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The eye is an organ of superlatives: it has the highest blood flow and densest innervation of all organs and is the only part of the central nervous system visible noninvasively. In my opinion, the eye is also the most aesthetic organ of the body, and age only improves this quality. The eye of an 80-year-old is just as beautiful as that of an 18-year-old and, because of age-related pathologies, even more interesting.

My attraction to the field of glaucoma was happenstance. As a third-year medical student, I was attending a pediatrics course but wandered into the first international conference on nonpenetrating glaucoma surgery in the adjacent auditorium. The enthusiasm of the organizers and participants enthralled me and introduced me to glaucoma. Had the same people been discussing strabismology, I might have ended up in that field, but glaucoma and I are a good fit. The unknown has always intrigued me, and I place a high value on impact. As a clinician scientist, how many people may benefit from my efforts?

Since early in my career, I have had the good fortune to work with innovators in surgery such as Tarek Shaarawy, MD, and André Mermoud, MD, who inculcated in me the idea that our current surgical techniques need improvement. Through them, I have become active in designing and conducting trials evaluating several new devices and implants.

Ultimately, it was my fellowship at the Hamilton Glaucoma Center of the University of California, San Diego, that revealed to me the vast research opportunities in glaucoma. I saw firsthand how engineers, biologists, mathematicians, geneticists, and other scientists collaborated with ophthalmologists to advance our fundamental understanding of glaucoma and translate their findings into clinical benefit for patients. From my mentor, Robert N. Weinreb, MD, I learned the meaning of leading by example, the ethics of hard work, and the value of foresight and long-term thinking.

My research focuses on developing practical tools for 24-hour IOP monitoring, including the evaluation of a new contact lens sensor for this purpose. My colleagues and I are now trying to better understand 24-hour aqueous humor dynamics and how best to

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translate the wealth of new information derived from new IOP-monitoring technologies into patient-level decisions. I am optimistic that we will soon be able to replace the use of snapshot IOP data with round-the-clock information and have an impact on patients' lives.

Whenever I can, I find time for my passions outside glaucoma, which include reading, classical music, and opera. I am not the sporting type. To quote Robert Hutchins, "Whenever I feel like exercise, I lie down until the feeling passes." In the winter, however, I like to go skiing, especially because in Geneva, mountains are easily accessible.

My advice to young colleagues interested in a career in research is to make sure they have the passion, to be or become good organizers, and to choose the right mentors. Academic life is rewarding, although not always in a financial sense. It provides the opportunity to meet brilliant colleagues and form friendships globally, gives constant intellectual stimulation, and allows access to the latest gadgets in a technology-oriented specialty. These intangibles are priceless. ■

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