

SUMMER 2022

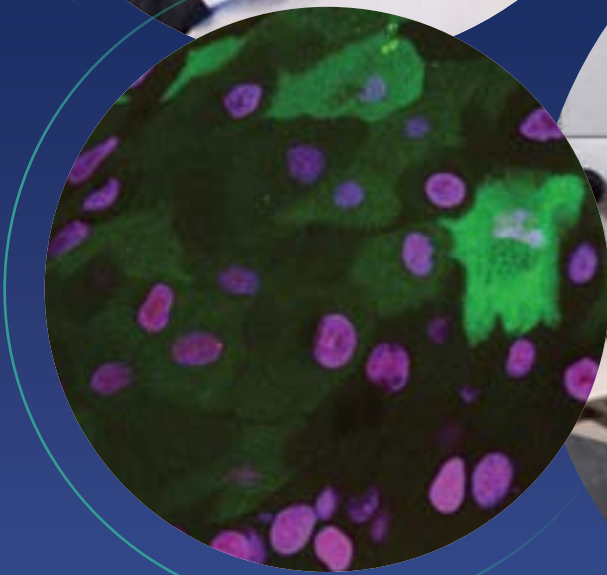
Wilmer Eye  
Institute



# Wilmer

## The Power of Professorships

How crucial funding drives faculty  
innovation in **education, research**  
and **patient care.**



# VISUALIZING GLAUCOMA

## Looking Forward

While glaucoma — a group of eye diseases that can cause vision loss by damaging the optic nerve — is a common source of blindness, the condition can often be treated effectively by using eye drops.

In a project aimed in part at educating patients about the importance of taking their drops, two Johns Hopkins scholars have teamed up to create a virtual reality (VR) experience.

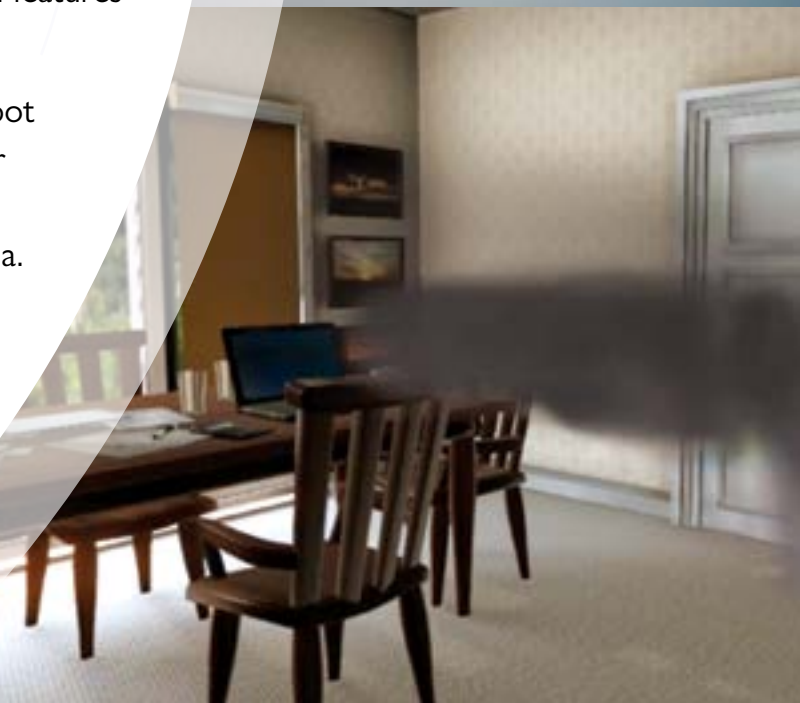
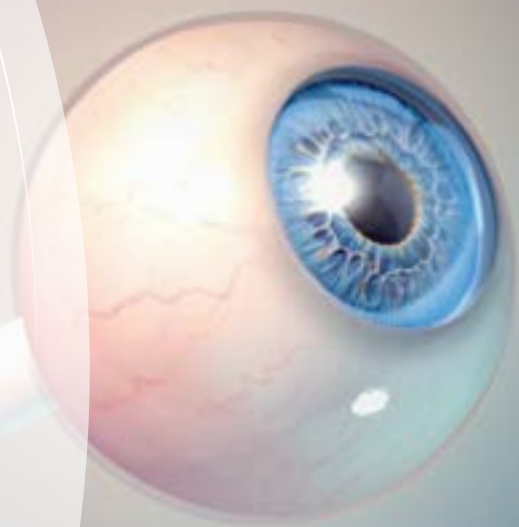
**Pradeep Ramulu, M.D., Ph.D.**, chief of the Glaucoma Division, recently partnered with **Emily Cheng**, a former student in the Art as Applied to Medicine graduate program at Johns Hopkins, to create the application.

Upon putting on VR goggles, the user will see the first image: a menu of different modules rotating around the eye.

The second image shows the module that explores a three-dimensional model of the eye, highlighting anatomical features important in glaucoma.

Image three represents a task simulation. The gray spot in the center of the screen — which follows the user wherever they go — is an enactment of the visual experience of a patient with moderate-stage glaucoma.

Cheng, who received input on the project from four patients with glaucoma, says the application is a prototype that can be built upon with the ultimate goal of applying it in a patient care setting.



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**On the cover:** Three endowed professorships at work supporting Wilmer faculty members in the mission to combine excellent patient care, education and research. *Clockwise from top:* Megan Collins fitting a student with glasses (read more on p. 16); Fasika Woreta with Wilmer residents in the microsurgical training center (read more on p. 6); and an image from Albert Jun's research into gene therapy for corneal diseases such as granular dystrophy (read more on p. 20).



## As I See It ...

Dear Friends,

**SYNERGY. IT CAN BE A MERE BUZZWORD OR IT CAN BE THE RESULT OF FORCES WORKING TOGETHER TO PRODUCE SOMETHING THAT IS MORE THAN THE SUM OF ITS PARTS.**

In academic medical institutions like Wilmer, the goal of combining patient care, research and education is to produce synergy that benefits all three — pushing the effectiveness of patient care, the innovation of research and the success of students past where each could go if pursued in silos.

A hallmark of academic medicine is that all clinicians are also professors who pursue research and teach others. Each of these tasks alone requires dedication. The combination of all three requires devotion to a mission — to being a part of something greater than oneself. This work also requires time and resources.

