In the bright sky of modern ophthalmology, a light has gone out. The death of Professor Barrie R. Jones on Wednesday 19\textsuperscript{th} August, at the age of 88, leaves a void in the pantheon of modern ophthalmic practice. No man has had a more profound influence on the conduct of a medical speciality and the pursuit of worldwide eye health.

Born in Silverstream near Wellington, New Zealand, on 4\textsuperscript{th} January 1921, Barrie Russell Jones obtained a natural sciences degree at Victoria University College, Wellington, before going on to study medicine at the University of Otago, Dunedin. After qualifying MB ChB, he began his clinical training back in Wellington before returning, in 1950, to Dunedin as Registrar in Ophthalmology under Professor Rowland Wilson. Wilson had been in charge of the Gizeh Ophthalmic Memorial Laboratory in Cairo and had done important research on trachoma and inspired in Barrie Jones not only a lifelong love of research based medicine, but the study of ocular infections, in particular trachoma. So profound was his admiration for Professor Wilson and his ambition to achieve the highest standard of medical practice so powerful, that in 1951 he came to the UK in order to train further in clinical ophthalmology, with the intention of gaining a PhD before returning to Dunedin to take over the reins from his old mentor.

Once in London, however, the course of Barrie Jones’s life changed forever, and with it the future direction of British ophthalmology. An entirely new prospect opened before him. He soon obtained a training post at Moorfields Eye Hospital, where he was stirred by a number of possibilities which presented themselves, in particular the chance to change the traditional practices still employed there, and the exciting new possibilities offered by the recently formed Institute of Ophthalmology founded and run by Sir Stewart Duke-Elder. It was while training at Moorfields that his title changed from Jones to Barrie Jones. Late for a ward round one day, the Chief demanded of his junior colleagues “where is Jones?” to which came the response “do you mean Barrie Jones, Sir?” thus earning him the sobriquet which would last in perpetuity. As soon as his training was complete he obtained a part-time research appointment at the Institute, which soon led to the post of Senior Lecturer with honorary membership of the consultant staff at Moorfields.

Barrie Jones possessed not only a powerful intellect, but a range of other assets, including excellent clinical judgement, fine surgical skills, a highly developed sense of curiosity, boundless energy and determination, all encompassed by personal charm and a puckish sense of humour. He would allow no obstacle to stand in his way. Indeed Professor Norman Ashton, already a towering figure as Head of the Department of Pathology at the Institute is alleged to have described him as being “like an oak tree growing up through concrete”. But although his attention to detail and single-minded focus on the problem at hand were legendary, they did not always receive the acclaim they deserved. Called upon to give an opinion about the diagnosis of a patient with an obscure eye condition, Barrie Jones spent almost an hour examining the eye and then wrote a detailed report in the patient’s notes indicating the possible diagnosis and suggested method of treatment. Soon afterwards, a consultant colleague came along to examine the patient, lifted the eye-lids, took a brief glance, scribbled a few words in the notes and departed hurriedly on his way; upon which the patient was heard to say to a passing nurse “now you can tell that he really is an expert”!

In 1963, Barrie Jones was appointed to the most prestigious academic post in ophthalmology in the UK, Professor of Clinical Ophthalmology in the University of London, and it is no exaggeration to say that this appointment was to change the face of British ophthalmology forever.
The Department of Clinical Ophthalmology was based at the Institute of Ophthalmology, but its clinical component was embedded in Moorfields Eye Hospital, and using his exceptional skills, both clinical and interpersonal, he set about changing the method and direction of ophthalmic practice at the Hospital and transforming the relationship between clinicians and researchers. The Department of Clinical Ophthalmology was granted a considerable amount of space within the hospital building as well as more than 20 beds of its own. Furthermore, Barrie Jones, by virtue of his unique personality and well-recognised brilliance was able to bring his influence to bear on just about every aspect of the Hospital’s activities. Furthermore he was able to reconcile the aims and aspirations of Hospital and Institute as never before, so that when I first crossed the threshold of Moorfields, in 1967, so great was the influence of the Professorial Unit (as the Clinical Department was known) that it was almost as though the Hospital was a mere appendage to it. By virtue of the importance of these two institutions, the influence he brought to bear on both Moorfields and the Institute soon spread throughout the country.

