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Matilda Ziegler Magazine for the Blind

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Contributor Jennifer Streisand – A 'Top Ten List' to Achieve a New, Normal Living with Vision Loss: Part Three

Posted by Matilda on November 23, 2012; This entry is filed under **Magazine Contributor**.

In the broad array of low vision technology, there is the established technology, like the CCTV, and then there is also brand new technology, like an Implantable Miniature Telescope (IMT) that is surgically implanted into the eye for patients with end-stage macular degeneration. The implant acts as a magnifier, enlarging the visual image for the patient, and it's hardly noticeable because it is surgically implanted, and not hand-held, as are the telescopes that were the only option before this was available for AMD patients, explains Szlyk.

The Implantable Miniature Telescope was approved by the Food and Drug Administration in 2010. The Chicago Lighthouse has a partnership with Rush Medical Center in Chicago, where Rush does the surgery, and then the patient goes for 13 weeks of Rehabilitation at the Chicago Lighthouse.

"It may provide the ability to recognize a loved one's face, for example, and patients may appreciate the landscape better," explains Szlyk. "It acts as a magnification device."

Another brand new technology currently being tested in an FDA clinical trial at The Chicago Lighthouse is a device called the BrainPort, developed by Wicab, Inc. The device translates the visual image into tactile stimulation on the tongue to help patients with severe vision loss, or who are totally blind, orient themselves to their whereabouts, and such can function as a navigation device.

"You put it on your tongue when you want to see something, and you take it off when you don't," explains Szlyk. The patient also wears a fashionable pair of sunglasses, which is part of the system, and there is a small computer that is worn on the person's belt, she adds. BrainPort, and the clinical trial, are featured on the cover of The Chicago Lighthouse's

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2011 annual report, entitled, "New Sites, New Sight," and can be read online   at

http://chicagolighthouse.org/Media%20Center/Publications/Ann
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To determine what stage and what technology is needed to help a low vision patient achieve better functionality in their daily routine, they should go for a low vision evaluation, says Kara Crumbliss, O.D., a doctor of optometry and director of Clinical Services for the Forsythe Center for Comprehensive Vision Care at The Lighthouse. One of the missions of The Chicago Lighthouse is to help people who are visually impaired maximize use of their remaining vision. What this means, Crumbliss explains, is that if someone is diagnosed with macular degeneration, for example, they can learn to read using their peripheral vision, and often with the help of technology for low vision. In this way, they are "maximizing the remaining vision that they have," because they are using it for such a vital daily living task as reading.

There is a distinction between low vision technology, and technology for the blind, she explains.

"In the low vision category, the technology involves magnification, and that can be low tech, such as reading or computer glasses, to high tech, which are the CCTVs, both portable and non-portable," she says. "The technology for blindness, on the other hand, is auditory, some speech, and text-to-speech, Braille instruction, technologies related to Braille, as well as some of the GPS technology used in an auditory manner with patients." Often low vision patients will use blindness technology too, such as text-to-speech because it is more efficient for them to carry out daily tasks, Crumbliss adds.

Each person has to develop their own repertoire or combination of technologies to achieve their "Top 10 List," of work and recreational activities that they need to do. And, if they become good at the technology, and are motivated, they can go beyond 10 activities, to a top 20 or 30 list, or beyond.

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