Comment on Murphy’s Law—Murphy was an optimist.
An experienced CRNA (certified registered nurse anesthetist) performed peribulbar anesthesia for a radial keratotomy operation. She perforated the globe resulting in vitreous hemorrhage, retinal detachment, and additional surgery. Experts for the plaintiff contended the event was negligence _per se_ and that no CRNA was qualified to perform a peribulbar block. However, the CRNA had performed the block on hundreds of patients over a ten-year period, and presented a video demonstrating her technique. Experts who viewed the tape found nothing wrong, and stated it did not violate the standard of care. The jury recognized the perforation as an unfortunate event and found in favor of the defendant.

Television—a medium. So-called because it is neither rare nor well done.
You have never heard of the _nocebo_? It is the opposite of the placebo, a pill that makes you feel better, although it contains only sugar. The nocebo makes you feel bad when physiologically it shouldn’t be able to do so. Example—for two years after the Gulf War no complaints were received from war vets, but after a doctor suggested a _syndrome_ and the media and attorneys got into the picture, now thousands have developed classic psychosomatic complaints such as aching joints and headaches. The unusual ailment involved only American soldiers, until the British press picked up on it, and then British soldiers became ill. Similarly, for 30 years women were satisfied with breast implants, but when the media and the attorneys got into the act, stories such as _toxic breasts_ and _ticking time bombs_, produced all kinds of strange illnesses. Curiously, silicone makes only American women sick; foreign women apparently are immune. One wonders when some attorney will discover that _deadly_ silicone is actually being placed in human eyes.

Confidence is simply that quiet, assured feeling you have before you fall flat on your face.
Gordon Miller MD, an ophthalmologist in Salem, Oregon, has prepared a “Capitation Initiative” aimed at the November ballot. His contention is that capitation contracts cause physicians to withhold care because of financial self-interest. His bill would provide that doctors could be paid in only five ways: for work performed (fee for service), by an hourly wage, by prearranged salary and benefits, by bonuses based on work performed, and by reimbursement for expenses. Dr Miller claims that the petition will exclude physicians who are paid for not doing work. As you might guess, the state’s HMOs are seriously opposed and claim that the initiative would hamper their successful attempts to hold down health care costs. Yes, and it would surely impact the fantastic incomes of some managers and investors.

There is no cure for birth or death save to enjoy the interval.
For a few dreamers who fail to understand why the Medicare program is in financial trouble, please consider the following: at the beginning of the 20th century, life expectancy in the United States was believed to be about 49 years. Today that number has increased to an estimated 75.7 years. Beyond question, it will expand further as research produces treatment for chronic illnesses, such as diabetes, heart disease, and cancer. Then consider the advances in control of infections such as polio, smallpox, measles, influenza, among others. Not only are people living longer, resulting in more degenerative conditions, requiring more surgery, more medications, and more extended institutional care, but the arrival of the baby boom generation will greatly enlarge the population of eligible citizens. Obviously, expenditures for the growing Medicare population are greatly challenged now and soon will exceed all available income. Superficial, Band-aid mechanisms, such as squeezing reimbursement to doctors and hospitals, make no significant impact. Congress must establish fundamental changes in such factors as eligible age, financial need, and health behavior patterns. The currently silly and arrogant posturing by Congress and the President over cosmetic changes in the Medicare budget appear inane after examining the overall social challenge.

Make a point of trying everything once—except incest and folk dancing.
It seems incredible on the surface, but the Red Cross may lose blood donors in the southern region because of a cookie shortage. It isn’t just any cookie, but the _Nutter Butter_, a 65-calorie peanut-shaped and peanut-butter-flavored morsel. Since 1970, the cookie has been part of the post-donation treats, but the regional Red Cross in its wisdom (?) reallocated funds, and discontinued the cookie. Calls and letters of complaint have been pouring in, some including threats of no more blood donations. It appears that some believe the cookie has medicinal qualities, others just like the taste, and a few say it is the only time they get to enjoy that treat.

There’s no safety in numbers—or in anything else.
The recent AAO meeting in Atlanta, Georgia, yielded a very interesting picture of expenditures for eye care by the Department of Veterans Affairs. A survey conducted by the Subcommittee on Eye Care determined that optometry clinics require 44% more full-time-equivalent employees (FTEE) than ophthalmology clinics to handle the same number of visits. On a per-visit basis, optometry services cost as much as or slightly more than ophthalmology services. Ophthalmology-led services give the most productivity per FTEE, the lowest cost per visit, and shorter waits for a new appointment. The summarizing statement: “A strong argument for the ophthalmologist-led team of eye care providers can be made based on efficiency and quality at the lowest cost.”

Addenda
- Latest study—mydriatics cannot diagnose Alzheimer’s disease!
- Meetings are indispensable when you don’t want to do anything.
- Lorena Bobbitt was acquitted because the evidence would not stand up in court.

Aloha and keep the faith—rts