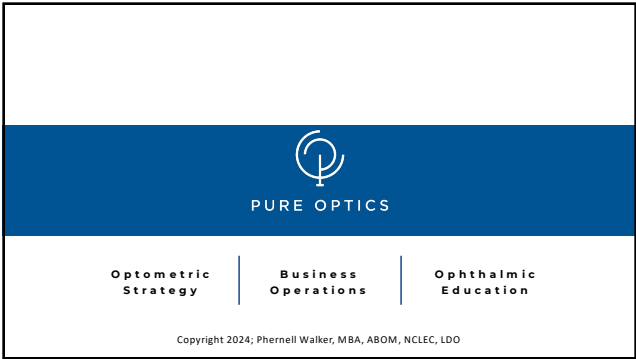
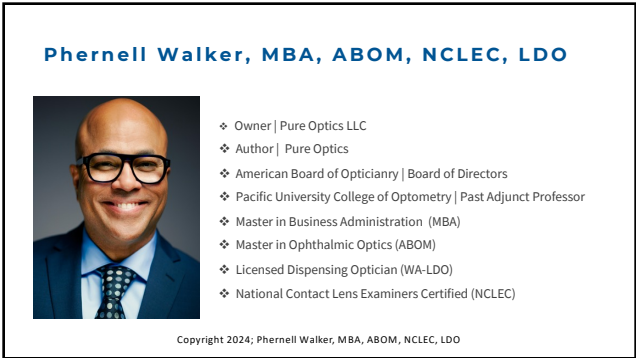




1

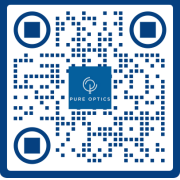


2



3

SCAN ME



Contact Information

Phernell Walker, MBA, ABOM, NCLEC, LDO

w: pure-optics.com
e: phernell@pure-optics.com

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

4

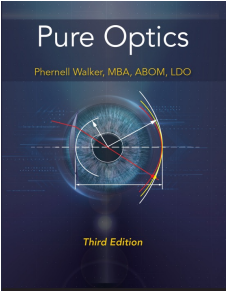
Reference Resource

Pure Optics

by

Phernell Walker, MBA, ABOM, LDO

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO



5

Agenda


Components of binocular vision

Sensory binocular vision

Binocular vision anomalies

Treatment options

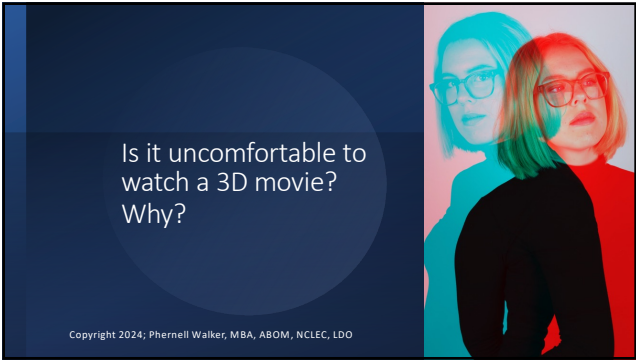
Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO



