PHOTOPHOBIA By Dr. G. I. Deane Merced, California

One of the great problems that confronts the optometrist in central California is Photophobia; glare is intense during the summer months.

For a number of years, prior to becoming a Syntonics, it was my practice to quite generally prescribe some shade of tinted lenses for those of my patients suffering from photophobia. The results from this procedure were not gratifying, but at that time I knew of no other means of giving such patients any comfort.

I am not attempting to make you believe that Syntonics has eliminated the necessity of prescribing tinted lenses for all my patients, but, it has practically done away with the necessity of tint in anything except fit-overs to be worn at certain times. I am not making any claim that, or do I expect that, these patients whom I have corrected syntonically, will not eventually have a re-occurrence of these former symptoms. However, it is my hope that the trouble will not be so severe, and will be more easily and quickly corrected at the second occurrence.

I also want to make it clear that any patient who is suffering from some foci of infection such as bad teeth, tonsils, or sinus, should have the infection cleared up, otherwise, good or lasting results cannot be expected by treating photophobia syntonically. Perimetry plays a most important part in my practice of Optometry. We must not try to do the impossible with Syntonics.

The cases on which I am reporting had, as far as I have been able to ascertain, no pathosis causing photophobia. A great majority of those were patients with ALPHA OMEGA pupils. You will note that we have followed ALPHA OMEGA with UPSILON. Where the ALPHA OMEGA pupil was more pronounced, we give more ALPHA OMEGA, and where the pupil held contraction fairly well, more UPSILON. It is true that UPSILON, alone, will give temporary relief to any Photophobia case, but ALPHA OMEGA gets at the root of the cause in an ALPHA OMEGA pupil, and when followed by UPSILON, the relief is pronounced and the results, gratifying.

April 29, 1935

Patient, H. H. C., age 35. Male, Asthenic

Wearing Crooks B. Pupil held contraction 10 seconds.

Nascentized N/L $\alpha\omega$ 15 minutes, υ for 10 minutes every day. After 7 days pupil held 50 seconds. Symptoms gone and discontinued wearing shade. After 13 adaptations pupil held 90 seconds. One year later symptoms had not returned and pupil held 70 seconds. No shade worn.

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May 15, 1935

Patient, M. W., Age 18, Female, Asthenic

Pupil held contraction 15 seconds

Nascentized L one day and N/L the next. Syntonic Rx: $\alpha\omega$ for minutes, ν for 10 minutes. Adaptations given every day. After 12 syntonizations pupil held 30 seconds. After 17 syntonizations pupil held 90 seconds. Eight months later, no return of photophobic.

May 27, 1935

Patient, L. S., Age 35, Male, Asthenic.

Wearing Crooks B constantly. Pupil held contraction 15 seconds.

Nascentized L- $\alpha\omega$ 15 minutes, υ 10 minutes, every day. After 14 syntonizations pupil held 80 seconds. Symptoms gone. Calobar fit-over worn when driving only. 14 months later, having slight trouble with glare.

April 30, 1935

Patient W. J. C., Age 46, Male Asthenic

Intense photophobia, wearing Crooks B, and Crooks C fit-overs a good part of the time. Suffered constantly; having corneal ulcers regularly every month or so, had had 40 in all. Atrophine had caused pupil to be constantly dilated.

Nascentized L- $\alpha\omega$ for 15 minutes, υ for 10 minutes daily for 5 days. Photophobic better, contraction of pupil improved, eyes badly inflamed. Gave 5 syntonizations of $\mu\upsilon$, and on fifth day corneal ulcer appearing and the pain was intense. Gave $\upsilon\omega D$. The next morning patient phoned that he was going to Fresno to see his specialist. The specialist could find no trace of ulcer; and it must be Iritis; gave Atropine; patient returned to my office after 4 days with pupil badly dilated again. Gave 15 syntonizations of $\alpha\omega$ for 15 minutes, then υ for 10 minutes. Pupil contraction normal. Symptoms gone; some inflammation. Gave 10 adaptations of $\mu\upsilon$. Inflammation gone; contraction good, pupil held 80 seconds. No shade worn. Patient took an auto trip across continent and used his Calobar fit overs only one day. No return of corneal ulcers or photophobia since that time. Pupil holding contraction.

June 10, 1935

Patient, L. B. Male, age 46, Asthenic

Eyes badly inflamed, intense photophobia for years. Pupil held 7 seconds.

Rx: N/L- $\alpha\omega$ for 1 minutes, ν for ten minutes, every day for 17 days.

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June 15, 1935

Patient, Mrs. W. B. Age 35, Asthenic

Photophobia, pupil held 15 seconds.

Rx: N/L- $\alpha\omega$ for 14 minutes, υ for ten minutes, every day for 17 days. After which pupil held 70 seconds. Symptoms still present. Patient claimed no relief. Case beyond my understanding. Made no charge for syntonizations. She has referred a number of patients to me since, all of whom have gotten results and have paid for syntonizations.

