

ILLINOIS EYE-BANK

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Tissue Distribution Coordinator ensures access to the right tissue, right away



Holly DeMasi

Eye banking isn't often regarded as a customer service field. Eye banks work mainly behind the scenes to recover, evaluate and distribute eye tissue for transplant, research and training. However, through its Corporate Tissue Distribution Coordinator, Midwest Eye-Banks has made customer service a top priority.

"Our customers are the surgeons and researchers who use corneal tissue we provide," explains Holly DeMasi, whose appointment as Tissue Distribution Coordinator is effective April 1st. "Our

relationship with each one of these individuals is critical. We'll do whatever it takes to meet their needs and exceed their expectations."

Midwest's Tissue Distribution Coordinator works with surgeons to match available eye tissue with each specific request, and see that it is shipped promptly and carefully. Because tissue distribution is centralized, surgeons have the opportunity to review a larger selection of corneal tissue, and a wider array of shipping options.

"We can ship anywhere, quickly," Holly adds. "We have expedited corneas to Taiwan and Egypt, so I'm confident we can deliver for any surgeon - whether local, national or international."

Having a single point of contact for eye tissue distribution is also helpful in establishing an effective working relationship. "I can get to know our surgeons and their individual preferences," says Holly, "and that means I'll have a sense of what they need from the moment they call."

Centralized tissue distribution allows Midwest Eye-Banks to greatly expand its service area and the number of surgeons and researchers it serves. It also makes better use of donated eye tissue by optimizing

tissue placement. Midwest will actively seek new surgical and research partnerships in order to maximize the potential of donated eye tissue and minimize waste.

Holly is looking forward to working with Midwest's customers, and to establishing relationships with new surgeons and researchers. "If there's a surgeon out there looking for a cornea, we can meet that need."

Holly replaces Melissa Haak, who is leaving her position as Distribution Coordinator. ■

For eye tissue requests anywhere in the U.S., contact Midwest Eye-Banks' Tissue Distribution Coordinator toll-free at (800) 247-7250.

Local or international requests can also be directed to Midwest's Tissue Distribution Hotline, (312) 706-6777 in Illinois, or (734) 780-2101 in Michigan, or via E-mail at hotline@midwesteyebanks.org.

INSIDE THIS ISSUE :

- 100th Anniversary
- Association activity
- Good tissue practice



Midwest Eye-Banks celebrates 100th Anniversary of corneal transplantation



Dr. Zirm



The year is 1905. Motorized carriages and mass production are in their infancy. Electricity and telephone service have not yet reached across the United States. World wars have yet to be fought. Few of us can truly imagine life in these horse-and-buggy days - which makes it that much harder to believe that 1905 also marked the first successful corneal transplant operation.

Today's eye and tissue banks rely heavily on technology for day-to-day functions. Computerized databases and communications, sophisticated laboratory equipment, advanced eye tissue preservation methods and modern transit comprise a system by which eye banks, like Midwest, can help to restore sight to thousands each year.

But in 1905, there were no such amenities - hence the success of the first corneal transplant was truly a miracle.

Dr. Eduard Konrad Zirm, an ophthalmologist practicing in Austria during the early 1900s, was presented with a unique opportunity. One of his patients was a young boy whose damaged eye, although it could not be saved, had a perfectly intact cornea. Another of his

patients was a workman whose corneas were damaged in an accident.

Dr. Zirm removed the boy's eye and carefully excised the cornea, then implanted it in place of the workman's damaged cornea. The result was a groundbreaking achievement: within a few hours, the man's vision returned, and he retained his eyesight for the rest of his life.

For nearly a century prior to Dr. Zirm's success, eye surgeons around the world had attempted various methods of corneal transplantation. None of the attempts resulted in restored vision.

In 1925, when Helen Keller persuaded Lions Clubs around the world to lead the fight against blindness, the idea behind eye banking was born.

Prominent ophthalmologists joined with community service groups, organizing efforts that streamlined eye tissue recovery, transportation, evaluation and distribution - thereby creating the foundation of eye banking as we know it today. Lions continue to play an active role in eye banking through public awareness efforts, volunteerism and financial support.

One hundred years after the first suc-

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cessful corneal transplant, the Midwest Eye-Banks pay tribute to Dr. Zirm, to those who have built upon his achievement over the past century and to those who will continue to advance the mission of eye banking in the future. ■



Midwest sets example through eye bank association activity

Nearly all U.S. eye banks are accredited by the Eye Bank Association of America (EBAA). EBAA inspects, evaluates, guides and supports its member eye banks.