One way to provide the wherewithal for people to engage simultaneously in patient care, research and education is the endowed professorship. Funded by donors, these named professorships are awarded to the best and brightest faculty members. Traditionally, full professors receive these endowed professorships as both an honor and as a means to receive more resources for their work. However, Wilmer has recently pioneered an initiative to award a special type of endowed professorship — named a Rising Professorship — to early-career faculty members who will hold this type of professorship for up to seven years. The unprecedented resources these Rising Professorships provide to early-career faculty members are meant to accelerate their research accomplishments by 10 years or more.

The goal for them is to pass their Rising Professorship on to the next crop of early-career faculty members when they have accomplished enough to achieve the next phase of their career — an endowed professorship. In this magazine, you will read about two Wilmer faculty members who have made it to that next phase of their career — holding an endowed professorship — and what that means for their ability to contribute to their patients, the field of ophthalmology and the community of Baltimore.

If you are curious, next time you visit Wilmer, ask your doctors about their research. Their passion for their work cannot help but make you optimistic for the future of eye care and vision research.

Yours in continued good health,

  
**PETER J. McDONNELL, Director**



THE LATEST VIEW FROM WILMER

# NEWS

## Wilmer Takes the Lead

**When it comes to growth and development at the Wilmer Eye Institute, whether overseeing expansions, recruiting award-winning faculty members, making capital purchases or figuring out what's next for the nearly 100-year-old institution, Cathy Kowalewski plays an instrumental role in making it happen.**

As administrator of the Wilmer Eye Institute, Kowalewski is involved with, as she puts it, “anything and everything,” including working to ensure top-quality service to patients. “It’s a very rewarding role to play,” she says.

Kowalewski can often be found walking around Wilmer’s main campus in East Baltimore talking with employees and patients to take stock of their concerns and to solicit feedback. “I want it to be a nice place for people to not only come as patients, but for us to work as employees,” she says.

As a member of various ophthalmology trade organizations, Kowalewski helps spread Wilmer’s influence worldwide.

Last year, she was named president of the executive board of the World Association of Eye Hospitals, or WAEH — a global association of eye hospitals and eye departments of general hospitals. The association’s mission is to continuously improve the experience, care and outcomes of patients with eye disorders. In her new role, Kowalewski travels the world to learn how other eye hospitals work and to promote the exchange of knowledge about best practices between eye hospitals worldwide.

“It’s been amazing to see how other hospitals do things, and sometimes it’s quite different than what we do here in the U.S.,” she says. “It’s been really interesting and eye-opening for me.”

Maike van Zuilen, global lead of WAEH, says Kowalewski is a good fit for the role because she is approachable, she thinks outside the box and she’s able to connect the WAEH with leaders in ophthalmology. “She is the leader you would like to work for,” she says. “She’s always encouraging and inspiring.” — *Jon Bleiweis*



## Wilmer Takes the Lead CONTINUED



**J. Fernando Arevalo, M.D., Ph.D.**, the Edmund F. and Virginia Ball Professor of Ophthalmology and chief of ophthalmology at Johns Hopkins Bayview Medical Center, has taken office as president of the Pan-American Association of Ophthalmology. With members in more than 35 countries, the association provides a forum for professionals from all over the world to gather and focus on ways to standardize and improve ophthalmic knowledge and skills for the improvement of patient care.

**Fasika Woreta, M.D., M.P.H.**, the Eugene de Juan, M.D. Professor of Ophthalmic Education and director of the Wilmer residency program, was selected as a member-at-large of the Association of University Professors of Ophthalmology Program Directors Council. The mission of the organization is to represent departments of ophthalmology; to provide leadership opportunities to department chairs, program directors and other faculty members; to promote excellence in ophthalmic education; to foster vision research; and to promote excellence in eye care. Woreta joins six other program directors on the council, all of whom will eventually rotate through the position of council president.

### FACULTY PROMOTIONS

**Meghan Berkenstock, M.D.**  
Associate Professor

**Megan Collins, M.D., M.P.H.**  
Associate Professor

**Boris Gramatikov, Ph.D.**  
Associate Professor

**Ian Pitha, M.D., Ph.D.**  
Associate Professor

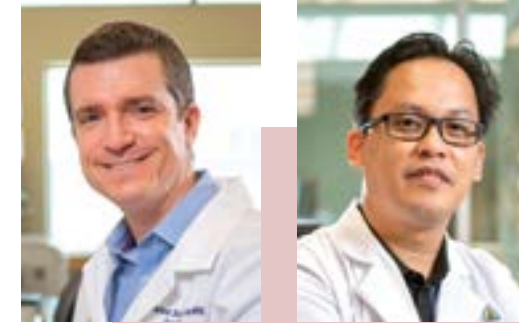
**Fasika Woreta, M.D., M.P.H.**  
Associate Professor



## Inventiveness Flourishes at Wilmer

**Jordan Green, Ph.D.**, director of the Biomaterials and Drug Delivery Laboratory and a professor of biomedical engineering,

ophthalmology, oncology, neurosurgery, and materials science and engineering, has been elected as a fellow of the National Academy of Inventors. Green's research focuses on developing biomaterials and nanobiotechnology to meet challenges in regenerative medicine and to better understand and control the therapeutic delivery of genetic material and drugs to cells. A particular area of interest is developing polymeric microparticle-based biological treatments for age-related macular degeneration.



## Knights Templar Eye Foundation Supports Wilmer Researchers

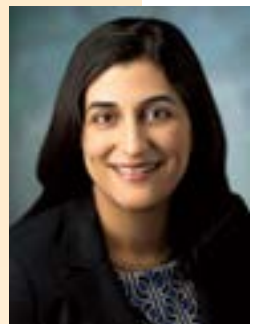
**Jefferson Doyle, M.D., Ph.D.**, assistant professor of ophthalmology in the Division of Pediatric Ophthalmology and Adult Strabismus, and **Rico Gamuyao, Ph.D.**, a molecular biologist and Wilmer research associate, each received Knights Templar Eye Foundation Career-Starter Research Grants. The grants support research that can help launch the careers of clinical or basic science researchers committed to the understanding, prevention and cure of vision-threatening diseases in infants and children.