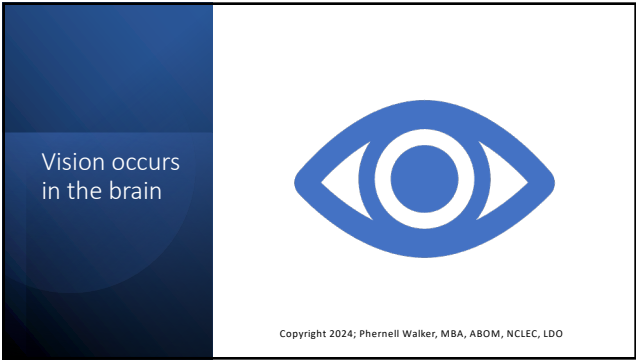
6



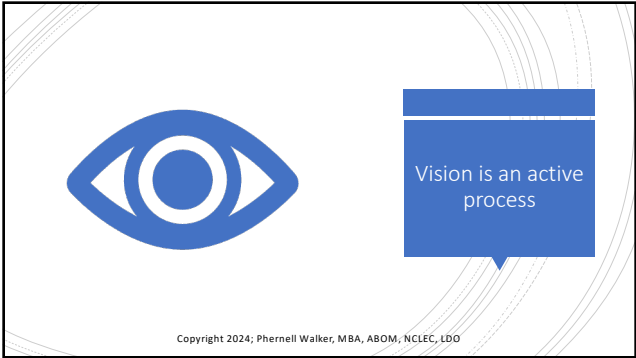
7



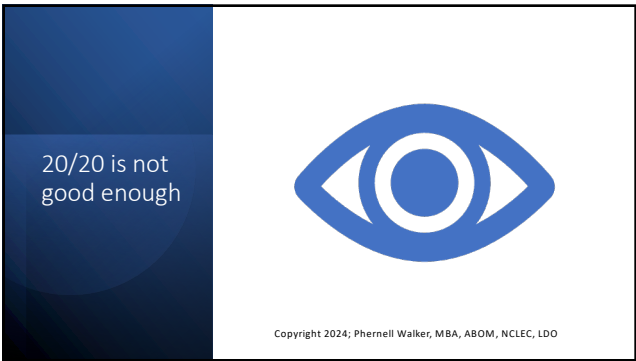
8



9




10



11



12



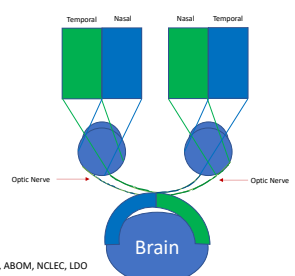
Binocular Vision

- Image unification from two eyes
- Stereopsis
- Balance
- Spatial relationship between objects

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

13

Visual Pathway



Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

14

Visual Field

Total area your eyes perceive while fixed on a central target

Normal visual field

90 degrees temporally to central fixation

50 degrees superiorly and nasally


60 degrees inferiorly

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

15

BV Assessment

- Accommodation
- Convergence
- Depth perception (3D)
- Fusion
- Ocular motility
- Ocular posture
- Review conditions that affect binocular vision
- Spatial awareness / planning

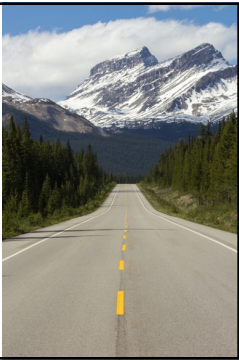


Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

16

Binocular Vision Assessment

- Stereopsis
- Tracking
- Working memory Vergence
- Visual acuity
- Visual-motor integration
- Visual perception
- Visual processing speed
- Working memory



Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

17

Ocular Motor Pathways

Saccades

Pursuits


Vergence

Vestibulo-ocular reflex

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

18

Saccades




Fast conjugate eye movements looking back & forth between two objects.

Eye movement aligns the image on fovea centralis to obtain best VA.


Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

19

Saccades



Normal – “Patient showed accurate saccades with age-appropriate head movement during saccade assessment”




Abnormal - “Patient showed undershoots on 4 of 5 trials with excessive head movement for a person of this age.”

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

20

Pursuits

Visual tracking (i.e., pursuits) - the ability to efficiently move the eyes from left to right (or right to left, up and down, and circular motions) or focusing on an object as it moves across a person's visual field.



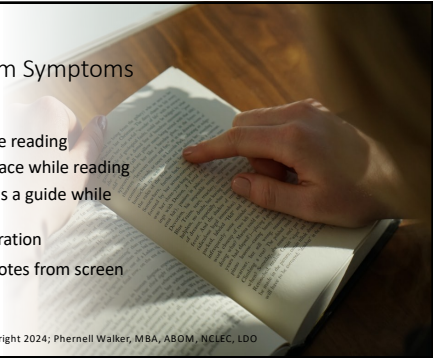
Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

21

Pursuit Problem Symptoms


- Skipping lines while reading
- Frequent loss of place while reading
- Using your finger as a guide while reading
- Short attention duration
- Difficulty writing notes from screen or dry erase board

