Dr. Herbert Wertheim
The Dr. Herbert and Nicole Wertheim Family Foundation has pledged a historic $50 million to the UC Berkeley School of Optometry

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BY ELIZABETH COSTELLO
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This transformational commitment constitutes the lead gift for a 10-year, $100 million investment that will expand the school’s ability to train the next generation of optometric physicians and educators to serve as leaders in the spectrum of primary and preventative health care.

COVER ILLUSTRATION BY SEAN MCCAIG. PHOTO OF DR. WERTHEIM COURTESY OF FLORIDA INTERNATIONAL UNIVERSITY.
Q: In addition to being an OD, you have a Master’s Degree in Public Health with a concentration in Social and Behavioral Science from Temple University. How has this combined experience helped prepare you for taking on the role of DEIR director?

A: At the core of my professional experience is being a clinician and taking care of patients. What led me to pursue an MPH degree was my desire to understand the socio-cultural reasons why minority people who experienced a TBI didn't report for clinical care as frequently as their White counterparts. This was especially perplexing since my former clinic was majority Black. During my time at Temple, my interest broadened into wanting to better understand the health disparities, particularly in eye care, and learn how to improve health outcomes in underserved and disadvantaged populations. This interest matured well with the work I was doing on several DEIB committees, including chairing ARCPS’s Diversity and Cultural Competency Committee. These experiences resulted in the desire to identify ways in which educational communities and doctors in practice could help decrease health disparities and improve outcomes in our communities and practices.

Q: What are your short-term and long-term goals for the School in terms of expanding diversity and cultural competence?

A: My short-term goals include getting to know the people at Berkeley Optometry & Vision Science—understanding the culture of the campus and learning their expectations of my role. I think people may have very different expectations across different departments and I want to ensure that those expectations align with the DEIB strategic plan that we will work together to develop and enact. One particular long-term goal that a few people have expressed is the desire to see more students (and faculty) who identify with historically underrepresented groups. And, if we can best represent those who identify as Black, Hispanic, and American Indian, represented more on campus. I think Berkeley Optometry & Vision Science is wonderfully diverse, but I would like to explore ways to improve the matriculation, graduation, and sense of belonging of these specific underrepresented groups.

Q: Why aren’t we seeing more students from diverse backgrounds applying to optometry school?

A: For the past year several organizations have spent time analyzing the data and reflecting on this very question. There is a multifaceted response to this question but, from my experience, a lack of exposure to the field of optometry and mentoring I believe continue to be a big reason why we see much fewer people from underrepresented groups applying to optometry school. The good news is that we did see a small uptick in the number of Black and Hispanic students who applied, 5.6% from 5% for Black students, and 12.6% from 8% for Hispanic students. I think this change represents the cross-organizational efforts made to applying to OD school more accessible and the field of optometry more fun and meaningful.

Q: What are some ways that schools of optometry can do a better job attracting and graduating students from diverse backgrounds and experiences?

A: I advise that schools commit to the marathon that is required to diversify a student body and workforce. While we want to continue to reach out to those in underrepresented schools, our efforts really should extend to those in high school, perhaps even middle school. For example, I knew I wanted to be a doctor when I was 6 years old. I had parents (not doctors) and family friends that helped to nurture that dream and get me involved in the right courses and extracurricular activities. It was in high school that I decided I wanted to go into optometry after having an eye exam and subsequently shadowing a local optometrist in my town. If we begin the process of mentoring and nurturing a 14 or 15 year old, we will have to wait at least 8 years before they apply to optometry school and at least 12 before they graduate. This journey is a marathon, not a sprint, and our leaders need to continue to invest the time, money, and human resources into this endeavor.

Q: In your DEIB workshop, you said that in the context of optometry, the broadest goal in diversity and inclusion is to make sure individuals who live in underserved communities receive care. What is the connection between a diverse cohort of optometry students, faculty, and staff, and reducing health disparities in the communities we serve?

A: Making sure that we have a diverse workforce is a key component in making sure we have healthy communities, and that we have the right people at the right time. That is equally those who identify as Black, Hispanic, and American Indian. It is possible to do much more to improve the likelihood that a patient will seek care in the first place, trust their doctor, adhere to treatment protocols and follow up care, and maybe even encourage and bring their family, friends, and neighbors with them. That is why this is so important. Having a diverse faculty and students is critically important if we want the likelihood that those groups will feel like they belong and are included in the campus culture.

Q: Efforts to increase diversity and cultural competence are not new at Berkeley. Do you think that much work has to be done? How do we as a community, ensure that the momentum of the past year does not dissipate?

A: We need to keep each other accountable. There have been a lot of efforts and initiatives this past year, which has been great! But I want to make sure that we have that same energy 3, 5, 10 years from now. And we need our leaders and community and corporate partners to continue to invest their resources and time into this journey.

Dr. Ruth Shoge, Associate Clinical Professor, and Director of DEIR

Change Agent

Director of DEIR Dr. Ruth Shoge on expanding diversity and cultural competence

This past summer, Dr. Ruth Shoge joined the Herbert Wertheim School of Optometry & Vision Science as Director of Diversity, Equity, Inclusion and Belonging, and as an Associate Clinical Professor. Before her move from Philly to Berkeley, we caught up with her via email and asked about the challenges — and hopes — for expanding diversity and cultural competence at Berkeley Optometry, and in the profession.

Q: In addition to being an OD, you have a Master’s Degree in Public Health with a concentration in Social and Behavioral Science from Temple University. How has this combined experience helped prepare you for taking on the role of DEIR director?

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Vaccination Efforts
Optometry Faculty Assist

IN VIEW OptometryNews

required self-study coursework, in-person classwork as certification. This certification process began over group of faculty members to participate in immunization Berkeley’s clinic administration, under the leadership the UC Berkeley campus community. including Drs. Kuniyoshi Kanai, Anne Tasaki, Meredith rare exceptions, to be vaccinated against COVID-19. As vaccinate students, staff and faculty. This Optometry’s faculty assisted in the effort to UC Berkeley’s general community returned to work this Fall, Berkeley Optometry’s faculty assisted in the effort to vaccinate students, staff and faculty. This Berkeley’s clinic administration, under the leadership of Associate Dean Dr. Chris Wilmer, sponsored the first group of faculty members to participate in immunization certification. This certification process began over two years ago when Drs. Kanai, Tasaki, Whiteside, and Yoshiyama completed the Pharmacy-Based Immunization Delivery Course — the same coursework completed by pharmacists to administer immunizations. The program required self-study coursework, in-person classroom as well as a skills assessment. “When we began the pharmacy course, I never thought that we would use these skills as part of the public health effort to mitigate a pandemic” said Dr. Whiteside, “but to get everyone vaccinated, we need an all-hands-on-deck approach.” Additional training was also required; participating faculty completed a training through the California Department of Public Health, as well as training required for University Health Services (UHS) staff. “This effort heightens the continued close collaboration between the UC Berkeley Optometry Clinic and UHS. The strength of the partnership not only kept our patients, staff, and clinicians safe in the early days of the pandemic lockdown, when our eye clinics remained open for urgent care, but also allowed us to contribute to the vaccination efforts that helped the campus and City of Berkeley achieve some of the highest COVID-19 vaccination rates in the country,” said Dr. Yoshiyama. “It’s really nice to be able to support one another and our shared community. We’re grateful for our partnership.” Berkeley Optometry currently teaches students coursework and skills related to injections as it relates to eye care but future coursework will be expanded to include vaccinations. Dr. Kanai notes, “Once you have mastered the basic understanding and skills through training, the vaccination procedure itself is achievable for optometrists in a variety of clinical settings.” Dr. Tasaki agrees, and adds: “It’s reassuring to be a part of the public health effort to get people vaccinated and to keep our campus and community safe.”