## Research to Prevent Blindness Invests in Wilmer's Future Leaders

Wilmer retinal specialists **Cindy Cai, M.D.**, the Jonathan and Marcia Javitt Rising Professor of Ophthalmology, and **T.Y. Alvin Liu, M.D.**, assistant professor of ophthalmology, each received a Research to Prevent Blindness Career Development Award. One of the organization's flagship awards, it provides outstanding early-career vision scientists with significant support over four years as a means to start and sustain an independent research program. (Read more about Liu on p. 12.)

**Fatemeh Rajaii, M.D., Ph.D.**, the Odd Fellows Rising Professor of Ophthalmology in the Division of Oculoplastics, received a Research to Prevent Blindness Physician-Scientist Award. The award is designed to allow physicians to devote more time to pursue clinical research activities, providing greater opportunities for specialized study with direct application to the human condition.

**Nakul Shekhawat, M.D., M.P.H.**, assistant professor of ophthalmology in the Division of Cornea, Cataract and External Diseases, received a Research to Prevent Blindness and American Academy of Ophthalmology Award for IRIS Registry Research. The grant supports the use of the IRIS database and its analytic capabilities to further population-based research in ophthalmology and blindness prevention.



# Upholding the Tradition of Excellence in Medical Education

By Joan Katherine Cramer

It is rare for the director of a residency program to hold an endowed professorship, but in 2006, Wilmer alumnus **Eugene de Juan Jr.**, a world-famous surgeon known for his numerous medical innovations and inventions, decided to create this unique position at the Wilmer Eye Institute with a \$2.5 million gift in honor of his father and namesake. The elder de Juan, a Mobile, Alabama, ophthalmologist, dedicated himself not only to caring for his own patients but also to educating young ophthalmologists.

*Left: Fasika Woreta in the Center of Excellence for Ophthalmic Surgical Education and Training, Wilmer's microsurgical simulation lab*

**Fasika Woreta, M.D., M.P.H.**, Wilmer's residency program director, shares this dedication. "When I perform a successful cataract surgery, I am helping one patient, and that is both important and gratifying," she says. "But when we help residents perfect their surgical skills, it multiplies the impact a thousandfold." So it is fitting that on Jan. 31, 2022, the Johns Hopkins University Board of Trustees named Woreta the Eugene de Juan, M.D. Professor of Ophthalmic Education at the Wilmer Eye Institute.

"My father was just a great dad and a great example," says de Juan, who now serves on the faculty of the ophthalmology department at the University of California, San Francisco. "He always had a private practice, but he also volunteered on the faculty of various residency programs and was an attending physician for residents at local hospitals. He saw teaching and guiding the next generation as important, as his responsibility."

De Juan and his family endowed the professorship not only to honor his father but also to honor teaching in general. "I just have so much respect for teachers. Plus, when I was a resident at Wilmer, I thought the very highest professional achievement anybody could attain was a named professorship at the Wilmer Eye Institute at Johns Hopkins," says de Juan, who himself taught at Wilmer between 1992 and 2001 and was the Joseph E. Green Professor of Ophthalmology.

"Maybe the Nobel Prize is better to some, but not for me," he says. "So this was an opportunity to honor my father, my teaching institution and, more broadly, all of my teachers. And I think Dr. Fasika Woreta embodies that high regard for teaching, so I'm very grateful to Wilmer and Johns Hopkins for allowing this to happen."

For Woreta, a cornea and cataract specialist who has been director of the residency program since 2019, educating the next generation of doctors

is less a career than a calling. When she received the named professorship, she saw it as both an honor and inspiration. “It’s humbling,” Woreta says. “Every time I see the new title beneath my signature, it feels almost like an oath — to uphold the tradition of excellence in medical education we are famous for here at Wilmer.”

Woreta grew up in Howard County, Maryland, her father an internist and her mother a nurse. “My family was originally from Ethiopia. Hearing about relatives there who had lost their vision because of operable things like cataracts piqued my interest in ophthalmology early on,” she says.

“As an undergraduate at the University of Maryland, I dreamed of going to Hopkins, with its history of excellence and of caring for the indigent regardless of cost. After finishing my medical school at Hopkins, Wilmer was my top choice for residency. Given how competitive it is to match at Wilmer — this year, we had 586 outstanding applicants for only five spots — I feel

incredibly lucky to have trained at Wilmer and to be an ophthalmologist.”

Woreta says that one of the great opportunities provided by the endowed professorship is that it supports her devoting 40 percent of her time to teaching. “Without the endowment, the program director could struggle to balance seeing patients, teaching and doing research,” she says. “Having two days a week of protected time to dedicate to resident education is quite a gift, as some program directors at other institutions may not even have a full day a week to dedicate to the job.”

Woreta is only the second residency program director to be named the Eugene de Juan, M.D. Professor of Ophthalmic Education, an honor she received after being promoted to associate professor. “I was a fourth-year medical student when my own residency program director, **James P. Dunn**, became the inaugural recipient of the professorship in 2006, and it is an honor to be following in his footsteps,” she says.

During her tenure, she has continued to build on the work of her predecessors, from acquiring new, state-of-the-art equipment for the microsurgical training center, where residents perfect their surgical skills on simulators; to admitting more women and other students underrepresented in medicine into the program; to developing new curricula for the recent integration of the ophthalmology residency and internship programs. This integration has expanded the Wilmer residency program from three to four years.

“It is wonderful to work at a place where teaching is so highly valued, and the professorship is emblematic of that,” she says. “As testament to the emphasis on education, Hopkins has its own Institute for Excellence in Education.

“Being program director at Wilmer is pretty special because the faculty are invested in educating the next generation of leaders,” Woreta says. “I have over 25 core faculty who have a significant role in education and supervision of residents, which is likely the highest number of any program in the world. In addition, there are my many amazing colleagues who help run the program, including residency associate program directors **Amanda Henderson** and **Michael Sulewski**, medical student educator **Henry Jampel**, vice chair of education **Divya Srikumaran**, and director of microsurgical training **Shameema Sikder**. What more could a program director ask for?” ●



Top: Fasika Woreta with Eugene de Juan Jr.



Bottom: Nancy de Juan, Gene de Juan Jr., Eugene de Juan Sr., Wilmer Director Emeritus Edward Maumenee and Sue Maumenee

“It is wonderful to work at a place where teaching is so highly valued, and the professorship is emblematic of that.”

— FASIKA WORETA

# Treating the Whole Patient Through Low Vision Care

By Joan Katherine Cramer



For newly minted optometrist **Dominic Brown, O.D.**, being named the Jones Fellow at the Lions Vision Research and Rehabilitation Center — Wilmer’s low vision division — was a dream come true.

