

EDITORIAL

One Time Around the Sun

Dominick M. Maino, OD, MEd, FAAO, FCOVD-A

Editor

*One time around the sun
Another year older
And my work ain't done^a*

My College of Optometrists in Vision Development life-cycle ends and starts with our annual meeting. What better time than this to review the high (and low) lights of the year? What did we do? What did the profession do? What has COVD done? What did others do to improve or enhance getting out our message? What did we do to improve the lives of our patients? What challenges still remain?

Research

Did you know that in-office optometric vision therapy (with out-of-office activities) has not only been shown to be the preferred method of treatment for convergence insufficiency¹ but that the benefits of this therapeutic regimen last for at least one year? The article, *Long-term effectiveness of treatments for symptomatic convergence insufficiency in children*², published in the September 2009 issue of *Optometry and Vision Science* notes that “Most children aged 9 to 17 years who were asymptomatic after a 12-

week treatment program of Office Based Vergence/ Accommodative Therapy for convergence insufficiency maintained their improvements in symptoms and signs for at least 1 year after discontinuing treatment.”

Optometric vision therapy (OVT) is not only effective at reducing or eliminating symptoms associated with convergence insufficiency (CI); and OVT is not only effective at improving the signs associated with CI; but its outcomes last for at least 12 months! What other treatment modalities can say the same?

In another article, *Academic Behaviors in Children with Convergence Insufficiency with and without Parent-Reported ADHD*³ (Attention Deficit Hyperactivity Disorder), it was concluded that “Children with symptomatic convergence insufficiency [and no] ADHD scored higher on the ABS [academic behavior survey], when compared to children with NBV [normal binocular vision]. Children with parent report of ADHD or related learning problems may benefit from comprehensive vision evaluation to assess for the presence of convergence insufficiency.” In this study, the higher the ABS the more concerned parents were about their children’s academic performance and school behavior. The study also seems to indicate that the symptoms associated with CI (and perhaps CI itself) adversely affect school performance and behavior. Yes, there is a growing body of evidence that is being published that supports the link between academic performance and vision.

If convergence insufficiency can affect up to 7% of the population⁴ and there are 300 million people in the United States, that means 21 million individuals have CI. (By the way, there are 29,239 people in the U.S. with the first name Dominick.⁵ That means that more than 2000 *Dominicks* out there need your help!) We have lots of work to do.

The research continues to demonstrate that amblyopia can not only be treated at any age but that OVT (aka perceptual learning) can alter neuroplasticity. For instance, in a *Journal of Neuroscience*

Correspondence regarding this editorial should be emailed to dmaino@covd.org or sent to Dominick M. Maino, OD, MEd, Illinois College of Optometry, 3241 S. Michigan Ave., Chicago, IL 60616. All statements are the author's personal opinion and may not reflect the opinions of the College of Optometrists in Vision Development, Optometry & Vision Development or any institution or organization to which the author may be affiliated. Permission to use reprints of this article must be obtained from the editor. Copyright 2009 College of Optometrists in Vision Development. OVD is indexed in the Directory of Open Access Journals. Online access is available at <http://www.covd.org>.

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a Lyrics from the theme song of “Saving Grace” television program. <http://www.lyricstime.com/everlast-saving-grace-theme-lyrics.html>. Accessed 11/09

paper by Dennis Levi, OD, PhD, Dean of the School of Optometry at the University of California, Berkeley, (*Prolonged perceptual learning of positional acuity in adult amblyopia: perceptual template retuning dynamics*),⁶ it was shown that the mature amblyopic brain is surprisingly malleable! During the recent College of Optometrists in Vision Development meeting in Denver, Dr. Levi, as one of our keynote speakers, noted that perceptual learning⁷ can be both effective and efficient if intervention is intensive, active and challenging. His research showed that it takes about 50 hours of perceptual learning and that this boosts brain processing efficiency, decreases cortical image distortion, and is not only appropriate for children, *but also for the adult amblyope*.

Although adult neuro/cortical plasticity has been acknowledged to occur by many scientists and professions, it is only within the last year or so that ophthalmology and primary care optometry have begun to understand what this means for our patients with visual impairment.^{8,9} We can alter, improve, remediate and enhance our patients' vision using those therapeutic regimens developed by scientists, video game makers, and even functionally oriented optometrists. Use this research when you discuss therapy with patients and their families. Use this research when you make presentations to teachers and the news media. Use this research in your practice of functional optometry. The research is just beginning to catch up with the many clinical insights of those who pioneered what we do. It is about time. Use it.

Internet

The explosion of internet social networking blogs, tweets, and websites have assisted COVD in not only getting the word out about optometric vision therapy, but has also allowed us to "listen in" on how others view what we do. We can reach out to COVD members, optometry students¹⁰ and moms, as well as primary care optometrists, teachers, physicians, and other health care providers. If you Google "mommy blogs" and vision, you will find that one of the blogs that will show up is Adventures in Amblyopia.¹¹ This mommy blogger has a son with autism and a daughter with amblyopia. Her websites offer many tools for parents (for instance, in her Amblyopia Kids Store¹² she has books, eye patches, DVDs, and more).