> OVERHEARD “Remember to breathe and take it day by day. Optometry school was definitely the most difficult 4 years of my life, but also the most that I have grown and learned as an individual. There will be times that you may feel discouraged and overwhelmed, but keep in mind that you are not alone and that you have tons of classmates and faculty that are there to support you! I definitely had my fair share of attending office hours and additional lab practice time. Make sure to prioritize self-care and ask for help when you need it. Be proactive and try your best to stay positive!” AMANDA DIEU, OD 2020

Farewell, But Not Goodbye
Wishing a happy retirement to the 36 distinguished faculty members who are retiring this year. Together, they represent a whopping 367 years of service to the school! They will be missed, but their contributions will continue to enrich our community.

MARTY BANKS “In addition to being a world-class vision scientist, Marty is a world-class friend, colleague, and storyteller. One of the great joys of knowing Marty is making the evolution of his stories: the bike rides get a little longer, the hills get a little steeper, and the weather gets a little more extreme. The best stories are those that start with "Oh man, this is a great story... and this one is actually true."” By Hany Farid

JOHN CORZINE “John, it has been an absolute pleasure and a privilege to have known student and colleague. Thank you for supporting me as I applied for contact lens residencies and for extricating me with the 2nd yr CL course. You are someone I truly look up to, both literally and figuratively. :) You will surely be missed around the school, and I know your legacy will carry on through the many people you have influenced here. Cheers to your well earned retirement!” By Pam Satjawatarcharong

BOB DIFTER “To say Bob Dister is one of a kind is an understatement. The man does it all: teaching optometry, and residency in contact lenses, clinical teaching in low vision, didactic teaching in binocular vision, ice skating, golf, travel! Who other than Bob could receive the Morton Plum Teaching Award from his own class?” By John Corzine

SARAH FISHER “Dr. Fisher, your legacy is as strong as your impact. You have been a role model to pediatric patients, co-working residents, teaching OD students retnoscopy for patients with astigmatism and more, coordinating UCBEST, and communicating with me over lunch. Enjoy your "pasta, Zev, Deb."” By Deb Orel-Bixler

DENNIS FONG “Dr. Fong is an amazing hero. He deserves so much more credit for elevating pre-clinical education and helping clinical interns who needed more time to develop.” By Glen Otawa

CHESLYN GAN “Cheslyn, I will certainly miss having you around in the contact lens lab. I appreciate your sense of humor and advice regarding the course and expectations for students — thanks for keeping it real :) Also, thank you for sharing your other talent with us and supplying delicious baked goods. Enjoy your retirement!” By Pam Satjawatarcharong

MICHELLE HOFF “To my sidekick, partner in crime, other half of the OD duo, it’s been an amazing 25+ years! Thanks so much for being part of the OD Team. Marty for over a decade is enjoying the evolution of his stories: the bike rides get a little longer, the hills get a little steeper, and the weather gets a little more extreme. The best stories are those that start with “Oh man, this is a great story... and this one is actually true.”” By George Lee

NICK KERRY “Dr. Kerry is a class act. He made teaching and learning fun. Students, faculty, staff and patients all loved him for his energy, positivity and kindness.” By Kathy Tran

JEFF KO “Dr. Jeff Ko was loved by his patients, who were loyal to him and his private practice emphasis within our larger clinic. He began what became known as “The Clinic” back in the early 90’s with the intention of exposing interns to a doctor driven exam. I had the personal honor of training with him as an intern and to this day use some of the pearls he taught me when teaching my own interns.” By Choi Wilmier

GUNILLA HAGERSTROM-PORNYCH “There is no one person who has influenced Berkeley Optometry more over the past 20 years, or has been more dedicated to driving our agenda of excellence. Gunilla is a brilliant administrator, an exemplary academic, a visionary of the highest order and a leader that has allowed others to shine around her, always without fuss and without ego. Gunilla has a wicked sense of humor accompanied by a healthy dose of skepticism, both essential qualities to survive UC. When I arrived as Dean, Gunilla promised me that I had 1 year as Associate Dean, she gave me seven. I will forever be grateful for her friendship and guidance.” By John Flaman

BARRY WINSTON “I have known Dr. Winston for over 20 years. He is a great clinician and teacher. I could always count on him being in clinic in the morning as he gets up around 5:30 AM and comes to the clinic really early. I had to remind him clinic starts at 8:30 AM. Arriving for clinic early allowed him to read a week’s worth of papers which he had picked up from coffee shops, gyms or wherever she had been. I think his greatest contribution to the clinic was planning the end-of-season potluck lunch.” By Dennis Burger
Top 10 Works of Art Featuring Eyes or Vision

Artists have long been drawn to the eyes. And for good reason. Eyes are often associated with focus, truth, clarity, light, vision, prophecy, awareness, and observation — and so are a perfect symbol for artists striving to evoke imagery that surfaces these concepts to the conscious mind.

1. The False Mirror
by René Magritte, 1929
Magritte and other surrealists working in the aftermath of World War I were fascinated by the eye, and saw it as a portal “between inner, subjective self and the external world.” The visual artist Man Ray, also a surrealist, once owned Magritte’s False Mirror, and is said to have described it as “a painting that sees as much as it itself is seen.”

2. Swyambhunath Stupa
Kathmandu, 460 AD
Also known as the “Monkey Temple,” the Swyambhunath Stupa is one of the holiest Buddhist sites in Nepal. Each day hundreds of pilgrims begin a series of clockwise circumambulations of the stupa. The eyes are said to represent wisdom and compassion. Above the eyes is ached eye from which it is said cosmic rays emanate when Buddha preaches, carrying a message to “heavenly beings so that those interested can come down to earth to listen to the Buddha.”

