Vision Access

A Magazine by, for and about
People with Low Vision

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Vision Access welcomes submissions from people with low vision, from
professionals such as ophthalmologists, optometrists, low vision specialists, and
everyone with something substantive to contribute to the ongoing discussion of
low vision and all of its ramifications.

Submissions are best made as attachments to email or on a 3.5" disk in a format compatible
with Microsoft Word. Submissions may also be made in clear typescript. VISION ACCESS cannot
assume responsibility for lost manuscripts. Deadlines for submissions are March 1, June 1,
September 1, and December 1. Submissions may be mailed to Joyce Kleiber, Editor, 6 Hillside Rd.,
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From the Editor

Welcome to the Autumn, 2010 issue of Vision Access. In this issue you will meet CCLVI’s new president, Richard Rueda and some of our officers and board members. You will find a survey at the end of this magazine. Our Large Print Committee asks that you take time to complete and return this survey so your voice may be heard. You will read about the role of ACB and ordinary citizens in achieving the passage of important legislation for people with low vision. You will read some highlights from our convention, and hear about the recipients of our Dr. Sam Genensky Video Magnifier Memorial Award. You will be able to mark your calendars for upcoming teleconferences “Let’s Talk Low Vision with Dr. Bill.”

We now have a Publications Committee. I look forward to working with Bernice Kandarian, Matt Kickbush, Sarah Peterson, Valerie Ries-Lerman and Mike Vogl all of whom believe in the mission of Vision Access—to inspire, inform, support and encourage people who have low vision.

Enjoy all the features of our magazine.

Thanks to all who have contributed ideas and articles to this issue of Vision Access. JMK, 9/15/10

Organization News

President’s Message
Thriving with CCLVI
By Richard Rueda

It gives me great pleasure to serve as President of the Council of Citizens with Low Vision International. Since 2007 I have served as First Vice President of this excellent organization and in 2010 I am both thrilled and humbled to step into a deeper leadership role. As I begin to listen, learn and take proactive steps to bring CCLVI into the limelight of today’s issues facing persons with low vision, I also want us each to reflect on the many great leaders that have steered CCLVI over the past 30 years.

As we move the mission and vision of this organization forward into uncharted avenues, let us pause and reflect on the great many contributions of Dr. Sam Genensky, our founder, the many leaders that have since led CCLVI up to the recent term of Mr. John Horst, our Immediate Past President. These folks gave selflessly of their time, wisdom and charity to acknowledge, advocate and honor the critical needs of the low vision movement. Their guidance gives us a charted historical overview of what accomplishments CCLVI is to be proud of as well as the challenge to those of us today who must continue to recognize what many advocacy avenues need to be addressed.

CCLVI is prepared to advocate for making large print, currency, smart phones, high contrast markings and a host of other signage accessible for people with low vision.

As I settle into the role of President, I want to focus on three
main areas in the coming year to best position CCLVI to be a stable and reliable driving force for decades to come. First among them is the need to best market and increase CCLVI’s visibility from local communities, to the state, national as well on the international stage. The product known as CCLVI is one that can boast of many facets—the monthly “Let’s Talk Low Vision” calls with Dr. Bill Takeshita, Vision Access, CCLVI’s award winning publication, our thriving scholarship programs, the toll free hotline, support groups, exceptional convention presenters and more. There are dozens of reasons to be proud of CCLVI. It is my plan to develop processes where CCLVI can be present and exhibit at state conventions and at national and local vision health fairs. With the update to our membership forms, brochures and other documents, Product CCLVI is chomping at the bit to be placed in the limelight and thrive.

Hand in hand with marketing and developing best practices for CCLVI is our second area of focus—identifying and reaching out to perspective new members. Presently there are approximately 348 known members in CCLVI. The baby boomer population is aging so there are more people with aging eyes who may be unaware of low vision services and the need for advocacy. This is where CCLVI can have a role in providing information and support so that people can maintain quality of life despite vision loss. We welcome this senior population to join, benefit from and contribute to CCLVI.

My third area of focus is CCLVI’s need for a stable financial footing. This is vital for us to reach our goals. In the next year, along with the development of a robust and creative membership committee, a logical marketing campaign and a proactive fundraising group, I will be seeking consultation and feedback from members both old and new.

Putting CCLVI deep into the hands of its members is a good organizational practice. On Saturday, September 25th from 11:00 AM to 12:30 PM, Pacific Daylight Time, I will host the second in a series in a year long campaign of open membership forum teleconferences. This is an opportunity for members, supporters and those interested in learning the soul of CCLVI to participate in meaningful dialog in matters facing people with low vision from advocacy to organization news. To participate, please call 218.339.2699, and dial 764516 to attend this teleconference. I look forward to hearing from many of you.

Additionally, on Monday, September 20th from 5:30 PM Pacific Daylight Time to 7:00 PM Pacific Daylight Time, the CCLVI board of directors meeting will occur on this same teleconference platform. Members of CCLVI are welcome to attend and comment during our public comment portion of our meeting.

To make CCLVI the great affiliate and organization that it deserves to be, I invite members and supporters old and new to reach out to me and the board to lend not only your thoughts but your wisdom and time to serve on one of our many committees. I can be contacted via email at richardrueda@sbcglobal.net and by telephone at 510-825-4106.
CCLVI Honors Dr. Bill Takeshita for Outstanding Service

The Council of Citizens with Low Vision International presented its Outstanding Service Award to Dr. Bill Takeshita. The plaque with gold lettering on black plate glass proclaimed that Dr. Bill’s “exemplary support of the Council of Citizens with Low Vision International (CCLVI) includes: hosting a monthly teleconference call for members of the low vision community on various aspects of living with low vision and making these valuable calls readily available for download as podcasts worldwide; spearheading the creation of an annual video magnifier scholarship for persons with low vision to memorialize our founding President and inventor of the CCTV video magnifier, Dr. Samuel Genensky, by bringing together specialty vendors to donate both portable and stationary video magnifiers to CCLVI's scholarship fund; and generally making his expertise available for the asking to individuals and groups in the low vision community. Presented this Thirteenth Day of July, 2010, in the City of Phoenix, Arizona.”

Large Print Survey
By Tom Lealos

About five years ago I wrote a letter-to-the-editor in “The Braille Forum” concerning my frustration with large print. Shortly thereafter I was introduced to CCLVI and asked to join. You have all heard of the saying “Lead, follow, or get the he_ _ out of the way.” Well, me being me, I now find myself chairing CCLVI’s Large Print Committee. Little did I know that there was more, a lot more, to the large print discussion than just font size.

For about a year now, our committee has been reviewing numerous documents and gathering supportive information about the many aspects of the readability of large print documents. The end product of this tedious endeavor will be a white paper entitled “Recommendations for Best Practices Guidelines for Large Print Documents Used by the Low Vision Community.” Upon Board approval and acceptance by the CCLVI membership, these recommendations will be our voice within the low vision community as well as to publishers and printing houses around the world.

