

THE EYEBALL ARTISAN

BY CHRIS BALLARD



EXCERPTED FROM

*The Butterfly Hunter:
Adventures of People Who
Found their True Calling
Way Off the Beaten Path*

I've always found it comical when a certain profession is described across the board as a "dream job," as if we could all agree upon what constitutes such an ideal. Professional athletes are often said to have dream jobs, but, as someone who covers them on a regular basis as a staff writer at *Sports Illustrated*, I can attest to the fact that some of them are among the most jaded individuals I've ever met. Somewhere along the way from passion to profession, they lost touch with the nine-year-old they once were, the one who put on mittens to go shoot baskets in the winter, retrieving the ball each time from its snow dimple. So we impugn them when they complain, because they're being paid millions to play a child's game, for God's sake. They should be the happiest people on the planet, or so the equation goes: something you love to do plus gobs of money to do it equals happiness.

This math is part of a larger, and it turns out, thoroughly modern, belief that we are supposed to find happiness through our work. We speak of finding meaningful work, or, more grandly, a "true calling." The upshot is that people feel as though they're expected to find this elusive calling but—as with the notion of true love—no one's quite sure exactly what that is.

So what, I wanted to know, makes some people so sure? What is it about the fit between a job and a person that makes someone consider his work a calling? That's what I set out to investigate two years ago, when I went in search of people who loved their work. Not just any people, though. I wanted to see what I could learn from men and women who are very good at very unusual jobs.

I was continually surprised by what I found, and not just because I was venturing into some pretty strange subcultures. I uncovered passion in the unlikeliest of places and wisdom where I never would have expected. I was astonished at the candor and compassion of many of my subjects. With that, let me introduce you to Willie Danz, "The Eyeball Artisan."

Most of the time, when you ask someone what they do for work, they tell you in a sentence or two. If they're particularly proud of their work, or they sell things—especially something they could get you a great deal on tomorrow—they might produce a business card. That business card might even have a photo on it.

Then there are people like Willie Danz, whose identity is practically fused with his career. Here is what happens when you ask Willie what he does for a living.

You (at cocktail party, making small talk): “So, Willie, what do you do for a living?”

Willie (smiling and plunging his hand into his left pocket rather suspiciously): “I’m glad you asked that!”

You (wondering if he’s going to produce a scary religious pamphlet): “Okay... “

Willie (holding up an eyeball that looks disconcertingly life-like): “I make these!”

You (taken aback): “What in God’s name is that?”

Willie: “I’m glad you asked!”

Danz uses this trick because were he to say, “I’m an ocularist,” (pronounced ock-u-LAIR-ist), people would probably assume he was a doctor of some sort. And, although many of his patients address him as such—perhaps because he wears a white doctor’s coat, has a doctor-like office and acts rather like a doctor—he is not a doctor. And if he said, “I make prostheses,” which is the technical term for the eyes, people might envision him working in a plastic appendage factory, fashioning fake arms. Then again, if he said he made glass eyes, the best-known term for the prostheses, it would be incorrect on two counts. First, the prostheses are no longer made of glass, and haven’t been since the 1940s (at least not in the States). Second, they aren’t actually entire eyeballs, but rather concave acrylic shells that fit on top of

the eye muscle—or an implant made to mimic the muscle—sort of like a bike helmet over a child’s skull.

But the main reason Danz carries around the eyeballs is because he really, really likes to talk about his work. Even among ocularists, a close-knit community filled with many second- and third-generation practitioners, he stands out. Not only because he’s one of the most accomplished (though he is) and he makes all manner of unusual eyes for horses, dogs and prisoner (though he does) but also because he is fifth-generation (one of his distant relatives made the first glass eye). Some people rebel against the family business; I was curious what made him so passionate about his.

I first met Danz at 8:30 on a Wednesday morning at his office, on the 22nd floor of an office building in downtown San Francisco, just up from Union Square. Previously leased by a dentist, the place maintained the hygienic feel of its former tenant; I could picture the ghosts of nervous preadolescents fidgeting in the waiting area. A friendly 27-year-old named Rachael sat at a desk in the reception area. Rachael came in three days a week, she told me, mainly to do filing, billing and, when she had time, extra painting on the prostheses (she was particularly good with the irises). Off of the reception area was a lab room and a patient room, which had a barber’s chair and two large south-facing windows. The orientation was important, Danz explained, because to accurately judge the color of the prostheses, indirect light, either northern or southern exposure, is preferred (“a noonday northern light with slightly overcast is the absolute best,” he told me, somewhat wistfully).

Handsome in a non-threatening way, Danz looks like he plays a doctor on TV. Though 54 years old, he could pass for a man in his forties; he has a full head of brown hair, which he keeps impeccably combed, smooth skin and the upbeat manner of someone who just found a five dollar bill in his pocket. He smiles a lot, has a goofy laugh that he uses to warm up his patients and speaks in an even, reassuring tone, like an airline pilot pointing out the Grand Canyon below to your left. Every day, he wears some variation of dress shirt and tie, over

which he buttons a white lab coat. Ever the professional, he keeps a pack of mints handy—“good breath is important”—and has a small mirror in his lab so that, before patients arrive, he can double-check the status of his hair.