EBAA oversight and support of its members is participatory, meaning eye banks have the opportunity to play an active role in the organization. Midwest Eye-Banks' unparalleled participation in EBAA is one of its most significant strengths.

Charles Pivoney, Midwest's Vice President, Illinois Operations, is heavily involved in EBAA activities, serving as EBAA's North Central Region President through June of this year.

"I chair the Certification Board and the Continuing Education Committee," Pivoney explains. "I also serve on the Board of Directors, the Medical Advisory Board, the International Relations Committee and the Constitution and Bylaws Committee.

"It's a lot of work, and each committee has a lot of ground to cover... but it's tremendously valuable and personally rewarding that we have the opportunity to participate in this way. My involvement in EBAA keeps my finger on the pulse of the industry. In turn, I think EBAA, as well as the other member eye banks, can benefit from the expertise Midwest brings to the table."

Pivoney isn't the only Midwest Eye-Banks employee holding an active role. In fact, he is one of seven staff members participating actively in EBAA boards, committees and task forces.

"Three of our staff, and one of our medical directors, serve on the EBAA

Accreditation Board," notes Brad Tennant, Vice President, Clinical Operations. "I co-chair the board, and our laboratory managers from the Michigan and Watson Gailey Eye-Banks are board members along with Dr. Joel Sugar, our medical director in Chicago.

"Two of our medical directors serve on EBAA's Medical Advisory Board, which creates an important link between board activities and our operations."

EBAA credentials eye bank technicians through its Certified Eye Bank Technician (CEBT) program. While each member eye bank is required by EBAA to employ at least one CEBT, Midwest employs 19, with new staff expected to attain certification during the next year.

"We expect all of our technicians to seek and attain CEBT status within their first year of employment," explains Tennant. "We take pride in our staff and the service they provide."

While clinical operations are certainly at the forefront of EBAA activities, Midwest's involvement also extends to finance and technology. Kevin Ross, Midwest's Vice President, Information Systems, chairs the EBAA Information Systems Committee. James Muzzin, Vice President, Finance and Human Resources, serves on the EBAA Finance Committee.

"It's a privilege to serve the industry like this," says Muzzin. "If members don't take part, it's like failing to vote in an election. We use our voice to bring about positive change within EBAA, rather than to complain about problems after the fact." ■



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Good Tissue Practices debut at nation's eye banks

The Food and Drug Administration's (FDA) long-awaited regulations governing the provision of human tissue are finally ready for prime-time.

Eye and tissue bank compliance with Good Tissue Practices, or GTP, becomes mandatory on May 25th. Although eye banks are not strangers to FDA oversight, many are working overtime to understand and meet the complex requirements set forth in the new regulations.

"Midwest Eye-Banks has always been committed to preventing the introduction, transmission and spread of communicable diseases," notes Brad Tennant, Midwest's Vice President, Clinical Operations. "That's also the intent of Good Tissue Practices." Tennant explained that Midwest's commitment to quality helped align the organization with the provisions of the GTP final rule. "As a result, our surgeons should notice no change in our service when the rule goes into effect."

Several years ago, when FDA first endeavored to standardize practices related to human tissue, Midwest took a proactive stance by providing substantial input directly to FDA and through the Eye Bank Association of America (EBAA). It was one of a handful of eye banks to take an active role in the development and refinement of GTP. Many of the recommendations and examples regarding ocular tissue, as provided by the EBAA, were reflected in the final rule. Since FDA's announcement of GTP implementation, Midwest Eye-Banks has been working on validation and verification of all processes, ranging from donor eligibility screening to tissue distribution. Good Tissue Practices aren't the only FDA



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regulations in which Midwest Eye-Banks has played a leadership role. During 2004, FDA published a final rule establishing donor eligibility criteria for donors of human cells, tissues, and cellular and tissue-based products (HCT/Ps) to help prevent the transmission of communicable disease through transplantation.

"We recognize that being leaders in our field means we have a responsibility to help guide and shape our regulatory environment," explains Kevin Ross, Midwest's Vice President, Information Systems. "We have an even greater responsibility to protect public health. For example, when FDA approved NAT (Nucleic acid Amplification Technology) testing

for use on cadaveric specimens, we were among the first eye banks to include it in determination of donor eligibility. It was voluntary, and we adopted it to increase tissue safety, not because of any regulation. When we're presented with an opportunity to improve in that way, we act on it, and hope our actions can generate a positive effect within our industry." ■

More information about Good Tissue Practices, FDA's Donor Eligibility Rule and other regulations governing eye banks can be found online at www.fda.gov.