Many bloggers often share the responsibility of keeping their blog current. *The Parent Support Space* has 4 bloggers who contribute. Most recently

they discussed vision information processing¹³ using materials from the Optometric Extension Program Foundation. Other bloggers share their heartfelt stories about their children and the emotional toll amblyopia can place on a family.¹⁴ The Thinking Mother blog¹⁵ gives a timeline of her child's progress while participating in an optometric vision therapy program. The American Optometric Association's InfantSee™¹⁶ program gets its share of attention as well with several blogs telling the world about the importance of infant eye care. These blogs include Cool Moms Rule,¹⁷ Because I Said So¹⁸ and Mother of Bun.¹⁹

As you know, individuals with autism have numerous vision and sensory processing information disorders. The BabyCenter blog²⁰ keeps moms up to date with the latest research in this area, while the Autism Hub blog²¹ lists almost 100 blogs dedicated to autism. Many of these blogs contain information about the role COVD members have had in the care of their children and have used the online *Optometry & Vision Development* theme issue on Autism as an educational tool.

Other blogs that are accessible to the greater public and are dedicated to vision include Janet Hughes' Vision First blog²² (Janet is the founder of the Vision First Foundation.²³) and the blog hosted by Psychology Today written by Dr. Susan Barry.²⁴ Even librarians blog about vision care and feature information about convergence insufficiency.²⁵

YouTube

Another way COVD doctors and others have been reaching out to a wider community includes placing videos on YouTube. If you have not linked your website to the National Institutes of Health National Eye Institute video²⁶ on convergence insufficiency you should do so immediately! Television news programs that feature stories concerning vision therapy, convergence insufficiency, learning related vision problems and eye problems masquerading as attentional deficit hyperactivity disorders can also be found on YouTube.²⁷⁻³¹ There are other videos that show how to conduct various therapy procedures including the Brock String,³² Eccentric Circles,³³ and Split Vectograms.³⁴ Videos that feature optometric vision therapy for adults include a series of presentations by Susan Barry, PhD³⁵⁻³⁹ as well as those for our most senior citizens.⁴⁰ Patients with traumatic brain injury have also shared their experiences.⁴¹⁻⁴³

Podcasts/Radio/Newspapers

Many of our members seek out or use not only video but also audio podcasts and radio programs. These podcasts include information about strabismus and amblyopia^{44,45} brain injury,⁴⁶ and sports vision.⁴⁷ National Public Radio has featured information on traumatic brain injury,⁴⁸ amblyopia,⁴⁹ vision therapy,⁵⁰ and the interviews with Susan Barry, PhD.⁵¹ Even Dear Abby has helped to tell her readers about convergence insufficiency and the best possible treatment for this disorder.⁵²

The Profession

Since our patients, the public, the media and the internet appear to be more aware of functional optometry and vision therapy, and COVD, as an organization, has definitively moved beyond the “Vision Therapy, Optometry’s Best Kept Secret!” phase, it is important to note that we still may have a bit of work to do within our own profession. The good news is that the American Optometric Association has become a strong supporter of pediatric eye and vision care and optometric vision therapy.

The AOA has made available a Convergence Insufficiency tool kit that is free to all members. This tool kit is to be used by primary care optometrists to help them determine the presence of binocular vision dysfunction and then hopefully refer to the appropriate colleague for treatment. A number of COVD members were involved in this project including Drs. Bill Leadingham, Gary Williams, Sandy Block, Glen Steele, and Leonard Press.^{53,54} Other noted support by the AOA included the immediate and forceful response to discredit the latest attacks by organized medicine concerning vision and learning, vision therapy and optometry in digital print and hard copy.^{55,56} The AOA, during the House of Delegates meeting this past summer, also supported COVD by making the Fellowship in COVD equivalent to the Fellowship in the American Academy of Optometry, and the completion of a residency when preparing for Optometric Board Certification. The AOA recognizes the importance of COVD and what we do to serve our patients. COVD members should be members of the AOA and active in this organization as well.

Challenges

Other Professions

With arrogance and hubris towards all,⁵⁷ organized medicine continues its relentless (yet frequently futile)

attacks upon the profession of optometry in general and the work of COVD members in particular. The American Medical Association’s Scope of Practice documents⁵⁸ use facts, omissions, innuendo, and phrase repetition to disingenuously present a distorted view of our profession. They do the same for several other non-MD professions as well.⁵⁹ All allopathic practitioners who are non-ODs, should feel ashamed of what their organization is doing. Their methodology is despicable. This topic, however, is fodder for a future editorial and will be discussed in more detail at that time.

