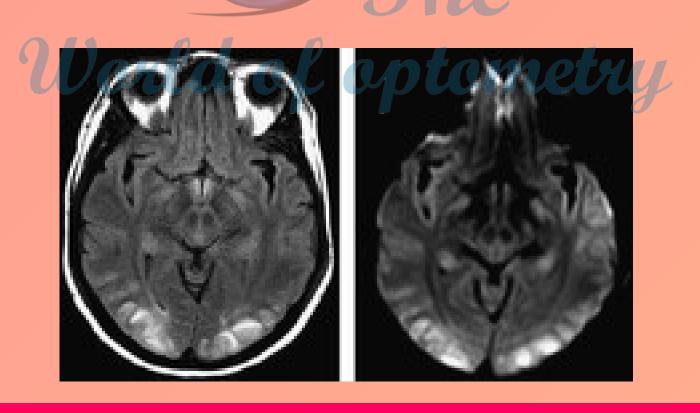
TWOP Discussion

CORTICALBLINDNESS











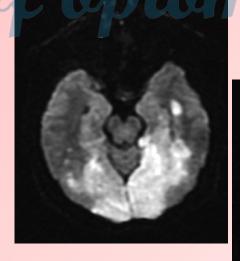
INTRODUCTION #TwopDiscussion

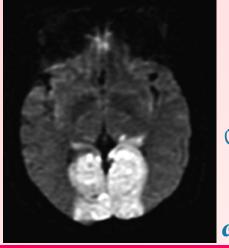
Loss of vision in a normal appearing eye due damage/lesion of the visual cortex. The loss of vision is either complete or partial, congenital or acquired, and affects both children and adults.

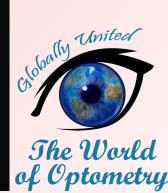
ETIOLOGY

Some of the common causes of Cortical Blindness (CB) are:

- Congenital abnormalities of visual cortex
- Traumatic brain injuries of the occipital lob/visual cortex
- Perinatal ischaemia
- Stroke
- Cardiac embolism
- Epilepsy
- Hypoglycemia
- Infections such as HIV
- Meningitis







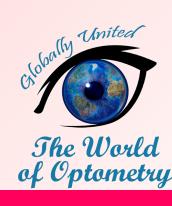




SIGNS/SYMPTOMS

- Blurry vision/ loss of vision/ visual field defects
- Visual hallucination of coloured objects and scenes
- Visual anosognosia (though the person is blind but he always denies blindness) ted
- Stato-kinetic dissociation (only perceive moving objects) in the field which is blind)
- Atrophy of the posterior cortex
- Visual prosopagnosia (impaired face perception)
- Visual agnosia (unable to recognize objects that are visually present) at an tametru
- Visual field defect ranges from small sctoma to homonymous visual filed loss in incomplete CB.
- Normal pupillary reflexes
- Ocular structures within normal limits











MANAGE MENT

- Treat the cause: Vision training and rehabilitation also play key roles and consist of 3 modes.
- Restitution therapy: to recover field defects, here the patient is given a task to detect light targets on a black background across both the normal and blind part of the vision field.
- Compensation therapy: to compensate for loss of vision through saccadic eye movements(helps to detect stimuli that would fall on the blind side of the vision field otherwise)
- Substitution therapy: substitute prisms and/or optical devices which project objects on the normal vision field from the blind side





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