We are asking for your help to assist us in this research. The Large Print Survey that some of you participated in at our recent convention made it clear to us that we needed further clarification and a larger sample to obtain more conclusive results. We would like to hear from all of our members, so we have included a survey at the end of the large print edition of this issue of Vision Access. Please take the time to read the several examples and then answer the questionnaire that follows. If you participated in the earlier survey you are welcome to review the examples again, answer the revised questionnaire, and then indicate which response you would
like us to consider. A pre-addressed, “Free Matter” return envelope is included for your convenience.

For those of you who receive Vision Access in other formats, please call the CCLVI office at 1(800)733-2258 to request a survey and one will be mailed to you.

Large print documents are both unique and proprietary to those of us who live in what I call “visual limbo land.” Thank you in advance for helping us speak out on this very important issue.

CCLVI and Vendors Partner to Award Video Magnifiers
By Dr. Catherine Schmidt Whitaker

The Council of Citizens with Low Vision International (CCLVI), Enhanced Vision, Eye Tech Low Vision, HumanWare and MagniSight are proud to announce the first annual Dr. Samuel Genensky Video Magnifier Memorial Award. The partnership recognizes and celebrates Dr. Genensky’s achievements and thirst for knowledge. A total of 6 video magnifiers have been awarded to individuals who have low vision with demonstrated need from a competitive pool of applicants.

Enhanced Vision made two video magnifier donations to benefit students in May. Ms. Karen Leger of Eureka, California received Enhanced Vision’s Merlin Video Magnifier. A nontraditional college student, Karen is excited to receive the magnifier as it will enable her to complete college assignments, read bills and other personal materials. The magnifier will support her over the years as she moves from a student role into her career as an orientation teacher for children with low vision.

Mr. John Wolfe’s, Eye Tech Low Vision, donation of an Optelec MultiView video magnifier was awarded to Ms. Suzan Ahmad of Clifton, New Jersey in May. Suzan has an eye condition called Granular Dystrophy that forms deposits on the cornea that reduces Suzan’s usable eyesight. The video magnifier will enable Suzan to read print on documents and the classroom board. As a graduating high school senior, Suzan looks forward to beginning studies in the sciences as a freshmen at Rutgers University in the fall. Inspired by her eye doctors and scientists, Suzan’s career goal is to become an ophthalmologist. Suzan is also an active member of her community and tutors children.

HumanWare made two Versa video magnifier donations to benefit students in May. One Versa was awarded to Aiden Stott a ninth grader from Plymouth, Massachusetts. Aiden’s eyesight has decreased significantly over the past year and this impacts his functioning due to other disabilities. A small portable video magnifier will allow Aiden to carry and effectively operate the magnifier to read books and look at maps, which are his favorite hobbies.

MagniSight’s donation of a MagniSight video magnifier was awarded to William Johnson of Sudbury, Massachusetts in May.
William is an active 9 year old in third grade who loves to read. While he has access to a video magnifier at school, he has been limited to handheld magnifiers at home. The video magnifier will enable Will to see his homework assignments by enlarging the print and allowing him to see what he is writing on the paper. Additionally, Will says that the video magnifier will allow him to “read anything I want” and enhance his independence.

A video magnifier is a machine that enlarges print material on a monitor to a font size from 2 to 10 times larger. The magnifier also allows the user to change the background and text color to maximize color contrast and eyesight usability. A video magnifier is often referred to as a CCTV.

Dr. Samuel M. Genensky, inventor of the first closed-circuit TV reading device for individuals with low vision, founder of the Center for the Partially Sighted in Los Angeles, and the founding president of CCLVI passed away on June 26, 2009. Dr. Genensky inspired and mentored many within the low vision community. For more information about the video magnifier award, visit [www.cclvi.org](http://www.cclvi.org) and click on “scholarship programs.”

**Mark Your Calendars for Let’s Talk Low Vision Teleconferences**

Here are the topics and dates for CCLVI’s Let’s Talk Low Vision teleconferences:
- October 19, “The Apple iPad, Richard Rueda”
- November 16, “Eccentric Viewing and Selecting a Low Vision Doctor,” Dr. Randy Jose
- December 21, “The Android Smartphone,” Joel Isaac

To join these conferences call 218-339-2699. Use ID#764516.

**Some Highlights from Our Convention**

By Joyce Kleiber

**Sessions about Print and Low Vision**

Mike Chiricuzio, Director, Arizona State University Center for Technology Management, Tempe, AZ, told us that in the past 20 years there have been more rapid changes regarding print due to technology and world expectations. Despite its limitations, desk top publishing took off because it is fast, cheaper, portable, and because it offers control. To answer the question “What works best?”, there may be 20 options, 20 people and 20 opinions.

Doing the Limbo at our dance

In today’s publishing world, book stores may have no inventory. Books may be printed on demand and the print used will be based on the reader’s preferences. Readers may be given an electronic/digital...
file so that they can customize the font or access the text through audio.

**Enjoying the buffet at our Mixer**

Lynn Noon, O.D., View Finder Low Vision Resource Centers, Mesa, AZ, asserted that “you can’t please everybody with the same thing.” People who are visually impaired want to modify their own font. When print is larger than threshold acuity, people can read faster. Extra space between lines is seen as an advantage by most readers. No crowding of letters, high contrast, and good lighting all affect readability.

In working with patients, Dr. Noon’s goal is to help her patients see everything they want to see.

**Coping with Vision Loss**

Dr. Bill Takeshita shared his very moving personal story of how he coped with gradual vision loss. He told how this loss affected him, his family and his work as an optometrist. We were inspired in knowing that he has found ways to have meaning in his life and to serve people who are coping with vision loss. Dr. Bill is the Director of Optometric Services at the Center for the Partially Sighted in Los Angeles. Dr. Bill asked “Can we make each day our masterpiece?” He learned that loss of vision doesn’t have to be bad, just different. He asserted “There is more that I can do than I can’t do—legally!” He noticed that anger limited what he could do, while positive attitude and outreach gave meaning to his life. As he revealed his disability to others, a burden was lifted. For Dr. Bill, becoming blind was a relief. While he was partially sighted he was always trying to see perfectly and he could never achieve the perfect vision he had. He underscored the importance of educating the general public and doctors about vision loss, and demystifying beliefs about blindness. Please refer to the profile of Dr. Takeshita in *Vision Access*, Volume 15, Number 3.

**Travel and Low Vision**

Barbara Milleville shared tips that helped her enjoy her recent trip to Holland and England. Barbara found that planning ahead, knowing what interests you and what your priorities are, safety, using mass transit, not planning too much, leaving room in your bags for souvenirs, and traveling off season to avoid long lines at attractions were important.

Jane Kardas told of using contacts in Japan to help guide her to sites she wanted to experience there. She also told of her travel experiences in Central Europe. Jane also enjoyed Ireland and England with her daughter. There she visited a pen pal.