July 26, 1936

Patient, J.M. A., Male. Age 40, Asthenic

Photophobia. Pupil held 30 seconds

Rx: N/L- $\alpha\omega$ for 10 minutes, and υ for 15 minutes. Syntonizations every day for 14 days. Pupil held 90 second, no return of photophobia after one year but eyes badly inflamed at times. Gave L- $\mu\upsilon$ for 15 syntonizations. Inflammation gone.

July 22, 1935

Patient, M. M. Female, age 15

Intense Photophobia. Pupil held 10 seconds.

Rx: L- $\alpha\omega$ for 15 minutes, υ for ten minutes, every day for 15 days. Pupil held 80 seconds; no return of symptoms after one year.

June 5, 1935

Patient, J. L. B., Male age 32

Photophobia, eyes badly inflamed after taking glass of beer, and the photophobia much worse when eyes are inflamed. Pupil contraction good.

Rx: L-µv for 15days. Symptoms gone; beer did not affect eyes. Patient happy. This patient had a dead tooth removed at my request and I cannot claim credit for Syntonics, as the tooth may have been causing the trouble.

October 8, 1935

Patient, H. L., Female, Age 40, Asthenic

Intense Photophobia; pupil hold 18 seconds.

Rx: N/L- $\alpha\omega$ for 15 minutes, and υ for ten minutes, every day for 26 days. Pupil held 77 seconds. No symptoms after one year.

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November 15, 2935

Patient, E. Mc., Female, Age 15

Photophobia; pupil hold 7 seconds

Rx: N/L- $\alpha\omega$ for 15 minutes, followed by υ for ten minutes, every day for 20 days. Pupil held 75 seconds. Symptoms gone. Saw her mother last month and she says her daughter is beginning to have some photophobia again when in very bright light.

November 5, 1935

Patient, G. N. Female, Age 19, Asthenic

Intense Photophobia. Pupil held 15 seconds.

Rx: N/L- $\alpha\omega$ for 15 minutes, followed by υ for ten minutes, every day for 16 days. Pupil held 60 seconds; symptoms gone. Have not seen patient since.

December, 1935

Patient, P. W., Female, Age 25, Asthenic, teacher

Intense photophobia; patient of mine since she was a child; had worn Crooks B for years, constant dread of light. Teaching in San Francisco and spent her December vacation in Merced taking 13 syntonizations.

Rx: N/L- $\alpha\omega$ for 15 minutes, followed by υ for ten minutes. Pupil held 15 seconds before syntonizations and 80 seconds after. Shade removed from glasses and no symptoms after 10 months.

December 15, 1935

Patient M. R., Female, Age 15.

Photophobia; pupil held 15 seconds.

N/L- $\alpha\omega$ for 15 minutes, υ for ten minutes, every day for 21 days. Pupil held 75 seconds; symptoms gone; after 4 months symptoms returned. Pupil holding only 20 seconds. Gave same Rx for another 15 days. Symptoms gone; pupil held 90 seconds. Saw patient last month. Pupil holding 70 seconds. No symptoms, abut I am doubtful about case.

January, 1936

Patient, M. P., Female, age 26, Asthenic

Photophobia; pupil held 28 seconds.

Rx: N/L- $\alpha\omega$ for 10 minutes, υ for 15, every day for 15 days. Pupil held 90 seconds; symptoms gone. Last week saw patient wearing pair of cheap dark glasses. If she is not having trouble, she will have it soon.

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January 28, 1936

Patient, D. C., Female, age 30

Intense Photophobia. Pupil held 10 seconds.

Rx: N/L- $\alpha\omega$ for 15 minutes, υ for 10 minutes, every day for 15 days. Pupil held 80 seconds; symptoms have not returned to date.

June, 1936

Patient, J. P., Female, Age 17, Asthenic

Pupil held 25 seconds.

Rx: N/L- $\alpha\omega$ for 10 minutes, followed with υ for 15 minutes, daily for 15 days. Pupil held 90 seconds; no symptoms, however, I do not know what will happen after a year.

March 24, 1936

Patient, C. E. D., Male, Age 40, Asthenic

Pupil held 10 seconds.

Rx: N/L- $\alpha\omega$ for 15 minutes, υ for 10 minutes, every day for 15 days. Pupil held 60 seconds; symptoms gone and does not wear his /crooks C shade any more.

March, 1936

Patient, H. F. B., Female, Age 44, Asthenic

Pupil held 10 seconds.

Rx: N/L- $\alpha\omega$ for 15 minutes, υ for 10 minutes, every day for 21 days. Pupil held 90 seconds, symptoms gone to date.

March, 1936

Patient, H. L. Female, Age 40, Asthenic

Wearing Crooks B constantly. Intense photophobia; pupil held 5 seconds.