“This is a one-of-a-kind program, and it afforded me the opportunity to not only improve my clinical skills and my confidence in those skills but also to be able to do research,” says Brown, who grew up in Baltimore. “It’s an environment that’s amazingly conducive to complex learning.”

After earning a B.A. in biology (with a minor in psychology) at the University of Maryland, Brown studied at Salus University’s Pennsylvania College of Optometry, where he graduated with honors — earning his Doctor of Optometry degree and a certificate of public health in 2020. He immediately applied for and was accepted into the college’s low vision residency program, but it did not have a research component, so the following year, he applied for and was accepted into the Wilmer fellowship program.

“I fell in love with the low vision field because it is really about the whole patient,” Brown says. “We work with

patients whose vision can’t be corrected by surgery or glasses or contact lenses, and we prescribe tools to help them do things they love but have mostly given up doing. There are so many technologies available today, from hand-held magnifiers to high-tech, head-mounted devices. I can’t tell you how satisfying it is when you find just the right tool and a patient can suddenly read a book or travel, or see their grandchild’s face in a photo again.”

Brown, who spends four days a week seeing patients and one day working on his research project — a study of outcomes of low vision interventions — says he loves the fellowship program’s team approach to patient care. “I have so many great mentors, from the low vision optometry staff to a low vision occupational therapist and a certified low vision rehabilitation therapist, to the people helping me with my research,” he says. He attends lectures and faculty meetings, interactions that are largely virtual because of continuing COVID-19 pandemic restrictions. And he has done

numerous in-person field trips, visiting state agencies and nonprofits as well as shadowing teachers and orientation and mobility specialists who work with the visually impaired.

“It’s been a very robust experience, both because we see so many complex and challenging cases at Wilmer, and because of that remarkable opportunity to see some of the specialists we so often refer patients to at work,” he says. “I am grateful to **Dr. Judith Goldstein** [chief of Wilmer’s Lions Vision Research and Rehabilitation Center], whose leadership is fantastic, and the whole Wilmer low vision team, for being generous with their time and sharing all they know and hopefully making me a better doctor.” ●



# Tapping Precision Medicine to Provide Individualized Care

By Joan Katherine Cramer



Left: T.Y. Alvin Liu  
Right: Nicholas Mahoney

What if one could create a powerful tool, using artificial intelligence (AI), that would help clinicians more accurately diagnose, predict and treat the disease process in an individual patient’s retina? That is the question that **T.Y. Alvin Liu, M.D.**, assistant professor of ophthalmology and retina specialist, has set out to answer as the director of the new Wilmer Precision Ophthalmology Center of Excellence.

“I like to take what I think of as the Elon Musk approach,” he says. “Instead of looking at the existing paradigm and infrastructure and asking what he can do with it, Musk [the renowned creator of Tesla and SpaceX] identifies his destination and works backward. So my question is: What kind of data, process and innovations do I need to get to my destination?”

Just before the pandemic started, Liu had a chance meeting with **Caroline Popper, M.D., M.P.H.**, chief business officer of the Johns Hopkins Precision Medicine inHealth initiative, which is encouraging and offering support to physician-researchers throughout Johns Hopkins to create precision medicine centers of excellence to develop tools to answer specific questions in their various specialties.

“The idea behind precision medicine is that not everyone is the same,” says Liu. “So, we want to harness our exponentially expanding ability to process and analyze massive amounts of data in order to fine-tune treatment for individual patients.”

Liu says he was inspired by his meeting with Popper to begin the application process, and the Wilmer Precision Ophthalmology Center of Excellence was approved in March 2021. The center — which builds on earlier capabilities of the Wilmer Artificial Intelligence Research Network that Liu helped establish in 2019 — adheres to several principles he sees as fundamental to all major advances in medicine. “First, they must benefit our patients. Second, they should be scientifically interesting. And, finally, they should be commercially viable so they have the potential to be self-sustaining.”

AI is, simply put, the ability of a computer to mimic human intelligence. Machine learning and deep learning are subtypes of AI in which an algorithm is generated based on lots and lots of data, which the computer can then use to improve its predictions. Deep learning is exceptionally good at analyzing the complex data behind images and has the potential to make increasingly accurate predictions based on imaging data — which makes it well



suiting to ophthalmology because the field relies so heavily on imaging.

The advantage of tapping into Johns Hopkins Medicine resources is obvious, Liu says, because it allows Wilmer researchers “access to data in a secure, centralized place ... and the data can be further transported to cloud-based Microsoft GPUs [graphic processing units] — special computer hardware that’s especially good for deep learning analysis.”

What will it mean for patients? Liu envisions patients coming into his office, getting a scan that’s read and analyzed instantly, and leaving with a personalized prediction that will guide treatment, including how quickly their disease might progress. The technology, he says, “will be better than humans, detecting things we can’t detect. But it’s not that your retina specialist is now a robot. It’s that I now have a very smart assistant, freeing me up to spend more time connecting with my patients and doing what humans do best.”

But first, Liu’s team has to create the AI infrastructure to do the kinds of mass data processing he envisions. “Just to give you a sense of the challenge, the most frequently used imaging modality in ophthalmology is optical coherence tomography, or OCT.” At academic medical centers like Wilmer, there are tens of thousands of OCT images produced every year, he notes. Typically, “researchers can usually only

download one image at a time, which means images for a cohort of 300 patients can take weeks to download,” he says. “One thing we are about to complete is a new [virtual] pipeline with which we can download all the images for 3,000 patients in a day or two.”

The goal is that Liu’s project will inspire other researchers at Wilmer, in every division, to take advantage of and build on the tools his team is creating.

“We announced [the Center of Excellence] at a faculty meeting last fall, and I have already been approached by people, both in other divisions and within the Retina Division, who are interested in what these tools can do to support their research,” says Liu.

Johns Hopkins Precision Medicine Director **Antony Rosen, M.B.Ch.B.**, who is also vice dean for research at the Johns Hopkins University School of Medicine, says he is delighted with the work being done at Wilmer. “Our evolving precision medicine approach is to build clusters of precision medicine centers of excellence in a specific area that use the same types of measurements, and then allow the tools developed in one center to be applied to other areas. Since so much done at Wilmer uses high-information content measurement of many different aspects of the eye, it makes sense to harness the efficiency of bringing those measurements onto the platform once, and well.”

