

**Dr. Marvin Sears Oral History Interview**  
**Conducted by Dr. Kupfer**  
**April 20, 2006**

(Revised from interview on September 9, 2004)

Dr. Kupfer: You had mentioned about having a training grant in about 1971 you know that there was a major change in the support of clinical training on training grants; did you ever have a problem with that?

Dr. Sears: Well there were several different phases, yes that I remember at the beginning they were offered money for recruitment and then that dropped off because I think that what happened there wasn't a lot of recruitment going on. But for me that recruitment money was absolutely vital—that was absolutely crucial because the school which was not, as I mentioned earlier, it was a facility of basic care in biochemistry and then following him up with diabetics. I mean these people they were rough, I mean they were you know, breaking their necks to get into our office and come out alive, particularly making requests for a bona fide biochemist in a clinical department. And even today that battle is still goes on. I mean, I don't remember when it was that I got Nigel Doyle and Colin appointed. And earlier than that they were some others you know, guys like Bill Miller and Ted Reed. And I mean it was always an incredible battle. An incredible battle. But the recruitment money made life a little bit easier and that was really very important. Recruiting MDs from that I think you and I both know and probably agree that the yield is pretty darn low.

Dr. Kupfer: Yeah but you didn't use that training or grant money to subsidize residents, or did you?

Dr. Kupfer: I mean early on, during the 60s...

Dr. Sears: To pay salaries?

Dr. Kupfer: Yes as they were residents. That was perfectly fine during the 60s.

Dr. Sears: You see, that's when—you see when I got up here there were only two resident positions. We moved it from two, I think it was two altogether and we moved it from two to three a year which meant nine, so we recruited nine and then we moved it to 12. So we had four residents a year for three years. And yeah, I mean that was vital in helping the clinical population here. I mean it was important in terms of everything. You know, money raising from all the new patients, who would never have come had there been no center of excellence here and all of that. I mean there was a tremendous opportunity. Not only, you know, I mean, I used to say to Bart Giamatti, it was like a three-way conspiracy. You had the basic science chairman shunning you because they didn't want my guys to compete for the same pot of money. They didn't want to give them an academic vote. Then you had the other clinical chairmen who were shunning you because they didn't want you to get any space. And then on top of that you would have the issue of getting positions allocated to you for tenure where everybody was against you because they didn't want you to gain anything. So, it was hell to fight to get it. So a training grant was essential because

what it did was it allowed you to develop more activity of all kinds; research activity, clinical activity, base knowledge, residence, recruitment money, you know, recruitment money for stuff. When I got the first electron microscope in the medical school, funded by the NIH believe it or not in the 60s, I had to do it together with a guy by the name of Jack McCrea who was a micro biologist who photographed DNA. So we had the that jointly shared. At the time I don't know if you remember Edward Adelberg?

Dr. Kupfer: Oh sure.

Dr. Sears: If you remember Ed, he was the guy who did all the, if you recall, who did all the work in E. coli genetics and he was in absolute opposition to this. So it was an enormous battle.

Dr. Kupfer: You would have had less trouble if you'd went to NEI. (Laughter)

Dr. Sears: Probably. I think that's probably true. My family at that time were pretty happy here and I had a position here was that was good because it wasn't huge, and it wasn't small and it was sort of medium size so I could keep my feet in both places.

Dr. Kupfer: So what happened when the training grant changed in '71-'72 when all this money was reduced.

Dr. Sears: Well immediately we got in a battle with the hospital about how much we did at the hospital where we could support the residency training but I think that from '70 to let's say certainly through say '88 or something like that '89, for almost 20 years, I'd say certainly for 18 years we were enormously productive, enormously productive so it was pretty hard for them to turn you down. I mean we were a small group we were billing, millions—you know like pretty close to 7 to 8 to \$9 million dollars just a small handful of ophthalmologist with the help of the residents of course. And we had pro-capita as far as the research grant per square milometer of space we had the highest in the school. Those were really remarkable days and I think that all this was the beneficiaries of the government supports.

Dr. Kupfer: But you did get the hospital to stat picking up some of the expense.

