

History of AAPOS

The history of AAPOS begins with the history of the development of specialty medicine and pediatrics in particular.

Pediatrics evolved from general medicine somewhat for social reasons that still exist today. At the end of the 18th century a movement that considered children to be a special national treasure swept across Europe. This movement marked the inception of recognizing the need for special care of children. Within a few years, hospitals dedicated to the care of children thrived in every nation in Europe. Yet, in the United States, pediatrics met immediate competition from general practice physicians and was treated with disdain. The first few children's hospitals in the United States were Philadelphia in 1855, Boston in 1869 and Detroit in 1886. These were started as very small units of 20 beds or fewer.

Ophthalmology and otorhinolaryngology (EENT) was emerging from general surgery in the 19th century due to the special skills needed that were separate from general surgery. In addition, there was in even these early years a further refinement with the beginning of a separation of ophthalmology from ENT. Those with a special interest in ophthalmology saw the need to come together to share ideas and learn. The first and oldest specialty society was the German Ophthalmology Society inaugurated in 1857. In the United States, in 1864, a group of 8 physicians, 4 general surgeons who dabbled in ophthalmology and 4 much younger EENT practitioners who had all trained in Europe where ophthalmology was developing as a separate specialty, met to discuss the formation of a journal, but that was abandoned in favor of forming a society. They formed the American Ophthalmological Society which was founded in 1864. It was and is the second oldest specialty society in the world. One of the charter members of AAPOS was Dr. Philip Knapp. His grandfather had come from Germany and was instrumental in the formation of the American Ophthalmological Society. This was an elite society and there was the need for an organization to offer all qualified practitioners the opportunity to share ideas and receive post-graduate education. This organization was formed in 1896 and became the American Academy of Ophthalmology and Otolaryngology.

Through the end of World War II, there was no specialty evolution in ophthalmology. In order for further specialization to occur, there needs to a recognized need, someone or individuals making a commitment to practice that specialty to develop the new knowledge and treatment base and then the development and education of a critical mass of practitioners dedicated to this new specialty.

Dr. Frank D. Costenbader trained as an EENT specialist at the Episcopal Eye, Ear and Throat Hospital in Washington, DC in 1930-31. It was a one year residency with 6 months spent in each of ophthalmology and ENT. After completing his residency, he and his co-resident decided to go into practice together. It was during the depression and money was very limited. Dr. Costenbader purchased the eye equipment and Dr. Victor

equipment depending in the needs of the patients they were seeing. Within one year, Dr. Costenbader had decided only to do ophthalmology and Dr. Alfaro only wanted to do ENT. Dr. Alfaro's father was the ambassador from Panama to the United States and eventually became President of Panama. During their residency in the depression, Dr. Alfaro and Dr. Costenbader attended many embassy receptions with their primary goal of dinner and on some occasions even some food to take home.

Dr. Costenbader's practice was a general ophthalmology practice but he developed a special interest in strabismus and the eye problems of children. He was on the voluntary attending staff of the Children's Hospital of the District of Columbia now the Children's National Medical Center and also at the Episcopal EENT Hospital. He was a volunteer attending the clinic at Children's Hospital on Tuesday afternoons and also a ½ day a week at Episcopal EENT Hospital. He was very interested in teaching, very good at it and very dedicated to it. He changed the clinic at Children's Hospital from a service provider to a teaching one that also provided clinical care. He eventually arranged for the residents from Episcopal EENT to rotate to the Children's Hospital Clinic for training.

In 1943, Dr. Costenbader limited his practice to children and became the first pediatric ophthalmologist. He loved working with children and when asked why he decided to limit his practice, he is reported to have said "Kids are just more fun." He also was bothered by the fact that those ophthalmologists interested in strabismus were mostly interested in adults with strabismus or older children. Surgery was directed at cosmetic straightening of the eyes and not establishing binocular function. To do this he felt that children had to be treated much earlier before most of their development had occurred. This would require new examination skills and a new attitude of working with children with eye problems before they got to an age where "they could cooperate." This desire to examine and treat children and not wait till later in life was the new specialty that he started.

To this point there were no other sub-specialties in ophthalmology.

In addition to setting up a new office in a 22nd street brownstone townhouse, his waiting room was arranged for children. For many many years, children would love to come to Dr. Costenbader's living room. He also changed how surgery was performed at Children's Hospital to be better for the child and family. He started having parents in the induction room when the child was put to sleep; he eliminated bandaging the eyes of strabismus patients after surgery and shortened the time in the hospital from two nights to same day surgery.

Dr. Costenbader took his first trainee, Marshall M. Parks, in 1947. Dr. Parks joined Dr. Costenbader in practice in 1948. Dr. Daniel Albert was the second preceptor and when Dr. Parks left Dr. Costenbader to open his own office, Dr. Albert joined Dr. Costenbader in practice. This was 1952. Within a couple of years, more preceptors came to Washington to train. Some came for a year but some only for 3 months and did the rest of their training at other locations that were specializing in strabismus. In the office on

Street, Dr. Costenbader's examination room was on the first floor and the associates and trainees used offices on the "lower level" or basement as they all called it.

