

'SEVERE CONVERGENCE INSUFFICIENCY'

a new focus



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Landon Smith works with vision therapist Carrie Hall at the Washington Vision Therapy Center in Yakima on Tuesday. Smith was training his eyes to work together.

Local advocates of vision therapy are working to raise awareness of a condition where kids' eyes don't work well together, causing struggles with reading and close-focus work

BY MOLLY ROSBACH
YAKIMA HERALD-REPUBLIC

For Shelby DeVore, glasses just weren't cutting it. When she reached kindergarten and her vision and reading problems became impossible to ignore, her parents took her to an optometrist. She got glasses at age 4, but the problems persisted.

Over the course of three years, Shelby saw five different optometrists.

"They kept telling us, she's slightly nearsighted but there's nothing else wrong," her mother, Lynn DeVore of Yakima, said. "She really struggled in math and really struggled in reading, but I could read her a book, and she could tell you every little detail."

It wasn't until Shelby was 8, when DeVore saw an ad for Dr. Benjamin Winters' vision therapy center and attended an informational session,

that something clicked: Shelby wasn't just nearsighted; she had what was later diagnosed as a "severe convergence insufficiency" that caused her eyes to refuse to work together.

"I was that parent that cried for the entire hour, because finally, someone understood what was wrong with my kid," DeVore remembers. "I had for years been trying to tell somebody that something was wrong, and no one would listen to me."

Convergence insufficiency is one of the most common binocular vision problems in children. In severe cases, it's possible to see the eye turned out, but often the problem goes unnoticed and unsolved. Affected children struggle with reading and doing any close-focus work because their eyes don't track together and

don't help each other process visual information. They're also sometimes diagnosed with attention deficit disorder, or ADD, because they can't focus on the work in front of them.

That's why Winters and other advocates in the Yakima Valley are working hard to raise awareness of vision therapy as a corrective measure. Vision therapists work with patients to retrain their eyes and strengthen the muscles that allow them to track and focus together so they can read normally, and continue through school and life without learning delays.

"These kids are seeing double when they read, getting headaches, taking hours to do 20 minutes of homework because of fatigue, skipping words. ... Just really struggling to figure out what the words on the page are," said Winters, who runs the Washington Vision Therapy Center in Yakima.



Winters

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Amelia Haller, 10, works to develop depth perception with the help of vision therapist James Smith on Tuesday during a session at the Washington Vision Therapy Center in Yakima.

VISION/Often called the 'silent problem'

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In DeVore's case, her mother said, Shelby could read a long word like "underestimate" but not "the" because her uncooperative eyes couldn't point to the same spot on the page to catch the small group of letters.

Winters often calls it the "silent problem," one that can even affect kids who see 20/20.

"We can't see those struggles. All we see is a child struggling to learn how to read," he said. "That's where it's so important that we go in and find that out." He does an hourlong assessment to pinpoint each child's difficulties.

At his office, Winters has a large therapy room with several different exercises meant to strengthen and discipline the eye muscles. He and his therapists use 3-D red-and-green glasses to help kids identify when they're only using one eye at a time, practice hand-eye coordination and depth perception. They ask the kids to do things like balance on a wobbling board or walk in a straight line while performing the exercises so they learn to use their eyes along with the rest of their body.

Yakima-area providers seem to support vision therapy, but nationwide, there is controversy over its effectiveness and whether it can fix the problems it claims to.

Local optometrist Dr. Roy Hinze, who practiced himself in the past, says "the practice just needs to reemphasize its scope."

"I think optometrists who make claims with pretty severe reading disability, like dyslexia, that type of thing ... I think it helps a little but I do not think it helps as much. Parents need to be realistic," he said.

Still, "I think there's a lot of good in vision therapy. We've got all these other therapies—foot therapy,

hand therapy—and what's more important than our eye coordination?"

Dr. Donald Shute with Cascade Eye Center also uses vision therapy, though his focus is now on brain injuries rather than children with learning delays. He said it's a "definite advantage" for a lot of patients, but again, it's not a cure-all.

"If you have a true learning disability, language dysfunction, dyslexia or something, that's not the same thing; we're not necessarily treating the higher-level function," he said. "Most of us are looking at making sure the basic visual skills are not hindering the learning."

Hinze and Shute agree that the broader medical community tends to be skeptical of the practice, largely because of what's taught in graduate school.

"I think the negativism is pretty much because one, they don't know enough about it, or two, refuse to know more about it. ... It's not that it hasn't helped people," Hinze said.

Some studies show that about a quarter of school-age kids in the U.S. have some kind of vision problem that affects their learning. With such a significant population potentially at risk, Winters and others are actively reaching out to tell parents and teachers that vision therapy might help.

At Heritage University, early childhood education department chairwoman Melissa Kotzin has coordinated three information sessions in the past two years for Winters and other experts to talk with nursing and early learning students so they can know what to look for when they start working with kids.

In Toppenish, Kotzin is working with the Department of Social and Health Services to restart an AmeriCorps program that had volunteers canvassing the community to talk to parents about vision therapy options for their kids.

"The Washington Child Vision Project ran from 2010 to 2012 and focused on foster children and the local Native American community, two populations at high risk for undetected vision problems because of historically low access to specialty health care, especially in rural areas. In the project's second year, AmeriCorps volunteers helped 54 foster kids get comprehensive vision exams. Several were enrolled in vision therapy.

Access to vision therapy is hindered by its poor reimbursement from insurance companies, which also plays a role in the limited number of optometrists who provide the service.

To that end, DeVore and other parents of vision therapy clients have started a nonprofit, Building Vision, to raise money to help families without insurance or the means to pay for treatment get access to therapy. After Shelby's experience, DeVore said she frequently refers families to Winters and is a big proponent of reminding parents to get their kids' eyes checked if they suspect a problem.

It took 9 1/2 months of therapy for Shelby to train her eyes, and it wasn't easy. She was 8 by the time she started, so her brain had already established a work-around for her eyes, and that had to be un-learned.

"The first third is exciting. The second third is actually grueling and miserable as all get out, then in the last third you can actually see some progress," DeVore said. At age 8, Shelby was reading at a kindergarten level; now in sixth grade, she's only about half a grade level behind.

"I feel we have just made great strides," DeVore said. "She's enjoying reading; she's enjoying taking out new books; it's actually something fun she can do."

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