Joel Isaac underscored the importance of being clear on what you want when you travel. Awareness is the key to being safe
when you travel. Joel spoke of traveling with his extended family to Paris, Amsterdam and Madrid. He chose to rent an apartment rather than staying in hotels. He said he likes to plan for flexibility. He finds suggestions at www.tripadvisor.com.

Project Insight Workshop

This workshop focused on taking care of the care giver. If we take time to care for ourselves, we can be better listeners and responders to people we try to help cope with vision loss. Participants at this workshop shared ways in which they nurture themselves and then an experience in mindfulness was offered.

Summary of Pre-Convention Board Meeting, July 10, 2010

Minutes of the last board meeting were accepted.

John Horst will be the delegate and Richard Rueda the alternate for CCLVI at the ACB convention. John will also be the delegate for the ACB nominating committee.

Joyce Kleiber reported about the meetings of the nominating committee.

The board discussed candidates running for offices and committees in ACB.

The board authorized door prizes for ACB--3 checks for $25. plus an issue of Vision Access.

Bernice Kandarian spoke about our Fred Scheigert scholarship recipients and their presence at our convention. Catherine Schmidt Whitaker, chairperson of our Scholarship Committee, will be presenting the recipients at ACB’s general session and at CCLVI’s mixer.

The board voted to approve Joyce Kleiber’s suggestion that CCLVI develop a handbook in which the duties of officer, board members and committee chairs are spelled out in detail. A committee will be established to proceed with this project.

Lisa Drzewucki described the aroma therapy basket which CCLVI is contributing to ACB’s auction.

The board discussed an appropriate location for a plaque honoring Pat Price, former president of CCLVI.

The board dealt with final preparations and assignments for our convention program.

Lisa Drzewucki formulated a question for ACB’s candidate’s forum. “As a member of CCLVI, I would like each of you to speak to low vision issues. Specifically, what do you see as being important and how would you seek to improve those issues?”

Bernice Kandarian gave a preliminary credentials report concerning CCLVI Chapters: CCCLV has 7 votes, DVCCCLV has 1 vote, FCCLV has 4 votes, MCLVI has 2 votes, NYSCCLV has 2 votes, and NCCLV has 3 votes. At the ACB convention CCLVI has 14 votes and 340 members.

Richard Rueda asked members to suggest agenda items for the post convention board meeting.

Lisa Drzewucki reported that we have 118 members on CCLVI’s Facebook page. Lisa plans to invite
members of Facebook who are not members of CCLVI to become members.

Joel Isaac reported on the CCLVI’s website. The board determined that criteria be set to determine items, including articles, podcasts and Vision Access, that are appropriate for CCLVI’s website.

Summary of Post Convention Board Meeting

CCLVI’s post convention board meeting was held on July 26, 2010 by conference call.

Kathy Casey’s minutes of the pre-convention board meeting were accepted as corrected. Mike Godino’s treasurer’s report was accepted. Richard Rueda asked Mike to provide more information at our next meeting about the Program Fund as well as a working budget.

Richard Rueda thanked everyone for supporting him as CCLVI’s new president. He identified his goals—increase membership, fund raising, increase visibility for CCLVI. Richard has initiated Open Forum Membership calls announced on CCLVI’s listserv and on CCLVI’s Facebook page. Richard will assist Minnesota in establishing a CCLVI Chapter.

Tom Lealos’s Large Print Committee report was accepted. Joyce Kleiber’s Publication Committee report was accepted.

Lisa Drzewucki reported on CCLVI’s Facebook presence.

Catherine Schmidt Whitaker plans to continue to chair our Scholarship Committee.

Ken Stewart reported that Paul Edwards, chair of ACB’s board of publication, will work to improve the cover of the Braille Forum as recommended in CCLVI’s resolution.

Joyce Kleiber reported on the planned CCLVI Operations Manual.

Bernice Kandarian reported on CCLVI’s 800 line. She noted that people call requesting information primarily about health and about scholarships. Our 800 number is currently funded by grants which Bernice obtained.

Richard Rueda said he is looking for someone to moderate CCLVI’s listserv.

Lisa Drzewucki will replace Joyce Kleiber on ACB’s Leadership list.

The Low Vision Book proposed by Dr. Bill Takeshita was referred to a committee consisting of Bernice Kandarian, Joyce Kleiber, and Richard Rueda. This committee will report to the board at the November board meeting.

Lisa Drzewucki will be the second signatory on checks for CCLVI.

Jim Jirak will explore the availability of a toll free number for conference calls.

Lindsey Hastings and Brian Petraits will assist Bernice Kandarian in updating CCLVI’s brochure.

Next board meeting is scheduled for September 20, 2010.

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The Low Vision Committee of the Pennsylvania Council of the Blind presents Low Vision 101. This symposium will be held on October 9, 2010 at Wills Eye Hospital, Philadelphia PA, 840 Walnut Street, Main Auditorium.

Here is the program for this event.

8:00-8:30 Registration
8:30-8:40 Welcoming and opening remarks
8:40-9:10 Conversation between parent and teacher, strategies for a positive outcome, Jean Ann Vogelman, Parent Liaison, Overbrook School for the Blind
9:10-10:00 Mock demonstration of an individual education plan session: an interactive perspective, finding your voice
10:00-10:15 Break
10:15-11:45 Finding solutions to low vision challenges – what low vision rehabilitation can do for you, G.W. Stillwell, VIS Coordinator, presents an overview of the full continuum of care for visually impaired veterans along with Janet Meyers, MS, OTR, CLVT – Low Vision Therapist, focus on rehabilitation services available at the Philadelphia Veterans Administration Medical Center for any veteran having difficulty with daily activities due to vision loss. Simple strategies you can try on your own will also be discussed!
11:45-12:45 Lunch (on your own)
1:00-2:30 Negotiating vision loss in and out of the home, Elita Gares, Certified Orientation and Mobility Specialist, Certified Vision Rehabilitation Therapist
2:30-3:30 Taking the emotional sting out of aging with vision loss, a conversation between two friends, Bette Homer, MS, Gerontological Counseling and Sarita Holliday, MS, Gerontological Counseling
3:30-4:30 Hot tips for individuals with low vision: Lynne Maleeff, Facing barriers to employment; Elita Gares, Traveling with low vision; George and Sarita Holliday, Finding outlets for leisure
4:30 Closing remarks.

To pre-register, email: efacem@verizon.net or call Ed at 610-647-3365. For off site parking, please check out www.fivestarparking.com.

The Vision Midwest Conference for blind and visually impaired individuals and the professionals who serve them offers educational, sports and cultural opportunities with a Midwest focus. This conference will take place from October 22 to October 24, 2010 at the Alliant Energy Center, Madison Wisconsin. We will feature programming for consumers and professionals.

