So, in establishing this separate institute, of course, you would want to work with various other groups, such as internal medicine people as you have indicated.

Of course, it is just as important to communicate with them, perhaps even more so, than it is with neurologists.

Dr. RYAN. We found it is so in the 2 years I was at the Institute. We had much more in common with other Institutes than we had with other branches of our own Institute.

The purpose of the National Institutes of Health was to bring together all those Institutes, and collaboration was the rule when I was there, so that merely being a separate institute would not remove the possibility of full collaboration whenever there was opportunity for research to become more advantageous by such means.