# Vestibular Asthenopia

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#### I declare no conflict of interest

# Asthenopia?

#### **Definition:**

- Word from the ophtalmological terminology
- Set of subjective symptoms
  - Visual fatigue
  - Headaches
  - Blurred vision
  - Sensory discumfort
  - Dizziness
- Causes
  - Refractive
  - Muscular

# Vestibular Asthenopia ?

#### Why?

- Because most of our patients have complaints with visual connotation
- Because these complaints are really asthenopia
- Because we don't have (in french) other medical words to put on these symptoms
  - Vestibular asthenopia ≠ vertigo

# Vestibular Asthenopia ?

#### What is it ?

Vestibular asthenopia is a set of subjective symptoms of discomfort the expression of which is mainly <u>visual</u> and the origin of which is a transient vestibular incident. It can be considered as the result of a global central disorder of the visual stability perception, occurring suddenly like a "computer bug", in response to an initial vestibular pathology without any minor clinical signs. The chain of gaze stabilizing being broken, the processing of visual information becomes chaotic, where the main consequences are hypersensitivity to visual flow preventing central fixation, break of fine binocular vision, fusion disorders and sometimes even of accommodation.

# Vestibular system



## Vertigo $\neq$ Vestibular asthenopia



### Two reasons

Intergrative disorder: « mismatch » Eyes Sensory-motor disorder:

- Eyes position (horizontal, vertical, cyclo deviations)
- Eyes proprioception
- Accommodation
- Decompensation of an underlying weakness
  - Heterophoria, monocular neutralization, loss of stereoscopy
  - Bad AC/A ratio
  - (nobody is perfect !)

# Accommodation / vergence



**Modeling of the control of accommodation and convergence and their reciprocal interactions.** (reference: Roth A, Gomez A, Péchereau A., 2007, redesigned by Brautaset R.L. and Jemmings J.A.M., 2004, and Semmlow J.L. and Hung G.K., 1981)

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Vestibular initial problem + • Heterophoria + Ametropia + Intergration is too much !! central fatigue = asthenopia



### Treatment

#### New rehabilitation device: PSP

#### Panoramic Stereoscopic Panel®

### Aims of this exercice:

- Intensify sensory conflicts to reorganize the priority of tasks during dynamic vision:
- 1. Ensure central vision
- 2. Ensure good accommodation
- 3. Ensure fusion and stereoscopy

Reduce sensibility to optic flow
Reduce neurovegetative reactions
Reduce visual-vestibular mismatch

# Panoramic Stereoscopic Pannel



### Panoramic Stereoscopic Pannel

#### **Specificities**

- Visual frame
- Regularity of the stimulus
- Very merging
- High contrast
- Antireflection
- Paralell and backward of the horopter



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# Stereoscopic induced effect



#### Because motion is very slow



Because the role of attention is essential Voluntary fixation privileges parvocellular pathway

• (N. Kanwisher, E. Wojciulik)

#### Magnocellular route (dorsal)



#### Parvocellular route (ventral) +++

Because optokinetic and vestibular reflexes are not conform and this combined interaction decreases the vestibular time constant

(Mingjia Dai, Ted Raphan, Bernard Cohen)



- Because fixation during optic flow combined with vestibular stimulations increases convergence and stereoscopy
  - (Alexandra Séverac Cauquil, Maxime Rosito and Simona Celebrini)

## Very effective exercice

# « All in one ! » = « reset of the vestibulo-visual interaction »

# Thank you for your attention

