Save Sight and Eye Health Institute
The University of Sydney
and
Lions N.S.W. – A.C.T. Save Sight Foundation

FIRST ANNUAL REPORT
1986/87

2006
This recreation of the First Annual Report of the Save Sight Institute was done in celebration of 21 years of Excellence in Research, Teaching and Community Service. With thanks to the Senate of the University of Sydney, it contains original text and photographic replicas (with 2 in colour).
The Save Sight and Eye Health Institute

Following approaches from the Lions N.S.W. - A.C.T. Save Sight Foundation the purpose of the Institute was approved in principle by the Senate of the University of Sydney on 3 December 1984 and the Institute was formally established by the Senate on 6 May 1985.

The objects of the Institute are to assist the Department of Clinical Ophthalmology of The University of Sydney in extending its activities and, without limiting the generality thereof, in particular in respect of:

a) Research into visual development in infancy and childhood and factors responsible for defects in visual developments;
b) Research into disorders of the visual system including basic research and development of appropriate management of disorders of the eye and vision;
c) Complementing the work and research within the Sydney Eye Hospital and co-operating with eye departments and research groups within N.S.W. and the A.C.T. and particularly with the Royal Alexandra Hospital for children and the Westmead Centre of the Parramatta Hospitals;
d) Teaching community ophthalmology including the training of family doctors and training Ophthalmologists and other health professionals concerned with eye care;
e) Increasing community awareness of eye disorders and eye health, including printing and purchase of publications and distribution of the same;
f) Originating programmes of relevance to training in Ophthalmology, eye care and eye health including programmes for developing countries and collaborating with the School of Public Health and Tropical Medicine situated in The University;
g) Furthering the objectives of the Lions N.S.W. - A.C.T. Save Sight Foundation and also, where relevant and appropriate to eye care, the Lions Clues N.S.W. - A.C.T. Public Health Care Foundation;
h) Collaborating with the Royal Australian College of Ophthalmologists, the Royal Blind Society and The Australian Foundation for the Prevention of Blindness, and other bodies concerned with save sight and/or eye health;
i) Supporting the visits of academics and research workers from within Australia and overseas who are likely to assist the Institute in the achievement of its objectives.

Professor Frank Billson, Director

Management Committee

1. P.D.G. Ted Wilson,
   Lions N.S.W. – A.C.T.
   Save Sight Foundation (Chairman).

2. Professor F.A. Billson,
   Professor of Clinical Ophthalmology and Lions Professor of Eye Health (Director)

3. Professor J.M. Ward,
   Vice-Chancellor and Principal.

4. Professor M.G. Taylor,
   Deputy Vice-Chancellor.

5. Professor R.S.B. Gye,
   Dean,
   Faculty of Medicine.

6. Dr J.W. Hornbrook,
   Consulting Ophthalmologist.

7. P.I.D. K.M. Lentfer,
   Director,
   Lions N.S.W. – A.C.T.
   Save Sight Foundation.

8. P.D.G. R. Reaveley,
   Director,
   Lions N.S.W. – A.C.T.
   Save Sight Foundation.
The Save Sight and Eye Health Institute

Report of the Management Committee

The Management Committee has the honour to submit to the Senate of The University of Sydney the 1st Annual Report covering the activities of the Institute up to 31 March 1987.

Statement by the Director

The Save Sight and Eye Health Institute represents the fulfilment of a dream that I and the Lions N.S.W. – A.C.T. Save Sight Foundation had for a long time, to offer the community, the Government and the University the opportunity to share in a joint mission to prevent blindness. The Lions have made it possible by providing the seeding money.

The Lions Clubs have a magnificent record in supporting research into eye disease throughout the world and are renowned for their ability to mobilise community effort. They have already founded two Chairs in Ophthalmology in Australia and the Lions N.S.W. – A.C.T. Save Sight Foundation has donated over $1,400,000 since 1947 to institutions in this State for equipment and research.

In establishing this Institute, the Foundation has provided $150,000 to purchase essential equipment and has guaranteed the salaries until 1990 of two administrative staff and an epidemiologist.

