

## THE SYNTONIC SYNDROMES

by Larry Wallace, O.D., F.C.S.O.

### I. Mu Delta ( $\mu\delta$ ) Syndrome (The Chronic Syndrome)

- A. Description: for an individual with chronic health problems due to glandular or organic imbalances, toxic conditions or a past traumatic event.
- B. Symptoms include: **general fatigue (780.7), vision system loses stamina and speed, reduced peripheral vision, asthenopia (368.13), headache (784.0), orbital pain (379.91), photophobia (368.13), transient blur (368.8), weight loss.**
- C. Diagnostic factors include: **constriction of the visual fields for form and/or color (368.45), alpha-omega pupil (adrenal exhaustion), esophoria (378.41), low recoveries on ductions (especially base in), embedded vision pattern, esotropia (378.00), convergence excess (378.84), accommodative insufficiency (367.5) and excess (367.53), reduced oculomotor skills (794.14). Acidity in aqueous, reduced red/green fields, interlacing fields, reduced blue field indicating liver involvement (toxemia), calcium deficiency, under-function - pale, flaccidity, acid pH.**
  1. Pathology factors: **diabetic cataracts (366.9), optic atrophy (377.0), choroid toxicity with kidney involvement.**
- D. Therapeutic considerations: **physiological stabilizer and detoxifier, producing sympathetic stimulation, motor stimulation to the visual system, produces exo reflex. Can be used to increase calcium absorption (to strengthen orbital walls in progressive myopia and esotropia), to stimulate thyroid, induce alkalinity.**
  1. Treatment: Mu Delta is often combined with Alpha Omega for 10 minutes of each to incorporate emotional stability. Often follows Alpha Delta when used for 10 minutes each. Mu Delta may be combined with "S" to increase its action. End the treatment session with Mu Delta if another filter is used to leave the patient in physiological balance. The need for Mu Delta increases with age.
- E. Duration of treatment:
  1. Used for 10 to 20 sessions.
  2. Progress evaluations include pupil responses, visual fields for form and color done every 6-8 visits, and analytical findings.
  3. Follow-up includes one-, three-, six-month and yearly exams.

### II. Mu Upsilon ( $\mu\upsilon$ ) Syndrome (The Acute Syndrome)

- A. Description: for an individual with acute problems relating to recent head trauma, anoxia, stroke or high fevers. This person needs palliation and is often suffering from headaches, hypersensitivity or pain. This syndrome requires depression of function or parasympathetic activation to promote healing.
- B. Symptoms include: **diplopia (binocular and monocular 368.2), headache (784.0), inflammation or "itis", transient blurred vision (368.12), asthenopia (368.3), orbital pain (379.91), abnormal posture (781.9), vertigo (780.4), motion sickness (994.6) and excess alkalinity.**

- C. Diagnostic factors include: **high exophoria (378.42), exotropia (378.10), convergence insufficiency (378.83), enlarged blind spot (368.42),** constriction of the visual field (368.45), visual field defects such as sector losses or monocular diplopia in the field (368.4), accommodative insufficiency (367.5), deficiency of smooth pursuit movements (379.58) and alpha-omega pupil (794.14).
  - 1. Pathology factors: acute trauma, e.g., corneal abrasions (918.1), strokes and head trauma syndrome, conjunctivitis (372.30), iritis (364.3), cataract (senile)(366.9), corneal opacities and wet macular degeneration (362.50).
- D. Therapeutic considerations: **to reduce swelling cortically and ocularly, redness and fluid, reduce pain by sensory depression, essential history of head trauma, fever, ear infections or stroke, produces eso reflex,** to treat toxic exophoria from secondary infections of the sinuses, teeth and tonsils; to activate cerebral depression through parasympathetic stimulation, create an acidic pH.
  - 1. Treatment: Mu Upsilon is used for 20 minutes alone or its action can be intensified by adding Upsilon Omega ("D" can be added to increase the action of Upsilon Omega) or Omega alone, each for 10 minutes. Upsilon Omega can be used until the pain subsides, then Mu Upsilon alone is given. Upsilon Omega is both a sensory and motor depressant with increased parasympathetic action over Mu Upsilon alone. Omega can be used as a motor relaxant in spasm and nystagmus.
- E. Duration of treatment:
  - 1. Used typically for 20 sessions.
  - 2. Progress evaluations include pupil responses, visual fields for form and color done every 6-8 visits, and analytical findings.
  - 3. Follow-up includes one-, three-, six-month and yearly exams.