The good news is that occupational therapists, physical therapists, speech and language therapists, psychologists, special educators and many other professionals do appreciate what we can accomplish for their patients and frequently refer to members of COVD. We should embrace these professions and share our knowledge and expertise with them.

Individual Members Contribute

If there is one COVD member that has taken advantage of the internet age, it is Dr. Nathan Warford-Bonilla of Tampa, Fl. He has a welcoming website,⁶⁰ a blog,⁶¹ a Facebook⁶² page and can tweet⁶³ with the very best of them. He also links to COVD and other appropriate websites and blogs. Dr. Warford-Bonilla reaches out far beyond his own community to bring his message of functional optometric vision care to many.

Other COVDers who have made a major contribution in cyberspace include Dr. Leonard Press. Dr. Press not only has a website,⁶⁴ and is part of the Optometrists Network,⁶⁵ but is always quick to respond whenever organized medicine attacks what we do. Dr. Carl Hillier has a beautiful website that includes podcasts and other multimedia tools;⁶⁷ and Dr. Brad Habermehl’s web page⁶⁸ even has links to the television news programs he was on,^{69,70} as well as an active “fans” Facebook page.⁷¹ Many of you know that I maintain a blog (Mainos Memos⁷²) that keeps all up to date on the latest research involving children’s vision and special populations. This blog is also posted in a prominent position on the AOA News blog. We all should be using this “new media” to inform our various constituents and stakeholders about who we are and what we do.



Dr. Nathan Warford-Bonilla's Facebook page.



Dr. Dominick Maino's blog, Maino's Memos.

COVD

So what has COVD done to ensure that its membership is served at the highest possible (cyberspace) level?

The leadership of COVD and its administrative staff strongly support this journal. We have made *Optometry & Vision Development (OVD)* available to the world by placing all of the articles published online, free of charge and downloadable in PDF format. We have indexed the journal in the Directory of Open Access Journals⁷⁴ right alongside other excellent publications of outstanding quality. We continue to support research projects that are often the “seed” for future NEI clinical trials.⁷⁵

COVD has made it a priority to remove the veil from “the secret of vision therapy” once and for all. Using the new media, we are proactively sending out press releases about the latest articles in *OVD*, current research and other activities that support the membership and their dedicated service to patients.

COVD will soon have a new and improved website designed primarily to meet the public's need for information and resources⁷⁶ and to make it easier for all to find just the right doctor. We have a Facebook⁷⁷ page and can Twitter⁷⁸ all day long and have stepped up to the digital plate with blogs as well.^{79,80} What we now need, however, is you.

We need you to get involved in this digital information age. We need you to link your website to the COVD webpage, Facebook page and various blogs. COVD will, in turn, link to your homepage

as well. This network of specialists will make finding all of us easier when an individual conducts a Google search. It will let all know that there are at least 3000 COVD members who care about children and adults and their visual welfare. It will let others within and without the profession easily find, and hopefully refer to, the very best optometrists in the country, Fellows of the College of Optometrists in Vision Development.

Send COVD your webpage address, Facebook page address and blog address. Send us info on any YouTube videos you've made and TV programs you've been on. Do you podcast? Well we want to know about that as well. Do it. Today.

One time around the sun

Another year older and my work ain't done

The final stanza goes on to say...

It's time for me to write the final chapter (chapter)

Well, as I reviewed all the exciting events over the past year... all the research... all the “digital happenings,” it's obvious that our work is indeed not done and the final chapter is yet to be written. We still have work to do, chapters to be written, and patients who need our help.

... and as the *Saving Grace* theme song ends you hear...

Hallelujah, Hallelujah

Hallelujah, Hallelujah

Hallelujah, Hallelujah

Amen

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**THE MOUNTAIN STATES
CONGRESS OF OPTOMETRY
AWARDS A \$15,000 GRANT
TO COVD'S
TOUR DE OPTOMETRY
PROGRAM**



On behalf of the COVD membership, the COVD Board of Directors expresses appreciation to the Mountain States Congress of Optometry for the \$15,000 grant to support our Tour de Optometry school visit program.

The Tour de Optometry Program was initiated in 2005 with the goal of bringing the private practice experience of developmental optometry to the optometric educational clinical setting. The program was designed to increase awareness of behavioral

and developmental vision and vision therapy in optometry school students.

The Tour has continued to expand and with this year's \$15,000 grant from MSCO COVD is able to add the three new optometric universities to our Tour schedule. Visiting the twenty-two schools is time consuming and costly to administer, and without the MSCO grant, we may not be able to visit all the schools every year.

**THE TOUR DE OPTOMETRY HAS BEEN
TREMENDOUSLY SUCCESSFUL AND IS JUST ONE EXAMPLE OF
COVD'S DEDICATION TO THE OPTOMETRIC COMMUNITY.**