Consumers can attend expert presentations on careers, cell phones, college accessibility, computer software and hardware, cutting edge stem cell treatments, leisure travel, sensory gardening, vision technological devices and much more! They can learn more at Symposia on Diabetes and Retinitis Pigmentosa and they can participate in sports including blind bowling,
GPS treasure hunting, running, tandem bicycling and more.

Professionals: Wisconsin Association for Education and Rehabilitation of the Blind and Visually Impaired (WAER’s) Annual Conference 2010 is now part of the Vision Midwest Conference! Professionals can attend accessible technology training organized with the Wisconsin Office for the Blind and Visually Impaired and WisTech! They can expand their knowledge with information technology programming organized with the International Association of Visually Impaired Technologists.

12 State, Inc. a Madison-based nonprofit organization hosts the annual Vision Midwest Conference. 12 State seeks to advance educational opportunities and accessibility in all phases of life for blind and low vision individuals and provide for greater public awareness of blind and low vision issues.

Registration: The basic conference fee of $35 entitles you to all presentations and the Exhibition Hall with some cultural events, some sporting events, and professional education credits requiring additional charges. Registering requires two steps: complete a form and make payment. You will find the form at our website—www.12state.org/schedule/presentations. Please email us with any questions at visionmidwest@gmail.com or call 608-238-3044. 12 State, Inc., 5818 Driftwood Ave., Madison, WI 53705.

We need volunteers to help before and during the event. Please send us an email and provide us with your name, phone number and a bit about your skills and interests and we will contact you.

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People

Meet Fred Scheigert

On the evening we met by phone for the interview on which this article is based, I had just returned home from a meeting of my political party. I’ve always been interested in politics. At the University of Southern Florida I majored in political science and minored in history. In college I used reel to reel tapes to access my text books obtaining these from Recordings for the Blind and Dyslexic, RFB&D. Using eye glasses, I read slowly the books that were not available through RFB&D. I was too busy keeping up with class assignments to become involved in student organizations, even those of a political nature.

Now I use newspapers, TV news, and meeting of my local political party to keep informed about politics. I support my favorite candidates by handing out literature at voting places. My Dad’s younger brother who was secretary to the county commissioner told me that getting active at the local level is the best way to get started in politics.

I was born with optic nerve atrophy. To my knowledge, no one else in my family has this usually hereditary eye condition. In elementary and high school I was helped and encouraged by a retired English teacher and by my special education teacher. I met with my
special ed teacher for one hour a week. She helped me with both class and take home assignments. She also helped me to prepare for the SATs and with my application to junior college.

I have one brother who is 20 months younger than I am. In childhood I recall playing in the Little Shavers soft ball league—a pre-Little League experience. My low vision made it difficult for me to continue in baseball. I then focused on learning to play musical instruments. I played drums, saxophone, organ and electronic keyboard. I looked closely at the notes while playing these instruments.

At one of my annual vision exams, my doctor introduced me to the bioptic glasses developed by Ocutech, a company located in Chapel Hill North Carolina. I use the autofocus telescope in these glasses for viewing objects at a distance, the carrier lenses for objects at mid range, and a reading lens glued onto the lower right corner of the lens over my left eye.


From time to time I operate a harness horse racing business based in Saratoga New York.

I am one of several founding members as well as a Life Member of CCLVI. Elizabeth Lennon introduced me to CCLVI. At first I contributed to the Carl Foley Scholarship fund. Then Janet Morrison asked me if I would like to have a scholarship established in my name. I agreed because I know it is important to encourage and support students who have low vision.

Because I don’t like air travel, I come to CCLVI conventions by train. This takes more time, but I relax by viewing the scenery as the train moves through our country. I like to sit with the CCLVI delegation at ACB sessions. I am proud to be a member of this organization which is all about low vision.

Getting to Know CCLVI Board Members

My name is Lindsey Hastings. I originally came to CCLVI by way of the scholarship program my senior year of high school and have been on the board since the close of my first year of college. I graduated in 2009 from Biola University in La Mirada, CA with a B.A. in Communication Disorders and minors in Biblical studies and Spanish. I am now working towards my M.A. in Speech Language Pathology at San Diego State University. My vocational goal is to work as a speech therapist in an elementary school.

I have Rod-Cone Dystrophy and have been involved in the low vision community since I was a little girl. I grew up attending youth programs at the Braille Institute and the Junior Blind of America. In school I was blessed to have wonderful V.I. teachers who taught me braille, computer skills, self advocacy, and mobility skills. After much thought, and years of trying to avoid using a cane, I became a guide dog user and
don't believe I will ever go back. My
guide is a beautiful black lab named
Valencia.

As a student with low vision, I
have a strong interest in being a
resource for other students. I have
been fortunate to not personally have
any major issues with professors or
administration regarding my
impairment, but I have witnessed the
struggles of others and know how
frustrating it can be. I am also well
aware of the accessibility issues that
can arise from textbooks and online
course sites. I am thankful to be able
to provide a student voice on the
board of CCLVI.

My name is Tom Lealos. I'm 63,
retired, and legally blind from uveitis
for the past thirty years.

I have a BS Degree in Forestry
from Utah State Univ. Prior to retiring
I worked for a major forest products
company in northern California. As
forest engineer I managed the
company’s logging road construction
and maintenance work, as well as our
fire suppression efforts. I was also
involved with our community
relations activities and political
endeavors.

My wife, of forty- three years and I
live in Powell, in NW Wyoming, not
too far from Yellowstone National
Park. We have three grown children
and four wonderful grand kids, who
we love to spoil. My hobbies include
landscaping and all things wood. In
fact, my wife and I have a small,
home-based woodworking business.

I am the Group Leader of a local
low vision support group which
meets monthly. I'm also an alternate
director for the Wyoming Council of
the Blind. I was fortunate to serve as
a member/president of the
Montgomery Trust Fund Advisory
Board, a Wyoming foundation which
helps citizens secure technical
assistance and equipment through its
grant program.

I've been a CCLVI director for a
year now and I'm quickly learning
how the organization works. My
involvement includes chairing the
Large Print Committee and serving as
a member of the Dr. Sam Genensky
Video Magnifier Memorial
Scholarship Committee.

For quite some time, I've been
drawn towards advocacy for low
vision issues. Involvement with
CCLVI allows me to expand my
efforts in this regard.

My name is John McMahon. I have
been a member of the American
Council for the Blind for over 25
years, and a member of CCLVI for
approximately four years. I currently
live in Readfield, Maine, with my wife
Darlene. I have two children and one
grandchild. I have experienced life as
a person who is legally blind for over
30 years as a result of a condition
called Stargardt's Disease, which is a
genetic form of macular
degeneration.