The N.S.W. State government has expressed its support for the concept of the Institute at 345 Crown Street, Surry Hills and The University of Sydney, through its Senate, has endorsed the initiative and supported the linking of the activities of the University’s Department of Clinical Ophthalmology and Eye Health, the Institute and the community at large.

I wish to say something about the need for an Institute such as this, about how it can provide education for eye health professionals and laymen alike and how it can foster research into the causes and prevention of blindness.

Forty millions or more than 1% of the world’s population are blind and blindness ranks with cancer as the two most feared afflictions in the community which threaten health and lifestyle.

The Institute has in its team scientists with skills in basic bio-chemistry and bio-physics, and research into basic visual science will be the main structure of the Institute’s research interests. Secondly, the Institute will be concerned with new treatment and management of eye disease not currently available in the community from other sources. Thirdly, the Institute will be concerned with detecting eye disease problems in the community, particularly in the areas of glaucoma, cataract, strabismus and amblyopia in children, and diabetic retinopathy.

Until now, medical scientists have focused their work on the mechanism of eye disease and its cure as though disease were inevitable. At the same time, insufficient attention has, I believe, been paid to the causes to be found in the environment and in the community as a basis for disease: that there exists considerable scope for preventative action, a fact which one sees more obviously when one returns to our society after working in a developing country where the problems are so magnified.

Community action is essential because eye disease threatens not only our quality of life and is a burden in human terms, but it is also a burden in economic terms. It is estimated that the total cost of spectacles and refractive surgery, including intraocular lens implantation for cataract, in Australia alone represents 100 million dollars each year. If we could delay the onset of cataract by just ten years we would halve the amount of surgery being performed for cataract in Australia today.

There is a need for the community to be aware of the major causes of blindness and to understand them and the symptoms so that they can respond to them. To this end prevention and better management of blinding eye disease in children is the first priority of the Institute. This priority is justified because it serves both to reduce the highest cost to the community of educating blind children and of providing rehabilitation throughout their lives.

It is a fact that 5% of children under the age of five are at risk of amblyopia and that 60% of the problems of severely impaired vision in children are developmentally determined. The major problems are retinal disorders associated with prematurity and cataract, glaucoma and developmental defects, all of which demand different solutions to adult causes of blindness. Retinitis pigmentosa is an example of a major problem which has a hereditary basis but about whose recognition and control the community is generally ignorant. Cataract, glaucoma and diabetic retinopathy can all be helped if recognised and treated appropriately.

The major causes of blindness in the Australian community in adults are age-related, but the following facts are not well-known:

a) CATARACT touches 5% of people over 55 and 50% over the age of 75 have it. With the estimated population increase by the year 2000, there will be a 30% increase in this problem.

b) GLAUCOMA represents 20% of world blindness and it affects about 11% of people over 40 of whom about 20% have a family history of the problem. Much blindness could be saved if there were general awareness of the relevance of family history.

c) AGE-RELATED MACULAR DEGENERATION affects one in four people over the age of 60. It is a particular problem because it comes at a time when people are looking forward to a time when reading takes up a considerable part of their leisure time.

d) DIABETIC RETINOPATHY is the leading cause of blindness in young adults and laser treatment is no substitute for early preventative measures as it succeeds only at the expense of destroying part of the eye and reducing peoples’ field of vision so causing disabilities such as night-blindness.

Only when the community understands how the eye works and the diseases that may affect it, will awareness be raised to the level where people will seek attention early or, more importantly, be able to recognize the problems within themselves, that is, to discover that something is wrong without necessarily having to attend an eye specialist. This would have an advantage economically as well as in practical terms. But more than that, I believe the community should understand how their
body works so that they can share with the scientific community the problem of tackling and solving the problems that these present.

To bring this about, I believe that there is a need today for a new type of medical eye health professional with additional skills in public methodology and biostatistics who is able to organize the most effective strategies to bring to the community knowledge of the eye and eye disease. I would call such a person a community ophthalmologist.

