



PRESIDENT'S PODIUM / MOT DU PRÉSIDENT

Such a Vital Message – So Few Messengers

Who amongst us does not believe in the good that Optometry does? Of our 2600 members, the overwhelming majority (100%, I hope!) knows that the optometric profession provides an extremely valuable range of vision care services to 70% of Canadians. But, outside our professional ranks, we instantly become a minority.

If optometrists were the only ones who knew and cared enough to carry the message about the value of Optometry, the messengers would be so small in number, it is unlikely that the majority would hear the message.

What Optometry needs is more messengers — and more effective ones, too.

Recently, I had the opportunity to meet and listen to Tom Sullivan, the star of the autobiographical movie, *If You Could See What I Hear*. Tom has been blind since birth. Yet this fascinating and inspiring man is a Rhodes Scholar, an Olympic wrestler, a 20 handicap golfer, a movie actor who has recently finished his fourth film and just about anything else he wants to be. He has a quick wit and a keen insight that cuts through the haze of preconception and offers a fresh perspective from someone who can't possibly see things as you and I do.

He's a fighter, a winner and he shared some observations about Optometry that make sense to me.

He believes that he and Optometry have something in common, beyond the obvious vision (or lack of vision) connection. He said that, all his life, at whatever he did, he was constantly having to prove himself. He could never expect or experience the luxury of being accepted on past performance or on the assumption that he is capable. He has always had to prove himself and will continue to have to do so throughout his life. "The same," he observed, "can be said of Optometry".

Medical Doctors have monopolized the pedestal of assumed capability for centuries. Optometrists have always had to prove their value and must continue to do so. Perhaps this process is what has made Optometry grow and mature so quickly — over decades instead of centuries. But we must prove ourselves continually. And, along the way, we must educate and inform the millions of Canadians who benefit from optometric vision and eye care of our services' vital importance in the health care field.

The public, perhaps not surprisingly, isn't sure what optometrists do, let alone that we do it so well. But the public does not even assume that optometrists are vision experts! A recent survey done in Alberta showed up some results that astonished me: the Alberta public still doesn't know the difference between the three (or four) "O's": Optometry, Ophthalmology and Ophthalmic Dispensers/Opticians.

(cont't on page 170)

Un message tellement vital – et trop peu de messagers pour le transmettre

Qui parmi nous doute des bienfaits de l'optométrie? Parmi nos 2 600 membres, la très grande majorité (100 %, je l'espère!) connaît la très vaste gamme de services oculo-visuels dispensés par les optométristes à 70 % des Canadiens. Mais, hors des rangs de notre profession, nous devenons subitement une minorité.

Si les optométristes étaient les seuls à connaître le message concernant la valeur de l'optométrie et à veiller à le transmettre, le nombre de messagers serait trop faible, et la majorité aurait peine à percevoir le message.

L'optométrie a besoin de plus de messagers — et de messagers plus efficaces aussi.

J'ai dernièrement eu l'occasion de rencontrer et d'écouter Tom Sullivan, vedette du film autobiographique *Si tu voyais ce que j'entends*. Tom est aveugle de naissance. Pourtant cet homme fascinant et vivifiant est un boursier de la fondation Rhodes, un lutteur olympique, un golfeur qui a un handicap de 20, un acteur de cinéma qui vient d'achever son quatrième film et une personne qui fait tout ce qu'elle désire. Son esprit vif et pénétrant dissipe le brouillard des préjugés et découvre des perspectives nouvelles que vous et moi serions probablement incapables de voir.

C'est un batailleur, un gagnant qui a fait part de ses observations sur l'optométrie, que je trouve sensées.

Il croit que lui et l'optométrie ont un point en commun qui dépasse la vision elle-même (ou le manque de vision). Il affirme que, toute sa vie, en toutes choses, il a dû faire ses preuves. Il n'a jamais eu le luxe de compter sur ses succès antérieurs ni de pouvoir compter sur ses capacités futures. Il a toujours dû faire ses preuves et devra poursuivre dans cette voie toute sa vie. "On peut faire la même observation à propos de l'optométrie", fait-il remarquer.