Last year, Chief of the Oculoplastics Division **Nicholas Mahoney, M.D.**, was named vice chair of information technology and data science at Wilmer, and he was tasked, he says, with “fostering our data science program and taking better advantage of the platform Johns Hopkins Precision Medicine has been putting together as a resource for everyone at Hopkins.”

Mahoney, who is working closely with Liu, says their data science goals at Wilmer are complex, ambitious — and very exciting. “By connecting people at Wilmer who are actively working on their own complex data-oriented projects with Dr. Rosen and his team, we can enable Wilmer researchers to build complex tools and access tremendously powerful data. We are working on getting everybody connected,” he says.

“We are living in a very unique time,” Liu says. “People often say AI is the fourth industrial revolution, and I’m a believer. It’s going to change medicine, and definitely ophthalmology, as we know it.” ●



“Our evolving precision medicine approach is to build clusters of precision medicine centers of excellence in a specific area that use the same types of measurements, and then allow the tools developed in one center to be applied to other areas.”

— ANTONY ROSEN



# Leading in ‘Everyday Ethics’ and Health Equity

By Karen Blum

As an expert in medical ethics, health equity, and school-based delivery of vision and health care services, pediatric ophthalmologist **Megan Collins, M.D., M.P.H.**, has made a name for herself as a leader to watch.

Thanks to the generosity of Baltimore ophthalmologist **Allan Jensen, M.D.**, a former chief resident at Wilmer and associate professor emeritus, and his wife, Claire, Collins is adding a new title to her expansive list of credentials: the inaugural Allan and Claire Jensen Professor of Ophthalmology.

Wilmer Director **Peter J. McDonnell, M.D.**, introduced Collins to the Jensens soon after she joined the faculty in 2014, knowing of their mutual interest in medical ethics. Over the ensuing years, they have become good friends and share interests in history, books and music.

“I can’t imagine two individuals who are more committed to professionalism and the doctor-patient relationship,” Collins says. “The fact that they value my work in ethics and ophthalmology, and to be recognized as the inaugural holder of that professorship — it’s left me speechless.”

In 2014, Collins established a longitudinal teaching curriculum in ethics and professionalism for Wilmer residents, taught in partnership with faculty members from the Johns Hopkins Berman Institute of Bioethics, where she has a joint appointment. The topics covered include shared decision-making, informed consent, managing racial bias and discrimination against patients or physicians, physician burnout, and the ethics of grateful patient philanthropy.

“We have designed a case-based approach that incorporates the issues our residents face in the course of their training,” Collins says. “We provide them both the foundation and framework to help navigate ethical issues that may arise in everyday practice.”

Collins is exploring additional ethics collaborations with Wilmer faculty members in new areas such as artificial intelligence, in particular investigating the role of technology in building decision-making algorithms. She also is looking at ethical considerations in building models of school-based care, including how to build partnerships with parents and educators about vision and eye health. The professorship will enable her to expand on these and other projects in health equity and community engagement.

“What’s always been important for me in my care of patients is the sanctity of the relationship between a doctor and a patient ... and caring for patients as a whole,” Collins says. “I’m not just thinking about their eyes in isolation, but thinking about that child, that parent, their relationship with you, their understanding of their condition and how you can partner together to ensure a child gets the care that they need to have the best outcomes.”

“The fact that they value my work in ethics and ophthalmology, and to be recognized as the inaugural holder of that professorship — it’s left me speechless.”

— MEGAN COLLINS

Over the past seven years, Collins has helped lead Vision for Baltimore, the largest citywide, school-based vision program in the country. The program, a collaboration among Johns Hopkins, Baltimore City Public Schools, the Baltimore City Health Department and others, provides vision screenings, eye exams and glasses to schoolchildren in grades pre-K–8. The program has screened more than 64,000 students, administered 11,000 eye exams and supplied glasses for more than 9,500 students.

Students who received eyeglasses through the program scored higher on reading and math tests, according to a September 2021 study Collins co-authored in

*JAMA Ophthalmology*. The study, which analyzed the performance of 2,304 students in grades 3–7 enrolled in the program, showed striking improvements for girls, special education students and those who had been among the lowest performing. The project emanated from the earlier Baltimore Reading and Eye Disease Study led by Collins and other Wilmer faculty members, which showed that less than two-thirds of second- and third-grade students studied reported wearing glasses as prescribed, and 66 percent needed replacement glasses — identifying a strong need for intervention.

Additionally, Collins co-founded and co-directs the Johns Hopkins Consortium for School-Based Health Solutions, which works to develop successful, scalable, school-based health solutions to address barriers to health and wellness in underserved populations. During the height of the COVID-19 pandemic, Collins and others, through the eSchool+ Initiative, created online modules to help school district leaders and teachers support students during school closures and advise them on safe practices for reopening.

Collins has a strong commitment to mentorship and teaching. She is director of the Wilmer Pediatric



Claire and Allan Jensen with Megan Collins (center)

Credit: Howard Korn Photography

Ophthalmology fellowship program and has supervised the training of over a dozen fellows during her tenure at Wilmer. Additionally, she supervises students from across Johns Hopkins’ schools of medicine, public health, nursing and education, and the Berman Institute. “I am profoundly grateful to my mother, a retired teacher and school administrator, who instilled in me an appreciation for education and the power of teaching and mentoring,” says Collins.

“We are grateful to the Jensens for enabling Megan to continue her vital work improving vision for Baltimore’s schoolchildren, and bolstering professionalism and ethics for our trainees,” says **Landon King, M.D.**, executive vice dean for the Johns Hopkins University School of Medicine. “She has continued to lead in pursuit of multiple emerging concerns, and she brings creative approaches to managing and solving tough problems.”

“I feel so fortunate to work at Wilmer,” adds Collins. “I’m constantly challenged and inspired by the work that I get to do and the people I get to work with.” ●

## A LIFETIME OF INVOLVEMENT WITH WILMER

Baltimore ophthalmologist **Allan Jensen, M.D.**, says he’s been fortunate and honored to be involved with Wilmer since he was a medical student in the 1960s. Not only was he able to meet with ophthalmologists in their private practices, he had the opportunity to train with world-famous ophthalmologists, such as **Edward Maumenee, M.D.**, and to see other members of his class (and even his trainees when he was chief resident) go on to leading roles in vision care.