3. Eye
by M.C. Escher, 1946
One of the most famous graphic artists in the world, Escher drew this image of his own eye while looking at it through a convex shaving mirror. Of the drawing Escher wrote, “As the viewer always sees himself in the eye he is looking into, I decided to show a skull reflected in it: because we are all forced to look at Death, whether we like it or not. Or he looks at us.”

4. The Japanese Footbridge
by Claude Monet, 1912
Monet, diagnosed with cataracts in 1912, initially refused to undergo surgery. Over time, his ability to see critical detail was reduced, and his paintings — such as The Japanese Footbridge — took on a more muted, brown hue devoid of the vibrant use of color found in his earlier work. Eventually Monet had cataract surgery, and over time his sense of color returned.

5. De la Conquista
a 1930
by Diego Rivera, 1929-1935
Celebrated artist Diego Rivera, one of the most important muralists of Mexico, painted a vast mural at the Palacio Nacional in Mexico City that describes the history of Mexico. In this section of the mural, we see the Vicar Luis de Velasco, who was an emissary sent by the Spanish king to rule over Mexico in the late 1500s. Velasco, pictured in the center, is thought to be the first person on the American continent with eyeglasses.

6. Eye of Horus
Tomb of Senenjem, ca. 1250 BC
Located on the West Bank of the Nile, the tomb of a local artisan named Senenjem. The walls of his tomb, like that of many artists from the area, are adorned with mythological symbols. The Egyptian sky god Horus is the son of Isis and Osiris, his eye — The Eye of Horus — is a symbol for well-being, healing, and protection.

7. The Eye
Salvador Dalí, 1945
Filmmaker Alfred Hitchcock commissioned Spanish surrealist Salvador Dalí to create a series of paintings for the psychological thriller Spellbound, starring Ingrid Bergman and Gregory Peck. The paintings were used during a dream sequence where Gregory Peck’s character describes being in a gambling house that had curtains adorned with eyes, which were then cut out with a giant pair of scissors. SPooky!

8. The Old Guitarist
by Pablo Picasso, 1903
The deeply shadowed eyes of the blind guitar player are typical of Picasso’s Blue Period, which began after he learned of the death of a dear friend. As Picasso’s depression deepened, his paintings took on somber blue tones, and many of his subjects depicted “the misery of the poor; the ill and those cast out of society.” Art historians believe that Picasso may have also been inspired by the literature of the Symbolist movement, which included “blind characters who possessed powers of inner vision.”

9. Charcoal and Ink Eyes
by Bryce Olson, 2020
No top ten list would be complete without an entry from one of our talented students! This charcoal and ink drawing by senior student Bryce Olson was created for the California Optometric Association to celebrate 2020. There wasn’t much to celebrate that year at all, but we think this piece is beautiful! For models, Bryce used friends, family members, optometry students, and Dr. Ron Seger of the COA.

10. C-Stunners
by Cyrus Kabiru, 2015
“I really love trash,” says Cyrus Kabiru, a painter and sculptor living in Nairobi, Kenya. “I try to give trash a second chance.” C-Stunners is a collection of eyewear fashioned from mostly electronic waste. Each frame is cleverly named with reference to its previous life. A collection of speakers is “Big Mouth,” a desktop computer became “The Fatherboard.”

Bryce Olson was created for the Celebration 2020. There wasn’t much to celebrate that year at all, but we think this piece is beautiful! For models, Bryce used friends, family members, optometry students, and Dr. Ron Seger of the COA.
Experience the life and times of Berkeley Optometry students through their (smartphone) lens!

STUDENTS

Anjali Paramanandam | CLASS OF 2023

“Showcasing some Berkeley spirit for Quiz Bowl at Optometry’s Meeting 2021 in Denver, Colorado!”

Micah Isabel Sarmiento | CLASS OF 2022

“Visiting Glacier National Park while on my externship rotation at Crow Indian Hospital in Montana.”

Peter Ji | CLASS OF 2023

“The best team one could ask for to run a club together! –VDC 2020-2021”

Kellie Melton | CLASS OF 2023

“Enjoying the blossoms on campus with our opto family line”

Sophia Moh | CLASS OF 2022

“The summer where we went paddle boarding in Lake Tahoe”

Iris Yeh | CLASS OF 2024

“Enjoyed the sunset after all the midterms next to Berkeley beach.”

Estie Sherbak | CLASS OF 2024

“Said goodbye to our scrubs and aloha to Hawaii on our spring break adventure!”

Quynh Nguyen | CLASS OF 2022

“Cradled by my staples at Crater Lake”

Through Our Eyes

Send your images to us at optweb@berkeley.edu
A look at the class of 2025: who they are, where they come from and how they got here.

Class of 2025

Applicants

307 Applications

70 Students matriculated

183 Interviews

Academics

2.99 - 4.0 Overall GPA range

3.46 Average GPA in Bio, Chem & Physics

3.7 Average GPA in undergrad

349 Average Score on the OAT

Student Profile

22 Out-of-State

18-31 Age Range

48 California

22 Number of students who entered directly from undergrad

48 Number of students who took at least a year off

13 Opto-Camp alumni

Undergraduate Institutions

ALCORN STATE UNIVERSITY
ARIZONA STATE UNIVERSITY
CALIFORNIA POLYTECHNIC STATE UNIVERSITY
CALIFORNIA STATE UNIVERSITY - EAST BAY
CALIFORNIA STATE UNIVERSITY - FULLERTON
CLEMSON UNIVERSITY
MCGILL UNIVERSITY - MONTREAL
OHIO STATE UNIVERSITY
RICE UNIVERSITY
ROWAN UNIVERSITY
SAN DIEGO STATE UNIVERSITY
SAN FRANCISCO STATE UNIVERSITY
STANFORD UNIVERSITY
UNIVERSITY OF CALIFORNIA - BERKELEY
UNIVERSITY OF CALIFORNIA - DAVIS
UNIVERSITY OF CALIFORNIA - IRVINE
UNIVERSITY OF CALIFORNIA - LOS ANGELES
UNIVERSITY OF CALIFORNIA - RIVERSIDE
UNIVERSITY OF CALIFORNIA - SAN DIEGO
UNIVERSITY OF CALIFORNIA - SANTA CRUZ
UNIVERSITY OF FLORIDA
UNIVERSITY OF REDLANDS
UNIVERSITY OF SOUTHERN CALIFORNIA
UNIVERSITY OF DALLAS
UNIVERSITY OF TEXAS - DALLAS
UNIVERSITY OF TORONTO
UNIVERSITY OF UTAH
UNIVERSITY OF WASHINGTON
WICHITA STATE UNIVERSITY
Dr. Herbert Wertheim: Making Life on Earth Better, One Pair of Eyes at a Time

BY ELIZABETH COSTELLO

berkeleyleaf.com

Dr. Herbert Wertheim is hard to miss, and not just because of the red fedora that is his signature look. This polymath, trained in chemistry, physics, computer programming, and electrical engineering, has worn many hats — engineer, scientist, clinician, researcher, inventor, entrepreneur, educator, philanthropist, and university leader. With an extraordinary $50 million gift — the largest to any school of optometry in the country — Dr. Wertheim and his wife Nicole have laid the foundation for a new era in vision research and clinical service at Berkeley and beyond. The gift is the seed of a new, 300 million investment in optometry that will expand the school’s offerings and position the profession as a central contributor in the healthcare sphere. To commemorate this historic gift, the school has been named the Herbert Wertheim School of Optometry and Vision Science.