Les médecins ont le monopole du présumé savoir depuis des siècles. Les optométristes ont toujours été contraints de prouver leur valeur et doivent continuer encore aujourd'hui. Serait-ce pour cette raison que l'optométrie n'a pris que des décennies et non des siècles pour grandir et mûrir? Sans cesse, nous devons prouver nos capacités. Et, dans la foulée, nous devons informer les millions de Canadiens qui bénéficient de soins oculo-visuels de l'importance primordiale de nos services dans le domaine des soins de santé.

La population, doit-on s'en étonner, connaît mal la fonction des optométristes, et encore moins notre grande capacité à nous en acquitter. Mais la population ne soupçonne même pas que les optométristes sont des experts de la vision! Une enquête menée récemment en Alberta montre certains résultats que je trouve étonnants: on n'y fait pas encore la différence entre les

(suite à la page 231)

PRESIDENT'S PODIUM

(con't from page 169)

The majority even ranked opticians and ophthalmic dispensers ahead of optometrists and ophthalmologists as the most knowledgeable sources of information to consult if they have a vision problem! (Tom Sullivan says, however, that I should not be astonished by this.)

We need to spread the message and 2600 optometrists in Canada can't do it alone. So who is going to help?

The minority of the population who knows Optometry's valuable role in the health care system — that's who. They are the optometrists' families; the team of optometric ancillary personnel who daily help provide those valuable services; the representatives of the ophthalmic business related community who have taken the time to get to know their optometric clients and the work they do; those "special" patients; teachers; coaches; other health care workers who have had an opportunity to observe or experience first hand the benefits of optometric care...

These are the people who can help spread our message.

These are the people who can swell the ranks of the messengers tenfold. They are the untapped resource which must now be tapped and mobilized if Optometry's message is to reach a significant part of that vast majority out there.

I am happy to say that one such seed has already germinated in Alberta. The Alberta Association of Optometrists' 1987 Annual General Meeting, held in Calgary in November, saw the creation of the Alberta Chapter of the CAO Optometric Advocates Section. It is my hope that it will grow and flourish and be followed by other chapters springing to life in provinces from BC to Newfoundland.

Alberta was honoured to have the President of the American Optometric Association's Auxiliary, Alana LaRock, come to the inaugural meeting to provide encouragement and helpful tips. Specific examples of successful projects to get Optometry's message across, excellent new audio-visual materials which are becoming available regularly, organizational guidelines, etc., were all discussed.

An Auxiliary, such as the AOA's, can be of great benefit to Optometry. But it suffers from a stifling malady. It is restricted to spouses and thereby eliminates many of the most valuable messengers we have.

It is an image problem, even among those who are spouses of optometrists. As more and more couples are both working professionals and as more and more women enter the profession of Optometry, the thought of joining an Auxiliary, with its "sewing circle" images, however inaccurate they may be, is not very appealing to a great many optometric spouses, male or female.

For these reasons, the Auxiliary concept has been and gone in most areas of this country and the Alberta group was repeatedly reminded that theirs is not an Auxiliary.

We have the opportunity to start fresh, to avoid the problems stifling any Auxiliary, but to build on the great base that the AOA and other Auxiliaries have provided for us in order to create the most effective messenger service ever devised.

(cont't on page 231)

EDITORIAL

Improving Our Clinical Skills

It has never been a stated policy of the CJO * RCO to offer Editorial comment on the content of a given issue. Only on rare occasions in the past have we done so. However, because of the clinical implications of the technical papers in the Autumn, 1987 issue, we feel that some comment is merited.

Applied optics has always been a strong point in Optometry's training program although, for some years now, an emphasis on pathology recognition and the physiological aspects of contact lens fitting seems to have obscured the therapeutic and clinical value of spectacles.