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His has been an illustrious career. Danz estimates he’s made more than 15,000 prostheses in thirty years in the business. He was president of the American Society of Ocularists and a charter member of the National Examining Board of Ocularists. In a field that numbers only 170 or so in the United States (and 400 in the world), he is renowned, both for his work and his family name. He has patients who come from across the country for his services, which run between \$2,000 and \$2,400 per prosthesis. (The eyes are covered under “durable medical equipment,” an insurance heading that includes wheelchairs, prosthetic arms and legs, oxygen tanks and bedpans, a grouping that many ocularists believe does their ‘artwork’ a disservice). One woman, a fashion model, flew in from the Philippines to get a Danz eye; another regularly comes in from Washington D.C. for checkups. Danz’s work is so convincing that nurses at UCSF, where he spends two days a month working with children who have retinoblastoma, occasionally attempt to dilate the fake eye rather than the real one just prior to anesthesia. Other patients have a hard time convincing on-lookers that they are indeed sightless; one woman with two striking green-irised Danz prostheses was accosted for sitting in the handicapped seat of a bus. After futilely pleading her case, she finally had to remove her eyes to prove they were fake.

On this morning, the first patient was Christina, a woman in her forties receiving her annual checkup. She'd lost an eye—I couldn't tell which at first—to glaucoma. Doctors tried numerous surgeries to save it but to no avail. She took a seat in the chair and Danz made small talk for a couple minutes before picking up a small suction cup-like device.

“Let's have a look then, shall we?” he said

Then he stuck the suction cup onto her eye and pulled it out.

Earlier in the morning, anticipating this very moment, I had actually spent a couple minutes in my hotel bathroom, practicing what I hoped was a clinically detached facial expression—lips pursed, eyebrows slightly raised, *nothing to see here*. It came in handy.

The woman's orbital socket was moist and pinkish-white. Imagine if one replaced an eyeball with an oyster and you'll get the general idea. It was not disgusting so much as disorienting. My brain wanted to fill in the missing space with something—without the twin markers of the eyes, I didn't know where to focus my attention. Danz, as would be expected, was totally inured to the sight. By his count, he's probably peered into around in somewhere in the area of 30,000 eye sockets during his career. He's seen so many that they inhabit his sleep. “I had a dream that I went into the bathroom, looked into the mirror and saw that I'd lost an eye,” Danz told me at one point. “At first, I was freaked out and thought, “Oh no!” Then I started looking around in there and trying to figure out how I was going to fit myself.”

Like those who go into medicine, Danz has to be able to view a patient's anatomy in blueprint fashion. When I asked him if he was ever bothered by what he saw, he cocked his head for a moment and thought before answering, “People say, ‘You have to look in eye sockets.’ Well, I think there can be beauty in an eye socket. If the surgeon was good and there's good tissue in there, it can be beautiful.”

This comment made me pause. Not only because of its unlikely nature but because of Danz's sincerity. It occurred to me that if one were to design a litmus test for whether someone had found a calling, this could serve as it, in one easy question: do you see beauty in the details of your work? Certainly, this is easier to do if you're a florist, or an interior designer or, well, almost anything other than an ophthalmologist. And even then, it would seem to me much easier to see the prostheses—the part of the job that could more readily qualify as 'art'—as beautiful and maintain a clinical neutrality about the eye sockets. Then again, considering all Danz has seen and heard, he wouldn't survive long if he didn't feel this way. There are innumerable ways to lose an eye, and most of them, as I learned, are quite ghastly.

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The second patient of the day was a good example. Forty-three years old, Brett accompanied most sentences with a self-conscious staccato laugh. He lost the use of his right eye when he was five years old while playing with a dart gun in the backyard. When the gun jammed, he did what children do in such situations: he turned the pistol around and looked down the barrel to see if he could figure out what was wrong. Then, as he put it, "It went POW!"

He remembers screaming and then running into the kitchen to find his mother, who promptly passed out upon seeing her son with a dart protruding from his eye socket and blood running down one side of his face. "My poor mother," he said with a wan smile, "was traumatized for life."

And this is one of the less gory stories. Danz estimates that 40% percent of his patients lose their vision due to eye disease and tumors, the most common being malignant melanoma and retinoblastoma, a congenital cancer. Another 5% percent lose them to congenital anomalies such as congenital anophthalmia, when a child is born without an eye, or congenital microscopia, when an eye stops developing. The rest are due to what is widely termed ‘trauma.’ This includes relatively mundane mishaps such as the female patient who was hit in the eye when her paramour tried to show her the proper golf backswing and the young man I met that afternoon who’d been shot in the eye with a BB gun as a 15-year-old (cue a thousand admonishing parents).