Dr. Sears: The hospital started picking it up and then they began renegeing over a period of time and then there are other ways of trying to get the thing reinstated and then I had to go overseas to Haiti first and then to the Bahamas where there were more physicians. You know, very honestly the whole thing became a little boring because there was so much nitpicking. I'm sure you had the same thing in the many aspects of your job. The issues were—it's like I think I once said to you the reasons there is so much back biting in academia is because the space is so small.

Dr. Kupfer: That's right, small parts to divide up.

Dr. Sears: But as you know, it was fun and I did my job and I had a good time and lots of the contributions are mine.

Dr. Kupfer: What are you doing now to keep busy Marvin, besides playing tennis? I guess you still pay tennis.

Dr. Sears: I don't know who told you that, but that's true, I'm playing national—on the national level, in fact I'm entering two national tournaments.

Dr. Kupfer: No, I didn't know that, I just assumed you were playing tennis.

Dr. Sears: Oh, I'm playing effectively. I was ranked number one in New England last year with a record of 12 and 4 I lost a couple of matches. But I represented New England in two very close matches down at the Wilmington Tournament just a couple of weeks ago.

Dr. Kupfer: No, I didn't know that.

Dr. Sears: So basically I'm staying real fit and I'm very mobile which is gives me a tremendous advantage over a lot of these 75 year olds. I'll even play guys who are 65 to 70. There's a very, very different approach to coming up when I was playing shortstop these guys were captains of their tennis team. The advantage I have is the mobility and the advantage they have is authenticity. So basically I get up at 5 in the morning and I do quite a bit of reading and writing and then I play tennis.

Dr. Kupfer: That's terrific. Good. And how's the kids doing?

Dr. Sears: They're all they're practically wonderful. Ann just got an appointment as an academic dean at a school out in California.

Dr. Kupfer: Oh great!

Dr. Sears: And John is really doing well, I mean he has this national reputation now, he's doing a lot of regular surgery but he also has a least a ½ dozen publications in experimental eye research. He is doing a really nice job at pigment epithelia on a research level. And he's taking care of patients, he's well liked.

Dr. Kupfer: Good.

Dr. Sears: Ted is a lawyer for the environment. He's actually coming up here on Wednesday, with his little kids. I have six grandchildren so Ted has the two young ones they are nine and five. And Ann's son, Tucker is at the University of Chicago as he was the one who was the gifted kid, you know, and really quite funny actually. This summer he's working up at New Hampshire and he had some trouble with the counselor. And then John has three and the oldest one, Nathan is what I can say, I mean he's pretty close to brilliant and he's amazingly sophisticated. Normally he prefers chemistry you know, and he had a Howard Hughes Fellowship last summer and has applied for a Fellowship this summer and he's going to go into a grant here at Western Reserve and he's debating whether to go into chemistry or into medicine.

Dr. Kupfer: Right.

Dr. Sears: One of my children has a second kid who has diabetes but he's doing well and he's going to some sort of like an agricultural school in Ohio. And the little one Avery is getting ready to go to college in a little town, but he's a terrific hockey player.

Dr. Kupfer: That helps.

Dr. Sears: Other than that Ted with the two little ones, Derrick and Helen they're coming up this Wednesday.

Dr. Kupfer: Well, gee that sounds great, Marvin.

Dr. Sears: Well Ben, you know Benjamin from my second marriage. He graduated from UCLA and he's all grown up and wanted to stay west but his mother was a little bit nervous and wanted him to get a job so he's coming to New York as of about six months ago and he's writing copy for a PR firm. But he and I see each other quite a bit. He's a dynamite skier and tennis player. I've got a place out in Utah, a little condo and we go out there and sky twice a year.

Dr. Kupfer: Oh, that's nice. Well, that sounds great.

Dr. Sears: What about yours?

Dr. Kupfer: Well, let's see. Charles is at Penn State trying to get tenure which will either come through or not come through in another year. He's in American Studies. Went to Texas for his PhD, he's gone to Hopkins undergraduate and then went to Michigan as an instructor and now he's at Penn State as an Assistant Professor. He's doing very well, highly respected. Wrote his first book which is important for tenure in that field. And a number of articles for academic magazines. He has four children, three boys and finally got a girl just last year. He kept at it. So we have four grandchildren right off the bat. Ranging in age from 18 months to 12.