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO




22

Documenting Pursuits

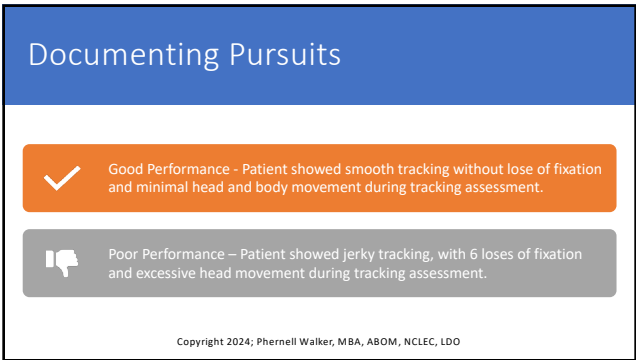


Good Performance - Patient showed smooth tracking without loss of fixation and minimal head and body movement during tracking assessment.



Poor Performance – Patient showed jerky tracking, with 6 loses of fixation and excessive head movement during tracking assessment.

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO



23



Pursuits

Practice Makes Perfect

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

24

Vergence

Normal Vergence
Eyes are able to converge directly on a target.

Convergence Excess
Eyes converge too much and align before in front of a target.

Convergence Inefficiency
Eyes lack converge and align behind a target.

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

25

Normal Vergence



Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

26

Convergence Excess



Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

27

Convergence Inefficiency



Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

28

Eye
Teaming

Eye Teaming (aka Vergence) -
The strength and flexibility of
the eye teaming system
should be evaluated.

Deficits in eye teaming will
result in double vision,
eyestrain, fatigue, headaches,
or dizziness.

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

29



Vergence
Practice Makes Perfect

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

30




Vestibulo-ocular reflex

Balance in motion.


Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

31

Binocular Vision Anomalies



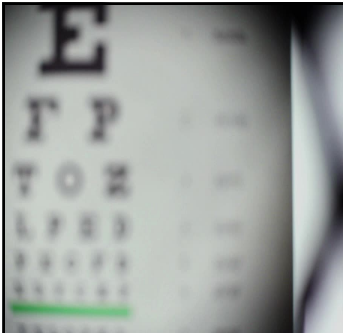
Non-strabismic binocular vision anomalies



Convergence insufficiency & Convergence Excess

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

32



Visual Acuity

- Clarity of vision
- Foundation of binocular vision

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

33

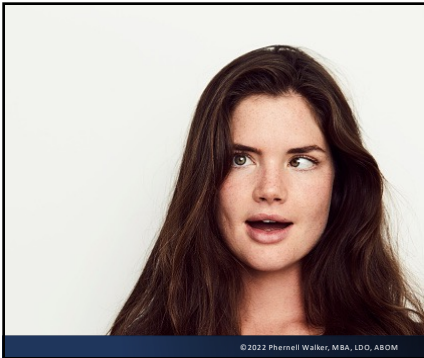


BVD Symptoms

- Attention /concentration issues
- Balance and mobility issues
- Driving Issues
- Double vision
- Eyestrain
- Headaches
- Poor hand-eye coordination
- Reading or learning difficulties