Jensen has remained actively associated with Wilmer, hosting trainees at his private practice, holding a faculty position as an associate professor (now emeritus) and serving on the Board of Governors.

“Being involved with Wilmer has been fun, hard work and rewarding, and also a wonderful honor,” says Jensen, a former president of MedChi, the Maryland State Medical Society; the Maryland Society of Eye Physicians and Surgeons; and the American Academy of Ophthalmology (AAO). “I can’t imagine any better experience.”

Jensen and his wife, Claire, have had a long-standing interest in medical ethics. They established the Redmond Ethics Center at the AAO in memory of a dear friend and colleague, and an annual lecture in professionalism and ethics at AAO meetings. Now, they are supporting this new professorship at Wilmer to foster ethics work conducted by pediatric ophthalmologist **Megan Collins, M.D., M.P.H.**

“She’s a good friend and a charming person,” says Allan.

“She’s very dedicated to what she’s doing, and it’s very important,” adds Claire. “We’re glad that in some small way we can support her.”

Megan Collins fitting students with glasses for the Baltimore Reading and Eye Disease Study





Opposite page:  
Meraf Wolle  
and Albert Jun

# Making a Global Impact on Trachoma

By Jennifer Walker

**D**on Neal came to the Wilmer Eye Institute four years ago specifically to see **Albert Jun, M.D., Ph.D.**, the Walter J. Stark, M.D., Professor of Ophthalmology; chief of the Division of Cornea, Cataract and External Diseases; and an expert in Fuchs' dystrophy. Neal's physician thought he might have this hereditary condition, in which cells in the cornea that are responsible for clearing fluid begin to deteriorate. Bumps then form on the back of the cornea and fluid builds up, causing the cornea to swell, which leads to cloudy vision.

"I looked to see who in the world was the best at treating Fuchs' dystrophy, and Dr. Jun's name was at the top of the list," says Neal. "I instantly felt comfortable with him, not only because of his expertise but also his chairside manner and his willingness to spend time with me."

At the time, Neal, who works as the chief strategy officer at Smithbucklin, a professional services firm serving the nonprofit and industry association market, had especially cloudy vision in the morning, which prevented him from reading — his favorite activity to do after waking up. As a treatment option, Jun told him about corneal transplants, which are most commonly performed to treat the condition.

Corneal transplants have come a long way since just two decades ago, when it was common to replace the entire

cornea, a more invasive procedure with a longer recovery time than the partial corneal transplants available today. For the latter, Jun removes only the damaged layer of the cornea and replaces it with healthy donor tissue to restore vision. During the surgery, he uses a tool he developed called DescePro, which gently unrolls the donor tissue in the patient's eye without damaging the cells, providing a solution to one of the procedure's biggest challenges.

"With these new transplants, the patient's natural cornea continues to function, and the recovery time is a matter of a few weeks," says Jun, who performs about 100 corneal transplants a year. "Patients get nearly full vision recovery in a short period of time."

Neal had his first corneal transplant in his left eye in May 2021. Afterward, he started thinking about supporting the

Institute, in part with encouragement from Beth Glassman, an acquaintance and Wilmer supporter. Neal expressed this interest to Jun, who invited him to his office to learn more about some of the work being done by the 20 faculty members in the cornea division, including the work of **Meraf Wolle, M.D., M.P.H.**, who focuses on global public health.

Neal and his wife, Belle, decided to support Wolle's research, which centers on trachoma, the world's leading cause of blindness that affects people in some of the world's poorest communities. "It struck me as something that is fixable," says Neal. "It feels like Dr. Wolle and others like her could eliminate trachoma in their lifetimes."

Trachoma is chronic conjunctivitis, or pink eye, caused by the bacterium

*Chlamydia trachomatis*. It has currently led to the visual impairment of 1.9 million people, according to the World Health Organization. Forty-four countries are still struggling to prevent people from going blind from trachoma sequelae. Children can get this eye infection over and over again from direct personal contact, and for some, the frequent infections lead to scarring under their eyelids as they become young adults. The scarring causes trichiasis, which happens when the eyelashes turn inward, where they repeatedly hit against the eyes with each blink.

"People with trichiasis have this foreign body that's constantly scratching their eyes, which results in the cornea breaking down," says Wolle, an assistant professor of ophthalmology at Wilmer

who was first introduced to trachoma when visiting family in Ethiopia, where it is found in many rural areas. "Those with trichiasis, if not treated, eventually get corneal opacification, or a clouding of the cornea, and that's what makes them go blind. This happens over decades."

Wolle's research builds on the world-renowned work of her mentor, **Sheila West, Ph.D., Pharm.D.**, professor emerita at Wilmer, and has three components. She is studying the risk factors that lead people to develop scarring in hopes of halting this process, as well as creating a statistical model to determine how many people will develop trichiasis to assist programs with allocating limited resources that provide treatment and prevent blindness. She also is looking at ways to automate the diagnosis of trachoma using artificial intelligence technology, which could help diagnose those in hard-to-reach communities and provide treatment more quickly.

Wolle is grateful for the Neals' gift, particularly because trachoma typically attracts very little attention or resources. "Anytime we can get support, it's huge," she says. "We're going to use these funds to support projects that will help advance trachoma elimination. I can't wait to implement these projects and share what we've accomplished." ●

## HOW TO SUPPORT THE WILMER EYE INSTITUTE

Your donations directly impact the Wilmer Eye Institute's mission to transform medical outcomes in the field of ophthalmology through collaboration and innovation, resulting in compassionate, leading-edge, patient-informed care.

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#### Cash Gifts

Gifts of all sizes made by check or credit card provide immediate support to the Institute. Gifts can be made outright or pledged over a period of up to five years.

#### Matching Gifts

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#### Gift Planning

Our Office of Gift Planning can provide you with resources to help fulfill your philanthropic wishes in coordination with your overall financial and estate planning.

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"It feels like Dr. Wolle and others like her could eliminate trachoma in their lifetimes." — DON NEAL

Belle and Don Neal



# Opportunity to Help Others

By Jennifer Walker

In the mid-1980s, Paul Ragonese came to the Wilmer Eye Institute seeking treatment for glaucoma, a leading cause of adult blindness that runs in his family. Decades later, he continues to see a team of ophthalmologists at Wilmer, with his longtime provider **Henry Jampel, M.D.**, the Odd Fellows Professor of Ophthalmology, coordinating the full scope of his care.