Rx: N/L- $\alpha\omega$ for 15 minutes, υ for 10 minutes, every day for 15 days. Pupil held 80 seconds; no symptoms with shade removed to date.

April 1936

Patient, E. K., Female, age 18, Asthenic

Pupil held 10 seconds.

Rx: N/L- $\alpha\omega$ for 15 minutes, υ for 10 minutes for 22 syntonizations. Pupil holds 70 seconds; no symptoms.

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April 25, 1936

Patient, R. A. Male, Age 11

Pupil held 30 seconds.

Rx: N/L- $\alpha\omega$ for 10 minutes, υ for 15 minutes, every day for 15 days. Pupil held 90 seconds. No symptoms to date.

April 25, 1936

Patient, J. F. W., Female, age 29, Asthenic.

Had prescribed Cruxite 3rd shade year before but she could not go boating or play tennis on account of photophobia even when wearing shade.

Pupil held 30 seconds.

After 5 syntonizations of $\alpha\omega$ for 10 minutes, υ for 15, had no trouble without shade. Went boating on lake all day.

After 10 syntonization of the above Rx the pupil held for over 2 minutes. Patient reports no further trouble up to the present time.

May 14, 1936

Patient, S. C., Female, age 35, Asthenic

Pupil held 2 seconds.

Rx: N/L- $\alpha\omega$ for 10 minutes, ν for 15 minutes, every day for 20 days.

Pupil held 80 seconds. No further symptoms.

June 10, 1936

Patient, E. F. E., Female, Asthenic

Pupil held15 seconds.

Rx: N/L- $\alpha\omega$ for 15 minutes, υ for 10 minutes for 15 syntonizations. Pupil holds 75 seconds; no further symptoms.

June 29, 1936

Patient D. S., Female, Age 36, Asthenic

Pupil held 15 seconds.

Rx: N/L- $\alpha\omega$ for 15 minutes, υ for 10 minutes for 20 syntonizations. Pupil holds 90 seconds and symptoms gone.

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September 1, 1936

Patient L. V. R. Female, Age 43, Asthenic

Pupil held 15 seconds.

Rx: N/L- $\alpha\omega$ for 15 minutes, υ for 10 minutes for 17 syntonizations. Pupil holds 80 seconds. No more trouble from photophobia.

May 10, 1936

Patient, S. H. B., Female, Age 50

Photophobia; eyes badly inflamed; just recovering from corneal ulcer; vision in left eye 20/200 due to scar tissue. After 10 syntonizations of $\mu\nu$ photophobia gone; vision improving. Scar less pronounced. After 30 syntonization of the same Rx the scar practically gone. Vision in left eye 20/30. No photophobia. Patient's friends noticed the difference in her cornea after 15 syntonization as central part of cornea had been almost white.

Discussion of paper by G. I. DEANE on "PHOTOPHOBIA"

By

Dr. W. B. Blee

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Photophobia, as discussed by Dr. Deane in his paper, is a complaint which does not seem to be as prevalent around New York as in California. While we do have glare cases to contend with, it is one of the minor ailments which we meet in our practice.

It has been my position for years before Syntonics became a part of my practice to avoid the prescribing of tinted lenses in these cases, for the plain and simple reason that I believed we did not know enough about the effects of such tints on the patient. Many times patients who have complained of sensitivity to light have been relieved by proper refraction. After the glasses had been worn a short time they had little or no trouble under ordinary light conditions. Without attempting to detract from the value of Syntonics in Dr. Deane's cases as cited, the question must be raised, "How much relief was afforded through his prescribing the proper glasses WITHOUT A TINT?"

The other point on which I would question the cited cases, is the use of υ after $\alpha\omega$. In the $\alpha\omega$ combination the α is the dominant filter, acting as a sensory stimulant. The following of $\alpha\omega$ by υ , which is defined as an intense sensory depressant seems to me to have the effect of neutralizing the α in the α combination.

The few photophobes I have come across since I become a syntonist, have all been relieved by the $\alpha\omega$ combination. I do, however, submit the following case because of the trouble the patient had and the results obtained!

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Mar. 1935

Patient, Miss A. F., Age 24, Asthenic

Case History: Previously fitted with +.50 S. O. U. with Crooks A. tint. Wore eyeshade constantly in office, and was constantly moving her desk to various locations because of the light. When she came to me, refraction showed.

Static retinoscopy findings

O. D. -.50

O. S. -.75

Muscles:

Dist. Zero

Near: 3º esophoria

Fusion:

Poor

Accommodation: Poor (took five seconds to focus from distant to near point)

Rx: L- $\alpha\omega$ for 12 minutes, with N/L- $\alpha\nu$ for 12 minutes, on a 1-3 basis every other day, and finishing with three syntonizations of μ for 12 minutes. No glasses prescribed. At the end of 14 syntonizations patient was dismissed. She claimed she had complete comfort. Up to one month ago, patient had no trouble at all with light in her office, and has discarded eyeshade.