Copyright 2024: Phernell Walker, MBA, ABOM, NCLEC, LDO

34




Strabismus

Mis-alignment between the eyes looking in the same direction

© 2022 Phernell Walker, MBA, LDO, ABOM

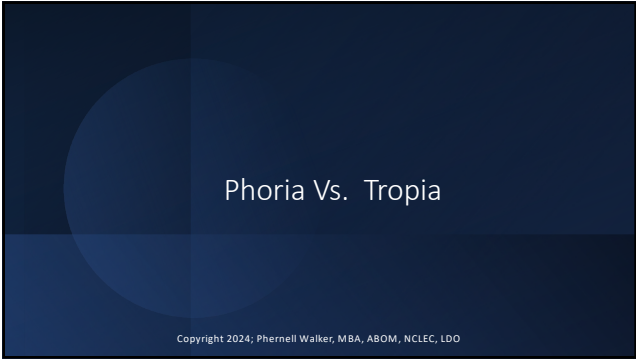
35



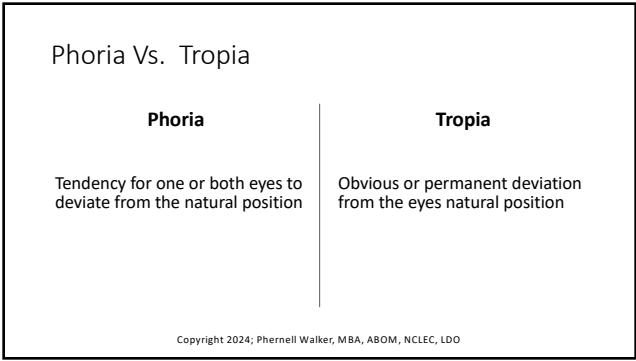
Strabismus

Copyright 2024: Phernell Walker, MBA, ABOM, NCLEC, LDO

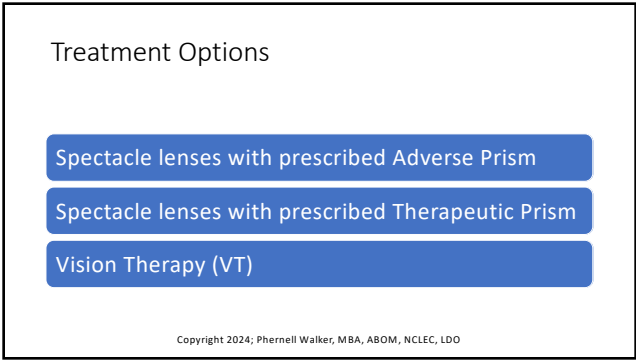
36



37



38

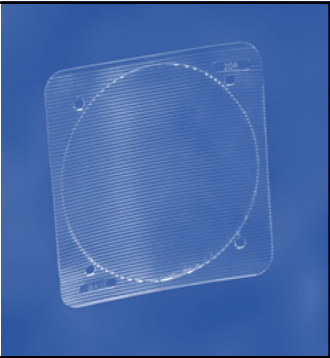


39

Treatment Options


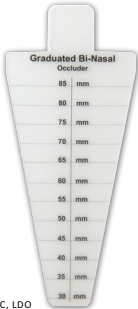

Temporary Testing Prism

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO



40



Binasal Occlusion



Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

41

Adverse Prism





Prescribed prism – apex over weak rectus muscle

Moving the image in the opposite direction of the eye

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

42

Therapeutic Prism



Prescribed prism – base over weak rectus muscle

Moving the image in the direction of the eye

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

43

Vision Therapy Indicated

- Amblyopia
- Strabismus
- Double Vision
- Depth Perception
- Convergence Insufficiency
- Eyestrain/Stress-Induced Vision Issues
- Neurological Ailments
 - traumatic brain injuries, strokes, multiple sclerosis, cerebral palsy, whiplash and developmental delays

- Eye teaming
- Accommodative dysfunction
- Oculomotor dysfunction

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

44

Cranial Nerves


CN II - vision

CN III - eye motility

CN IV - superior oblique eye muscle

CN VI - lateral rectus eye muscle

CN VII - facial and lacrimal gland



Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

45

Vision Therapy Indicated

Traumatic Brain Injury (TBI) stroke, automobile accidents, concussions, whiplash, post neurosurgical (e.g., tumor excision, aneurism repair)