“Dr. Wertheim cares deeply about elevating and expanding the field of optometry as a key part of prima- ry health care,” says Dean John Flanagan, remarking on the scope of the gift, which supports a new optometry satellite campus for clinical teaching and professional education, children’s vision and vision science initiatives, two endowed faculty chairs, and scholarships for students pursuing an OD or a PhD. “This investment reflects the shared vision for an imperative to train the next generation of optometric physicians to serve as health care leaders.”

Warm and genial by nature, Dr.Wertheim is clearly enthusiastic about advancing optometry as a field, a prac- tice, and a public health offering. An unflagging dysslectic in his youth, he has had a lifelong fascination with the way the human brain takes in and processes information. A polymath trained in chemistry, physics, computer programming, and electrical engineering, Dr. Wertheim has led an unusual life driven by a deep curiosity about the greatest computer of all — the human brain.

“What is my interest in medicine? It’s basically what I call visual neurology,” says Dr. Wertheim, framing his interest as a series of questions. “How does one transfer information to the brain, where it’s interpreted as information rather than optical signals?”

Throughout his extraordinary life, Dr. Wertheim has been interested in the mechanisms in the brain that inform our sense of sight. From his humble beginnings as a high school dropout hunting frogs and snakes in Florida swamps, he built a career that includes serving as an engineer at NASA working with the team that launched America’s first astronaut into space in the early 60’s, teaching and leading academic institutions, and creating technologies that have saved countless people from debilitating eye disease. More than 40 years ago, through his company, The Wertheim Group, Dr. Wertheim discovered the dangers of UV and blue light and developed technologies that have helped prevent visual loss and macular degeneration for countless numbers of people.

While his research — and the more than 100 patents he has owned — has been critical to his career, Dr. Wertheim’s deep philanthropic commitment to vision science has been just as important. Since his time as a pediatric ophthalmology fellow in the late 60’s, Dr. Wertheim has been interested in the role that good vision can play in cultivating a life well lived. “The Wertheim gift actually doubles the number of graduate students we can bring on,” says Rowland Taylor, interim dean of optometry and optometry programming and support at Berkeley. “It’s a big impact in allowing us to support a pediatric eye-care model clinic at Berkeley, as well as the establishment of Berkeley Vision CURE, a national and international initiative that aims to provide eyeglasses to every child in need of them. The endowed Nicole Wertheim Chancellor’s Chair in Pediatric Optometry will ensure that a top faculty member has the resources they need to pursue research in this critical area.”

As a philanthropist, Wertheim found public education to be the best vessel for expressing his wide-ranging interests. He says he always looks for the “multiplication factor” in his giving, asking himself what kind of support can generate the greatest benefit and long-term positive change. The Wertheims’ initial efforts to support public education focused on their home state of Florida, where they have long been involved with Florida International University. Dr. Wertheim has served as a trustee at FIU for 30 years, and the Wertheim name graces Florida colleges and laboratories focused on engineering, medi- cine, and nursing, as well as a 1,000-seat performing arts complex. In 2010, the Wertheims brought their interest in incorporating the health sciences as a public good to UC San Diego, establishing the Herbert Wertheim School of Public Health and Human Longevity Science. Creating new vision science and optometry programming and support at Berkeley seemed like a logical next step.

“Everybody I’ve known who’s graduated from Berkeley Wertheim has been a multiplication factor,” Wertheim says. “They’re all doing great things, so why wouldn’t you want to be associated with those kinds of people? I’m not an alumnus, but I hope to be able to produce lots of well-trained optometric alumni.”

Wertheim’s gift will provide game-changing resources for established vision scientists and budding optometrists. For those considering graduate school in these areas, new resources can make the critical difference that leads to vital new careers.

“In every aspect of his career, Dr. Wertheim has remained engaged with and interested in the role that good vision can play in cultivating a life well lived.”
Frances Van Loo wasn’t feeling well. An academic who earned a PhD in economics and a faculty position at UC Berkeley’s Haas School of Business in the 1970s — when women were a rarity in the field — Van Loo wasn’t accustomed to feeling lethargic. Her primary care physician noticed her continuously low platelet count and sent her to a hematologist. “He told me that I had bone marrow cancer,” she recalls, “but that I didn’t need to worry about it because it was moving very slowly.” Needless to say, that wasn’t much of a reassurance. Then he left to do research and tossed her to another doctor. The second hematologist rejected the cancer diagnosis but he also sent her to a liver specialist and to a neurologist. The neurologist treated her with monthly 3-hour infusions for over a year, which did no good whatsoever. By this point, Van Loo’s symptoms also included severely dry eyes and dental problems associated with an inability to produce adequate saliva.

“I was having symptoms for five years, and probably more like eight to ten,” she recalls. Eventually Van Loo landed in the office of Dr. Nancy McNamara, currently a Professor and Associate Dean for Academic Affairs at the Herbert Wertheim School of Optometry & Vision Science at UC Berkeley. McNamara, a specialist in dry eye, confirmed what so many other doctors had missed. Van Loo wasn’t suffering from cancer or liver failure or any of the other theories that had been proposed. Instead, what Van Loo had was Sjögren’s Syndrome, an autoimmune disorder that often first manifests with dry eyes, but that can grow to include any number of additional symptoms and bodily systems.

McNamara, Chief of the Sjögren’s Clinic, says that Van Loo’s experience is not unusual. “Quite honestly, the typical patient is a middle-aged woman,” McNamara says. “And they...
people in the United States. "In fact, it affects more than four million people in the United States, approximately ninety percent of whom are women. Probably the most famous sufferer is tennis star Venus Williams. Williams withdrew from the 2011 US Open because of extreme fatigue. At one point she was the top-ranked player in the world but undiagnosed Sjögren’s caused her to fall so far that she was no longer even in the top hundred players. Even with access to the world’s best doctors, it took seven years of struggle before Williams was accurately diagnosed. This isn’t unusual, says Dr. McNamara. “Historically, it takes five to seven years for Sjögren’s to get diagnosed, because clinicians often don’t know how to recognize it.”