Nor was I the only one to sense the overwhelming effect that Barrie Jones had on everything that crossed his path. Douglas Coster, a Visiting Fellow from Australia, later Professor of Ophthalmology at Flinders University, Adelaide, wrote: “...I was fortunate to be given a position with Professor Barrie Jones in the Cornea and External Disease Service...The attachment altered the course of my life. It was at this time that I decided to pursue a career in academic medicine...Barrie Jones had established several groups that were international leaders in fungal, viral and chlamydial eye disease and were also amongst the leaders in corneal transplantation...The standing of the groups attracted Fellows from all around the world and many of them went on to establish major reputations in ophthalmology...

...Although I worked with Professor Jones for a number of years and was privileged to spend quite a lot of time with him, I could never claim to know what made him tick. He had a drive, which set him apart from anyone else I have met in the field...He was able to identify the areas of ophthalmology where advances needed to be made and where advances were feasible. Often he was working in a number of disparate fields at once, assembling willing collaborators around London and the rest of the UK and indeed the world. Each of his pursuits was attacked with extraordinary enthusiasm and effectiveness. The ability to focus intently on important and emerging issues and to get to a point of tangible contribution quickly was one of Professor Jones’ attributes.

...He was a shy man, but a showman nevertheless...never a self-promoter in the manner of so many latter-day rock-star doctors, he was a most energetic promoter of his cause, which was the eradication of preventable blindness. He had a remarkable facility with language...Every paper was carefully crafted...Nothing went out until it was word perfect. He once told me that when writing you have to think until it hurts. When writing or preparing for an oral presentation, he gave great importance to finding the perfect words and considered carefully not only the meaning of the words he used, but their weight and rhythm, much as an orator like Churchill must have done...many of his terms and expressions quickly found their way into the ophthalmic vernacular. Phrases such as “the burden of avoidable blindness” are constantly repeated and have been for 30 years...he believed in what he was doing and presented his findings accordingly and with maximum impact.

In addition to his influence on the conduct of laboratory-based clinical research, Barrie Jones brought about two fundamental changes in clinical practice in the UK. Firstly (and very belatedly considering its common use in other fields such as ENT surgery) he insisted on the use of the operating microscope by all trainees at Moorfields, so that his arrival on the consultant staff spawned a new generation of microsurgeons. Secondly he realised that ophthalmology would only progress by encouraging subspecialisation. In this regard he had a powerful ally, Lorimer Fison, a close colleague on the consultant staff of the Hospital who was already committed to the modernisation of retinal detachment surgery,
while others such as Redmond Smith in glaucoma, took a similar line. As all trainees spent time working in both the Professorial Unit and Fison’s Retinal Unit, while others who were already fully trained returned to serve as Research Fellows in the Professorial Unit, a bright new set of stars was soon released into the ophthalmic firmament, in the shape of ophthalmologists with special expertise in each area of ophthalmic surgery. These new super-specialists were inspired and encouraged by Barrie Jones to undertake research at the Institute and in some cases to study in departments abroad, in order to become acknowledged experts in their chosen fields, before competing with one another to obtain consultant posts (if they had not already done so) at Moorfields and elsewhere. Gone were the days of the general ophthalmologist with or without “an interest”. Moorfields could soon boast some of the finest specialists in every branch of ophthalmology, such as medical retina, external eye disease, oculoplastics, oculomotor disorders, and several others. Barrie Jones himself was especially interested and expert in the surgery of the eyelids, often deformed by trachoma, and similarly, in the microsurgery of the lacrimal drainage system, into which he introduced a new operation of his own, the canaliculodacryocystorhinostomy (CDCR) which was uniquely effective. The buzz and excitement, which pervaded the Hospital when I first crossed its threshold, was palpable and infected us all. It was not a random choice that when I came to write the third volume of the History of Moorfields, it was decided to dedicate it to “Barrie Jones who led the way”.