80% of TBI patients suffer vision issues

We can use prism to widen a patient's field of view

1.00 diopter is equal to 0.573 degrees

Copyright 2024: Phernell Walker, MBA, ABOM, NCLEC, LDO

46

Diplopia


stereopsis

walking

balance

reading

visual field loss

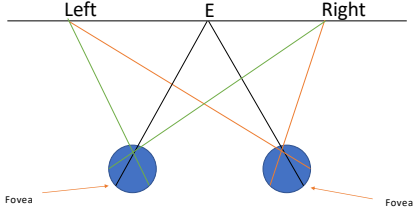


Copyright 2024: Phernell Walker, MBA, ABOM, NCLEC, LDO

47

Normal Binocular Vision

LeftERight



FoveaFovea


Copyright 2024: Phernell Walker, MBA, ABOM, NCLEC, LDO

48

Prism Power

- **Bilateral prism** - splitting prism between both eyes
- **Convergence (ESO)** - bilateral Base Out (B.O.)
- **Divergence (EXO)** - bilateral Base In (B.I.)
- **Right (Hyper)**
 - OD lens = Base Down (B.D.)
 - OS lens = Base Up (B.U.)
- **Left (Hyper)**
 - OD lens = Base Up (B.U.)
 - OS lens = Base Down (B.D.)

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO



49

Prism Therapy

- **Divergence** - bilateral Base In (B.I.)
 - Advantage - promotes bifocal stimulation
 - Disadvantage - reduces (P.F.R.) prism fusional vergence amplitude

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

50

Prism Therapy

Fusional Convergence amplitudes - focus on a accommodative target at near while holding a base out prism bar in front of one eye

Increasing the prism power gradually while maintaining a single image looking through Base Out Prism (B.O.)

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

51

Accommodative Dysfunction

The strength, flexibility, and accuracy of the eye focusing system should be evaluated

Deficits in accommodation will result in blurry vision during near work, blurry vision when transitioning from near to distance tasks (such as copying notes from the board in school), and eye strain or fatigue

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

52

BVD Anisometropia

Power difference of $\geq \pm 1.50$ D between the right and left eye in any meridian

OD: -2.25 -0.50 x 090
OS: -0.50 -0.75 x 090

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

53

BVD Antimetropia

- Form of anisometropia
- Opposite refractive errors between eyes
- Patient is both hyperopic and myopic
- Opposite signs on the Rx

OD: +1.25 -0.50 x 090
OS: -0.75 -0.75 x 090

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

54

Verify by Flat Transposition

OD: -1.00 +2.50 x 165

OS: -1.75 +1.50 x 015

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

55

Anisometropia in Multifocal

OD: +1.50 -0.50 x 180

OS: -1.00 -0.75 x 180

Add: +2.75

PD: 32/34

+1.50

+1.00

OD

-1.00

-1.75

OS

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

56

Discovery

OD: -2.25 -1.50 x 135

OS: -1.00 - 2.00 x 090

Add: +2.75

PD: 35/34

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

57

Slab-off | Bicentric Grinding

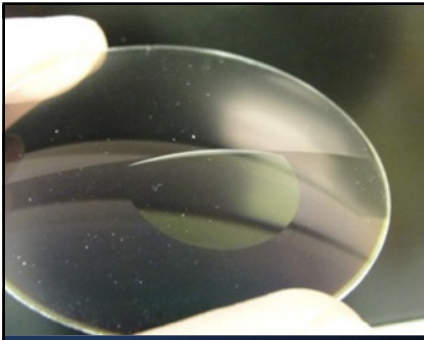
Slab-off - the use of prism in the reading portion of a lens to balance unequal prism in the 090th meridian between the OD and OS lenses.

Slab-off Methods:

- Traditional Slab-off
- Reverse Slab-off

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

58



Slab Off

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

59

Traditional Slab-off

Imbalance =	> 1.50 D x 090 th Meridian
Lens Selection =	Weakest Plus Power
Lens Selection =	Stronger Minus Power
Ground (Surfaced) =	Base Up Prism x 090 th Meridian

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

60

Reverse Slab-off

- Imbalance = > 1.50 D x 090th Meridian
- Lens Selection = Strongest Plus Power
- Lens Selection = Weaker Minus Power
- Ground (Surfaced) = Base Down Prism x 090th Meridian

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

61

Solution

- How much slab-off should you prescribe?
- OD: -2.25 -1.50 x 135
- OS: -1.00 - 2.00 x 090 Add: +2.50 OU
- Ft. 28
- PD: 35/34