Professionally, I earned a Master of
Arts in Blind Rehabilitation Teaching
from Western Michigan University in
1985. Since that time I have worked
as a Vision Rehabilitation Therapist
(VRT) in Maine, and as a Vision
Rehabilitation Therapist, Vocational
Rehabilitation Counselor, and Low
Vision Therapist in Michigan. Over
the years I have served in a variety of
leadership positions in both local and
international Association for the
Education and Rehabilitation of the
Advocacy

The Journey to HR3101—the 21st Century Communications and Video Accessibility Act
By Donna Pomerantz

Editor’s Note: Donna Pomerantz chairs CCLVI’s Legislative Committee.

I remember hoping that manufacturers and industry would do the right thing which would result in our community having complete access to the menus that fully sighted people would see as part of their cable television package. I also wished that I could have video description when I chose to watch a movie, documentary or just a plain old sitcom on T.V. I can remember wondering what the notice would say on the television when receiving an emergency alert. I wished that I could buy whatever cell phone fit into my budget in the store right off the shelf and that when I’d turn it on to use it everything would begin talking to me as I needed.

People would always say, oh if you show the need industry will do the right thing. But complaint after complaint would be filed under 255 or other relevant laws regarding cell phone access, or lack there of. And still nothing. There was no universal access to these areas and more. I can go on and on but will continue with my view of the H.R. 3101 journey.

Hoping, wondering, wishing and the like never made it happen. It wasn’t enough. And so the journey begins.

H.R. 3101 is comprehensive legislation that updates the Communications Act by calling for the accessibility of wireless devices like PDA’s, DVR and T.V. menus, requirements for video description on prime time television, accessible emergency alerts and more. This legislation was made a reality by the active participation of the American Council of the Blind through its steering committee membership in the Coalition of Organizations for Accessible technology (COAT).

I can remember in 2009 attending the ACB Legislative Seminar in Washington D.C. We knew this bill may be coming and we educated our representatives on Capitol Hill about the doors that this piece of legislation would open for us if it came to pass.
We told them to be on the lookout for it, and I was glad that CCLVI had representation at both the Legislative Seminar of 2009 and 2010.

This bill was reintroduced on June 26, 2009 by Congressman Edward J. Markey, MA. It was a bit of a slow start as on July 20th there were 2 co-sponsors and by September 23 there were 8. I know several people made telephone calls and/or sent letters to their Representatives. I am pleased that CCLVI members did so as well. I received several calls as CCLVI’s Legislative Chairperson. I was pleased that one of those telephone calls was from now Board Member Grady Ebert. He had questions and sought clarification and he told me that he was going to contact his Representative. I’m sure others who might not have contacted me did the same. To all of you I say thank you for your help in getting co-sponsors for H.R. 3101.

In late October of 2009 a group of us from California were asked by Eric Bridges, ACB Advocacy and Governmental Affairs Director, to enquire about seeking an appointment with Congressman Henry A. Waxman, Chair Energy and Commerce Committee. This committee would be one of the hurdles this bill needed to pass through. We were able to secure an appointment with key staff of Congressman Waxman so ACB President, Mitch Pomerantz, two of the Congressman’s constituents, Andy and Mary Lu Baracco, and I went to the appointment that day. Key points of the bill and all of our personal stories were shared with an attentive staff. I was pleased to see staff throughout our appointment doing a lot of writing as we all took turns speaking on behalf of H.R.3101 and the doors it would open for us. And what doors it would open up.

On my birthday I got a nice email surprise and heard the news that my Congressman, Adam Schiff had signed onto H.R.3101 earlier in the month of March. Oh what a good birthday present indeed! On June 30th we received an alert that H.R.3101 would be going before The House Subcommittee on Communications, Technology, and the Internet which was going to meet in open markup session. We knew that the bill had been weakened so the COAT, of which ACB was a member, would be prepared to submit an amendment reflecting the language of the COAT. It came out favorably from the subcommittee and would go before the entire committee while we were in convention.

These were the things we asked for as posted on the COAT website.
--Restore financial support for communications equipment for people who are deaf-blind.
--Make sure that people who are blind or visually impaired can get to the Internet when it is available on mobile, handheld, or other devices.
--Do not prohibit the FCC from making video programming on television accessible to people who are blind or visually impaired. Do not limit video description to 7 hours per week on 9 channels. Give the FCC authority to increase accessibility when providing video description is not economically burdensome.
--Require closed captioning on video programming distributed by broadcast, cable, satellite, or the Internet. Strike the closed captioning
limitation to video programming 'first published or exhibited on television.

Now, on July 21st we received a positive update from Eric Bridges of ACB. “It has been quite a week in the House Energy and Commerce Committee. This morning I am very happy to report, H.R.3101, The Twenty-First Century Communications and Video Accessibility Act was favorably reported out of committee and has tentatively been scheduled for House floor action early next week.

The blind, visually impaired, and deaf-blind communities can be proud of what is contained in the legislation that will go to the House floor.

The program to fund the purchase of communications devices for individuals who are deaf-blind has been added to the bill.

H.R.3101 gives the Federal Communications Commission (FCC) authority to increase the availability of description of video programming. It will not limit video description to 7 hours per week on 9 channels. There will be a time-line for adding more hours and ensuring that description is available nation-wide and not just in the largest media markets.

This bill makes sure that people who are blind or visually impaired can connect to and interact with the Internet when it is available on mobile, handheld, or other devices through accessible user interfaces.

There are also other very positive provisions that have been included in the legislation. We are actively reviewing the amended bill now to gain a full understanding of the technical language. I wanted to highlight these specific provisions as they have been the subject of several action alerts and have been discussed in various meetings at the 2010 ACB Conference and Convention.

We can be very proud of the advocacy efforts of individuals and affiliates of ACB.

Oh now the countdown was really beginning for H.R.3101. On Saturday, July 24th we received word that our bill was scheduled for a vote on the House Floor Monday, July 26th which was the 20th anniversary of the Americans with Disabilities Act. The bill was labeled “under suspension” which meant that it was noncontroversial. Well, we had approximately 3 years of controversy with this bill from leaders of industry and some Congress Members. So it was a great achievement that it came out labeled “under suspension.”

Another quote from Eric Bridges: “On the 20th anniversary of the signing of the ADA, the U.S. House of Representatives passed H.R.3101, The Twenty-First Century Communications and Video Accessibility Act. The bill passed by a 348-23 vote. This represents resounding bipartisan support.”

ACB as a steering committee member of the Coalition of Organizations for Accessible Technology (COAT) wishes to express sincere appreciation for the tireless advocacy of Representative Ed Markey (D-MA) through this long and difficult process. The blind and deaf-blind communities have a staunch advocate in Rep. Markey.

It is also quite appropriate to express our thanks to the Chairman of the House Energy and Commerce Committee, Henry Waxman (D-CA) for the critical role he played in working
with COAT and the Republicans on his committee so that 3101 could be bipartisan. Thank you also to the Ranking Member of the Energy and Commerce Committee, Joe Barton (R-TX) and Rep. Cliff Stearns (R-FL) for their willingness to work in a bipartisan way. As many of you know, bipartisanship in Congress is a very rare occurrence these days.