I shall give an instance of the effect of the work of such practitioners. Every year since 1978 I have lead a team of ophthalmologists to Bangladesh, a country where 50,000 of the adult population go blind each year from cataract and, tragically, about 30,000 children under five years of age go blind each year because of Vitamin A deficiency. Using the staff of my department (and now also of the Institute) and with the financial backing of Foresight, an Australian non-government organization, we have provided training for 32 doctors and 72 paramedics in community ophthalmology and, as a joint enterprise between the Universities of Chittagong and Sydney, have established a Diploma in Community Ophthalmology.

Through this work in Bangladesh, not only has sight been restored to a very large number of people, but the incidence of new blindness is decreasing steadily each year as the population is examined on a large scale and is taught to recognise early symptoms of cataract and the importance of maintaining minimum levels of Vitamin A intake.

Based on my experience in Bangladesh, I have no hesitation in saying that up to half of new blindness in this country could be prevented through community awareness of the particular types of eye disease which afflict Australians.

So I see the Save Sight and Eye Health Institute not as a monument, but as a point of focus for prevention and better management of blindness activities in our community, as an interface between the community, the Government, visual scientists in the University of Sydney's Department of Clinical Ophthalmology, eye health professionals, scientists, psychologists, and workers in other health roles who should be involved and share in this problem because they all have some relevance.

The Institute's formal objectives highlight the need for research in eye health care and prevention of blindness in activities in all ages, but particularly in infants and young children. They recognise the need to tackle the problem of prevention of blindness at three levels so that the workers at the Institute will look not only at diseases in the clinical situation and tackle the problems in the laboratory both in terms of service and of research, but will also emphasise the need for understanding within the community, and the need for research activity with the community under that discipline known as epidemiology which, through statistics, arrives at public health methodologies as has, of course, been done for many years by the School of Public Health within the University of Sydney.

The Institute will support eye research wherever it will assist the objects of the Institute and I want it to be accountable to the community. The fact that the Institute is getting substantial funding from Lions will enhance that.
accountability. The Institute is considering the possibility of joint research with Professor J.D. Matthews, Director of the Menzies School of Health Research in Darwin, in respect of trachoma in Aborigines. The Institute will initiate education programmes within the community and among health professionals. There will be a series of public health lectures on how the eye works and on eye disease. These will be open to the community to share the information, not only what we know, but also the interface where research is taking us. We intend to raise community awareness and education through screenings and through a course of lectures and also through films and publications.

In conclusion, I wish to thank the Directors of the Lions N.S.W. - A.C.T. Save Sight Foundation who saw fit to support the establishment of this Institute with the funds raised by so many members of Lions Clubs throughout this state.

Opening of the Institute

The Safe Sight and Eye Health Institute was officially opened on Wednesday, 4th June 1986 by His Excellency Sir James Rowland, Governor of New South Wales. Among the 165 invited guests were Sir Hermann Black (Chancellor), Mr Joseph Wrobleski (President, Lions Clubs International), Alderman D.W. Sutherland (Lord Mayor of Sydney) and Mr M.B. Yabsley (State Member for Bligh).

There was a substantial photographic exhibition and a video of highlights of the Opening was given to each of the 24 Directors of the Lions N.S.W.-A.C.T. Save Sight Foundation.

A plaque commemorating the event has been erected in the foyer of the Institute and is inscribed thus:

SAVE SIGHT AND EYE HEALTH INSTITUTE

This Institute was opened on 4 June 1986 by His Excellency Sir James Rowland, Governor of New South Wales, in the presence of Mr Joseph Wrobleski, International President of Lions Clubs International and of Sir Hermann Black, Chancellor of the University of Sydney.

Professor F.A. Billson

Director

Mr T Wilson

Chairman

A joint project of the Lions Clubs of N.S.W. and the A.C.T. and the University of Sydney.

Building

The Institute is situated at 345 Crown Street, Surry Hills. Building identification signs have been placed on the external wall and on the entrance doors. The building belongs to the University of Sydney and is also used by the Department of Obstetrics and Gynaecology. It is maintained by the N.S.W. Government under the terms of the State Grants Act.