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

62

Slab-off Made Easy

- Calculate the dioptric power in the 090th meridian of each lens
- $De = S + [C (\sin a)^2]$
- Calculate the amount of prism 10 mm (reading level - FT 28) or 8 mm (reading level - FT 35) below the distance optical center per lens
- $P = (1 \text{ cm}) (De)$
- The dioptric difference between each lens is the amount of prism required

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

63

Calculate Slab-off
Ft. 28

- Calculate the dioptric power in the 090th meridian of each lens
- Calculate the amount of prism use 1 cm (10 mm)
- The dioptric difference between each lens is the amount of prism required

OD: -2.25 -1.50 x 135
OS: -1.00 - 2.00 x 090
Add: +2.50, Ft. 28

OD: -3.00 | OS: -1.00
(3) (1.0) | (1) (1.0)
OD: 3D | OS: 1D
3 - 1 = 2
OD = 2 Diopters, BU

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

64

Calculate Slab-off
Ft. 35

- Calculate the dioptric power in the 090th meridian of each lens
- Calculate the amount of prism use .8 cm (8 mm)
- The dioptric difference between each lens is the amount of prism required

OD: -2.25 -1.50 x 135
OS: -1.00 - 2.00 x 090
Add: +2.50, Ft. 35

OD: -3.00 | OS: -1.00
(3) (.8) | (1) (.8)
OD: 2.40 D | OS: 0.80 D
2.40 - 0.80 = 1.60
OD = 1.60 Diopters, BU

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

65

Slab-off
Verification

- Slab-off verification using a lens clock.
- Measure the base curve in the 090th meridian (distance portion only)
- Measure the base curve with the center pin on the slab-off line, one pin on the distance portion and one pin on the near portion
- The difference is equal to the Base Up prism

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

66

Verification of Bi-Centric Grinding

Slab-off

First Measurement

Second Measurement

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

67

Slab-off Verification

1

Base Curve 090th meridian (distance portion) = +6.25 D.

2

Base Curve 090th meridian (dual curve) = +8.25 D.

3

Net Result 2.00 B. U.

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

68

What is Aniseikonia?

Aniseikonia - unequal retinal image size between OD and OS

Result of anisometropia

Unequal magnification or demagnification

Disrupts binocular vision

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

69

Refractive vs. Axial Aniseikonia

- **Refractive** - result of refractive anisometropia
- **Axial** - result of axial anisometropia

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

70

Solutions

- Keratometry or Topography
 - Delta K difference indicates refractive anisometropia
 - Solution = Contact lenses
- Biometry ("A Scan")
 - Significant delta between OD & OS axial length
 - Solution = Iseikonic spectacles vs. contact lenses

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

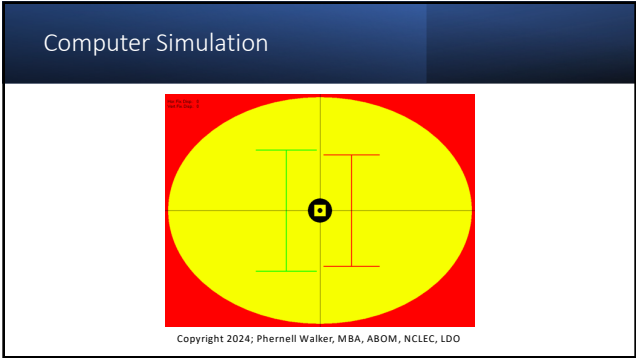
71

Subjective Tests

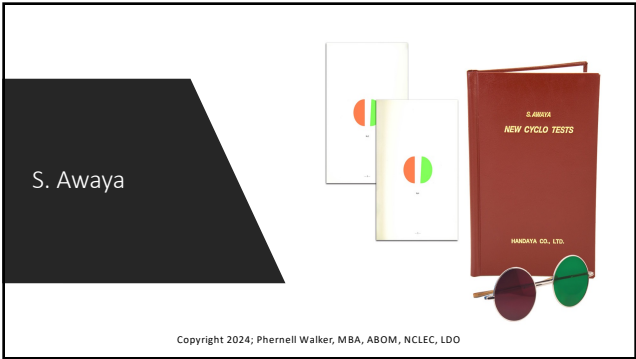
- Space eikonometer
- Synoptopore
- Computer simulation (most popular)
- Test Book - S. Awaya (second most popular)
- Maddox rod two pen light test