So now we have two bills in the Senate. The goal is to have the Senate pass H.R.3101 because it is a stronger more consumer focused bill than S.3304.

Please call your senators and urge them to communi cate with Majority Leader Reid if Democrats or Minority Leader McConnell if Republicans, that 3101 is the one bill of the two that provides for future accessibility to telecommunications and video programming technology.

We have clear momentum right now and the prospect of getting 3101 signed into law has never been better.

I would like to share two things in closing. First, this is my first and last article I am submitting to Vision Access as the CCLVI Legislative Chair. I want to thank the CCLVI Board of Directors and Membership for all of your support as I gave updates on our legislation. Also, at the time I complete the writing of this article Congress is in Recess, but when The House returns to Washington D.C. it will take up S. 3304 on the floor. It is my hope that this bill will be as strong as H.R. 3101 and be the foundation to pave our way to universal accessibility in this ever growing, fast moving age of technology. If you would like a more detailed explanation of what H.R.3101 is about go to http://www.acb.org/washington/telecommunications-2010.html and for information on the COAT go to http://www.coataccess.org/

Quality of Life

Some Faces I’ve Seen Thanks to the Digital World
By George Covington

Most people see to photograph. I have to photograph to see. I use the wonderful world of digital imagery to capture the faces that otherwise appear to me as a blur. My techniques are simple and easy to understand and could be used by millions of Americans who have a severe visual impairment.

Although I was born with only around 10 percent of normal vision, my mobility skills were almost on the level with normally sighted children. More than thirty years ago, that small amount of vision began to slowly dwindle. I haven’t seen the large E on an eye chart in 20 years. Luckily, digital photography has allowed me to manipulate images so that I can still make out faces.

To understand how my techniques work, you must understand the nature of a photograph. A photograph is not reality, but an abstraction of reality. Millions of colors, tones, textures, and distances...
are reduced to a two-dimensional recreation of the world around us. These sometimes visually confusing elements are reduced to a few shades of grey in a normal black and white print. The compression of distance onto a single plane also reduces the confusion.

As my eyesight began to fail, I discovered that I could see detail in the human face in a black and white photograph better than I could see those features only a few feet away. The photograph was a high contrast abstraction of reality. I discovered that by increasing an image to a high contrast representation, I could see things that were otherwise a blur.

In the past ten years my eyesight has reached a point where I must render my portraits as photo/sketches. I constantly carry a ten mega-pixel canon digital camera. Using a magnifying lens on the camera’s LED screen I attempt to frame my subject while cracking a few jokes that I hope will engender a genuine smile. Later I will download the images onto my large screen iMac. Using Adobe Photoshop, I will turn the full color images into black and white sketches. These high contrast sketches allow me to see faces that I would otherwise see as obscure blur.

It has been pointed out that most of my portraits are of women. OK, I would rather see the face of an attractive woman than the face of an ugly man (ugly or not). Actually, only about 4/5 of my portraits are females. The rest are of puppies, kittens, graveyards, adobe ruins, and men.

I have been photographing Dona Roman, director of Sul Ross State University’s theatre program, for more than ten years, and have never gotten a bad portrait. I have photographed Anna Marie Rodriguez for six years and have gotten some of my favorite portraits from her photo/sketches. Ricardo Maestas photographs well.

I may collide with a fire hydrant, an ill-placed bench, or an uncanny hole, but as long as I can see to photograph, I’ll never be blind.

Really Seeing
By Barbara Milleville

One day I hear the faint voice of autumn calling. The next day I can’t. One evening summer escapes into the cool night. The next morning summer’s back again. But progress is made. Cars loaded with beach gear have gone and are replaced with bright yellow school buses. I look into the tree-lined landscape as dusk begins and I see a throng of airborne bugs. How would it be, I wonder, to have an awareness of everything that is going on in the complex world which I call home.

I ask myself a version of that question every day: “Have you ever really looked at ...?” You can fill in the blank yourself. But every day I feel blinded by familiarity. I open the door and hear the squirrels scurrying up into the tall mature trees and then I hear the acorns dropping to the ground. Even their community somehow escapes me, if only because I’ve been living here for a good while.

Again and again, I find myself trying to really look at what I’m
seeing. It happened the other afternoon on a hike. An ant settled on a napkin which held my sandwich. Then, without warning, it scurried away toward another picnicker’s feast. Later, I saw some butterflies quivering through the air. Do the insects know that I’m here? Do they care about me and what I think? I always notice that there’s no such thing as really looking.

That is because what I want to be seeing is invisible: the pressures and joys of life itself and the web of relationships that bind us all together. I find myself trying to witness all of this but keep coming up against the limits of what I can see and understand.

What I want to notice is the intent of the squirrels and ants. If I could, I would ask them, “What are you doing?” Or, better yet, “Who are you?” But all I can do is look — and notice that I am looking — and make the best of the sight I see.

Have you ever taken a good look at – and I mean REALLY SEE who you are and what you are doing? Have you ever taken a good look at your community, the organizations you work for and support with your donations? I encourage you to do so. It can be a very rewarding experience. And one you’ll not likely forget.

Recipe for Tomato Crab Soup
Submitted by Vera Muchow

1 can of tomato soup
1 can of cream of mushroom soup
1 can of cream of celery soup
1/2 cup cooking sherry
2 tbsp Worcestershire sauce
5 drops hot sauce

1 quart half and half (can use fat-free)
2 cans crab meat
Blend together and heat in crock pot or on the stove

Science and Health

Braving the Low Vision Exam
By Cydney Strand, RN

Editor’s Note: This article is reprinted with permission from Lighthouse International
"It’s not the strongest of the species that survives, nor the most intelligent, but the one most responsive to change." Charles Darwin

"But I thought you were going to help me," implored Mrs. Kern, as I began showing her how to use her new spectacles. The examination part of her low vision visit had concluded, and Mrs. Kern had felt optimistic. Unlike her last eye exam, at which she could barely see the large "E" at the top of the eye chart, she had just read three full lines of the low vision eye chart. Maybe things were improving, she thought.

Now in the instruction room of the low vision clinic, we were following the doctor’s recommendation and working with a pair of spectacles that
gave Mrs. Kern the ability to read the newspaper but it meant having to hold the paper six inches from her face. And when she looked up at me, everything was out of focus again. Why did these glasses only work up close? Again, she protested: "I thought you were going to help me!"

The misunderstanding of what low vision care is and is not often causes confusion and frustration. Low vision care is about rehabilitation, not cure. It’s about finding new ways to accomplish the tasks of daily life whether it’s writing a grocery list, watching a grandchild play soccer or reading a menu in a restaurant.

