

D. Michael Colvard, MD

Dr. Colvard discusses his experience as an educator and how his work in undeveloped countries inspired the creation of the Friends of Vision Foundation.



You have been involved with many surgical and medical developments. What do you consider most exciting?

Over the years, I have had the pleasure of being involved with many exciting projects: the development of safer techniques in the early days of phacoemulsification, the first foldable and multifocal IOLs, the first laser device for circular anterior capsulotomy and cataract extraction, the first clinical pupillometer, and so forth. I think, though, the most fun I have ever had was working with J. Stuart Cumming, MD, and J. Andy Corley on the clinical trials and postmarket development of the Crystalens (Bausch + Lomb). I have such respect and warm feelings for both of these guys, whom I believe to be two of the most courageous and important innovators of our time. Against all odds and in the face of many detractors and skeptics, Stuart created the first accommodating IOL, and Andy revolutionized our field by introducing the concept of the premium IOL. I believe their efforts set the stage for the future of ophthalmology, and I am proud and honored to have worked with them.

What forms of surgical instruction do you find to be most effective for ophthalmologists in training?

Simulators are rapidly improving, and the practice eye model under development by Stuart B. Stoll, MD, shows promise. There is still no substitute, however, for live surgery performed under the watchful eye of an experienced attending surgeon.

As an educator, what skills do you strive to instill in your students?

The single most important surgical skill is the ability to see trouble coming before it creates a disaster. My standard teaching message is that every ship hits choppy waters on occasion. The skipper's job is to know when a storm is coming and to reach safe harbor before the cruise turns into *The Poseidon Adventure*. It is often said that the vitrectomy rate with cataract surgery in the United States is one in 20 cases. That is appalling if true. The better surgeons I know, who are careful, thoughtful, and attentive, have vitrectomy rates of approximately one in 1,000. This is the standard I want residents to aspire to, not just some dismal national average.

What is the mission of the Friends of Vision Foundation, and what inspired you to start this organization?

One of the great joys of my professional life is working as an eye surgeon in undeveloped countries. I have worked in sub-Saharan Africa every year for the past 20 years. Once I was there, I saw things I just simply could not ignore. The Foundation funds everything from surgical supplies and equipment for local physicians to books and educational supplies for local schools to self-sustaining farms for orphanages.

What is your most memorable international experience?

My daughter, Megan, was working with the Red Cross in northern Namibia some years ago while I was working as a volunteer surgeon for Surgical Eye Expeditions International in the



Dr. Colvard making morning rounds in Namibia.

same general region. Megan's team was going village to village to make sure that every orphaned child was under the care of a responsible adult. As she travelled around, she came upon a tiny, isolated hut with nothing around it but a few goats. She called out, asking if anyone were home. From the hut, she heard a soft voice reply, "There is no one here, only a blind person." Megan asked if she could come in, and when she entered the hut, she discovered an elderly blind woman living alone with two small, orphaned children. The woman was all the children had, and she was desperately trying to care for them. There was no cell phone service in those days, so Megan put the lady and both of the children in her jeep and headed toward our eye camp. We were breaking down the camp and planned to leave the area the next morning. Megan rushed in to tell us about the woman she had found. We checked the elderly woman, determined that cataracts were the source of her blindness, and took her straight to surgery. The next day when we made rounds, the old lady was smiling ear to ear. It was a toothless smile but beautiful nonetheless. The woman recognized Megan by her voice. She placed her hands on Megan's face, looked in her eyes, and said, "My daughter, God's grace helped you to find me. God's love has let me see again. Thank you for helping us." That is a moment I will never forget. ■