Dr. Sears: Gee, that's great!

Dr. Kupfer: Sara, our daughter lives in San Francisco, is a clinic coordinator for two clinical trials and basically is having a good time. Whether this is going to be her eventual professional life or not, I don't know and she doesn't know. She has a boyfriend, she's living with and that's about it. And Kim and I...

Dr. Sears: Is she in clinical trials for one of the schools out there? At UCSF in internal medical. One clinical trial is Lupus and the other is rheumatoid arthritis. Is she an MD?

Dr. Kupfer: No, no—just a graduate of Hopkins, that's it. That's why I say I don't know what her professional life is going to be. But she seems to be happy and I guess that's of value.

Dr. Sears: How old is she?

Dr. Kupfer: She is, let's see, hold on a moment, she was born in 72 so she's 31, no 32. And then Kim retired in October and I retired in July.

Dr. Sears: Just this past year?

Dr. Kupfer: Yeah, I'm trying to think not this past July but July at 70.

Dr. Sears: In 2000?

Dr. Kupfer: Yeah, 2000 and that made it 30 years of being the one and only institute Director and that's why I'm being asked to write this book. Because there's no chronology recorded of any institute from its inception to the present and of course it's going to be something that is relatively easy for me to do since I've been there for that length of time. So, I started off when I stepped down in 2000 to fulfill a promise I made to Dave Cogan to archive his collection of clinic pathologic data and that's supposed to go on the internet. I finished my work this past December and we're still waiting for the computer people to develop a website and to get the database in shape so people can use it. But it will be useful anywhere in the world where someone has access to the internet and that was quite a job. He had 5,000 cases which I reduced to 1,000. I mean there was a lot of redundancy if you might imagine. And now I'm working on the book and after that I think I really will retire, full time.

Dr. Sears: Sounds good. Well, I've gone back to my sort of undergraduate phase. Mostly what I'm writing is really some sort of fiction with a little bit of truth, but not much.

Dr. Kupfer: Excellent. Well, that's okay, you've had your fill of science. Well Marvin it really sounds good talking with you again, and I just wanted to try to be as accurate as I can and I wanted to be sure that I hadn't made this meeting up with Everett Kinsey but sounds like you were there, and I was there and he was there. Maumenee was pushing for the NEI and Everett, a renowned scientist in his own right was pushing back and somehow Maumenee was able to turn Everett around and the NEI was able to come into existence.

Dr. Sears: Well, I think, for me anyway it's a little bit like "Fools Walk in Where Angels Fear to Tread," you know. But I think there was a lot of hoopla over this whole thing. I was being pushed hard by people I'd admit had no idea how it was going to turn out, mainly Maumenee.

Dr. Kupfer: Sure.

Dr. Sears: On the other hand, it's a great thing certainly that has occurred and for guys like you and me and the whole thing was for vision research.

Dr. Kupfer: Yeah, without a doubt. I think it would have been a disaster, but you know originally we were supposed to cover the eye and stop at the retinal ganglion cell. Did you know that?

Dr. Sears: Yes.

Dr. Kupfer: Yes, you knew that. What foundation is this that you're involved with?

Dr. Sears: Well in line with what you just said, I started two foundations, one called the Macular Research Vision and the other called the E. Matilda Ziegler Foundation, but she's gone so her grandson Bill Ziegler runs the Foundation now. I started an invitational grants program that mainly deals with funding retinal research grants. And these grants are aimed mainly at the people who already have this funding so that they can try something innovative and not worry about the study section.

Dr. Sears: The only other science I'm doing is on the phone with my son, Jonathan, about two hours every week, who is currently has a joint appointment in ophthalmology and cell biology in the Cleveland Clinic.

Dr. Kupfer: Listen Marvin, its great talking with you and things seem terrific and I'm glad to hear that. And when the book is finished, I'll send you a copy.

Dr. Sears: That would be great.

Dr. Kupfer: Take care now.

*End of Interview*