A low vision examination, often the first step in vision rehabilitation, is designed to accurately measure how one’s vision works in the real world, how it functions in day-to-day living. It’s not only about how well you can see an eye chart, but also how well you can see faces, street signs, newspaper print, stove dials and all the other visual clues that guide you through the day. The low vision clinician uses special charts to measure how well you see both at a distance and up close. Additional vision tests measure contrast sensitivity and locate blurry or distorted areas in the visual field. You will also be asked specific questions about your vision. Are you affected by glare outdoors, indoors or both? Do you have difficulty seeing under different lighting conditions? Do you see better on sunny days or cloudy days? How do you describe your ability to see contrast, such as a light gray sweater lying on a white bedspread? Are there any blurred or distorted areas in your vision? Where are they? Do you see better when you look slightly away from the object?

Additional questions address your ability to manage activities and tasks of daily living. Expect to discuss with the low vision specialist how your vision impairment impacts your life. Do you travel independently? Can you safely prepare your own meals? What about grocery shopping, making phone calls or taking medications? Can you write checks and manage other financial tasks? How does your vision loss affect your participation in leisure pursuits or in employment-related activities? Do you have any special or unusual hobbies that will need some creative solutions?

The information gathered during a low vision examination enables the doctor to prescribe the device(s) that will best meet your individual needs. Device selection is based on several considerations:

How strong of a lens do you actually need? Can you use a weaker lens for some tasks? How and where will you use the device? Do you plan to carry it with you, or will it sit on your desk? With what kind of activity will the device assist, and how close can you get to the task at hand?—very close (reading a newspaper), not too close (cooking an omelet) or not close at all (watching a theater performance)? Do you need your hands to be free while doing the task, or can you hold a magnifier? Are safety issues involved? How big are the items you wish to see? Can the activity be made easier with better use of lighting, controlling glare or increasing contrast?

While your doctor may suggest many options for devices, the final
choice is yours. You’ll also receive instruction in how to use them and time for practice. Getting accustomed to using most devices often requires additional practice at home.

Stronger isn’t always better! A strong magnifier can be difficult to use. It must be held very close to the object it’s magnifying, and even the slightest motion can cause it to lose focus. The size of the area that can be viewed is also reduced as the magnifier gets stronger. In fact, the "best" magnifier is usually the weakest one that still allows you to accomplish a specific task. Sometimes it’s even necessary to practice with a weaker magnifier in order to develop the skill to use a stronger one.

Seeing Things That Aren’t Really There

By Dr. Bill Takeshita

Editor’s Note: This article is a summary of Dr. Bill’s presentation at a CCLVI Teleconference on June 15, 2010. Dr. Bill is Chief of Optometric Services at the Center for the Partially Sighted in Los Angeles, CA.

We often see visual phenomena that are really not there. Some of these may be signs that significant changes are happening in our eyes that require the immediate attention of a doctor. On the other hand some of these phenomena are normal and require no medical attention.

When light enters our eyes, our retinal cells convert light to electrical signals. These signals are sent back to our brain which processes them.

One of these phenomena is fog, but there is no real fog. This appearance of fog may be related to the cornea, the front structure of the eye which focuses light to the back structure of the eye. Increased pressure in the eye may make the cornea clouded. This could be a sign of glaucoma, a serious condition that could lead to permanent vision loss. So it is important to see your doctor immediately or to go to the ER.

Sometimes we may see things floating in our eyes. These may look like flies and we may see from 12 to 24 of these. We may see what look like spider webs or spiral bacteria floating in our eyes. These may be caused by fibers in the vitreous clumping together. These phenomena are normal and will probably go away in time.

We may see lightening streaks or flashes. These may occur if we are hit in the head. These may indicate retinal detachment or tear and may result in a loss of a high percentage of vision. We may see a combination of floaters and flashes. If this happens, tilt your head back and go to your doctor. The retina can be reattached, but if it is left alone, the retina may detach completely and result in vision loss.

Some people see sparkling images. This results from mechanical pressure, for example, from poking your eye hard. This activates photo receptors which send signals to the brain. If no poking has occurred, the sparkling images may indicate changes to the back of the brain. These may be caused by
migraine headaches. Vessels in the brain change shape and we may see what look like fireworks. We may also see a rainbow around the head of a person or even a scintillating rainbow effect.

We may see something that has a broken glass appearance. This may mean that a severe migraine is coming on. We can use caffeine to constrict blood vessels in the brain to relieve these headaches. Some medications can do this too.

Sometimes we see spots or a glowing light either in the center or periphery of our vision. This may occur when we are exercising and not enough oxygen is coming to our eyes or to our brain.

People with macular degeneration need not be afraid if they see things like faces in their soup, or other things that don’t make sense. You are not going crazy! You can make these images go away by closing your eyes. Things trigger our visual memory. If we are walking along the grass, we may see toys because our memory is stimulated.

Stroke or lack of oxygen to the occipital lob can cause pressure. It is always safer to talk to an optometrist or ophthalmologist to rule out something that could cause further damage. Check routinely in order to maintain the health of your eyes.

Valproic Acid Shown to Halt Vision Loss in Patients with RP

Researchers at the University of Massachusetts Medical School (UMMS) believe they may have found a new treatment for retinitis pigmentosa (RP), a severe neurodegenerative disease of the retina that ultimately results in blindness. One of the more common retinal degenerative diseases, RP is caused by the death of photoreceptor cells and affects 1 in 4,000 people in the United States. RP typically manifests in young adulthood as night blindness or a loss of peripheral vision and in many cases progresses to legal blindness by age 40.

In the July 20 online edition of the British Journal of Ophthalmology, Shalesh Kaushal, MD, PhD, chair of ophthalmology and associate professor of ophthalmology and cell biology at UMMS, and his team, describe a potential new therapeutic link between valproic acid and RP, which could have tremendous benefits for patients suffering from the disease. In a retrospective study, valproic acid-authorized by the FDA to reduce seizures, treat migraines and manage bipolar disorder—appeared to have an effect in halting vision loss in patients with RP and in many cases resulted in an improved field of vision.

Results from this study, in conjunction with prior in vitro data, suggest valproic acid may be an effective treatment for photoreceptor loss associated with RP.

UMass Medical School will be the coordinating site for a $2.1 million, three-year clinical trial funded by the Foundation Fighting Blindness/National Neurovision Research Institute quantifying the potential of valproic acid as a treatment for RP. The clinical trials will build upon Kaushal’s work in the retrospective study in which patients
were treated off-label with doses of valproic acid ranging from 500mg to 750mg per day over the course of two to six months. Treated at a time when patients normally experience rapid vision loss as a result of RP, five of the seven patients in the study experienced improvement in their field of vision.

"Inflammation and cell death are key components of RP," said Kaushal. "It appears the valproic acid protects photoreceptor cells from this. If our observations can be further substantiated by randomized clinical trials then low dose valproic acid could have tremendous potential to help the thousands of people suffering from RP."

