The investigation of meridional accommodative disorders in children with with-the-rule astigmatism and there treatment.

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Background and methods

- Astigmatism is one of the most frequent refractive abnormalities in children. Astigmatism offers 34,5-39% among all forms of refractive abnormalities.
- Adaptation of visual system to astigmatism is provided with two mechanisms – irregular accommodation in main meridians and regular fluctuations of optic setting, thank to which different focal lines connect with retina.
- The investigation of adaptation to astigmatism by irregular accommodation in different meridians of astigmatic eye is an actual problem in pediatric ophthalmology.



To investigate accommodative disorders in different forms of with-the-rule astigmatism, to increase the effectiveness of treatment refractive amblyopia in children by use the modificated original method of treatment accommodative disorders by its training in weak meridian

Material and methods

- 183 children (358 eyes) from 5 to 14 years old with different forms of with-the-rule astigmatism (mixed astigmatism, simple hyperopic astigmatism, simple myopic astigmatism) were investigated.
- >> The degree of astigmatism: 0,75 5,0 D
- **Main meridians:**
 - vertical: from 70 to 115 degrees;
 - horizontal: from 160 to 25 degrees

Material and methods

- visual acuity (VA) for far and for near,(corrected and non-corrected);
- proxymetria in main meridians (the nearest point of clear vision (NPCV)
- >> ophthalmometria
- refractometria
- **binocular vision functions**
- common indexes of accommodation

Diaphragma of Vyasovskiy-Serdyuchenko

Theoretical advantages of diaphragma:



- 1 the plane of diaphragma
- 2 the hollow
- **3** the grate

- >> One can see the pupil of the eye and centralize it
- Diaphragma hold its function even be moved
- The lighting of retina is more by 5 times, then while using Sheiner's diaphragma
- Visual fields are wider to 80-90 degrees

Different forms of meridional accommodation

 1. Regular accommodation - the quantity of difference of NPCV in diopters in main meridians (ΔNPCV) is equal to the degree of astigmatism: ΔNPCV=ΔR.

• 2. Irregular accommodation

2a) the quantity of difference of NPCV in diopters in main meridians (Δ NPCV) is lesser, then degree of astigmatism: Δ NPCV< Δ R. This condition can tell about the partly «adaptation» to astigmatism.

2b) the quantity of difference of NPCV in diopters in main meridians (Δ NPCV) is more, then degree of astigmatism: Δ NPCV> Δ R. This condition can tell about the «desadaptation» to astigmatism.

2c) the quantity of NPCV in diopters is equal in main meridians (Δ NPCV=0). This condition can tell about the full «adaptation» to astigmatism.

Different forms of meridional accommodation







Myopic astigmatism

- $\Delta NPCV = \Delta R$; regular accomodation
- ΔNPCV<ΔR; partly «adaptation» to astigmatism
- \triangle NPCV> Δ R; «desadaptation» to astigmatism

Methodic of training accomodative ability

So, we proposed the original methodic of training accomodative ability in weak meridian by using changing of positive and negative cylindrical lenses in order to increase non-corrected and corrected visual acuity for far and for near in children with astigmatism. Cylindrical lenses were put before the eye in the meridian that had shown the maximum distance of NPCV. We proposed the special ruler also for more comfort of treatment.

Special rulers for more comfort of treatment (Ukrainian Official Scientific Patents Nº28124, Nº 4732).



Results of treatment of children with mixed astigmatism









Results of treatment of children with simple hyperopic astigmatism







5-7 years

8-14 years

After treatment

<u>Results of treatment of children with simple</u> <u>myopic astigmatism</u>







Common accommodative indexes before and after treatment in children with mixed astigmatism





8-14 years

Common accommodative indexes before and after treatment in children with hyperopic astigmatism





5-7 years

Before treatment

After treatment

8-14 years

Common accommodative indexes before and after treatment in children with myopic astigmatism







The presence of irregular accommodation in the majority cases of investigated forms of astigmatism in children was shown. Different forms of meridional accommodation were determined. The influence of meridional accommodation upon visual acuity was shown. The use of proposed method of accommodative training in weak meridian is effective to treat refractive amblyopia in all forms of with-the-rule astigmatism.

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Thank You for attention!

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