**Q. Low vision – what is it?**

**A.** People are considered to have “low vision” when their eyesight cannot be corrected by ordinary glasses, contact lenses, medication, laser treatment or surgery. However, they can enhance their ability to accomplish tasks with the use of compensatory visual strategies, low vision and other devices, and environmental modifications.

**Causes of low vision**
1. Juvenile / Age-related Macular Degeneration
2. Cataract
3. Diabetes
4. Trauma
5. Glaucoma
6. Retinitis Pigmentosa
7. Albinism

**Need for early examination**
Conducted by specially trained ophthalmologists and optometrists, the low vision examination is designed to accurately evaluate how one’s vision functions in day-to-day living.

As a result of this examination, you may be prescribed specific devices to make best use of your existing vision. In many cases, more than one visual device may be required, such as magnifying lenses for close-up viewing and telescopic lenses for seeing in the distance.

We can equip you with techniques to maintain an independent lifestyle by offering guidance for making changes in your home as well as group support from others with low vision.

**Low vision devices**
Low vision devices or aids are optical and non-optical in nature. **Optical devices** use lenses or combinations of lenses to provide magnification. They should not be confused with standard eyeglasses. There are five main kinds of optical devices: magnifying spectacles, hand magnifiers, stand magnifiers, telescopes and closed-circuit television. Different devices may be needed for different purposes. Training in how to use these devices is provided at our low vision rehabilitation centre.

The simplest **non-optical technique** is to bring the object of interest closer. Non-optical low vision devices include large print books, check writing guides, enlarged phone dials, talking appliances (timers, clocks, computers), and machines that scan print and read out loud.

**Low vision Aids**

- **Hand Held Magnifier**
- **Table Magnifier**
- **Hand Held Telescope**
- **Spectacle Magnifier**
- **Magnifier (Bar)**
- **Image Enlarger**
- **Stand Magnifier**
- **Reading Stand with overhead reading lamp**
Technology resources

Closed circuit televisions (CCTVs) are video magnification systems capable of higher levels of magnification and can also manipulate the brightness and contrast of the image. Other aids include electronic reading technology, which includes Braille printers and Braille translation software, print enhancing software such as screen magnifiers and machines and software for converting text into speech.

Lighting and low vision

Determining the right kind and amount of light needed for visually impaired individuals is the most critical step. Moreover, every person responds differently to the various kinds of lighting available.

Tips on lighting in your home and workplace:
- Put the light directly where it is needed. Use small lamps that swivel and can be raised or lowered to help direct the light.
- Direct the light over the shoulder of the eye with the best visual acuity.
- Wire your overhead fixtures to a dimmer switch in order to increase the amount of light in a room.
- Position lamps near frequently used appliances.
- Provide extra lighting in stairs and hallways.
- Pay attention to lighting access and control, making sure that switches are located where they can easily be found. Contrast switchplates with the wall color or use switchplates that contain small lights.
- Consider preset light timers for difficult areas.

Low vision Rehabilitation Centre at Shroff Eye

Shroff Eye aims to –
- provide people with low vision the opportunity to understand their condition better and
- help to learn the use of an array of simple devices in order to achieve a life of independence.
1. Following a complete evaluation depending on the patient's requirements, different optical and non-optical devices are prescribed for various tasks undertaken at the office, home or school.
2. Training on the use of such devices is given.
3. Individual counseling and follow-ups for different types of eye diseases is an integral part of the treatment.

Myths associated with low vision

Myth: People who still have a little vision should not use it too much, or their vision will deteriorate.
Fact: The more a visually limited person uses remaining vision, the better that person will be able to see.

Myth: Reading by holding printed material very close to the eyes will harm the eyes.
Fact: Reading by holding printed material very close to the eyes may cause fatigue, but there is no evidence that it leads to further vision loss.

Myth: People with low vision always need others to care for them.
Fact: People with residual vision can, with proper motivation, continue to lead independent lives.

Myth: People with low vision automatically develop better acuity in their other senses.
Fact: Visually impaired people need to work hard to develop their other senses to compensate for vision loss.

Myth: Children with poor vision automatically need glasses or low vision devices.
Fact: The cause of low vision needs to be identified and only then can the course of treatment be decided upon.

Myth: A child with low vision may eventually become blind and hence should be taught Braille.
Fact: Over time the level of low vision may stay the same. Sometimes the condition may get worse, but it does not always end in total blindness. Individuals can read large print, or even read regular print with the use of an optical device.

Myth: Use of optical low vision devices is harmful.
Fact: Low vision devices help visually impaired people to make best use of their residual vision.

Myth: Watching television from a close distance may lead to further vision loss in low vision individuals.
Fact: Sitting close to a television may cause fatigue, but there is no evidence that it leads to further vision loss.