By Joseph L. Streich
and Jeffrey Schiller, MD

IN ORBIS

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As a commercial jetliner, the DC-8 passed into obsolescence a long time ago. The racket the aircraft produces rivals a Concorde; by today's noise standards, it would not even be allowed to land at U.S. airports. Yet, when the flying eye hospital known as Project ORBIS touches down on runways the world over, the plane is met with the heartfelt gratitude of the host country's doctors and health establishment.

Since leaving Project Orbis, Dr. Jeffrey Schiller has been teaching at the University of Medicine and Dentistry of New Jersey, Newark, and is in private practice in Lyndhurst and Verona, N.J.

The ORBIS jet has been completely retrofitted as a self-contained ophthalmological surgical facility; on board, modern lasers and medical technology help restore sight to those suffering from treatable eye diseases. ORBIS also serves as a traveling teleproduction facility. The jet's video capabilities enable the ORBIS staff to document on-plane surgery, teach visiting physicians, and even provide entertainment to pre- and post-operative patients. Since its inception in 1982, ORBIS has flown over 58 missions to more than 40 countries, treating more than 4,000 patients aboard the plane. Its most recent travels have taken it through Malta, Egypt, Jamaica, Peru, and Ecuador.

"The symbol of the plane is very powerful," notes Penny Staples, ORBIS director of external affairs. "If a team of doctors simply arrived in a country, it might get mentioned in a column in the local paper. When that plane lands on the runway, it becomes front-page news—we've put a university on the tarmac for three weeks, and we get visits from politicians and heads of state."

Inspiration for ORBIS came from the historic floating hospital Project Hope. Dr. David Paton, a Houston ophthalmologist, conceived the idea of an airplane that could spread the latest techniques in his field to all corners of the earth. The figures are sobering: there are some 42 million blind people worldwide, while over half a billion suffer from various eye diseases. But what is truly shocking is that two-thirds of these people suffer needlessly, for the skills are present to cure or prevent blindness and must only be communicated to local health care professionals.

With the aid of Leonard F. McCollum, Project Hope's chairman of the board (and now co-chairman of Project ORBIS), Paton's dream took shape. The U.S. government gave ORBIS a $1 million grant toward start-up costs, while over 200 corporate donors proved even more generous, ranging from the gift of the DC-8 aircraft by United Airlines, to the plane's video equipment, electronic sight, donated by the Sony Corporation. (Ongoing government support comes from the U.S. Agency for International Development.)

Working with local ophthalmic groups and government health organizations, Mark Mahoney, of the ORBIS primary eye care office, and Meg Crabtree (assistant to Oliver Foot, the organization's executive director) set up a program designed to interface and expand upon existing eye care efforts in host nations. If no such efforts exist, they must then find an appropriate local organization to host the ORBIS visit. An advance team works with the sponsoring organization, establishing itineraries, preselecting a pool of patients for on-plane surgery, and arranging side trips to local medical facilities.

ORBIS' own staff is augmented by ophthalmologists and specialists from the U.S. and around the world who join the project as visiting faculty for one to two week stretches. These doctors do most of the actual teaching that takes place aboard the jet and share surgical duties with local host doctors. Staff ophthalmologists join ORBIS for a six-month