



# GLAUCOMA REPORTS

SPRING 2005

*A quarterly publication of the Friends of the Congressional Glaucoma Caucus Foundation, Inc.*

## 2004 WAS A GOOD YEAR FOR THE FOUNDATION

*by Bud Grant*

From April 2001 to March 2005, the Friends of the Congressional Glaucoma Caucus Foundation has operated under a very simple premise: that for the vast majority of individuals with glaucoma, the chances of preserving their sight is significantly improved if diagnosed and treated early enough.

In the past year, our efforts have been showing more and more results. In all of 2004, FCGCF conducted 1038 events, screening 23,000 persons at 573 screening sites. That is an average of 1,932 persons screened per month. In the first three months of 2005, some 6,896 men and women have already been screened, and the months of January, February, and

March are the lightest of all year. In all likelihood, the Friends of the Congressional Glaucoma Caucus Foundation will screen more than 35,000 people before 2005's end.

Student Sight Saver Programs have accounted for 25% of everyone screened by the FCGCF. Eve Higginbotham, MD, of the University of Maryland, has said, "The Student Sight Saver Program gives medical students fertile ground to

grow their knowledge and use it to make a difference in another person's life." FCGCF Student Sight Saver Program participants made such a difference some 9,502 times last year. Of those, 1,463 men and women were referred to eye care specialists for glaucoma follow-ups; 1,511 were referred for ophthalmic follow-ups for suspected conditions other than glaucoma; and 6,528 were considered routine. All were told to return at least yearly for check-ups.

In 2004-2005, some 39 Student Sight Saver Programs were inaugurated or on-going under the auspices of the Friends of the Congressional Glaucoma Caucus Foundation. Three more schools are now in the process of setting up their programs. A listing of Student Sight Saver Programs now in place is available at our webpage, [www.glaucomacongress.org](http://www.glaucomacongress.org).

The use of mobile, self-contained units has enabled testing to be effectively and inexpensively carried out in parks, shopping malls, playgrounds, or any area large enough to park the van. Being mobile, the vans have been able to reach potential



*Clara Napolitano (left) of New York Eye Surgery and the FCGCF poses with the Mobile Eye Screening Unit on its swing through Florida in January/February, 2005.*

glaucoma victims in isolated areas, such as the Yazoo Delta country of Mississippi, and the wide plains of Texas and Oklahoma; in fact, just about anywhere.

Already in 2005, in fact, Friends of the Congressional Glaucoma Caucus Foundation vans have made swings through rural areas of southwest Texas, from San Antonio to the Rio Grande valley. Another mobile eye unit traveled south from New York to Florida, where it could be more effectively utilized during the winter months.

During the 2004 grant year, seven mobile eye screening units were used at nearly 500 screenings. These "eye doctor offices on wheels" participated in screenings in 15 states and the District of Columbia.

Next year, two new vans will be constructed by the Friends of the Congressional Glaucoma Caucus Foundation and will be on the road, and at least two more partnerships will be finalized so that the Foundation will be supporting or sponsoring at least four additional mobile units.

### FCGCF Looks at the Numbers

Total Number Screened (through March, 2005): .....**51,446**

Total Women: .....**32,644**

Total Men: .....**17,222**

Total Participants Referred for Further Workup Due to Suspected Glaucoma: .....**8,020**

Percentage of Total: .....**15.6%**

Total Participants Referred for Further Workup Due to Other Possible Eye Diseases: .....**8,201**

Percentage of Total: .....**15.9%**

Total Screenings: .....**2,123**

Total Number of Screening Locations: .....**1,235**

# A WHIRLWIND TOUR WITH THE FCGCF



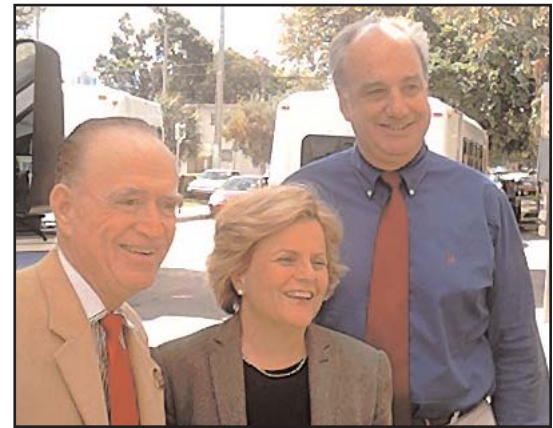
MOC Henry Bonilla of Texas (left) and Bud Grant of the FCGCF smile together at a meeting of the Southwest Texas Eye Care Collaborative in San Antonio in February, 2005.

Nancy Pelosi, a longtime MOC from San Francisco, has her vision checked by FCGCF tech Loraine Karimullah in one of the Foundation's Mobile Eye Screening Units.