Staff

Mr A.B.M. James was seconded from the Registrar’s Office in February 1986 to act as Administrative Officer and Miss A.W. Bone was appointed as Secretary to the Director, on an annual basis, from May 1986. Miss Bone has since been succeeded by Mrs Noelene Griessel.

Affiliation

In keeping with its intention of being a focus for blindness activities the Institute has affiliated with Foresight, with the Australian National Council of and for the Blind (A.N.C.B.) with the Australian Foundation for the Prevention of Blindness (A.P.B.), South-East Asia Region, with the Neuro-Ophthalmology Society of Australia and with the Australian Retinitis Pigmentosa Society (N.S.W.). It has also established close links with the Australian Council for Overseas Aid (A.C.F.O.A.), Sydney Hospital, the Royal Blind Society of N.S.W., The Royal Australian College of Ophthalmologists and the Eye Infirmary and Training Complex of Bangladesh.

Continuing Education

The Staff at the Institute was involved during the year with a large number of training programmes and conferences held to further the skills of health professionals.

Professor Billson delivered the Council Lecture at the Annual Conference of the Royal Australian College of Ophthalmologists (R.A.C.O.). He also addressed the Tasmanian Branch of R.A.C.O. and was a guest lecturer at the Scientific Meeting in Paediatric Ophthalmology organised by the Queensland Branch of R.A.C.O.

The staff of the Institute and the Department of Ophthalmology is associated with the Sydney Eye Hospital in a Family Medicine Training Programme of doctors at the Hospital and the Institute has, with the assistance of the Postgraduate Medical Committee of the University, organised a week-end symposium entitled “Ophthalmology for the General Practitioner”.

In addition, Professor Billson conducted courses in the evening at Parramatta and Baulkham Hills for family doctors and he, Dr K.A. McClellan and Dr A. Farinelli took part in a nine-week course conducted by the Family Medicine Program at St Leonards.

A three-week residential course, the Ophthalmic Basic Science Course, was conducted in May by the Institute to prepare candidates for Part I of the fellowship examinations conducted by the Royal Australian College of Ophthalmologists. Forty one general practitioners attended from throughout Australia and thirty two lecturers were involved in giving lectures and demonstrations in the areas of anatomy, physiology and optics.

The Institute also hosted the Annual Conference of the Orthoptists Association of Australia and a week-end seminar ‘Developments in Retinal Topography’, conducted by the Visual Scientists Association for over 60 members. In August 1985 and 1986 Professor Billson travelled to Bangladesh to take part in the teaching programme and skill transfer in cataract surgery and in the setting and

Management Committee

Article 20 of the Constitution provides for a Management Committee consisting of the Vice-Chancellor, the Deputy Vice-Chancellor, the Dean of the Faculty of Medicine, the Director of the Institute (that is, the Professor of Clinical Ophthalmology and Lions Professor of Eye Health) an ophthalmologist nominated by the Director and three members of Lions Clubs International nominated by the Board of Directors of the Lions N.S.W. - A.C.T. Save Sight Foundation. Professor Billson nominated Dr J.W. Hornbrook, consulting ophthalmologist to the Committee and the Directors of the Lions N.S.W. - A.C.T. Save Sight Foundation nominated Messrs T. Wilson, R. Reavley and K.M. Lentfer.

At the first meeting held on 30 October 1985, Mr Ted Wilson was elected as Chairman as per article 13. Six other meetings have been held since.
marking of papers for the Diploma of Community Ophthalmology at the University of Chittagong. In 1985 he was accompanied by Dr McClellan and Dr G Williams who have established a clinical microbiology laboratory at the University and who have provided on-going instruction to the local microbiologists since 1983.

As a Bicentenary project, the Institute has begun arrangements for a meeting of the Concilium Ophthalmologicum Universale to be held in Sydney in November 1988.

