

IIH and Visual Monitoring and Testing.

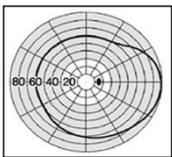
Vision loss is one of the most serious possibilities of having IIH. Our leaflet gives more information on the visual problems that can occur with IIH.

Regular vision and field tests should be performed until the medical team is confident that there is no vision loss occurring. Vision testing could then be done once or twice a year depending on symptoms. It is very important to keep your vision test appointments as vision loss can occur very quickly. If you have visual symptoms that are worrying you, do not hesitate to go to your GP, Eye Hospital or A&E.

Field tests

Field tests are performed to assess your peripheral vision (i.e. how far you can see to the sides whilst looking straight ahead). The test monitors how much each eye is contributing to your overall field of vision, and can assess how well you're responding to treatment.

Why does this test need to be done?



IIH can cause narrowing of the field of vision, meaning that you have less peripheral vision and an enlargement of the blind spot (the area in the back of the eye where the optic nerve enters the eye) due to swelling of the optic nerve, called papilledema.

How is it done?

There are a various methods of measuring the visual fields. A crude test can be done by the doctor having you look straight ahead and count the fingers shown by the doctor from the side. Usually, however; visual fields are measured by computerized assessment.



During the test lights are flashed on the inside part of the machine that you can see. When you see lights of various intensities and at different locations, you push a button given to you by the operator. This process produces a map of the visual field. The charts are either printed by the machine or drawn up by the operator.

Each eye is tested separately, to assess how much each eye is contributing to your overall field of vision. The test does not hurt or make any contact with your eye, but does require concentration for approximately 10 minutes with each eye. If you require a rest during the test, ask the operator and the machine can be stopped temporarily.

Examination with an ophthalmoscope

An ophthalmoscope is an instrument which has a mirror with a hole in the centre with a light attached that enables the doctor to see into the back of your eye. The ophthalmoscope has lenses in the mirror which can be rotated into the opening in the mirror so that the doctor can clearly focus the image of the back of the eye. This doesn't touch your eye at all. The light is bright so if you suffer from photophobia (intolerance to bright light), make sure you tell the doctor before the examination.



Slit-lamp examination

Your doctor may also want to examine your eyes using a **slit-lamp**. This is a microscope with a light attached that allows the doctor to examine your eyes, under high magnification. This instrument is usually used to view the front structures of the eye such as the cornea, iris, and lens, however; with special lenses, it's possible to examine the back of the eye as well. The instrument's name comes from its adjustable light beam. By changing the width of the beam, the doctor can gather important detail about each eye structure.



The slit-lamp looks a little like a microscope with a metal frame attached. Again although the lamp does not touch your eye, there is a light being shined in to it, you can take breaks if needed.

Photographs

Your ophthalmologist may want to take photographs of the backs of your eyes (the retina), so that they have a record of the swelling of the optic nerve (papilledema), of the optic disk (the small circular area in the retina where the optic nerve is attached to the back of the eye - also called the blind spot).



This will involve putting dilating drops into your eyes to dilate your pupils so that the doctor can see into the back of your eyes.

These drops will make you more sensitive to light as they dilate the pupils and allow more light into the back of the eye and will also make your vision blurred for a number of hours afterwards.

If you know you are going to have dilating drops put into your eyes, take a pair of sunglasses with you and make sure you are able to get home safely after your appointment.



Having photographs of the backs of your eyes taken is rather like having an examination using a slit lamp, only the equipment is modified so that a photographic record of the back of your eyes is kept. Nowadays most hospitals use a digital camera that is hooked up to a computer. This allows the images to be seen as they are taken. A copy of the photographs may be printed off for your medical notes. Ask the photographer if you can have a look at the resulting photographs. You'll be able to see the retina, the optic disc and optic nerve - seeing the backs of your own eyes is quite an experience!