Then there are the more unusual cases. Such as the woman who was attacked by a Grizzly bear on a nature walk in Alaska and, as Danz remembered it, “had a good part of her face torn off” when the bear moved to protect its cubs. Another woman was walking through a field when a great horned owl swooped down and landed on her head, clawing at her eyes. Then there was the local police officer who was playing paintball—‘He got taken out of the game, called himself safe and lifted up his goggles when—poof!—he got hit in the face,” explained Danz.

I also heard some truly disturbing, doubt-the-goodness-of-humanity stories. One woman I met lost the use of an eye when, as a grad student at Penn, she was attacked, raped and stabbed in the eye. Danz told of a husband who, in a fit of rage, reached in and pulled out his wife’s eye, then held it up to her face and said, “Look what I did.” Twice, Danz has treated patients who tore out their own eyes. “Both of them were coming down off drugs,” Danz told me. “The first guy, his girl had recently broken up with him. The second guy, he felt he’d developed an evil eye. You know the scripture? Something like, ‘if thine eye offends ye, pluck it out.’ Well, he did.”

It takes a certain type of person to enter a line of work that requires coming into contact, even if only second-hand, with this type of trauma. Many an aspiring surgeon or ER doctor has been diverted to private practice upon seeing one too many mangled arms or open chest cavities. Some are squeamish, others overflow with empathy and are haunted by the specters of patients past. Months later, I was still disturbed by the stories Danz told (not to mention apprehensive around golfers). When I relayed the tales to my friends, many recoiled—except for my brother, who’s an ER doctor. He pushed me for more details. Interesting. Was the orbital bone damaged? Was there massive hemorrhaging? But, like I said, the normal people were disgusted.

Danz’s wife, who is a schoolteacher, tried to fill in for her husband once when he broke his arm but, as she told me, “my stomach doesn’t do so well when you get to the socket.” For many years Danz hoped that his son Dave would follow him into the business to create a sixth generation, but he couldn’t deal with the emotional carnage. “I could embrace the paper work, the lab work and the patients, but when it came to the children, that was my downfall,” said Dave, who is now in banking. “To see the pain and to constantly hear their stories wore on me.”

Willie, on the other hand, sees the stories as part of the healing, and his role as that of a listener. “I tend to just let them talk,” he told me while re-setting his lab in between patients. “Listen and not be judgmental. Agree, nod. The one thing ocularists provide that doctors don’t is a chance to unload. Doctors often come in after other people have done a lot of the prep and are real busy. I really make an effort, and have the time, to let them talk.”

He sees all kinds of patients: lawyers, doctors, politicians, a commercial airline pilot, a federal judge, the elderly, the homeless. Danz doesn’t just treat humans, either. He’s done eyes for 40 horses, including “Pavo Real,” a show horse owned by Bo Derek that Danz estimates was

worth “at least a million,” and four dogs, including a police canine in Reno. He used to work with patients at the California Medical Facility at Vacaville State Penitentiary. When one of the convicts escaped and burglarized a house, he lost his prosthesis while fleeing from a second story window. The police found it and took it to a local ophthalmologist who identified it as a Danz eye. Danz examined it and remembered the patient; six months later, Danz was on *America’s Most Wanted*, explaining the case. Not long after, the thief was apprehended.

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Though he generally frowns upon it, Danz has also made unusual eyes by request. So when a Hispanic woman who’d always had brown prostheses came in asking for “Elizabeth Taylor eyes,” he went looking through magazines to make them for her. He’s made a Harley Davidson eye for a biker, an American flag eye for a veteran, a 24-karat gold skull for a guy with an eye patch, and, once, a yellow-and-green cat eye for a guy whose nickname was “Cat.” One patient kept showing up and his good eye was bloodshot. “He finally admitted he was smoking a lot of grass,” Danz said, chuckling. “I asked him if he was going to quit and he said no. So I had no choice but to make him a stoned prosthesis with extra blood vessels. I said, ‘If you ever quit the habit, let me know and I can take them out.’”

During my two days in the office I met, among others: a peppy 14-year-old skateboarder who was born without one eye; a 19-year-old deaf boy who’d been coming in since he was three months old; Claudette, an African-American Pentecostal minister who, prior to coming

into the office, had been preaching enthusiastically, unaware that she'd put in her eye upside down (the parishioners, Claudette recounted, thought she'd really channelled the holy spirit on that day); and John, who'd been coming in since 1977, when he'd lost an eye to shards of glass in an auto accident. Danz greeted each like a friend. With the help of a Polaroid—he snaps one of every patient—he says he can remember almost everyone he's ever worked on. "I feel like once I make a prosthesis for someone, I become part of their life," he told me in a rare moment of emotional analysis. "And they become part of mine."

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ABOUT THE AUTHOR

After a string of oddball jobs, Chris Ballard found his calling at *Sports Illustrated* as a staff writer covering the NBA and writing features. He has written profiles of people with offbeat professions for the *New York Times Magazine* and is the author of *Hoops Nation*, which was named one of Booklist's Top Ten Sports Books of 1998. Ballard recently moved from New York City to Berkeley, California.

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