Community Screenings
The Institute, in co-operation with the Lions Clubs, the Australian Foundation for the Prevention of Blindness, Optical Prescription Spectacle Makers, the Royal Blind Society of N.S.W., the Royal Australian College of Ophthalmologists, the Orthoptic Association of Australia and the Sydney Eye Hospital has commenced a programme of community screenings for Glaucoma, Amblyopia and Strabismus.

The screenings are being held on one Saturday each month in Sydney and large country towns and there will be a stand at the Royal Easter Show in April 1987.

Income and Expenditure
The Institute’s income from its foundation until 31 December 1986 totals $301,342.87, including interest. Of this $161,773.86 was unspent as at 31 December 1986.

The major items of new equipment which have been bought are:

1. An Australux Projection Screen to be used for lectures both public and teaching at the Institute ($1,985.00).

2. A Leitz Cryostat 1720 ($25,297.52).

3. An Olivetti ETV 250 word processor ($3,430.00).

4. A Commander AN616 telephone system with 16 interconnected stations situated at the Institute and the Sydney Eye Hospital ($10,826.00).

5. A pattern generator ($2,561.36).

6. A horizontal laminar air flow unit ($2,600.00).

7. A mikro-rapid K centrifuge ($6,195.00).

8. A CO₂ incubator ($4,449.00).

9. A Sanyo personal computer with two portable basic time computers and printer ($11,645.00).
Founding Donors

In connection with the opening of the Institute, the Lions N.S.W.-A.C.T. Save Sight Foundation invited all the Lions Clubs in N.S.W. to become Founding Members of the Institute by donating $10 or more per member before 31 August 1986. A total of 73 Clubs and the Conferences of all six Multiple Districts of N.S.W. responded by contributing a total of $40,641.38. The Founding Members of the Institute are:

MULTIPLE DISTRICT 201
District 201 N1 District 201 N2 District 201 N3
LIONS CLUBS - DISTRICT
Armidale-DumaresqMoreeMoree Plains
BellingenMoree PlainsPort Macquarie City
Bowra-villePremeer and District
Camden HavenQuirindi
Coffs HarbourTamworth
Glen InnesUrunga
GraftonWerris Creek
Inverell

LIONS CLUBS - DISTRICT
AshfieldHurstville
CronullaIngleburn
EngadinePaddington
Green ValleySydney Central

LIONS CLUBS - DISTRICT
BranxtonMaitland West
CessnockMorisset
CharmhavenMuswellbrook
GwandanalkPort Hunter
Killarney-BateaouToukley

LIONS CLUBS - DISTRICT
CoonabarabranOrange
GilgandraTemora
Lightning RidgeTooraweenah
Mandurama & DistrictWagga Wagga South
Mendooran

LIONS CLUBS - DISTRICT
BalgowlahParramatta
Baulkham HillsSt. Ives
DuralWest Pennant Hills
HarbordWest Ryde
Kings LangleyWinston Hills
Mt. DruittWiseman’s Ferry & District

LIONS CLUBS - DISTRICT
Canberra-Phillip-Weston Creek
Canberra-Woden

LIONESS CLUBS
Beverley Hills
Fairfield
Gwandanalk
Katoomba
Manly

LEO CLUBS
Engadine
Gundagai

Research Report

Research in 1985 and 1986 has been carried out in the clinical, electrophysiological and basic science fields under the control of the Director assisted principally by Dr. K.A. McClean, Dr. Vaegan, Dr. J.M. Provis, Dr. J.N. Currie, Dr. T.J. Miller, Dr. G. Williams, Dr. O. Lux, P.L. Penfold, B.A. Fitzgerald and D. van Driel.

The bulk of the seeding money of $150,000 provided by the Lions N.S.W. - A.C.T. Save Sight Foundation has been allocated for research equipment. At the same time, the growing prestige of the Institute has been invaluable in supporting successful applications for fellowships and scholarships for four non-established researchers and for three postgraduate students.

The research work has been made possible with prestigious grants from the National Health and Medical Research Council, the Ophthamal Research Institute of Australia, the University of Sydney Medical Foundation, the Royal N.S.W. Institute for Deaf and Blind Children, the Clancy Foundation, the Sylvia Clan Trust, the Sydney Hospital Research Foundation, the Lions N.S.W. - A.C.T. Save Sight Foundation and private donors.