The paper by Bolduc and Gresset, for example, describing the adapting of the principle of the Franklin bifocal to solve the problems of a paralytic tropia is a case in point. The Franklin bifocal is not a new device, but neither does it become obsolete or useless because of its age.

This type of clinical expertise to solve a problem of covergence has been reported as long ago as our own July, 1971 issue. Likely it could be used more frequently in those cases all too often described by "nothing further can be done".

Children's Vision is a field begging for greater involvement by Optometry, particularly with respect to reading problems and underachieving children. Refractive status is not usually a major impediment as optical treatment is simple and straightforward, but oculomotor problems can be. Measurement of convergence and accommodation amplitudes should be routine procedures. Results have little value unless we have criteria to evaluate our findings and to interpret them in relationship to the child's symptoms.

The paper on accommodation by Woodruff established for the first time accommodative standards for children under twelve. It provides practitioners with a better understanding of the function. This could be enhanced if one were to qualify the recording of the test results. Good results by themselves do not imply efficient performance. We would be better clinicians were we to qualify our results with notes such as "blurs and clears every -.50D increase in power; clearing slowly as the test progresses. Child stumbles in reading. Is this a reading problem or an inability to maintain a clear focus?"

A brief, descriptive note can be a lifesaver in a few months' time when the child returns. What interpretation can be placed on the simple recording "O.D.: amplitude 6.50D"?

Physical exertion and body position have always been known as factors that influence physiological functions in a human being. Up until very recently, little was known of these effects on ocular and visual functions. Today's emphasis on "participation" and physical exercise, whether aerobic or other form, irrespective of age and health status, gives added importance to the paper by Lovasik et al. on vascular and neural changes during body inversion. The clinical implications are important in the counselling of patients from a preventive aspect.

If one hasn't already done so, one should read each of these papers with attention, keeping preventive optometric care firmly in mind.

GMB

PRESIDENT'S PODIUM/MOT DU PRÉSIDENT

(con't from page 170)

An Optometric Advocates Section is composed of non-optometrists who believe in the vital role optometrists play on the primary health care team and whose members have as an objective the sharing of what they know of the value of Optometry with others.

Many, for example, will have stronger and more effective political connections than most members of our own optometric Keypersons Committee. Many will have better communication links with the education system, with other health care professions, etc. At some level or other, they will all be messengers.

The potential for such a group is exciting. Getting it organized in each province will be a challenge. I encourage you to talk it up amongst your families, your staff, your patients and your friends. Make a list of potential messengers for Optometry that you know. Then call an organizational meeting (perhaps, but not necessarily, in conjunction with your next provincial AGM).

I expect, in fact, that this will be one subject about which I will be asked on Sunday, March 6 for **Dial the President Day**. Call me and let's discuss it further. Then get yourself and all those other potential advocates involved.

Your future may depend on it.

Scott D. Brisbin, O.D., F.A.A.O., President

(suite de la page 169)

trois "O": l'optométriste, l'ophtalmologiste et l'opticien.

La majorité des répondants ont même classé les opticiens (et les distributeurs de produits ophtalmiques) au-dessus des optométristes et des ophtalmologistes comme sources les mieux informées à consulter en cas de problèmes visuels! (Cependant, Tom Sullivan prétend que je ne devrais pas me surprendre de cette situation.)

Nous devons transmettre le message, et 2 600 optométristes au Canada ne suffisent pas à cette tâche. Alors qui va nous prêter main-forte?