Sjögren’s is an autoimmune disorder which, among other things, affects the body’s ability to generate moisture. This is why many patients’ first experience of the disease is keratoconjunctivitis sicca, or dry eyes. People often fight the disease unsuccessfully by themselves for years, changing contact lens solutions or using over-the-counter eye drops. Xerostomia, or dry mouth, is another common symptom. "The hallmark of Sjögren’s is a faulty lymphocyte, an immune cell that fails to recognize its own cells, but something happens here and it does not react to its own cells," says Carteron. "When this happens, it creates in the bone marrow. These lymphocytes primarily impact glands, which are found throughout the body and created in the bone marrow. These lymphocytes primarily impact glands, which are found throughout the body and in most major organ systems. Sjögren’s sufferers can experience joint pain, as with rheumatoid arthritis. There are also some symptoms that are specific to the disease. Lympocytes can sometimes be part of the interaction between the doctors at the Sjögren’s Clinic. "One of them will pick up on something that the others may not have noticed and then they deal with it as a group. And the openness of all of them is just amazing. They’ll admit when they don’t have the answer to a question and then they’re so good about emailing or calling back once they figure it out.”

"I get excited talking to optometry students about this," says Dr. Carteron, "because they may meet someone in their career and be able to ask some questions and then they say ‘Oh I wonder if…’ and they’ll be able to make the next referral step.” Dr. McNamara agrees wholeheartedly. "I would love to see more clinics get started to do this kind of care. And not even just for Sjögren’s. There are so many diseases where this type of model and integration would be so valuable to patients.”

Because at the end of the day, the best doctors recognize that their work isn’t narrowly about a disease or a drug or a procedure. The underlying reason for it all is the patient who shows up seeking help. “A patient is not just their eye,” says McNamara. “They’re not just their mouth, not just their systemic condition. What we do here is care for the whole person.”
EyeTech

A growing number of Vision Science PhDs are finding scientific satisfaction in a demanding and rewarding new industry environment

BY GORDY SLACK

Many recent PhD’s from UC Berkeley’s Vision Science program have altered their presumed career trajectories from traditional academic or clinical ones to instead enter the tech sector, as well. There are a few reasons for this trend, says Austin Roorda, professor and former chair of the Vision Science program. One important reason is that several distinct technological frontiers have advanced to the point where expert knowledge of the ins and outs of the visual system is a key to progress. Foremost among those frontiers are virtual reality and augmented reality.

Augmenting Academic Realities

Krista Ratnam, who completed her PhD at UC Berkeley’s Herbert Wertheim School of Optometry and Vision Science in 2021, expected to follow the academic path. She chose vision science because she loved biology and engineering and wanted to fuse them to make a positive impact. In her fourth year, Ratnam’s advisor, Roorda, whose lab focuses on how our visual systems create rich perceptual experience out of two-dimensional images that enter our retinas, asked if she would be interested in an internship helping a company develop a perceptual tested for virtual reality displays. She spent four months at Oculus Research (now Meta Reality Labs Research). During this time, she worked with both vision and optical scientists, several of whom were Berkeley Vision Science alumni or colleagues in the adaptive optics field. “The experience was “so collabora- tive, rigorous, and gratifying as my research,，“ Ratnam says. She completed her postdoc at Meta (formerly Facebook Reality Labs Research) investigating the visual quality of novel near-eye displays and developing a wide-field-of-view retinal eye tracker.

Today, as a technical program manager at Meta Reality Labs, Ratnam works with a cross-functional team of optical scientists, engineers, perceptual scientists, product managers, and experts on VR and AR technologies. “My vision science background gives me a unique per- spective as to how engineering decisions will impact visual quality, which ultimately impacts the quality and immen- surability of users’ experiences,” Ratnam says. “With display technologies, typical engineering design processes need to be adjusted to these ultimately require perceptual, not engine- ering, optimizations. The eye is an imperfect optical system, so you don’t want to rely on indices on specifications where the eye is the bottleneck. Additionally, vision is a temporal process, which introduces a novel dimension to consider when designing a display. My vision science training enables me to drive these complex decisions with perceptual quality being the paramount goal.”

“As amazing as the technology emerging from VR and AR companies is, if their engineers don’t fully appreciate the complexity of the human visual system, the whole thing won’t come together,” says Roorda. “They need to consider how the eyes work together to form a multi-dimensional view of the world. How do the two eyes act independently and change their positions, even when a person is focusing on a single small letter on the visual acuity chart. And when surroundings are constantly changing, the eye instinctively focuses on, but a good VR or AR display will have to factor in.”

Genes Therapy

Gene therapy is another burgeoning field where vision science has made some major strides. A robust understanding of human eyes and the visual system’s processes are key to companies racing to develop products. Cecile Fortuny, who got her PhD from UC Berkeley in 2019, now works for Scribe Therapeutics, co-founded by UC Berkeley biochemist Jennifer Doudna, winner of the Nobel Prize for her work developing CRISPR. “Human eyes are “pseudo-immune privileged,” meaning that they have a milder immune response than other organs to the viral vectors used to deliver gene therapies, a quality that allows for study without extreme immune suppression. For one, it makes it possible to “tack on” genes from other tissues, organs and blood circulation, which makes it safer to introduce novel genetic modifications without unifying consequences elsewhere. Additionally, CRISPR is a powerful tool to modify other organs, eyes are easily accessible for quick and safe drug delivery. That is, each have two separate eyes is useful too, which counters the fear that as you age you may need to administrate a drug to just one eye but take data from both.”

At Scribe Therapeutics Fortuny is using the eye not only as a tool for treating systemic conditions but also for treating dis- ease of the eye itself. In 2017, the first FDA-approved gene therapy for a monogenic disorder targeted Leber congenital amaurosis (LCA). Unlike Ratnam, Fortuny knew she wanted to work in industry from the start. For several years in graduate school, she was a member (and director) of Beyond Academia, a Berkeley-based group that helps graduate students and postdocs consider the liberal arts to explore career options beyond the academic track.

“There’s nothing wrong with an academic career. But it’s not the golden path anymore. Everything is flexible, blurry, dynamic, and crossing over in a confusing but beautiful way. And I think that’s great.”

Falling EyeTech

Finding scientific satisfaction in a demanding and rewarding new industry environment

BY GORDY SLACK

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“I was definitely on the professor track,” says Mozafari. “But I was naive about what that meant. Yes, it’s liberat- ing to choose your own research questions, but with that comes a lot of responsibility, a lot of writing, a lot of fund- raising in addition to just the engineering. As it turns out, just focusing on engineering is my preference.”

When he first noticed a growing number of his students heading toward industry, Koschak admits he worried a little. “I always had the mindset that the ultimate achievement for any PhD student was to become a professor like me. But I totally changed my thinking on that. For one thing, the opportu- nities for industry-based development have expanded.”

