

There are 12 members of the National Advisory Council. Two of these are neurologists, one is a neurosurgeon, one a neuropathologist, one of the head of a Department of Physiology and Biophysics, one an audiologist, one an otolaryngologist, three are laymen, and only two are ophthalmologists.

Thus, of the 12 people called on to make decisions concerning research and training in the field of ophthalmology to the extent of some \$20 million a year, only two are trained in ophthalmology and, I might add, the two alternate members of the Council are a neurologist and a layman in the Office of the Army Surgeon General. You can readily see that this Council represents all the disciplines included in the Institute of Neurological Diseases and Blindness but cannot, therefore, incorporate adequate representation of vision science.

This organizational structure is particularly unsatisfactory when it is recognized that ophthalmology and the sciences related to vision encompass a broad field of medicine in which many aspects are unique and have no counterpart in neurology, neurosurgery, or otolaryngology.

The utilization of physiological optics, the essential appraisal of intraocular pressure dynamics and the specialized methods of ophthalmic examination are vital to ophthalmology and without parallel in other neurosensory disciplines. Optical abnormalities and most of the disorders that affect the visual system are not comparable to abnormalities affecting other neurosensory structures. Even the retina, a part of the eye that is derived embryologically from the central nervous system, is so highly specialized that it has many diseases, such as retinal detachment and senile macular degeneration, that are unrelated in terms of diagnosis and management to the central nervous system or the disciplines of neurology, neurosurgery or otolaryngology.

In essence, vision science is of itself a major branch of medicine with areas that are exclusively in its realm and relationships to a broad spectrum of basic and clinical science. The full development of vision science and the necessary growth of its important relationships to other areas of science cannot be expected in the present statutory structure of the Institute of Neurological Diseases and Blindness.

To establish an optimum framework for an attack on vision disorders and blindness, a National Eye Institute is needed. This would provide for an Institute Director, a National Advisory Council, and an Institute staff totally committed to the preservation of vision.

Able to concentrate exclusively on ocular disorders, the Director and staff of the Institute would be selected primarily on the basis of their qualifications to promote, coordinate, and administer eye research, training, and patient care. The National Advisory Council, composed of similarly qualified scientists and lay representatives, would be able to include representatives of the clinical and basic sciences related to vision.

With this structure, a fully knowledgeable Council would oversee the Institute's activities, would be capable of analyzing every aspect of the vision problem and would be able to establish subcommittees, supported by consultants, to evaluate progress in critical areas and propose programs conducive to the advancement of vision science.

In research, for example, committees of experts could concentrate on the major causes of blindness such as cataract, glaucoma, and