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International Pediatric Ophthalmology & Strabismus Council

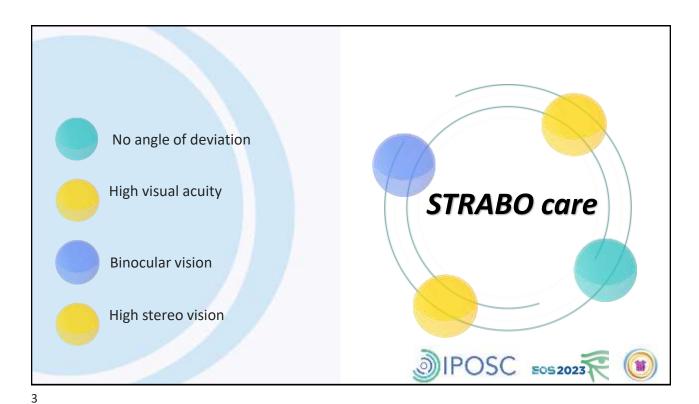
My personal tips and tricks to improve the surgical success

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I have no financial interest to disclose

"Strabo glasses" was invented by my Teacher and Head of Pediatric Eye Clinics "Yasnyi Vzor"



Binocular field Tychsen L. Can ophthalmologists repair the brain in infantile esotropia? Early surgery, stereopsis, monofixation syndrome, and the legacy of Marshall Parks. Birch EE. Marshall Parks lecture. Binocular sensory outcomes in accommodative esotropia. Journal of American Association for Pediatric Ophthalmology and Strabismus. 2003;7(6):369-373. Birch EE, Stager DR, Berry P, et al. Stereopsis and long-term stability of alignment in esotropia. Journal of American Association for Pediatric Ophthalmology and Strabismus. 2004;8:146–150. Lateral Geniculate Nucleu Birch EE. Stereopsis in infants and its developmental relation to visual acuity. New York, Oxford University Press. 1993:224. DIPOSC E052023

AIM

Development of a method for restoring sensory fusion by alternating programmable separation of vision with liquid crystal glasses and evaluating its effectiveness in comparison with traditional orthoptic treatment.







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Material

Main group 46 patients

Treatment by STRABO glasses

Control group 53 patients

Orthoptic treatment







STRABO glasses



LCD glasses were used daily for 4 hours Check-up with a doctor to determine binocular functions was carried out monthly

Synoptophore



Courses for 10 days every 3 months (total 3-4 courses). Recovery of sensory fusion was studied on synoptophore







Inclusion Criteria:

- age from 2 to 11 years
- state of orthotropy (when measured on the synoptophore, the residual angle of strabismus is not more than 10°)
- hypermetropic refraction up to 5 diopters in spherical equivalent and astigmatism no more than 2.0 diopters

Exclusion Criteria:

- amblyopia of medium and higher degrees
- the presence of a serious concomitant ophthalmic pathology
- · vertical strabismus greater than 3 degrees and with cyclotropia, which were detected on the synoptophore and during the Maddox test





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Research methods



- ✓ study of the objective and subjective angle on the synoptophore
- ✓ determination of binocular vision according to the Worth test
- ✓ study of the movement of the eyeball during installation movements using the Gazelab video oculograph (BCC Innova, Spain)
- √ according to the indications, optical coherence tomography, the study of visually evoked potentials and electroretinography were performed.









Recording of the adjusting movement of the eyeball in a 6-year-old patient after surgery for concomitant convergent alternating non-permanent strabismus (Hirschberg angle 0°, synoptophore — objective angle 2°). The duration of the adjusting movement is 20 ms (1 small horizontal division is equal to 4 ms), the duration of the latent period is 100 ms.

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To determine the individual frequency of alternating liquid crystal glasses, we developed a patent (Aznauryan I.E., Shpak A.A., Balasanyan V.O., Agagulyan S.G. Method for determining the frequency of alternating liquid crystal glasses to restore sensory fusion, RF patent No. 2721888 dated December 25, 2019).







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Parameter	Main group	Control group
	(n=46)	(n=53)
Age, years	5,6±2,5	5,7±1,9
Gender, M/F	23/23	30/23
Age when strabismus was detected, years	1,4±1,4	1,3±1,7
Visual acuity of the better seeing eye with correction	0,94±0,09	0,91±0,1
Visual acuity worse seeing eye with correction	0,79±0,07	0,77±0,07
Spherical equivalent of the better seeing eye, diopter	2,85±1,65	2,5±1,45
Spherical equivalent of the worse seeing eye, diopter	2,94±1,7	2,54±1,6
Anisometropia value, diopter	0,43±0,39	0,5±0,48
Strabismus angle	5,1±1,8	5,3±1,3

Note: The groups did not differ statistically (p>0.05)







Results

Recovery of sensory fusion and binocular vision after treatment

Functions after treatment		Control group (n=53)	Main group (n=46)
Fusion	Binocular vision		
Restored	Restored	11 (21 %)	18 (39,1%)
Restored	No	2(4%)	23 (50 %)
No restoration	No	40 (75 %)	5 (10,9 %)

*Note: The difference between the groups is statistically significant (p<0.000)







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