Today, Koschak actively cultivates relationships between his students and industry partners. “There are a few other PhDs students here at Berkeley who have work, “That is the right decision.”

Next Gen Data Transmission

Saman Mozafari, a member of her PhD from the Vision Science program in 2017, is now an ophthalmic engineer at X-Device (formerly Google X), Alphabet’s “moon- shot lab,” where she works on a wide range of optical communi- cation systems for the next generation of VR and AR devices.

“Benefits go both ways. Everyone gains from the collaboration,“ says Mozafari. “Fortuny agrees. “It’s part of the crossroad of people, knowledge, and technology moving between the academic and industrial realms,” she says. “There’s just one path anymore. Everything is flexible, blurry, dynamic, and crossing over in a confusing but beautiful way. And I think that’s great.”
What bit of advice or wisdom would you have for students just beginning their degree program?

Always volunteer to see that extra patient. Always pick the hard cases and rotation sites. Remember to thank your support system regularly as you go through the next four years, as it will be difficult, and they will help you survive it. Finally, travel and attend conferences whenever you can!
Reverend Dr. Clyde Oden, Jr. talks about his quest to overcome inequities in health status and health services, the importance of acknowledging the spiritual needs of patients, becoming a community healthcare advocate and leader, and his belief that “To whom much is given, much will be required” (Luke 12:48).

What led you to optometry?

In high school, I applied for a Naval Reserve Officer Training Corps (NROTC) scholarship. I was an excellent student and a star athlete. Fit in every way except one — I had myopia. I was motivated to do whatever it would take to pass the U.S. Navy physical examination, so I visited my optometrist seeking solutions. He saw my profound disappointment when I failed the vision test but knowing my aptitude for math and science — he asked me if I had ever considered being an optometrist rather than an engineer or majoring in physics. I was surprised by his question. After all, I had never thought about it because I had never heard of or even seen an African American optometrist.

He then told me that there were no Black optometrists in my hometown of San Diego, and in the entire state of California, he knew of only three! He told me opportunities were wide open if I were to pursue that profession. Additionally, he was a graduate of Berkeley’s School of Optometry — and I should look at what it had to offer. I was not only interested in going to the school, I was also selected and was awarded a Berkeley Optometry Alumni scholarship — and as they say, the rest is history!

Q: Who were your early influencers in life? Who inspired you?

My parents were the most significant influencers in my life, period. My mother was from Mississippi, and my father was born in Alabama. They grew up during the Great Depression, and life was hard on both. Their grandparents were enslaved African Americans, and every generation in my family lived harsh lives. My father joined the U.S. Navy in the 1940s. He found that the only opportunity available to him was to be a messman — a servant to officers and enlisted sailors in the segregated Navy. The structural racism of all the armed services limited my father’s ability to achieve, which did not change until after World War II. My father served our country for 46 years and retired as a chief warrant officer. My father wanted me to walk through doors closed to him. I pursued the Navy ROTC option — until my vision challenges closed doors that optometry opened — and new horizons manifested themselves.

Q: You have four degrees from Berkeley (BS, Master of Optometry, OD, MPH), and you’ve talked about your experience at Berkeley as transformative. How did Berkeley change you?

When I stepped on Cal’s campus, the mix of social activism and civil rights and student rights was beginning to percolate. The Free Speech Movement, the Anti-War Movement, the Civil Rights Movement, the Black Student Union movement, and the Third World Liberation Struggle Movement were beginning to express themselves in a tangible way to me. I was touched and engaged in all of it. My conscious- ness and societal awareness were radically altered by what was happening around me.

I arrived at Berkeley intending to become the first Black optom- etrist in my hometown of San Diego with the expectation of becoming a successful practitioner. I had met the role model, Dr. Marvin Poston — the first African American to graduate from Berkeley Optometry. More than 25 years elapsed between his graduation and the time I entered the program. He had a successful practice, and his impact on the profession and other business activities was profound.

However, by 1966 my self-awareness and my mission had changed. After graduating with my OD, I enrolled in Berkeley’s School of Public Health. I was greatly influenced by Professor Hern- rit Blum and some of his colleagues at the SPH and their insistence that health care was a right and not a privilege. They opened my eyes to the inequities in health status and health ser- vices, particularly for African Americans and commu- nities of color. I left Berkeley with a determination to be part of the solution addressing health disparities in low-income communities. Being a successful clinician was no longer my top priority. I wanted to become a community health care advocate and leader.

Q: In addition to being an optometrist, you served as CEO and President of Watts Health Systems (WHS) in Los Angeles for over 20 years. What inspired you to make the transition from seeing patients to more broadly engaging in community health?

I left Berkeley’s School of Public Health with a master’s degree and was offered an opportunity to serve a public health endowment in Washington, DC, at the Office of Economic Opportunity (OEO) headquarters. They had just started developing Neighborhood Health Centers. I completed my service in OEO and was offered an opportu- nity to serve in an administrative capacity at the Watts community in Los Angeles. I served there for 13 years. A few years later, I became its President and Chief Executive Officer — and we experienced phenomenal growth. The organization eventually operated an HMO, 21 community health programs, including substance-abuse, home health agency, and school-based health clinics. WHS also owned and controlled the interest in a community savings and loan company. By the end of my service at that institution, we served about 250,000 persons per year in the nonprofit enterprise known as Watts Health Systems, Inc.

How did you prepare for taking on this new challenge?

Frankly, my public health education did not prepare me for the responsibilities of managing a health care enterprise with an annual budget that was a quarter of a billion dollars. I enrolled at Pepperdine University’s Graduate School in an MBA curriculum de- signed for presidents and senior executives of large and growing compa- nies. That experience prepared me for the management challenges that emerge in operating a large company providing health care services to medically underserved and under-resourced communities.

Q: You’ve spoken about a spiritual encounter that led you to seek a master’s degree in divinity, and ultimately you became an ordained minister, working full-time as a pastor with the

“I left Berkeley with a determination to be part of the solution addressing health disparities in low-income communities.”

African Methodist Episcopal Church (AME) for 24 years. What parallels do you see between your work in direct patient care, delivering community health services, and ministry?

As a person of faith, providing care to persons with significant healthcare needs and limited financial resources kept me on my knees. I soon felt a calling to engage in a more meaningful way in my church, not knowing that it would eventually lead to becoming a pastor. While leading the Watts Health Systems, Inc., I enrolled in Claremont School of Theology and pursued a master’s degree in div- inity. At the time, I did not know what doors might be open to me. I wanted to be of more service in my local church; however, soon after graduating from seminary, I was appointed to pastor at a church in Long Beach. I eventually had the privilege of serving as senior pastor at three different churches in Southern California.