Ragonese says that being able to access many specialties in one place is what first drew him to Wilmer, and why he and his wife, Anne, have decided to support the institute through a planned gift today to create their legacy during their lifetime.

“The beauty of Wilmer is that it’s a facility that is staffed with a broad range of professional people. It’s a one-stop shop,” says Paul, who worked as a mechanical engineer for the U.S. Coast Guard from 1985 until his retirement in 1998.

While reflecting on what inspired him to support Wilmer, Paul stresses that he and Anne, who was a nurse at Union Memorial Hospital for 32 years, have been fortunate in many ways, and their gift gives them a chance to help others. “We felt we could do something that would be a benefit to people,” says Paul, a 1967 graduate of the engineering program at what was then called the Johns Hopkins evening college.

Glaucoma is a group of eye diseases that cause high pressure in the eyes, which can damage the optic nerve and lead to impaired vision and blindness. As part of his treatment, Paul used eye drops and later had an outpatient laser procedure, both of which lowered his eye pressure for some time. Then, Paul had a trabeculectomy in each eye about seven years ago. With this procedure, a new passageway is created in the

eye for fluid to drain to relieve the eye pressure and prevent further vision loss. The procedures were successful.

As Paul’s provider for three decades, Jampel says his role is akin to a quarterback who keeps track of all the moving parts involved with his patient’s multiple diagnoses. This includes his treatment for a wrinkled retina and cataracts — treatment provided by two other ophthalmologists at Wilmer: **Adam Wenick, M.D., Ph.D.**, and **Esen Akpek, M.D.**, the Bendann Family Professor of Ophthalmology. **Judith Goldstein, O.D.**, chief of the Lions Vision Research and Rehabilitation Center at Wilmer, has also played a key role in his care.

“It would be very difficult for one patient to keep track of all of these details,” says Jampel, a member of the glaucoma division since 1988. “So, I look out for his care and make sure that nothing is done in a vacuum. It’s all done with consideration for the whole patient.”

Today, Paul continues to visit Wilmer several times a year.

“At Wilmer, I feel I’m being attended to by very competent people,” says Paul, who also supports the Johns Hopkins Whiting School of Engineering. “They are very patient in telling me what the problems are, and they’re willing to discuss them with me. I feel like I am in good hands.”

“Legacy gifts, such as the one given by the Ragoneses, have always been a source of strength and support for Wilmer. They have endowed professorships and research funds, expanded resources for our clinical care, and provided opportunities to educate the next generation of leaders in ophthalmic medicine,” says Wilmer Director **Peter J. McDonnell, M.D.** “They also inspire us, because these gifts demonstrate the faith our supporters have that investing in the future of Wilmer is worth doing.” ●

Left to right, Paul Ragonese, Anne Ragonese and Henry Jampel



**With thoughtful planning, you can leave a meaningful legacy to the Wilmer Eye Institute. Popular ways to make a legacy gift are through a will or trust. Your gift can support any area of Wilmer, augment your current giving, and even establish an endowed fund.**

**What are the advantages of making a gift through a will or trust?** A gift through a will or trust offers flexibility and peace of mind, along with the satisfaction that your gift will support the future needs of Wilmer. You remain in control of your assets during your lifetime and can modify your plans if your needs change.

**What can I give through a will or trust?** Many types of assets may be given through your will or trust. These include cash, stock or mutual fund shares, and real estate. Retirement accounts can be wonderful sources of legacy gifts to Wilmer, and they can offer tax advantages too. *(A beneficiary designation form is needed to identify recipients of such accounts.)*

**What if I have already included a gift to the Wilmer Eye Institute in my plans?** If your plans include a gift to Wilmer, please let us know. We want to thank you and ensure we honor your wishes. We also want to welcome you into the Legacy Society, which celebrates donors who support the future of Wilmer with a gift from their estate or a life income gift. Legacy Society members receive special acknowledgment.

*Seek advice from a tax professional before entering into a gift annuity agreement.*



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<sup>L</sup> Legacy (estate plan  
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Left to right, Wilmer Director Peter J. McDonnell, Wilmer Director Emeritus Morton Goldberg, Clarice Smith, Robert H. Smith, Arlene Kogod and Robert Kogod

**Dear Friends,**

The Wilmer Eye Institute lost a dear friend this past year. Clarice Smith, who died Dec. 9, 2021, was a member of Wilmer’s Board of Governors for over two decades. Along with her husband, Robert H. “Bob” Smith, she helped make possible the construction of the building that houses most of Wilmer’s research laboratories and state-of-the-art operating rooms.

This addition to Wilmer transformed the institute, allowing us to dramatically increase the size and scope of our vision research while also delighting our surgical patients with a wonderful experience when they need eye surgery. It is most appropriate that this remarkable facility bears the names of these two special people.

Clarice Smith had a rare gift that made her famous within and outside the United States: She was an acclaimed painter and portraitist. She once told me that since she was a little girl, she could look at something and then draw it. She had solo exhibitions in Washington, D.C., New York, London, Paris, Zurich and Jerusalem, and one of her works is part of the permanent collection of the Smithsonian American Art Museum.

Wilmer witnessed magic happen when the Robert H. and Clarice Smith Building was constructed and the amazing couple for whom it is named combined their talents. Bob told me it was important that the building itself not simply be functional but also beautiful, and he insisted that the surrounding landscaping include mature trees and attractive plants. Clarice felt strongly that the building should include beautiful works of art, so that staff members and visitors could find joy and peace when they had a few minutes. She donated many of her own paintings for display, and other artists soon followed her lead.



**TODAY, THE SCIENTISTS AND SURGEONS OF WILMER FIND THEMSELVES SURROUNDED BY LOVELY ART WORKS, AND I CANNOT HELP BUT WONDER WHETHER THIS GIFT FROM CLARICE IS HELPING US PSYCHOLOGICALLY TO WEATHER THE STORM OF THE COVID-19 PANDEMIC.**



Above:  
Clarice Smith attends Wilmer Research Day in April 2010

Below:  
The artist bio of Clarice Smith adorning the wall of the Robert H. and Clarice Smith Building beside her paintings

Along with her daughter, Michelle, Clarice also supported the scientific work being conducted in the building that bears her name. Michelle and Clarice were particularly interested in furthering the work in Wilmer’s Center for Nanomedicine. When I listened to her discuss the research with our scientists, I was struck by the insightful questions she raised — no small feat for an artist exploring the complexities of chemical engineering and nanotechnology.

