### Case Study

#### Learning Cases/Amblyopia

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# Learning Case/Amblyopia Basic Premises

Learning difficulty. Usually small symmetric fields. Treat 90% as chronic with unless history suggests increased sympathetic activity. AO/MD 10/10 to start

Asymmetry with fields think TBI and Strabismus.

Asymmetry is a hallmark of amblyopia but not necessarily in the field. Chronic, Cause, ANS usually subdued. Treat on "red" side.

# Learning Case/Amblyopia Basic Premises

Amblyopia occurs in the brain. Usually significant asymmetry found in evaluation especially spatial. Dissimilar images cannot be fused leading to suppression to avoid confusion.

Ultimately to permanently improve amblyopia (visual acuity) symmetry must be provided to the brain that includes equality in spatial localization.

Syntonics will not be the only treatment but does need to come first.

# Learning Case/Amblyopia Discovering Asymmetry

Refraction
Ocular Alignment
Dynamic Retinoscopy
Tests of Localization – Cap test
VO Star
Kinetic Visual Fields

### Amblyopia Case Study – Chris P

#### History

05/07/2018, First eye examination

Age – 7.2, First grade,

Reason for Examination - Reading delays – 1 year

Development: Normal pregnancy/delivery, no developmental delays, history of falling off couch at one-year-old. Nail biting, perfectionist, stable demeanor.

### Amblyopia Case Study – Chris P

#### Diagnosis

- 1. High Exophoria with V pattern
- 2. Saccadic and Pursuit Dysfunction, moderate
- 3. Kinetic Visual Field Deficit, moderate
- 4. Anisometropia, Amblyopia, OD
- 5. Visual Processing Deficit
- 6. Visual-Spatial impairment