My faith directed me to serve people of need: spiritually, emotionally, socially, financially, and medically. As a pastor for 24 years, one of the most common needs of my congregants was in health- care. Some of my members came to the church with acute health care problems because of accidents or disease. However, many more of my members suffered from the challenges of advanced or chronic illnesses. The glaring inequities of healthcare services are magnified in the church setting.

It was important to me then, as it is now, to do something constructive. I wanted to help members to navigate their personal lives in such a way as to receive whatever kinds of services and assistance they need. A pastor must look at the whole person — mind, body, and spirit, and seek harmony for them. It is in that holistic theme that I see parallels in healthcare and ministry.

It was important to have healthcare ministries in the churches, and health providers must recognize and acknowledge the spiritual needs of these patients. I see this now more than ever.

Q: You’ve had a long and distinguished career, but you don’t seem the type to sit still. What are you doing now?

In 2010, I retired as pastor, relocated from Southern California, and moved back to Oakland. Not long after I moved, the pandemic struck our nation and, of course, every community. To paraphrase a scripture (Luke 12:48): “To whom much is given, much will be required!” This season of the pandemic calls for “all hands on deck.”

I could not remain retired with the skills and experiences I had been blessed with, so I explored how I could be part of the solution in this new situation. In early 2021, I accepted the position of managing director of the Alameda County Collaborative Alli- ance (ACCA-ACIP). This nonprofit organization is a faith-based, person-centered, lay care navigation intervention serving predomi- nantly, but not exclusively, African American adults with advanced illness and their caregivers in Alameda County, Contra Costa County, and San Francisco County. Today, with over 40 churches in its network, including partnering with health systems and commu- nity organizations, the ACCA program is designed to help bridge the gap between health delivery systems, community organizations, faith-based communities, and communities of color in managing advanced illness.

I’m helping in a way that combines all my previous experiences and healthcare knowledge and training. This season of sickness and pain is a special moment in my life, and I’m “all in.”
Q: As the fourth African American graduate of Berkeley Optometry (‘67 and ‘68), and a current member of the DEIS Council, you have been a voice for over five decades of slower-than-hoped-for progress regarding the school’s goal of improving the diversity of students and faculty at the school, and in the profession. In your opinion, why has change been so slow?

Structural racism is the answer and the problem. There has been institutional inertialism to the reality that students come from underrepresented and ethnically underrepresented populations. Since my graduation in the 1960s, there have been few national efforts to address this under-representation, despite the fact that, historically, there have been insufficient efforts by schools of optometry and professional associations of optometry (except for the National Optometric Association) to prioritize addressing this glaring problem — until very recently.

Back in the 1960s, I asked the leadership at Berkeley’s School of Optometry this question: “Why aren’t there more African American and Latino students in our classes?” The responses were, “We don’t know where to find qualified students.” In 1968 I appointed myself, with the blessings of Dean Meredith Morgan, to become a one-person recruiting team to return to Atlanta, Georgia, and asked permission to speak to students at Spelman, Morehouse, and Clark colleges. I was just a Berkeley Optometry student, but I was able to get several students to indicate interest during my one-week visit of classes.

Unfortunately, after I graduated, there was no one to pick up the mantle. Few African American or Latino students matriculated to Berkeley, and one to pick up the mantle. Few African American and Latino students matriculated to Berkeley, and one to pick up the mantle. Few African American and Latino students matriculated to Berkeley, and one to pick up the mantle. Few African American and Latino students matriculated to Berkeley, and one to pick up the mantle. Few African American and Latino students matriculated to Berkeley, and one to pick up the mantle. Few African American and Latino students matriculated to Berkeley, and one to pick up the mantle. Few African American and Latino students matriculated to Berkeley, and one to pick up the mantle.

When I returned to the Bay Area in 2020 and met with Dean John Flanagan, he gave me the same question I asked in the 1960s, as I once again observed a scarcity of African American and Latino students when I visited the School of Optometry for the first time in many years. Something was different, however. I found leadership who were not only open to the idea of diversity and inclusion, but were actively moving to make some institutional changes. I am thrilled and excited about Dean Flanagan’s leadership. There is now a DEIS Council and a strategic plan that speaks to Berkeley’s commitment to change the trajectory related to lasting a more diverse and inclusive student body, staff, and faculty. I am so pleased with this institutional response to a disappointing history, and I am so grateful.

Are you optimistic about the school’s current efforts to make lasting changes in this area?

I am very optimistic regarding the changes that are now happening. Changes are happening at this moment. I celebrate the recent hiring of Dean John Flanagan, and I am thrilled and excited about his commitment to lasting change in this area.

What I see is not an effort of tokenism or appeasement but a recognition that optometry and vision care students, faculty, and staff need to represent the full diversity found in our society. But this must be only the beginning. New pipelines need to be developed with HBCUs and HIs — so that future optometry students, vision science students, and faculty members will emerge from these schools and colleges. There must be substantive, institutional, and permanent changes for Berkeley Optometry to become and remain a leader for the world to see and aspirate. Diversity, Equity, Inclusion, and Belonging are not just buzzwords or a convenient euphemism of “political correctness” but he as much of a symbol of UC Berkeley and Optometry as Sather Gate, Sproul Plaza, and the Campanile.

We’d like you to look back for a moment. What is a favorite Berkeley Optometry Moment?

Professor Gerald Westheimer is my favorite memory. He was teaching my first class in physiological optics. Dr. Westheimer was so scholarly, and at times, so intimidating because of his incisive intellectual accent. He was a challenge for me. Additionally, physiological optics is a complicated subject matter. However, I hung on to every word he spoke and studied hard to try and master the subject matter. I was required to impress him. When he read my “A” in his class, I jumped so high in the hallway in Minor Hall that I felt on top of the ceiling. But I knew then that I had arrived. I earned an “A” at Berkeley! Later, as a student, I made the Dean’s list.

For me, academic achievement at Cal was a way to challenge myself and to test my limits. But rather, my primary concern was to master the science of eye care.

The School of Optometry, if you excuse the pun, opened my eyes to new possibilities. It was not just the grounding about vision care, but there was a “holistic ethos” that allowed me not just to have a religious grounding related to the “Golden Rule” — doing for others what I would want done for me. That was promoted in me a new gestalt. The gestalt was further informed by my experience working with veterans in a VA hospital, where I worked with veterans who had sustained severe injuries.

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There are now African American and Latino faculty and staff and a diversity of persons of racial and ethnic backgrounds seeing persons with diverse cultural and personal experiences. There is now a “welcome mat” at the entrance of the School of Optometry.