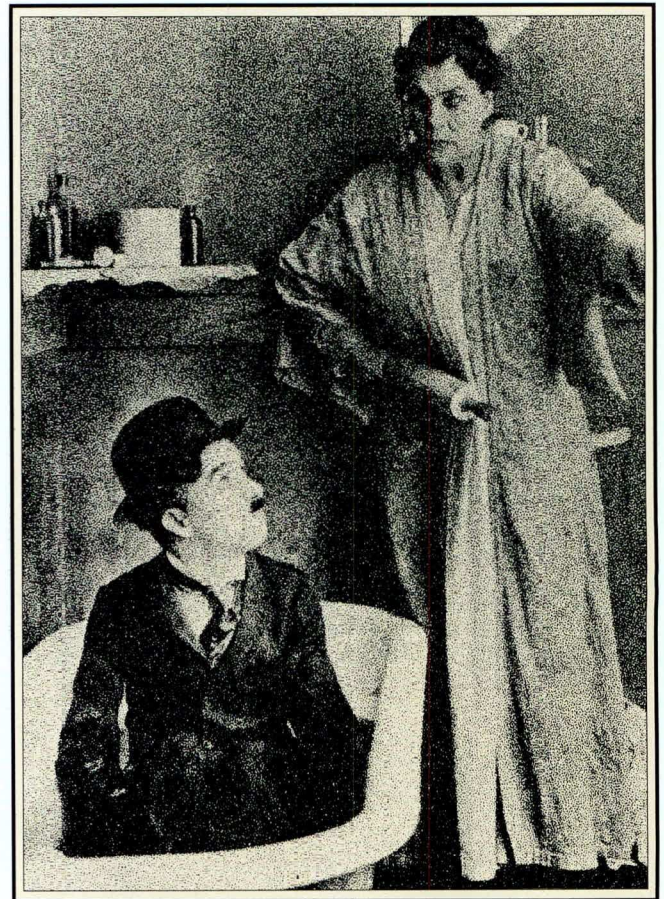
La minorité qui connaît le rôle important de l'optométrie dans le système des soins de santé — voilà la tranche de la population qui peut nous aider. Ce sont les familles des optométristes, l'équipe du personnel auxiliaire qui dispense chaque jour ses précieux services, les représentants des sociétés ophtalmiques qui ont pris le temps de connaître leurs clients et leur travail, les "bons" patients, les professeurs, entraîneurs et autres travailleurs du domaine de la santé qui ont eu l'occasion d'observer les bienfaits de soins optométriques ou d'en être eux-mêmes les bénéficiaires...

Eux peuvent nous aider à diffuser le message.

Ce sont eux qui peuvent grossir de dix fois le nombre de nos messagers. Ils représentent une ressource inexploitée à découvrir et à mobiliser si l'on veut que le message de l'optométrie gagne une part importante de la grande majorité.

Je suis heureux d'affirmer que cette idée commence déjà à germer en Alberta. L'assemblée générale annuelle 1987 de l'Association des optométristes de l'Alberta, tenue à Calgary en novembre dernier, a vu naître le chapitre albertain de la Section

(suite à la page 233)



A simple soak without complications

ULTRAZYME has a solution to complicated protein removal — a simple one-tablet system. Combined with peroxide disinfection, ULTRAZYME effectively removes protein and mucoprotein from all soft contact lenses during the disinfection step. Used once weekly, ULTRAZYME's one step disinfection/deproteinization works to eliminate non-compliance.

The result is a simple one-tablet system that uncompliates protein removal.



ULTRAZYME

One Step Convenience

ALLERGAN
Science with Vision



THE BEST LENS

YES BECAUSE

For overall visual comfort to the presbyope, no lens can beat Varilux.

- ▶ *Varilux has a right and left lens that are power modulated differently to favour binocularity in peripheral vision.*
- ▶ *Varilux is fully aspheric to ensure orthoscopy in static and dynamic vision: straight lines remain straight and the wearer's eye can wander freely without disturbing "side effects".*
- ▶ *Varilux's design provides patients with more functional intermediate and reading vision.*
- ▶ *Varilux has the highest record of patient satisfaction and is backed by the greatest experience. More than 40 clinical studies at leading Canadian and American universities confirm it.*

**NATURAL VISION RECREATED,
MILLIONS OF SATISFIED WEARERS AGREE!**

PATENTS EXPIRE ONLY IN 1990, NOTHING COMES CLOSE YET!