Date 6/18/18

Acuity Sc 20/200 Cc 20/70

20/20 20/20

Static +375-075 180

Plano

Refraction +200-050 180

Plano

Dynamic +225-050 180 ½ in

+025 ½ in

Alignment 2XP/15XP

Cap Test 1" O Target +175

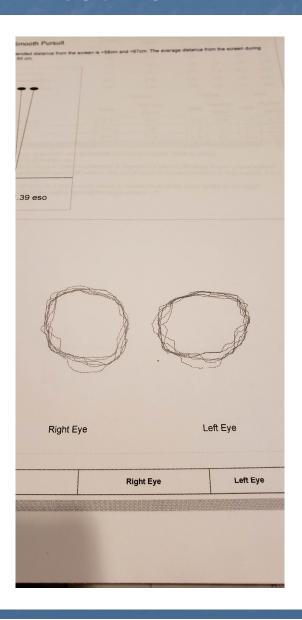
½" O/I +025

Prescribed +200-050 180 ½ in

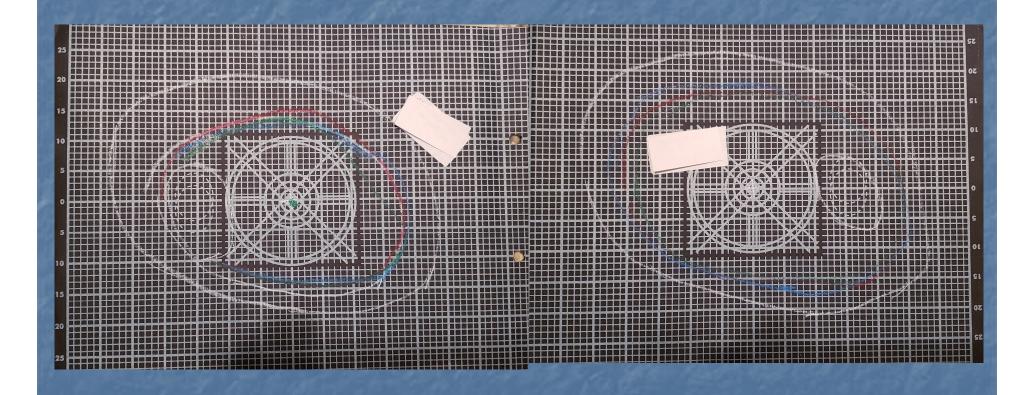
+025 ½ in

Other DEM No Horiz

Vertical 1yr above

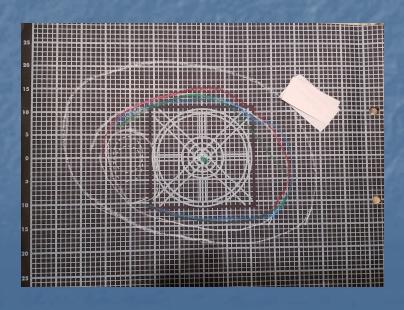


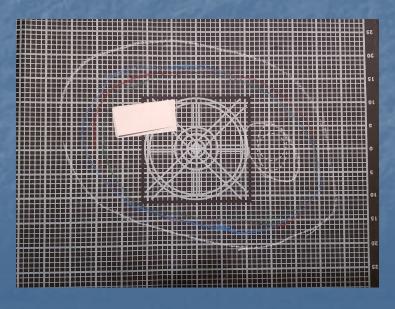
#### Initial Fields



# Syntonic Treatment Options What are your thoughts?

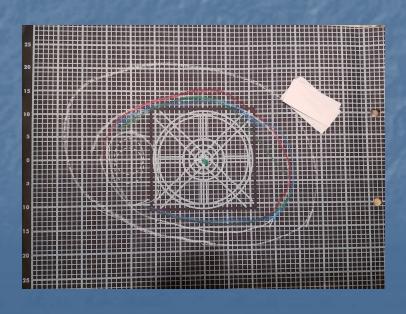
What closed the field?
Chronic or Acute?
State of ANS?
Other Factors of History?

