Reminiscing About Doug Johnson, MD

BY MARTIN B. WAX, MD



The passing of Doug Johnson, MD, comes as a surprise to many of us in the glaucoma community. He was in the prime of his life, and, in many ways, the embodiment of what we strive for professionally and personally. I have asked his close friend, Martin B. Wax, MD, to share Dr. Johnson's many contributions with us in this guest editorial.

-Richard A. Lewis, MD, Chief Medical Editor

am privileged to say that Doug Johnson was a good friend of mine. We did not live near each other, see each other, or exchange political or offbeat humor e-mails frequently. Yet I miss him dearly. We all know that he was a glaucoma specialist whose light burned brightly and will continue to do so for a long time. As an outstanding clinician-scientist, he made several notable contributions to our field including the development of the organ perfusion model that advanced the way we evaluate the function of drugs that affect aqueous outflow. Doug also furthered our understanding of the trabecular meshwork's biology, the natural course of glaucoma, and the clinical assessment of the disease. Remarkably, he also played the bagpipes. He was truly an extraordinary individual.

Doug and I were contemporaries, but we did not get to know each other well until the late 1980s when we were both invited to speak at a dinner meeting in Los Angeles. Oblivious to multiple requests from housekeeping to finally leave, we spoke intently for hours about our purpose in life and about religion. I knew then, that despite our different faiths, we shared similar views. These views served as the cornerstone of our friendship over the ensuing years. I loved his inquiring mind. Whether the topic was medicine, science, gardening, or religion, Doug was on a continual search for big-picture answers, and I adored him for it.

Doug was often the first person to send me a congratulatory e-mail when I published a new article. His notes went beyond perfunctory accolades and inevitably included suggestions for additional research. They were always so genuine in their spirit of honest inquiry. Most of all, they typified the credo that he came to live by, which was to provide encouragement to all those with whom he would interact.

Encouragement was also featured prominently in his moving funeral service that he authored and entitled "The



Figure 1. Doug Johnson, MD, (right) and the author hiking on Italy's Amalfi Coast in 2001.

long farewell: 6 months of surgery, chemotherapy, and waiting." In it, he summarized what was most important to him: namely, God, family, and friends. And he encouraged those present to develop their three "Es" so as "to make life worth living and fun on a daily basis." The first was exercise at least three times a week. Doug was a diligent runner every morning at 6:00 AM. The second was enthusiasm. Find a hobby or enjoyable activity he said, that you cannot wait to get back to. I guess that is where bagpiping fit in for Doug. The third was to do something exhilarating once a year. I am lucky to have shared an exhilarating experience with Doug as he and his wife Nan went adventure trekking with my wife and I on the the Amalfi Coast of Italy in 2001 (Figure 1).

Doug would be pleased to know that my reminiscing of him concludes with his favorite bible verse: "But the fruit of the spirit is love, joy, peace, patience, kindness, goodness, faithfulness, gentleness, and self-control." (Galatians 5:22-23). These words capture Doug's outlook perfectly. Yet, they provide little comfort or help us to understand why he was taken from us in his prime. Nor do they provide the answer to the nagging question, "Why the bagpipes?" I miss you, my friend. \square