A fellowship program started in Washington, DC with the first pediatric ophthalmology fellow, Leonard Apt in 1959. In 1964, Children's Hospital received a Senior Medical Training Grant from the Public Health Service for post residency training. Drs. David Friendly, John O'Neill, and Donald Texada in 1964 – 1965, were the first fellows that received financial support and the first fellows of the Children's Hospital of DC. Prior to that time, the fellows were really preceptors of Drs. Costenbader and Parks. After 16 fellows had completed either 6 or 12 months of training in the Washington, DC program there was interest in starting an organization dedicated to pediatric ophthalmology. How wonderful it would be if the alumni could come together annually to enjoy professional aspects of the specialty of pediatric ophthalmology and social time together. On October 31, 1967, at the invitation of Dr. Marshall Parks a breakfast meeting was held in the Palmer House in Chicago at the AAOO (Academy) meeting. Those in attendance were Marshall Parks, Frank Costenbader, Dan Albert, David Friendly, Richard Simmons, Edward Raab, John O'Neill, Malcolm Ing, Earl Stern, and Al Smith. Dr. David Hiles was unable to attend. Dr. Friendly acted as recording secretary.

Organization of a pediatric ophthalmology society and a periodic pediatric ophthalmology meeting were discussed. Based on a European or International model, a closed and open meeting format was proposed by Dr. Parks. The International Congress of Ophthalmology Meeting had occurred in Munich, Germany in 1966. This was open to all. Dr. Arthur Jampolsky and Dr. Cuppers had organized a very extensive strabismus meeting in Geissen. Jampolsky, Cuppers, Parks, Costenbader and a few others met in Gruenberg to discuss forming an International Strabismus Association which would have meetings associated with the International Congress Meetings. This was the formation of the ISA.

With this format in mind, it was agreed by the group that met at the Palmer House to start an organization that would be made up of the graduates of the Washington, DC Fellowship Program. This organization would put on an annual pediatric ophthalmology meeting open to all. A member of the Alumni group would be selected to host the national meeting (pick the site, organize the program, invite the speakers, make financial arrangements, etc.). This would be a 3 day meeting and would move to different geographical locations each year decided by the Alumni group and whoever was chosen or volunteered to organize the open meeting. In addition to the open meeting, there would be a 2 day closed or private meeting for the members of the Washington Alumni Group. This alumni group took the name the Costenbader Society in honor of the father of pediatric ophthalmology and the individual responsible for much of the training of the graduates of the program at that time.

It was decided that the first national open meeting where the format of having an associated closed meeting to follow would be in 1969 in association with an open national meeting already scheduled and organized by Dr. Earl Stern, an early fellow of Costenbader and Parks, in San Francisco. Dr. Stern had organized the first real national

pediatric ophthalmology meeting in San Francisco in 1967. It was a huge success and the demand to repeat it caused Dr. Stern to plan the 1969 meeting. For the 1967 meeting, Dr. Stern had the University of California Medical Center Art Department create a logo. They drew the four stacked figures of the children. Dr. Stern gave the logo to the Costenbader Society and the Costenbader Society gave the logo to AAPOS when it formed.

The next meetings were Washington, DC in 1970, Miami in 1971 and Hawaii in 1972. While the open meeting was excellent and supported by the majority of pediatric ophthalmologists, the closed meetings of the Costenbader Society that usually followed the open meetings caused some friction, particularly by those individuals that had spend 3 months in the Washington Program. Membership in the Costenbader Society had been established as requiring a minimum of 6 months of training in Washington. In addition, the fact that the membership of the Costenbader Society was in charge of the open meeting with one of its members always the organizer, there was a growing sentiment among pediatric ophthalmologists that had trained elsewhere for broader participation.

The Costenbader Society was very sensitive to these feelings and devoted considerable time to a discussion of the problem. At the Sea Island Meeting in 1973, it was resolved to find a solution to the problem. The answer was to create the American Association for Pediatric Ophthalmology. This would be the national organization that would put on the national meeting. The Costenbader Society would still have its own meetings as other training program alumni might elect to do, but the Costenbader Society would be eliminated as an organization from the large meeting.

Several meetings were held in preparation for forming this new organization. Marshall Parks was the lead person along with David Friendly and other members of the Costenbader Society. However, if this was to be a national organization, leaders in the field not members of the Costenbader Society needed to be involved and they were. The original name AAPO did not have strabismus as part. Dr. Arthur Jampolsky was the kingpin and leader in the strabismus field. He was the key to this new organization becoming a one-body organization representing both pediatrics and strabismus. He put his considerable strength and leadership into this effort. He attended all of the organizing committee meetings needed to get AAPO underway.

The formation of AAPO was legally accomplished in 1974 at the Los Angeles Meeting, the last organized by a member of the Costenbader Society in that role. The first AAPO meeting was in 1975 at Lake Tahoe. The Lake Tahoe meeting was originally planned by Dr. Donald Mousel. He stayed on the committee, but overall responsibility was handed to the new AAPO. In 1976, Dr. Jampolsky made the motion to change the name from AAPO to AAPOS (American Association for Pediatric Ophthalmology and Strabismus).

Dr. Marshall Parks was the first president of AAPO and Dr. David Friendly was the first Secretary-Treasurer.

The CECF, Children's Eye Care Foundation, was founded in 1970 in Washington, DC. The founding members were Dr. Costenbader, Parks, Albert, Friendly and O'Neill. The initial purpose was to support training of pediatric ophthalmologists, initially in the Washington, DC program and then elsewhere in the country. The name was changed to the National Children's Eye Care Foundation a couple of years after its founding. The Foundation is now known as the Children's Eye Foundation and is the Foundation of the American Association for Pediatric Ophthalmology and Strabismus.