

Insight

Summer 2007

BRINGING THE GIFT

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To Just

by Paul O'Rourke
and
Rick Whitten, M.D.

Who takes a child by the hand, takes the mother by the heart.

Danish proverb

Risa leaned backed in her mother's lap and reached up, trying to put her arms around her mom's neck in a sort of reverse hug. "Ever since she was a little girl," Risa's mom said, looking down at her squirming daughter, with warmth and motherly love shining in her eyes, "the other kids made fun of her, called her names." When I first met Risa, in April 2005, during VHI's first field program to Piura, Peru, she was five years old, maybe six. She was afflicted with *strabismus*, a muscle-related misalignment of the eyes often called "crossed-eyes."

Strabismus is a condition not uncommon in the U.S., but corrected here very early in life. But in places like Piura, where joblessness, lack of medical insurance, and the scarcity of even basic medical care are the reality for a majority of the population, kids with strabismus simply don't receive treatment they need. They must endure the daily taunts and constant teasing that are often directed at those with physical, especially facial, abnormalities. "Like every mother, I hope she grows up and has a great life," Risa's mom said, her voice breaking, tears welling just a bit.

Kids don't think much about the future; the immediate is a sufficiently weighty focus for youthful and often abbreviated attention spans. Tomorrow is a mother's worry, and the years ahead for kids with strabismus are, sadly, more than a little worrisome. Psychologists suggest that



be a Kid

abnormal physical characteristics, like strabismus, often result in social isolation and subsequent antisocial behavior. For men and women in Latin

America—and, I suppose, everywhere for that matter—

when appearance is a significant element in the process of mate selection, strabismus could influence one of life's most basic, and joyful, passages.

According to local ophthalmologist, Dr. Florentino Sotomayor, "the backlog of children in Piura requiring strabismus surgery

is enormous...and growing." Childhood denied is a sad and cruel reality in Piura and in Latin America, especially when one understands that strabismus is so readily corrected.

Risa would have her surgery. And two days following her successful outcome, a contagious grin, as wide as the handlebars on the tricycle she rode, was spread across her happy face. Her brown eyes, now realigned, were obviously smiling. VHI will resume its efforts to serve those kids with strabismus when we return to Piura this July with the hope, like Risa's mother's ardent wish for her daughter, that many, many kids can grow up and have great lives, that they get the chance to feel what it's like to **just be a kid.**



VHI Will Return to Costa Rica

VHI will travel to Limon, Costa Rica during the week of September 22-30 to conduct its 40th field program, our 15th to Costa Rica. Located on the Atlantic Coast, in a geographically and commercially isolated section of the country, Limon is situated in the poorest region of Costa Rica and suffers from a documented lack of medical and vision care services.

VHI's host agencies in Costa Rica are the Caja Costarricense de Seguro Social (CCSS), or the Costa Rican Social Security, and the Costa Rican Association for the Prevention of Blindness. Dr. Roberto Sawyers Copeland, a former student of VHI's Program Director, Sarah Felknor, is regional director of CCSS and will help secure government authorizations for the program as well as help coordinate the receipt and storage of supplies and equipment prior to our arrival. Dr. Javier Cordoba, one of VHI's International Advisors who lives in San Jose, will work with staff and local ophthalmologists at the regional hospital in Limon (Hospital Tony Facio) and coordinate patient pre-screening for cataracts and oculo-plastic surgeries. VHI's Medical Director, Richard Whitten, M.D. has been scheduled to conduct educational seminars with local doctors and will act as consultant to the National Children's Hospital during VHI's stay in Costa Rica.

For more information on this upcoming trip please be in touch with Sarah Felknor at sfelknor@sbcglobal.net.

Insight Into Strabismus

by Richard Whitten, M.D.

I was recently asked about how kids with strabismus see their world. Is their vision out of focus? Are there dual images or confusing messages the eyes send to the brain?

