

Professor Hugh Ringland Taylor AC

Professor Hugh Taylor has dedicated his life to realising a vision conceived early in his career. While training in medicine and ophthalmology at the University of Melbourne, Hugh's keen interest in public health led him to work with the late Fred Hollows as Associate Director of the National Trachoma and Eye Health Program, screening more than 60,000 Indigenous Australians for trachoma, currently the world's leading cause of infectious blindness. In working towards his Doctorate of Medicine, his work among Indigenous Australians had a profound influence on his career and his choice to work improving vision in the world's most disadvantaged populations, reaching beyond Australia to Liberia, Tanzania, Nepal Vietnam and Eritrea.

During an extended sojourn in the United States, Hugh held chairs in the Schools of Medicine and Hygiene and Public Health at Johns Hopkins University in Baltimore and was the associate director of the International Center for Preventive Ophthalmology at the Wilmer Eye Institute. Whilst there, he developed a World Health Organization Collaborating Center for the Prevention of Blindness and started the first masters in public health program in preventive ophthalmology.

Returning to the University of Melbourne in 1990, Hugh was inaugurated as Ringland Anderson Professor of Ophthalmology – the chair named for his grandfather – and took up chairmanship of the Department of Ophthalmology. Hugh became Managing Director of the Centre for Eye Research Australia, which he founded in 1996. Upon resigning these roles in 2007, he took up the inaugural Harold Mitchell Chair of Indigenous Eye Health in the Melbourne School of Population Health at the University of Melbourne.

He is recognised as a clinician-scientist who has achieved an outstanding career with his research focus in laboratory science and clinical research. His primate model for trachoma provided seminal insights into the progression of clinical disease with understanding the importance of recurring Chlamydia infection of the eye. His contributions to the field of preventive ophthalmology include other seminal works with multidisciplinary colleagues on the value of using ivermectin as chemotherapy for onchocerciasis (river blindness), his discovery of the link between ultraviolet radiation exposure and cataracts, and his contributions to the understanding of the pathogenesis and control of trachoma.

Hugh Taylor has served as a consultant to many agencies, governments, and foundations, and has been a member or chair on numerous advisory committees. He has been recognised with 16 international awards including the Lifetime Achievement Award from the American Academy of Ophthalmology and the Helen Keller prize for Vision Research. In 2001, he was made a Companion in the Order of Australia in recognition of his multiple achievements: to the prevention of river blindness, to academia, and to eye health in indigenous communities.

The most widely published ophthalmologist in Australia, Hugh's research into two of the leading causes of world blindness, trachoma and onchocerciasis, has earned him a prominent reputation in the field of international ophthalmology. His work with the World Health Organization (WHO) has done much to address the scourge of blindness across the globe, including, most recently, his work for the Vision 2020 Global Initiative project to eliminate avoidable blindness by the year 2020.

For over 30 years Hugh Taylor has devoted himself to ophthalmic research and

teaching and to improving lives through the design and delivery of community eye health care programs. In his work with colleagues at WHO, he has been the architect of much of the progress in controlling trachoma worldwide. His population-based studies in Australia have defined the agenda for eye research and for the implementation of important eye care delivery programs in Australia, particularly throughout the Australian Aboriginal community.

Hugh Taylor's life's work has been characterised by the clarity of his vision for the elimination of preventable blindness, born out of his confidence in a rigorous combination of epidemiological research and clinical programs carefully designed to produce comprehensive results. He continues to be a tireless advocate for concerted action from the Commonwealth Government believing that persistent active trachoma in outback communities could be eradicated in Australia within the next three to five years.