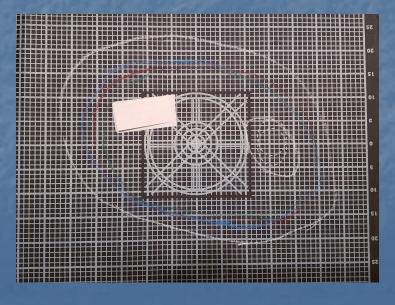




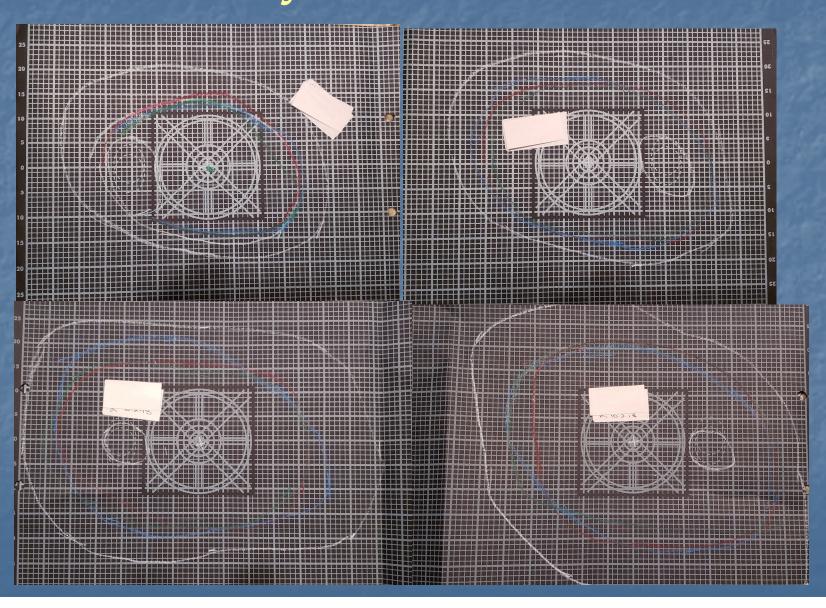
#### Treatment Chris P Home Therapy

Start 09/07/2018
Filters AO 10 min MD 10 min

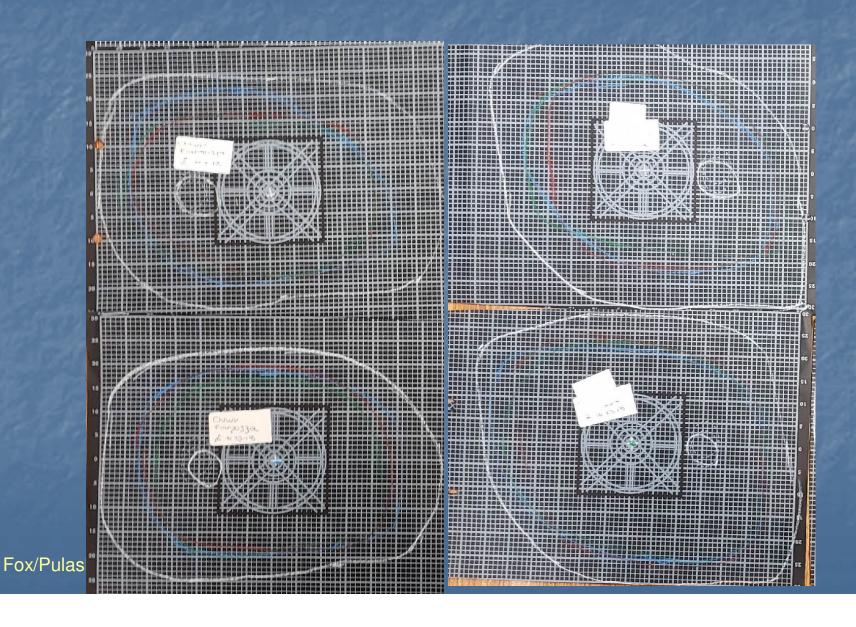




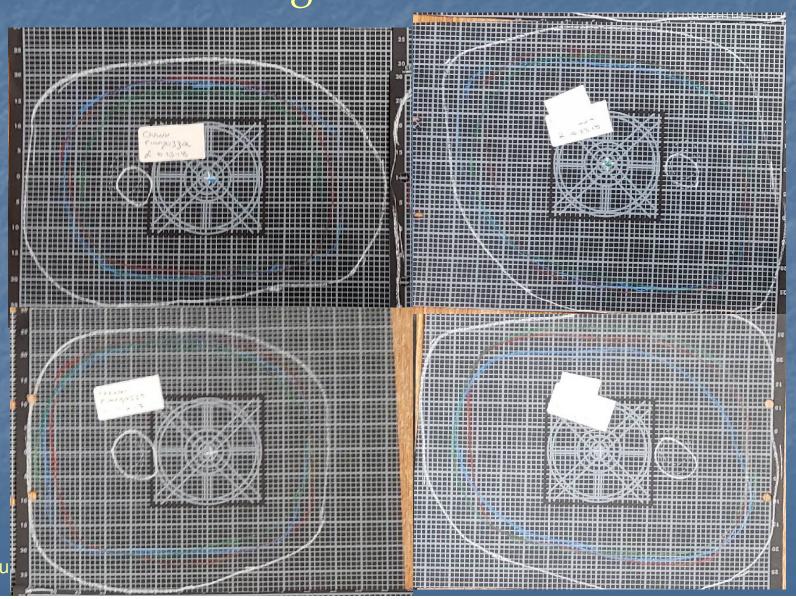
### 18 Days 10/02/2018



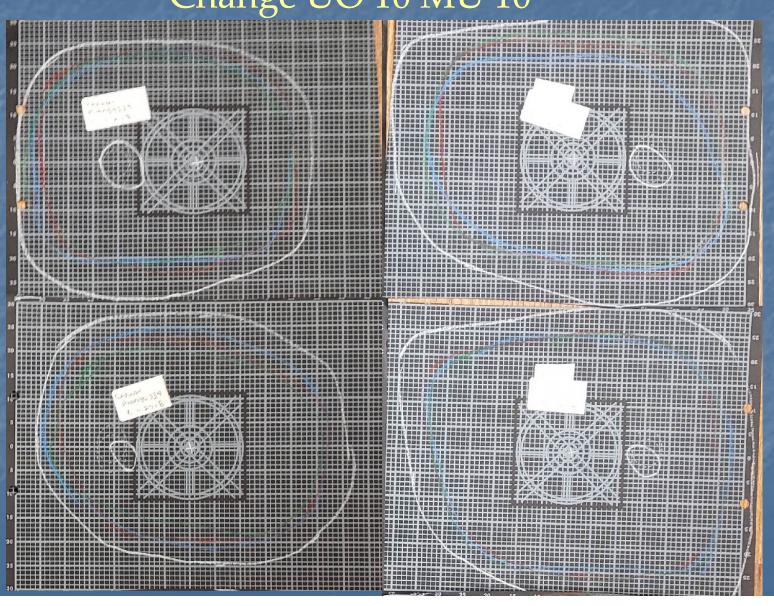
## 36 Days 10/23/2018



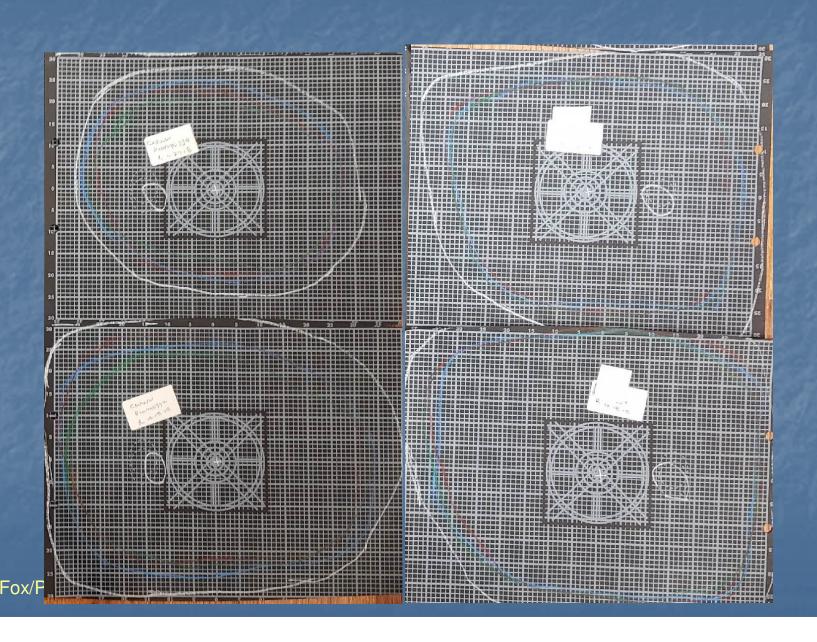
# 50 Days 11/06/2018 Change MU 20 min



# 71 Days 11/27/2018 Blind Spot Better/Asymmetry Change UO 10 MU 10



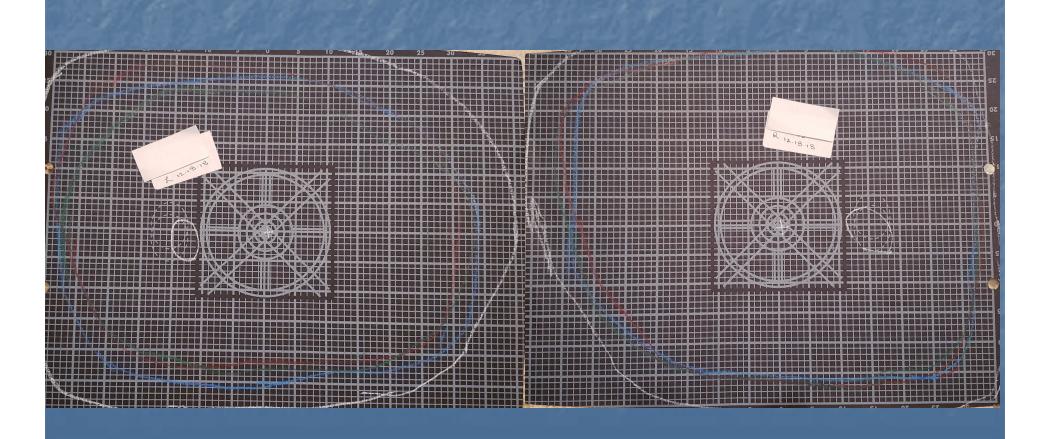
### 92 Days 12/18/2018



AO/MD 10/10 MU 20 min UO/MU

Patience

50 Days21 Days21 Days



| Date       | 5/07/18                            | Post<br>FXT | 05/28/19                               |
|------------|------------------------------------|-------------|--|
| Acuity     | Sc 20/200 Cc 20/70<br>20/20 20/20  |             | Sc 20/50 Cc 20/40<br>20/20-3 20/20     |
| Static     | +375-075 180<br>Plano              |             | +350<br>Plano                          |
| Refraction | +200-050 180<br>Plano              |             | +225-025 160<br>Plano                  |
| Dynamic    | +225-050 180 ½ in<br>+025 ½ in     |             | +225-025 160 ½ in<br>Plano ½ in        |
| Alignment  | 2XP/15XP                           |             | 3XP/9XP                                |