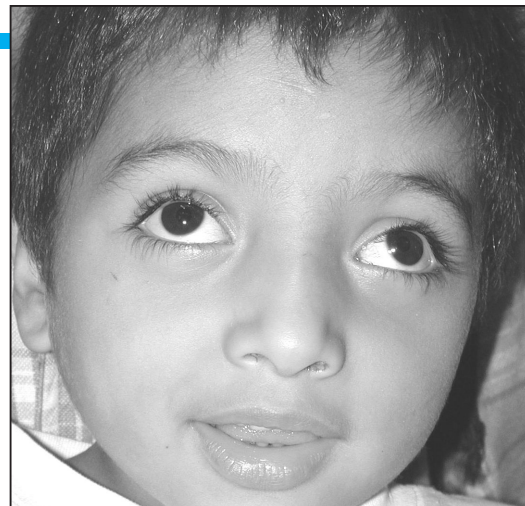
Children with strabismus develop, almost immediately, a unique ability to "suppress" conflicting visual information. Their malleable little brains simply turn off incoming data which present an alternate picture of the outside world. If the two eyes are not focusing precisely at the same point, two identical, but not superimposed images arrive at the visual cortex. A child with strabismus erases, or more technically, blocks one set of incoming signals and focuses attention on the other.

The lucky child is the one who can artfully alternate attention back and forth between two eyes. He will develop good vision in each eye, though he won't have *binocular* or *stereoscopic* vision. The unlucky child will consistently block the

image from the same eye, and that eye will become *amblyopic*, a condition where the brain loses its ability to receive incoming signals from that eye.

If detected before the age of five (an unfortunately uncommon occurrence in Latin America), amblyopia can be treated by way of patching the "strong" eye, forcing the brain to pay more attention to the weaker eye's signal and thus, improving vision. Sadly, the vast majority of Latin American kids with amblyopia are not diagnosed by the age of five and surgical realignment of the eyes to correct their strabismus will not return binocular vision.

If, however, a strabismic child can have the eyes surgically realigned before age two, they will often regain the ability to fuse the images in the brain, thereby regaining stereoscopic vision. After age two, even though the eyes are straight to all outward appearances, fusion is seldom regained.



Child with strabismus awaits surgery

However cosmetic it may seem, the correction of strabismus for kids of all ages is an important social, cultural, even economic event. The "normalization" of a child's appearance can only have lasting benefit and will greatly improve their future lot in life.

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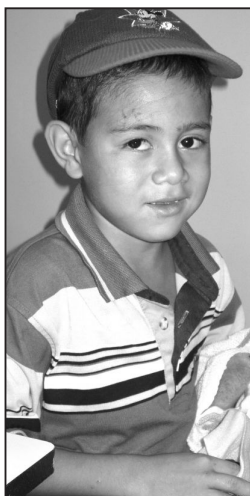
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You Can Help Restore the Gift of Sight

On each VHI field program, physicians, nurses, technicians and other volunteers (20-25 per trip) donate not only their time and talent, but pay their own way, including air fare, lodging, and meals. Depending on the location and duration (usually 7-8 days), our field programs to Latin America cost the organization approximately \$30,000; participant fees cover roughly one-half of that amount. To sustain our mission we rely on donations of dollars and gifts-in-kind from individuals, corporations, and foundations.

Consider that a gift of \$25 means 25 people will receive an eye exam, perhaps for the first time; \$50 means one child will have life-altering strabismus surgery; \$100 means one person will have sight-restoring cataract surgery; \$500 sponsors one operating room nurse on one trip; and \$1,000 will help underwrite the cost of shipping surgical equipment and supplies to Latin America. Please help VHI restore the gift of sight.

Come visit us on the internet at www.visionhealth.org

For More Information

If you are an ophthalmologist, anesthesiologist, surgical nurse or technician, or a recovery room nurse and think you would like to volunteer for a VHI mission, please contact

Cindy Goodale at (707) 224-5956

or toll-free at (877) 689-2981.

If you know someone who would like to receive our newsletter or get more information about VHI, please let us know.

We'd like to spread the word.

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