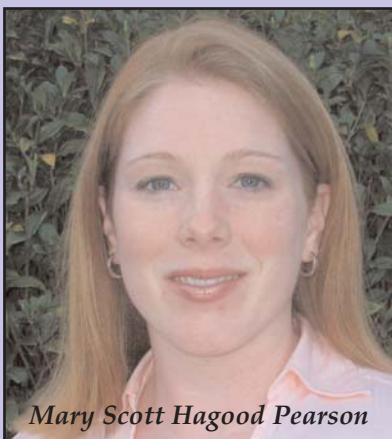


Representative Nydia M. Velazquez (NY) peeks over the top of an FDT screening unit as FCGCF tech Vipul Patel explains the process at a screening in New York City.

Dr. Bob Welsh, a nationally renowned eye care physician (left) with Representative Ileana Ros-Lehtinen (FL) and Jack Martin of Miami at a screening in Miami's Little Havana.



## THE FACES OF FCGCF



Mary Scott Hagood Pearson

The southern region of the United States is well represented by the Friends of the Congressional Glaucoma Caucus Foundation from Texas across to Florida, and our interests are well served by Mary Scott Hagood Pearson, who is the special consultant to the Foundation.

Mary Scott, a native of Tuscaloosa, AL, received a B.A. in International Studies and a minor in Spanish from Emory University in May of 2000. We first met Mary Scott when she worked in Washington, D.C. as an assistant to Congressman Henry Bonilla of Texas, a strong supporter of the FCGCF. She began her career on Capitol Hill in the fall of 2000 as Congressman Bonilla's Legislative Correspondent. By July of 2002, Mary Scott was promoted to handling the Appropriations Subcommittee on Foreign Operations for Congressman Bonilla, preparing the Congressman for hearings of the

subcommittee, as well as overseeing the implementation of the Congressman's foreign affairs priorities. In February of 2003 Mary Scott was promoted again, to become to Legislative Director, serving as Congressman Bonilla's primary advisor on legislation and policy, with managerial responsibilities for all legislative staff.

In September of 2004 Mary Scott left Washington and began consulting for the Friends of the Congressional Glaucoma Caucus Foundation. In her current role she serves as coordinator for many of the foundation's activities in the southeast. Mary Scott speaks often with Congressional staff and arranges screening events and educational meetings. On behalf of the foundation, she also assists in strategic planning. In addition, she supervises several of the Foundation's Student Sight Savers programs. She also oversees the Southwest Texas Eye Care Collaborative on behalf of the foundation, an effort that she helped secure the initial funding for when she was a congressional staffer. Since she began working for the foundation Mary Scott has organized two meetings of the Collaborative, one focusing on the importance of providing follow-up care and treatment to Collaborative patients and a second focusing on training Collaborative staff.

Mary Scott and her husband Blake reside in Birmingham, Alabama with their dog, Colby, a chocolate Labrador Retriever. The couple is expecting their first child in April.



# SAVING VISION: KEEPING AN EYE ON THE GOAL

by Frank Ashburn, M.D.

The Friends of the Congressional Glaucoma Caucus Foundation (FCGCF) is dedicated to finding individuals with glaucoma and referring them for appropriate care so that they may avoid the loss of sight. A major concern for The Foundation is to target our resources, to maximize our cost effectiveness and our benefit to the at-risk population. Throughout the year, our six vans attend various events across the country designed to find those individuals at significant risk for glaucoma. Several population-based glaucoma studies have helped us to target our work.

The National Eye Institute has a wealth of statistics on glaucoma in its data bank, and much of this can be obtained from the NEI website at: <http://www.nei.nih.gov/eyedata>. For example, there is recent information on the prevalence of open angle glaucoma (OAG).

## OAG on the Rise

There we learn the following: The overall prevalence of OAG in the U.S. population 40 years and older is estimated to be 1.86%, with 1.57 million white and 398,000 black persons affected, affecting 2.22 million U.S. citizens. Owing to the rapidly aging population, the number with OAG will increase by 50% to 3.6 million in 2020.

Black subjects have almost 3 times the age-adjusted prevalence of glaucoma than white subjects. Also, researchers at Johns Hopkins have reported that, in general, glaucoma is six times more likely to cause blindness in blacks than in whites. Several studies have shown that blacks have thinner corneas than whites and that this may be an important risk factor in the development of glaucoma damage. An among blacks in the age group 45-64 years, glaucoma is 15 times more like-

ly to cause blindness than in whites the same age.

Researchers from Johns Hopkins have studied the problem of glaucoma in U.S. Hispanics, the fastest growing minority group in the country. The study, published in 2002 and still available on the Johns Hopkins website, showed that glaucoma was the leading cause of blindness in Hispanics.

## Access is Vital for Minorities

Professor Sheila K. West, principal investigator states: "Clearly, getting access to vision care is a real problem for this community. The population we studied, in Arizona, was largely low income and had no access to health insurance, and we believe the same barriers to care exist in other areas across the country. We must increase vision screening and access to health services for them."

Phoenix, Arizona, and San Antonio, Texas, with other screenings taking place across the country.