Another gift she possessed was her kindness. Clarice always had a smile for those of us she met at Wilmer and showed genuine interest in not only our work but in us as people. One time we were chatting, and Clarice told me she loved to dance. I revealed that my wife also loved to dance and was a natural, while I was a terrible dancer; to try to split the difference, I had found us a dance instructor and assigned her the impossible task of turning me into a Fred Astaire. Clarice looked at me with a serious expression and said, “I bet you can’t sing either.”

“Can’t carry a tune!” I replied, “but how did you know?” Clarice told me, very seriously, that Bob, talented and driven as he was, had been a bad dancer and an even worse singer. She was convinced that the two talents — singing and dancing — were correlated. I was not the least bit offended — for Clarice to compare me in any small way with her remarkable husband felt like an honor.

**Clarice Smith’s name will forever be on the walls of our buildings and in the hearts of us who work at Wilmer.**

Regards,

**PETER J. McDONNELL, Director**

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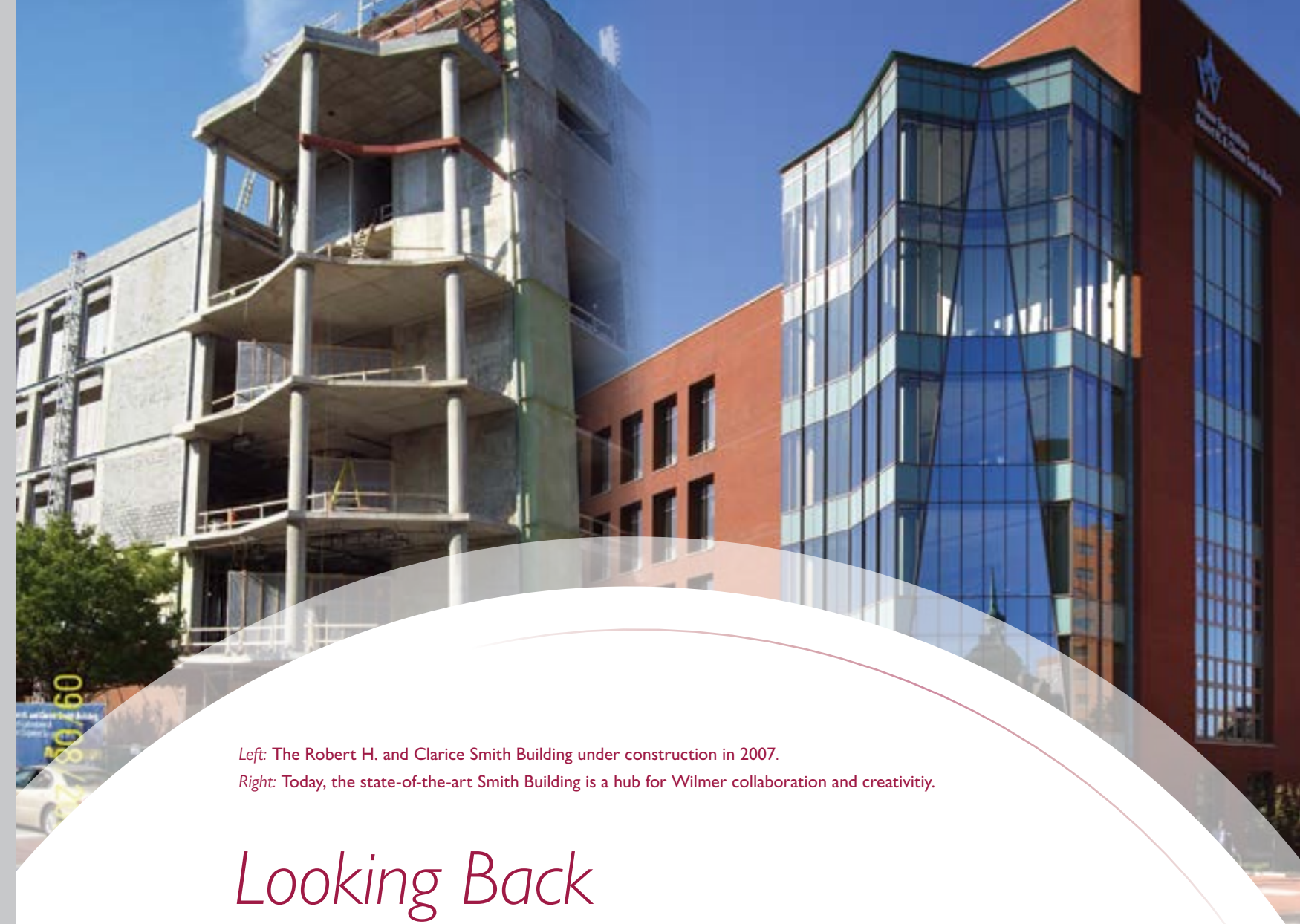
Wilmer magazine is published by the  
Wilmer Eye Institute Development Office  
600 N. Wolfe St.  
Wilmer 112  
Baltimore, MD 21287-9015

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Left: The Robert H. and Clarice Smith Building under construction in 2007.

Right: Today, the state-of-the-art Smith Building is a hub for Wilmer collaboration and creativity.

## Looking Back

When the Wilmer Eye Institute broke ground on the Robert H. and Clarice Smith Building in January 2007, the vision was to bring a wide array of researchers and clinicians together under one roof to accelerate the pace of discovery and advance patient care. Before the Smith Building, researchers at Wilmer were spread across different buildings and different campuses, which made collaboration challenging.

Every aspect of the Smith Building supports its mission to promote collaboration and creativity — from the open lab spaces that ensure researchers are aware of their neighbors' work to the art hung on its walls. In addition to five floors of research space, the building also houses the Maurice Bendann Surgical Pavilion, which consists of seven state-of-the-art operating rooms.

The lead gift from the Smith family provided the foundation to make the Robert H. and Clarice Smith Building a reality. When the building opened its doors in 2010, it launched a new era at the Wilmer Eye Institute.



# Wilmer

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600 N. Wolfe St.  
Wilmer 112  
Baltimore, MD 21287-9015

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