What I see is not an effort of tokenism or appeasement but a recognition that optometry and vision care students, faculty, and staff need to represent the full diversity found in our society. But this must be only the beginning. New pipelines need to be developed with HBCUs and HIs — so that future optometry students, vision science students, and faculty members will emerge from these schools and colleges. There must be substantive, institutional, and permanent changes for Berkeley Optometry to become and remain a leader for the world to see and aspirate. Diversity, Equity, Inclusion, and Belonging are not just buzzwords or a convenient euphemism of “political correctness” but he as much of a symbol of UC Berkeley and Optometry as Sather Gate, Sproul Plaza, and the Campanile.

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2010
5 | Tiffany Chan, OD '10, (L) and Ellie King, OD '10 (R), hiked Lassen in 80 degree weather with snow still on the ground. Tiffany is the Chief of Lens Vision at CPNC and also practices at Chan Family Optometry in Grass Valley, CA, the practice founded by her parents Lisa Moon, OD '76 (retired) and Jerry Chan, OD '76. Ellie joined the Kaiser team a few years ago and has become involved in IFTPPE ESC Latz Union leadership, along with the Alumni Board.

2011
Sheryl Guillory, OD '11, “I just passed my exam for the American Board of Optometry! I’m now Board certified!”

2013
Anne Tasaki, OD '13, married Paul Taylor in a private ceremony in Petaluma, California on October 5, 2013. She is Chair of the Admissions Committee, a faculty co-chair of Berkeley Optometry’s CE Committee, and she teaches in the Pediatrics Clinic.

Jackie Theis, OD '13, Residency '15, “2020 was a year of change! It was humbly awarded the COA Young Optometrist of the year award in February. Then, after 5 years working in neuro-optometry at Northern California Kaiser Permanente, I relocated in March of 2020 to Richmond, VA to cold-start a private practice...during a global pandemic. Virginia Neuro-Optometry is a tertiary care private practice that is located part of a multidisciplinary brain injury clinic; the Concussion Care Centre of Virginia. We offer brain-injury specialization in physical medicine and rehabilitation, physical therapy, neuro-ophthalmology and of course, neuro-optometry! But most importantly, I adopted a second stray dog named Tucker into the “pack” bringing me nothing but joy and gratitude.”

2014
Cory Hakanen, OD '14, has joined Plenty/Pentney Therapeutics as a Product Manager. The startup, founded in August 2020, is a joint venture between Vertly (an Alphabet subsidiary) and Santen (the leading Japanese ophthalmics company), focuses on high-tech solutions in eye care to support doctors and generate superior patient outcomes.

6 | Sarah Singh, OD '14, Residency '17, PhD '19, (nee Kochal) and Arjun Singh on 3-2-2020. They eloped on the UC Berkeley campus where they fell in love 13 years ago as undergraduate students. Sarah joined the Berkeley Optometry faculty after completing her PhD in Vision Science in 2019, and Arjun works in tech.

2016

8 | Britney Kitamura-Wong, OD '16, joined the UCSF Department of Ophthalmology early in the year, after practicing for several years at Lamonida Optometry in Lafayette, CA. She is the incoming president-elect of the Alameda Contra Costa Counties Optometric Society. Britney was the Gold Retinoscope winner in her fourth year.

2017
8 | Sloan Rajadhyaksha, OD '17, married Dr. Hunter Morgan (OCOP) in New York on June 6th, 2017. The couple met at the AOA meeting during their 4th Year and reconvened during Residency in NYC. They have recently relocated to San Diego.

9 | Ryan Ngo, OD '17, after several years in New York City, Ryan Ngo has returned to San Francisco! He moved to NYC for a Residency year at SUNY and stayed. He and partner Thomas Pence look forward to setting down roots on the West Coast and living closer to Ryan’s family.

2019
Jackie Chan, OD '19, completed her Residency at the VA Central California Healthcare System in Fresno, CA, and joined San Ramon Optometric Group in 2020. She loves the patients and working with owner Fletcher Thames, OD '81.

Seija Roggeveen, OD '19, married Matthew de Gooijer on August 8, 2020 in Calgary. The couple then became “snowbirds” and packed their bags for Yarmouth, Nova Scotia, Canada where Seija currently practices primary care optometry.

2021
Jackie Nguyen, OD '21, started her pediatric residency at Vanderbilt. Her new colleagues include Berkeley alumnae Dora Mathe, OD '84, and her mentor Stephanie Tian, OD '16, Residency '7.

10 | Phoebe Chen, OD '21, classmates Phoebe Chen, Marlon Mendoza, Vanessa Huang, and Johnny Cao-Nguyen celebrated their graduation with a trip to Utah! It rocks!

11 | Mahsa Masoudi, OD '21, celebrated her graduation with a trip to Abuja before starting her Residency at Omu Rra Eye Services in Atlanta, GA.

Jordan Dula, OD '21, married Grant, her boyfriend of seven years, just three weeks after graduating. The newlyweds are moving to Orange County and starting their careers.
Herbert & Nicole Wertheim Family Foundation Gift

$100 Million Investment

$75 Million + $25 Million

Amount already committed. To be raised over the next 10 years.

This campaign, a collaboration between UC Berkeley, the School of Optometry, the Vision Science Program, and the Dr. Herbert & Nicole Wertheim Family Foundation, will ensure access for the best and brightest students, build the specialized expertise of the doctors of today, revolutionize curriculum and training for the doctors of tomorrow, expand the profession’s reach to broader populations, dramatically increase training opportunities through residency, and strengthen our vision research initiatives. In doing so, we will enable and sustain optometry’s pioneering spirit and propel the profession into the future.

Areas of Impact

**Funding the Future of Optometry**
Elevating optometry as a key component of primary health care. The investment in Optometry and Vision Science — which includes new facilities, scholarships and endowed fellowships for students — addresses an imperative to train the next generation of optometrists to serve as leaders in the spectrum of primary health care.

**Networks for the Future**
Expanded training, research, and patient care impact through academic networks and collaborations. This investment in collaborative networks will ensure expansion and integration of Berkeley Optometry and Vision Science — including residency training throughout the UC system and beyond.

**Funding the Future of Vision Research**
This investment will ensure that Berkeley Vision Science maintains its position as a world leading center of excellence in basic and translational vision research. Funding will include endowed support for PhDs, postdoctoral fellows, faculty and staff scientists, the Herbert Wertheim Chancellor’s Chair in Neuro-Optometry, and the Vision Science Institute, a new home for vision science at Berkeley.

**Children’s Vision**
Dedicated Children’s Vision and Pediatric Care Initiatives. This investment in clinical training and research leverages the knowledge and networks at Berkeley to deliver primary eye care, vision health and correction to both domestic and global communities. The initiative includes the Nicole Wertheim Chancellor’s Chair in Pediatric Optometry.
Invest In Our Vision

Dr. Manoj Kulkarni,
Postdoctoral Researcher
Puthussery Lab

The path to outstanding patient care and vision science research begins in our classrooms, labs, and clinics. Learn more and make your gift online.

optometry.berkeley.edu/give