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

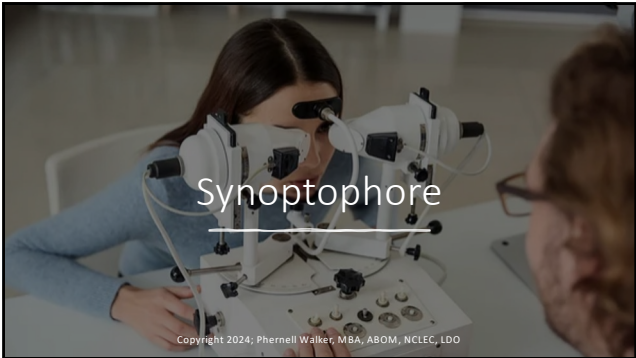
72



73



74



75

Types of
Aniseikonia


Physiological
Aniseikonia

Anomalous
Aniseikonia


Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

76

Physiological Aniseikonia



Normal function of visual system



Helps determine object position and stereopsis

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

77

Anomalous Aniseikonia

Occurs when the object is seen straight ahead

Retinal images that are difficult to fuse or in a distorted space perception

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

78

Dynamic Aniseikonia

Subcategory of Anomalous Aniseikonia

Two perceived retinal images are of a different size

Although images are the same, eye rotation to foveate to a different part of the image
anisometropic lenses might induce anisophoria, causing an apparent aniseikonia.

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

79

Aniseikonia Candidates

Individual tolerance for magnification
differential threshold

Anisometropia prescriptions can
significantly cause aniseikonic symptoms

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

80

Common Symptoms

Headaches 67%

Asthenopia
(fatigue, burning,
tearing, pain,
pulling) 67%

Photophobia 27%

Reading difficulty
23%

Nausea15%

Motility (diplopia)
11%

Nervousness11%

Vertigo and
dizziness 7%

General fatigue 7%

Distorted space
perception 6%

Binocular Vision
Dysfunction
(driving issues) 40%

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

81

Oculomotor Dysfunction

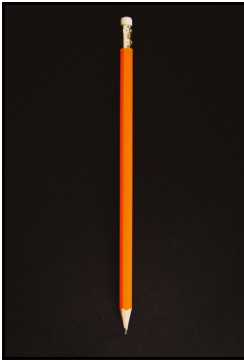
Eye tracking

Quality of your eye movements is related to the neural connections to the brain as well as the integrity of the eye muscles themselves.

Eye movements - used to determination of a central nervous system dysfunction (i.e.; tumors, inflammation, or neurologic conditions)

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

82

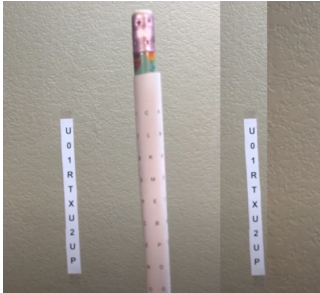


Convergence Insufficiency Pencil Push-Up Treatment

Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

83

Pencil Push-Up Treatment



Copyright 2024; Phernell Walker, MBA, ABOM, NCLEC, LDO

84




Pencil Push-Up Treatment
Practice Makes Perfect

85

Stereopsis

- Depth perception
- Dependent on the ability to use both eyes together
- Deficiencies results in reduced 3D vision, headaches and eye strain during 3D movies



Copyright 2024: Phernell Walker, MBA, ABOM, NCLEC, LDO

86

Take Aways

1. Though 20% of Binocular Vision Dysfunction (BVD) is diagnosed, an estimated 56% of people suffer from BVD
2. Consider adding vision therapy and, or lens designs that address BVD issues to your ophthalmic lens portfolio
3. Consider prism lenses even for small amounts of strabismus to provide the best vision for your patients.

Copyright 2024: Phernell Walker, MBA, ABOM, NCLEC, LDO

87



88