Details of current research work may be scheduled as follows:

1. Two NH & MRC Grants, both for research into diseases of the retina, which are responsible for 40% of new blindness, have been renewed for 1987.

Children’s Eye Disease

Dr. Jan Provis’ team has continued to increase understanding of visual development in children, and to provide insights into the sensitivity of the developing visual system to deprivation of clear retinal images. This work is of fundamental importance to the understanding of the management and timing of cataract surgery in infancy and childhood, and of the secondary effects of congenital glaucoma resulting from distortion of the shape of the eye due to uncontrolled intraocular pressure.

Dr. Provis’ group has established a good working relationship with King George V Hospital, Department of Pathology, and has been assisted by Phillip Penfold, an immune histo-chemist and by Professor Jonathan Stone. Professor Stone has developed monoclonal antibodies to elements of the retina which form “biological bullets” that can target particular cells and tissue in the retina and help in the understanding of cell types occurring during development of the retina. Dr. Provis has been appointed Honorary Visiting Fellow to Professor Stone’s Department and, with Professor Stone’s appointment as Head of the Department of Anatomy at the University of Sydney, the relationship between his research interests and those of the Institute should be strengthened.

Dr. Provis has been invited to write a review for the International Journal of Neurobiology of recent advances in retinal and optic nerve development and will be assisted in the publication by Mr. Penfold. This invitation recognises the standing the Department has internationally.

Age-Related Macular Degeneration

Mr. Penfold’s group working at Sydney Eye Hospital has continued its research into age-related macular degeneration (AMD) and the disturbance in the immune system that is associated. Several resources have been established, particularly Professor Stone’s work on the development of the retina, and the Eye Bank, Clinics and
3. Electrophysiology

Dr Vaegan's group is concerned with the electrophysiology of the eye and since Dr Vaegan joined the Department new tests of macular and optic nerve function have been developed employing a pattern electro-retinogram. Research has particularly concentrated on the hypothesis that two types of retinal macular electro-retinogram (ERG) pattern and focal, are specific for macular damage and that patter ERGs, unlike focal ERGs, are reduced after damage to the ganglion and amacrine cells.

4. Studies of the Cornea and External Eye Disease

In 1986 a research clinical microbiology laboratory was established at Sydney Eye Hospital and Penny Bernard, a research microbiologist, has been appointed. Dr McClellan, who was appointed this year to the lectureship in the University Department, is heading research in external eye disease and currently data is being collected on infections of the eye and management of suppurative keratitis, and an epidemiological study of the organisms which cause conjunctivitis in the community has been initiated.

This research laboratory is important in that it will also provide a facility for cell culture which will have relevance to our basic research in retina and it will also supply a service to the Sydney eye Hospital to enable rapid identification of micro-organisms collected in ocular swabs.

5. Professor Billson with his Research Assistant/Department Orthoptist, Anne Fitzgerald, has continued clinical research in amblyopia, congenital cataract and

Out-patient facilities at Sydney Eye Hospital. Early results indicate that antiretinal auto-antibodies exist in patients' sera related to the pathogenesis of AMD. Mr Penfold's immune histochemistry and electron-micrographic skills, together with expertise in the Department has excited the interest and support of Professor Tony Beasten's Department of Clinical Immunology and collaboration with Professor Beasten's Department is proceeding.

2. Diabetic Retinopathy

The Institute's studies in this area are focused on the electrophysiological diagnosis of early diabetic change in the eye using a technique developed in the Department known as the Pattern Electro-Retinogram.

These studies have continued into 1987 and will be supplemented by research into epidemiological factors affecting both the severity of diabetes and the prognosis for life in those with proliferative diabetes.

The persons currently working in the area of diabetic retinopathy are Professor Billson, Anne Fitzgerald and Dr Paul Mitchell. In February 1987 Dr Tom Millar from the Australian National University joined the staff and is also working in this area.