| Cap Test   | 1" O Target +175<br>1/4" O/I +025  |             | ½" O Target Dyn<br>Target              |
| Prescribed | +200-050 180 ½ in<br>+025 ½ in     |             | +225-025 180 ½ in<br>Plano ½ in        |
| Other      | DEM No Horiz<br>Vertical 1yr above |             | DEM Horiz on age<br>Vertical 1yr above |

Date 11/12/2019

Not using Rx 2mo

Acuity Sc 20/250 Cc 20/40

20/20 20/20

Static +375-025 180

-050

Refraction +225-050 160

Plano

Dynamic +225-050 180 ½ in

Plano ½ in

Alignment

Cap Test On Target w/Rx

Prescribed No Change – Use Rx

Suggest CL

Other VO Star

| Date       | 11/12/2019<br>Not using Rx 2mo    | 02/13/2020<br>Using Rx            | 06/23/2020                        |
|------------|-----------------------------------|-----------------------------------|-----------------------------------|
| Acuity     | Sc 20/250 Cc 20/40<br>20/20 20/20 | Sc 20/70 Cc 20/30+<br>20/20 20/20 | Sc 20/50 Cc 20/30+<br>20/20 20/20 |
| Static     | +375-025 180<br>-050              |                                   |                                   |
| Refraction | +225-050 160<br>Plano             |                                   |                                   |
| Dynamic    | +225-050 180 ½ in Plano ½ in      | No Change                         | +250-050 180 ½ in<br>Plano        |
| Alignment  |                                   |                                   |                                   |
| Cap Test   | On Target w/Rx                    | On Target Sc<br>OnTarget Sc       | On Target OU                      |
| Prescribed | No Change – Use Rx                | No Change                         | No Change                         |
| Other      | VO Star                           | VEP                               | VO Star                           |

| Date       | 10/20/2020                          | 11/03/2020                             |
|------------|-------------------------------------|--|
| Acuity     | Sc 20/40-2 Cc 20/30+<br>20/20 20/20 | Cc 20/30+<br>20/20                     |
| Static     | +325-050 180<br>+050-025 180        | +375-075 180<br>+025-050 180           |
| Refraction | +250-050 180<br>+025-025 180        | +300-075 180<br>+025-050 180           |
| Dynamic    | +275-050 180 ½ in<br>+025 ½ in      | +300-050 180 ½ in<br>+025-025 180 ½ in |
| Alignment  | 3XP/14XP                            |  |
| Cap Test   | +275-025 180<br>+025                | +275-050 180<br>+025-025 180           |
| Prescribed |                                     | Rx + VT                                |
| Other      | VO Star                             | VO Star                                |