### III. Alpha Delta ( $\alpha\delta$ ) Syndrome (Lazy Eye Syndrome)

- A. Description: for an individual who is cross-eyed or has amblyopia. This person may be parasympathetic dominant, exhibit over-flexion; body and eyes turned in.
- B. Symptoms include: **reduced acuity in one eye, uncoordinated movement (781.3),** poor depth judgment, head tilt/turn, diplopia (368.3), loss of peripheral vision, tunnel vision.
- C. Diagnostic factors include: **esotropia (378.00), amblyopia (368.00), esophoria (378.41),** suppression of binocular vision (368.31), field constrictions (368.45), abnormal retinal correspondence (368.34), deficient vergence abilities (368.33), subnormal accommodation (367.5), excess calcium in ocular media, low thyroid (mental sluggishness, listlessness, slow pulse, weight gain, low metabolic rate).
  - 1. Pathology factors: scotoma when there are retinal exudates, optic atrophy (377.0), suboxidation in diabetes, asthma, blue sclera, early chalazion (373.2).
- D. Therapeutic considerations: **to stimulate the sympathetic nervous system with a strong sensory-motor stimulant,** used with reduced fields, normal fields and long-standing strabismus. This filter decreases ionization at the retinal level to build electrical potential for exciting synaptic transmission.

1. Treatment: Alpha Delta is often combined with Mu Delta for a combination of 10 minutes each. It is also used after a treatment series of Alpha Omega and Mu Delta combination to improve acuity in amblyopia. Alpha Delta can be used alone for 20 minutes when intense sensory-motor or sympathetic stimulation is desired.
- E. Duration of treatment:
1. Used typically for 20 sessions.
  2. If a visual field is less than 10°, a second series of 20 sessions may be necessary.
  3. Progress evaluations include pupil responses, visual fields for form and color done every 6-8 visits, and analytical findings.
  4. Follow-up includes one-, three-, six-month and yearly exams.
- IV. **Alpha Omega ( $\alpha\omega$ ) Syndrome (Emotional Fatigue Syndrome)**
- A. Description: for an individual tending toward emotional exhaustion, mood swings, overt stress, negative emotional affect, visual stress, frequently seen in children. This individual may also exhibit extreme fatigue or hyper-irritability.
- B. Symptoms include: **photophobia (368.13), transient blurred vision (368.12), asthenopia (368.13), abnormal fatigue (780.7), headache (784.0), dizziness (780.4), frustration, allergies, asthma, fluid retention.**
- C. Diagnostic factors include: **alpha omega pupil response, low breaks and recoveries in ductions, especially adduction (368.33), fatigue exophoria (378.42), adrenal exhaustion, pelvic or sexual tension, reduced ocular motor skills (794.14), subnormal accommodation (367.5) in myopia, constriction of visual fields (368.45), constriction of blue color field, heart involvement, hyperthyroid (mental hyperactivity, weight loss, rapid pulse, tremors, high metabolism).**
- D. Therapeutic considerations: **to balance the sympathetic and parasympathetic for emotional types.** Management affected by the severity of symptoms, onset, duration, general health, lifestyle and stresses (within and without the individual's control).
1. Treatment: Alpha Omega can be prescribed for 20 minutes but is usually combined with Mu Delta for 10 minutes of each filter combination. Alpha Upsilon can be substituted for Alpha Omega in female sexual disorders.
- E. Duration of treatment:
1. Used for 10 to 20 sessions.
  2. Duration is complicated if life stresses or emotional upset are not reduced.
  3. Progress evaluations include pupil responses, visual fields for form, color and blind spots done every 6-8 visits, and analytical findings.
  4. Pupil responses will normalize as the visual fields expand and the analytical will move toward the expecteds.
  5. Follow-up includes one-, three-, six-month and yearly exams.

Note: numbers in (parentheses) are ICD-9-CM codes.