Dr Millar also has expertise in immune histochemistry and his particular expertise in neuro-transmitters in the retina will be highly relevant to Dr Provis' and Mr Penfold's work.

The Sylvia Kane Bequest will also make it possible for staff to carry out fundamental basic research into pathological development of new vessels seen in diabetic retinopathy which are responsible for the most sight-threatening complications of diabetes mellitus.

The members of the Department and the Institute would particularly like to thank Mr C.F. Bethke for his support and continued interest in the research being undertaken in this field.

Dr Kathleen McClellan, lecturer, examining a patient with the argon laser
Chairman's Report

Our Institute has, I believe, had a most successful first year. As programmes are developed I am certain that we will see increased support and recognition for the excellent work of the scientists and their support staff.

I pay a special tribute to the Director, Professor Billson, who has worked untiringly towards the Institute's goals and his efforts, particularly during times of great personal stress, were greatly appreciated.

I am particularly pleased to report that each of the six Lions Districts of New South Wales and 73 of the Clubs responded to the invitation to become Founding Donors and the total amount contributed was in excess of $40,000.

I returned on 6 November from a visit to the United States of America where, assisted by letters of introduction from Professor Billson, I visited the following institutions:

UNIVERSITY OF BRITISH COLUMBIA, VANCOUVER: Department of Ophthalmology, Eye Care Center and Eye Bank.

UNIVERSITY OF WASHINGTON, SEATTLE: Department of Ophthalmology and Lions Eye Bank.

LIONS OLD DOMINION EYE BANK, RICHMOND, VIRGINIA.

AMERICAN DIABETES ASSOCIATION, ALEXANDRIA, VIRGINIA.

PACIFIC PRESBYTERIAN MEDICAL CENTER, SAN FRANCISCO: Northern California Lions Eye Foundation and Eye Bank.

EYE BANK ASSOCIATION, WASHINGTON, D.C.


UNIVERSITY OF SOUTHERN CALIFORNIA, LOS ANGELES: Estelle Doner Eye Institute and Lions Eye Bank.

My discussions and fact-finding related particularly to the operation of Institutes such as ours including their role and relationship with Departments of Ophthalmology, Universities, Teaching Hospitals, Government and the community. Where appropriate, I also discussed Eye Banks.

I am preparing a comprehensive report on my findings.

Both the Management Committee and the Executive have met regularly during the year and the administration has been properly attended to for which I thank the Administrative Officer, Mr Alfred James and the Secretary, Miss Alison Bone for their ever-willing cooperation and assistance.

To my fellow members of the Management Committee may I say thank you for your participation and I look forward to continuing to work with you and serve the Institution.

T. WILSON - CHAIRMAN
F.A. BILLSON, DIRECTOR
Statement of Receipts and Payments
for the fourteen months ended 31 December, 1986

In respect of:
SAVE SIGHT AND EYE HEALTH INSTITUTE
(University Account Codes 6 K79 200; 203;205)

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M L Bannigan, BEc BA FASA CPA FCIS
DEPUTY ACCOUNTANT

Professor Frank Billson, Professor of Clinical Ophthalmology and Director of The Save Sight and Eye Health Institute with three Bangladeshi children who are recovering from eye surgery as a result of corneal disease caused by malnutrition and infection.
Save Sight Institute
‘Sight for Living - Sight for Life’

The Save Sight Institute in 2006 is the research arm of Sydney Eye Hospital, a teaching hospital of the University of Sydney and is located on the site of Sydney Hospital (built in 1810), the birthplace of medicine and nursing in Australia.

It is a world leader in research into the major causes of blindness in children and older Australians. It provides tele-ophthalmology outreach services to rural and Aboriginal communities in NSW and beyond. It manages the Lions NSW Eye Bank, providing corneas for sight saving surgery in NSW. It is home to Foresight an I.N.G.D.O. providing services to the Asia Pacific Region and Near Island Nations to Australia.

SAVE SIGHT INSTITUTE
UNIVERSITY OF SYDNEY

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