To date, discovery of a treatment for RP has been complicated by the fact that more than 40 different genes have been linked to the disease, making many interventions impractical or impossible; as a result, the disease remains largely untreated for an estimated 100,000 patients in the U.S. Most RP therapies currently being investigated focus on nutritional supplementation, vitamin A supplementation, light reduction or gene therapy.

Dr. Kaushal and colleagues, having previously demonstrated the use of the small molecule, retinoid, as a pharmacological agent capable of increasing the yield of properly folded RP rhodopsins, began screening other small molecules for similar attributes. Because of its already known qualities as a potent inhibitor of the inflammatory response pathway and cell death, valproic acid was believed to have a unique profile making it a potential candidate as a retinal disease treatment.

"Traditionally, moving a new scientific discovery from the bench to the patient requires a significant investment of time and resources," said Kaushal. "Repurposing drugs already approved by the FDA and which have been shown to be safe, such as valproic acid, is an economical and time-efficient way to quickly bring new treatments to patients."

Contact: Jim Fessenden, james.fessenden@umassmed.edu, 508-856-2000, University of Massachusetts Medical School

Therapies May Slow Progression of Diabetic Retinopathy

In high-risk adults with type 2 diabetes, researchers have found that two therapies may slow the progression of diabetic retinopathy, an eye disease that is the leading cause of vision loss in working age Americans.

Intensive blood sugar control reduced the progression of diabetic retinopathy compared with standard blood sugar control, and combination lipid therapy with a fibrate and statin also reduced disease progression compared with statin therapy alone. However, intensive blood pressure control provided no additional benefit to patients compared with standard blood pressure control.

Results of the Action to Control Cardiovascular Risk in Diabetes (ACCORD) Eye Study, supported by the National Institutes of Health, were published online June 29 in the New England Journal of Medicine (NEJM)
and were presented June 29 at the 70th Scientific session of the American Diabetes Association.

The ACCORD study was a landmark clinical trial that included 10,251 adults with type 2 diabetes who were at especially high risk for heart attack, stroke or cardiovascular death. The study evaluated three intensive strategies compared with standard treatments for lowering cardiovascular risks associated with diabetes.

The ACCORD Eye Study involved a subset of 2,856 participants. Researchers analyzed the effects of the treatment strategies on blood vessels in the eye by identifying diabetic retinopathy progression over four years. Diabetic retinopathy is a disease in which blood vessels in the eye's light-sensitive retinal tissue are damaged by diabetes. Blood vessels can begin to leak, causing swelling in the retina, and abnormal new blood vessels can develop, both causing vision loss. In the study, disease progression was identified through retinal photographs that indicated blood vessel changes or by the need for laser or eye surgery to treat abnormal blood vessels.


New Website for Eye Disease

We are pleased to announce the opening of www.achromatopsia.info. It is the most comprehensive site ever developed on congenital achromatopsia, also called stationary cone dystrophy. We cover both Rod Monochromatism and Blue Cone Monochromatism. Achromatopsia patients experience severe debilitating glare, the profound colorblindness, nystagmus and reduced visual acuity. Today, we have new ways to help achromats. The site features new movies we have developed to help others understand achromatopsia.

It was developed by the nationally award winning staff (41 state and national awards) of the Low Vision Centers of Indiana. I encourage you to visit the site and let others know about the site. Feel free to link to this site. We also grant permission to link to our YouTube videos.

We always welcome suggestions for items to add to our site.


Assistive Technology

Zoom-Twix Can Aid Students

Zoom-Twix, created especially for students, instantly reads aloud any printed material, scans books, and displays magnified text without going
off the screen. A second camera allows students to do distance viewing and immediately captures images of the blackboard and classroom.

The Compaq Presario Notebook will have our Zoom-Office Software pre-loaded and ready to go, so all you have to do is plug in the Zoom-Twix and begin reading with ease.

Humanware Offers Voicenote Apex

HumanWare announces a noteworthy extension to the Apex family of products. The VoiceNote Apex is a practical, portable and affordable productivity tool designed for users who are visually impaired and are accustomed to using speech output. With the VoiceNote Apex, you can take advantage of a superior notetaker and enjoy accomplishing productivity tasks without the complexity of ever changing operating systems, screen readers and updated applications.

Just 2 cm (0.78") thick and weighing only 612 grams (1.35 lbs), the VoiceNote Apex is simply perfect for keeping track of appointments, creating grocery or to-do lists, printing or embossing letters, notes or recipes, surfing the Web, listening to audio books, and exchanging information and documents with other computer users. The VoiceNote runs with the user-friendly KeySoft suite of applications, which includes content sensitive help, easy access to the user's manual via index or table of content, along with many other tools that make digital communication easy. Speech users will especially enjoy the high-quality stereo speakers. In addition, a trial version of the Sendero 2010 GPS extension is included and can be purchased as an option.

Featuring a long battery life and superior connectivity, the VoiceNote Apex can access email and the Internet with built-in Wi-Fi and Ethernet. It's easy to use and can store electronic books using one of the multiple storage options, including 8 GB of internal memory and support for high capacity SDHC cards or USB thumb drives. VoiceNote Apex users can take advantage of the ergonomic standards established by the BrailleNote Apex line and select the most comfortable QWERTY keyboard or full sized Perkins style keys for input.

Voicenote Apex avoids the expense of a braille display while still having the opportunity to upgrade by adding a braille display in the future.

For more information visit www.humanware.com/apex or call 1-800-722-3393 or (925) 680-7100 Email: us.info@humanware.com

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CCLVI gratefully accepts contributions from readers and members to help pay for the costs of publishing Vision Access, the costs related to our 800 line and Project Insight, and for funding the Carl E. Foley and Fred Scheigert Scholarships. Please send contributions to CCLVI Treasurer, Mike Godino, 104 Tilrose Avenue, Malverne, NY 11565-2040. Our Tax ID number is 1317540.

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Achromatopasia
www.achromatopasia.info

Diabetic Retinopathy
www.nei.nih.gov/health/diabetic
www.clinicaltrials.gov

H.R. 3101
http://www.acb.org/washington/telecommunications-2010.html
http://www.coataccess.org/

Humanware
800-722-3393
www.humanware.com

Low Vision Symposium in Philadelphia
Edgar Facemyer
610-647-3365
efacem@verizon.net.

Midwest Conference on Vision
www.12state.org/schedule/presentations. Please
visionmidwest@gmail.com
608-238-3044
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5818 Driftwood Ave.
Madison, WI 53705.

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An Affiliate of the American Council of the Blind
2010 Membership Application

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___ Life member of CCLVI.
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Visual Status: I am a:
___ person with low/no vision. ___ fully sighted person.

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At this point, the large print edition of Vision Access contains a survey concerning fonts and font sizes. This survey can only be done in hardcopy large print. If you would like to complete the survey, please contact the CCLVI office at:
800 733-2258
and you will be sent a hardcopy by mail.

We value your input and hope that you will participate.