VARILUX

MOT DU PRÉSIDENT

(suite de la page 231)

de promotion de l'optométrie de l'ACO. J'espère que cette tendance se poursuivra par la création d'autres chapitres dans les provinces, de la Colombie-Britannique jusqu'à Terre-Neuve.

L'Alberta a eu l'honneur d'accueillir à sa réunion inaugurale la présidente de l'American Optometric Association's Auxiliary, Alana LaRock, qui a prodigué ses encouragements et conseils judicieux. On y a discuté entre autres d'exemples précis de projets de diffusion du message de l'optométrie qui ont été menés à bonne fin, du nouvel équipement audio-visuel excellent qui est de plus en plus répandu, de lignes directrices d'organisation, etc.

Une branche auxiliaire, telle l'AOA, peut se révéler une aide inestimable pour l'optométrie. Mais elle souffre d'un malaise étouffant: elle ne regroupe que les conjoints et élimine de ce fait nombre de nos messagers les plus précieux.

Il y a là problème d'image, éprouvé même par les conjoints des optométristes. Puisque de plus en plus de couples sont tous deux professionnels et que de plus en plus de femmes intègrent la profession de l'optométrie, l'idée de se joindre à un groupe d'auxiliaires, qui évoque à tort des "cercle de couture", n'est pas très alléchante pour nombre de conjoints d'optométristes, hommes ou femmes.

Voilà pourquoi la notion d'auxiliaire a été rejetée depuis longtemps dans la plupart des régions du pays, et le groupe de l'Alberta s'est fait redire maintes et maintes fois qu'il n'était pas un groupe d'auxiliaires.

Nous avons l'occasion de recommencer à neuf, d'éviter les écueils qui entourent tout groupe d'auxiliaires, mais surtout de construire sur les solides assises de l'AOA et d'autres associations semblables afin de créer le service de messagers le plus efficace qui soit.

La Section de promotion de l'optométrie se compose de non-optométristes qui croient au rôle vital des optométristes au sein de l'équipe des soins primaires, et qui se fixent comme objectif de partager avec d'autres leur connaissance de la valeur de l'optométrie.

Par exemple, bon nombre d'entre eux ont des liens politiques plus forts et plus efficaces que la plupart des membres de notre Comité des personnes-clés de l'optométrie. Bon nombre ont de meilleures relations avec le système d'éducation, avec d'autres professions liées aux soins de santé, etc. Dans leur entourage, ils pourront tous transmettre notre message.

Le potentiel d'un groupe de ce type est considérable. L'organisation de ce groupe dans chaque province représentera un défi. Je vous encourage à en parler à votre famille, à votre personnel, à vos patients et à vos amis. Dressez une liste des messagers potentiels de l'optométrie que vous connaissez. Puis convoquez une réunion d'organisation (peut-être, mais sans toutefois que cela soit nécessaire, conjointement avec la prochaine assemblée générale provinciale de votre association).

En fait, je m'attends de recevoir des questions à ce sujet le dimanche 6 mars, à l'occasion de la **Journée de Ligne directe au Président**. Appelez-moi pour en discuter plus à fond. Puis rassemblez tous les autres promoteurs potentiels et mettez-vous en marche!

Votre avenir peut en dépendre.

Le Président,
Scott D. Brisbin, O.D., F.A.A.O.

LAUREL & HARDY Characters™ & © 1987 Larry Harmon Pictures Corporation, Los Angeles, California, U.S.A. All rights reserved



Irritation can be rather bothersome

ULTRAZYME has the solution to bothersome irritation – protein removal without residual enzyme. Used once weekly during the peroxide disinfection step, ULTRAZYME effectively removes protein and mucoprotein – in just 15 minutes. Left overnight, ULTRAZYME's unique non-binding action works without leaving irritating residual enzyme.

The result is a simple one step solution that works without irritation.



ULTRAZYME
One Step Convenience

ALLERGAN
Science with Vision