



## 10 Need-to-know Children's Vision Facts

1. **There is much more to vision than reading letters from a chart.** While around 90% of primary school-aged children have visual clarity – reading letters from the chart – only around 50% have good visual efficiency – eye coordination and teaming. Eye teaming and tracking influences how efficiently a child can transmit visual information from the 'hardware' (the eyes) to the 'software' (the brain) for learning.

2. **What is tracking?** Tracking, the overall eye movement of reading, is made up of innumerable small 'jumps' in visual attention, which require correct eye coordination and teaming. There are two eye coordination systems active for correct eye teaming, especially for close focus tasks – the



*aiming system*, which allows for correct alignment of the eyes at the point of interest; and the *focusing system*, which then makes the object of interest clear. These systems must also work together for far vision tasks like reading from the board. Aside from learning, problems with either of these systems can make a child's vision 'uncomfortable' and lead to intermittently blurred vision for reading, concentration and comprehension issues and behaviours of avoidance.

3. **There is a known link between ADHD and eye teaming problems.** Research on the link between ADHD and Convergence Insufficiency (CI) – a type of eye teaming problem – has shown that in children with ADHD, CI is about 3 times more common; but in at least 15% of children presenting to a University clinic with diagnosed ADHD, their primary problem is more likely to be



undiagnosed CI. These authors stated that 'the presence of CI may cause a misdiagnosis of ADHD.' Children with CI have a higher frequency of behaviour issues related to school performance and attention. While eye teaming problems may not be the whole answer to attentional and learning difficulties in children, they can play a small or large part, and in most cases can be easily fixed with vision training (eye exercises) or glasses, or a combination of both.

4. **The majority of eye teaming and tracking problems are fixable.** Vision-based learning difficulties have the advantage of being almost always fixable, whether through vision training (eye exercises), glasses or both. Research also shows that in convergence insufficiency (CI), vision training can lead to a 97% chance of a permanent resolution of the vision issue.

5. **Our children's vision assessments include a full examination of tracking, eye teaming, clarity of vision and eye health.** We know children's vision and we are great with kids – we make testing fun! We will also give you full explanation and options to choose whether you would prefer vision training or glasses for your child, where suitable.

6. **What is myopia control?** Myopia (shortsightedness) is an inability to see far objects, which



requires full time spectacle or contact lens correction. Once a child becomes myopic, they frequently become worse at a swift rate. Myopia control involves considering options (spectacles, contact lenses, and/or eye exercises) for slowing or stopping the progressive worsening of childhood shortsightedness. This comprises analyzing your child's eye teaming and visual tasks in relation to their level of myopia and determining your choices for taking an active approach to managing their vision. Our optometrists have lectured nationally and internationally on myopia control, and we are experts in orthokeratology (ortho-k) – a specialty type of contact lens which controls myopia by 50 to 100%.

- 7. Yes, children can wear contact lenses successfully and healthily!** Research has shown that:
- ✓ contact lenses for children and teens significantly improve quality of life in the areas of participation, satisfaction with vision correction and self-perception.
  - ✓ Children aged 8-12 years only take 10-15 minutes longer overall to learn to handle contact lenses than their 13-17 year old counterparts.
  - ✓ There is no additional risk or incidence of adverse outcomes in contact lens wearers who were fitted as teens or as adults after 10 years of wearing time.
- 8. Sinus allergies, hayfever, asthma and eczema can be linked to vision problems when a child is older.** These allergic conditions, which can be associated with itchy eyes, can lead to chronic eye rubbing. There is a link between eye rubbing and allergy and the development of keratoconus, a condition of the cornea (clear window over the coloured iris of the eye) which leads to blurry vision which cannot be corrected fully by glasses or soft contact lenses – rigid contact lenses or sometimes surgical procedures are required. Keratoconus usually onsets between ages 15-30. Also, long term use of asthma puffers or nasal sprays which contain small amounts of corticosteroids can increase the pressure in the eyes and increase risk of glaucoma. We have special instruments to check eye pressure in children without need for eye drops or the intimidating ‘puff of air’ test!
- 9. A child can be doing well at school and still have a vision problem.** Many eye coordination problems may not have obvious symptoms like blurry vision, and rather lead to fatigue and loss of concentration. A vision problem which does not impede learning in Grade 1 may become a bigger issue in Grade 3 once the print becomes smaller and visual demands increase.
- 10. Visual development undergoes the most significant changes from birth to age 12-13.** Turned eyes or lazy eyes which are not remedied before the end of primary school can lead to permanent visual impairment. Because vision is so crucial to learning, we recommend eye examinations every 12 months for children.



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