## Treatment Is the Missing Element

Screenings provided by the Foundation are important facets of the management of glaucoma. Patient follow-up and the necessary treatment are the critical next steps. It is tragic when patients lack the funds or insurance to follow through with their care. The FCGCF realizes the importance of coordinating screenings with patient follow-up for confirmation of diagnosis and then treatment. For example, this past summer we screened in Yazoo City, Mississippi with the help of The University of Mississippi Department of Ophthalmology, under the direction of its chairman, Ching-Jygh Chen, MD and Professor Tosin Smith, MD. Patients who did not have

a local ophthalmologist could be referred to the University Medical Center for follow-up and care, ensuring that everyone could receive help. The three day screening required a significant volunteer effort on the part of Dr. Chen's department and was crucial to the success of the Foundation's screening activity. Such coordinated efforts are a hallmark of the Foundation's screenings and are the focus of our staff starting many months before an actual screening takes place.

In the coming year, the Friends of the Congressional Glaucoma Caucus Foundation will greatly expand our

screenings by increasing the number of mobile van units, as well as by contracting with other groups on a short term basis that use their own mobile units. We will continue to focus our efforts at high risk groups and will coordinate diagnosis confirmation and care in the local areas, trying to make a real difference.

## A ROAD TRIP TO SAVE VISION

During August, 2004, the FCGCF's MESU3 was driven from Columbus, OH (1) to Birmingham, AL where four screenings were held. The van then drove west to Mississippi where another six screenings took place. Finally MESU3 went to Atlanta for three more events before coming back to NY.



The foundation's screening efforts have been directed towards the underserved Hispanic community, with more than 6,000 Hispanics screened in the past year, making it the largest demographic block screened.

The Coordinating Centers for major Hispanic screenings are in

# FIGHTING AGAINST INEQUALITIES IN HEALTHCARE

by Randall D. Bloomfield, MD

Healthcare Disparities or “Unequal Treatment” is an issue which the Office of Minority Health has cited for some time. This problem is currently receiving considerable attention.

The Friends of the Congressional Glaucoma Caucus Foundation has addressed the difference in the treatment of minorities since its inception. Spurred on by congressional concerns, the Foundation was formed. Special emphasis was given to screening high-risk populations for glaucoma. Among the population at greatest risk are African American, Caribbean American, and Hispanic and Latino Americans. Among the differences in the treatments noted are Diabetes Mellitus, Cardiovascular and Renal Diseases. The Congressional Glaucoma Caucus Foundation consists of 79 members of the House of Representatives and two members of the Senate. These elected officials have not only supported the efforts of the “Friends” but they have per-

sonally attended the screenings and encouraged their constituents to be screened.

The Office of Minority Health has also been aware of the issue of cultural sensitivity and its impact on ethnic populations. The “Friends” have responded to this concern by utilizing physicians and staff of the same cultural background, whenever possible. It emphasized the importance of cultural competence and realized the importance of cultural sensitivity in getting an ethnic population to accept and access the screening procedures.



*At a late October screening in Augusta, Georgia, a Student Sight Saver Volunteer applies eye drops to a participant prior to taking his intraocular pressure with a tonopen.*

The Foundation staff has made its services available in churches, community centers and clinics. Mobile vans have been used to increase the accessibility to the targeted populations.

## ANOTHER BENEFIT OF GLAUCOMA SCREENINGS

by Eleanor Beers

In February 2003 New York Hospital Queens was awarded its initial grant through the Friends of The Congressional Glaucoma Caucus. For the past two years these grant moneys have been used to fund Free Glaucoma Screenings in the Queens communities.

In an effort to provide excellent service at these screenings, a team of NYHQ clinicians and support staff work at the various community events providing assistance to the Ophthalmologists by conducting Blood Pressure, Glucose and often times Cholesterol Screenings. We at NYHQ know that our efforts are successful by the number of individuals that we have been able to recommend for follow-up and preventive care.

Recently, during a lull in the screening at one of the community events, one of our Nurses (whom we will call “Valerie”) decided to have

her eyes checked for Glaucoma. Much to her surprise, “Valerie” was told that her eye pressure was very high. This proved to be shocking to her since she participated in the screening only because she wanted to know how the equipment worked. After that initial reading, “Valerie” went for a follow-up eye visit at which time her readings were found to be within normal levels. The high reading at the screening was attributed to a medication which she had discontinued between the time of the screening event and the follow-up visit.

Just as “Valerie” was releasing a sigh of relief due to the normal eye pressure reading the Ophthalmologist turned to her and said, “Do you know that you have a nevis?” From “Valerie's” medical training, she knew a nevis is often indicative of a malignant melanoma. After further testing it was determined that “Valerie” that all was okay and being assigned to a Retina

Specialist for regular observation, “Valerie” continuously states, “Thank God that this free testing was available in the community.” She reported that she is not one who goes to the eye doctor on a regular basis and that she would have probably continued to live with this condition for years to come with out appropriate medical intervention. “Valerie” for one is very glad that NYHQ makes free glaucoma screenings available to its employees at various times throughout the year.

*Glaucoma Reports is a publication of the Friends of the Congressional Glaucoma Caucus Foundation*

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