Aside from the dynamic of his presence in London, Barrie Jones was a towering international figure. His driving ambition had always been to make a major contribution to the eradication of world blindness. The coincidence of his early training in New Zealand with Rowland Wilson and his experience at the Institute of Ophthalmology in London led him to pursue the study of and treatment for eye disease resulting from all kinds of infection, but in particular those caused by Chlamydia. It came to his notice that the chlamydial organism was just as rife here in the western world as it was in the middle east, causing chronic, blinding eye infection in dry hot countries where infestation with eye-seeking flies was endemic, and a low-grade venereal infection associated with sexual promiscuity, in western society. Working with Dr Eric Dunlop, consultant venerealogist at the London Hospital, Barrie Jones conducted unique research into the diagnosis and treatment of chlamydial infection in London, while on numerous field trips to the middle east and elsewhere abroad he and his team conducted meticulous and arduous research, and thereby made a major contribution to the eradication of trachoma throughout the world. Later, with the foundation of the International Centre for Eye Health, he was to extend this role to include, amongst others, the control of onchocerciasis (river blindness) in Africa.

Not surprisingly, the demands on his time sometimes became overwhelming. Not only did he take to working in the station waiting-room on his way home from Moorfields in the evenings, to escape the attentions of those demanding his time at the Hospital (there were no mobile phones), but he soon developed, perhaps unfairly, a reputation for absent-mindedness. Arriving at London Airport one day (a very different place then from the Heathrow of today), he explained to the check-in staff that knew him well, that he had forgotten to bring his ticket. “Don’t worry, Professor,” they said “Just tell us where it is that you are going and we will print you another”. “That is just the problem replied Barrie Jones, I can’t remember that either”! In spite of all this he was loved and revered in equal measure, both professionally and in his personal life. This was in no small measure due to the love and devotion of his wife, Pauline, and the massive contribution that she made, not only to their family life (there were three sons and a daughter) but also to his work. Indeed, not only did Pauline inspire and sustain him, she accompanied him on numerous field trips to inhospitable places where she was a vital part of the research team. As Barrie himself freely acknowledged, theirs was indeed a marriage made in heaven.

From 1975 onwards, he set about realising the achievement of his life’s ambition, by garnering support and raising funds to enable the creation of an international centre that would promote the teaching and promulgation of preventive ophthalmology worldwide.
In 1980, smitten by a life-threatening illness, Barrie Jones was forced to take leave for several months. On his return to normal health he decided that this was the time to change course, relinquish the Chair of Clinical Ophthalmology which he had occupied for 17 years, and spend the remaining portion of his working life in the pursuit of the goal which had always inspired him, namely to relieve the burden of preventable blindness.

In 1981 the International Centre for Eye Health, Department of Preventive Ophthalmology, was formally opened by HRH Princess Alexandra, with Barrie Jones its first Director. The culmination of a life’s work in the eradication of preventable eye disease, he continued as the Rothes Professor of Preventive Ophthalmology and its Director until his retirement in 1986, and after that as Emeritus Professor in the University of London, teaching (especially African students) and researching, for many years afterwards. It was not until 2002 that he and Pauline finally decided to return home to New Zealand and settle down. The International Centre, now based at the London School of Hygiene and Tropical Medicine, continues to thrive, as does the worldwide movement for Eye Health, with training centres springing up in other countries, including Africa, India and America.

Barrie Jones was asked to deliver many of Ophthalmology’s most prestigious lectures, including the Jackson Memorial Lecture in the USA (1974), the Bowman Lecture here in the UK (1975), and was the recipient of many awards and honours, both here and worldwide, including the CBE, the Gonin Medal, the highest award in international ophthalmology, and the King Feisal International Prize in Medicine. As well as awards and honours too numerous to mention individually, in 2004 the International Agency for the prevention of Blindness gave him its Global Achievement Award. A light has indeed gone out, but the legacy that Barrie Jones leaves behind him continues to burn brightly. He is survived by Pauline, their daughter Jenny and sons, Graham, Andrew and Peter.

Barrie R Jones, born 4th January 1921, died 19th August 2009

Peter K. Leaver