



Questions (and answers) about low vision

Q. What is different about a low vision examination as compared to other eye exams?

A. The purpose of a low vision examination is to find tools or techniques that will help you reach your goals in your daily life. Every low vision examination starts with a discussion about the tasks that are difficult for you. Common goals include reading the newspaper, seeing the television or threading a needle. Your vision is measured in various ways to determine your visual acuity, location of blind spots, how well you see with low contrast and your sensitivity to lighting. All of these factors help determine which tools will work best in helping you to meet your personal goals.

Q. What are you looking at when you look at my eyes?

A. Although a low vision examination is focused on helping you reach your goals, we cannot forget about the health of your eyes. During the low vision examination, a microscope is used to check the health in and around your eyes. It is important to monitor your eye condition for any changes that may have occurred since you have seen your other eye care professionals.

Q. What does it mean to be dilated?

A. If there is reason to believe there has been a change in your eye condition, or if there has been a significant change in your vision since you have last seen your primary eye care professional, or if it has been over one year since you have been dilated, it may be necessary to dilate your eyes. This means using eye drops to enlarge the pupil (the black center in the front of the eye). This allows for a better look inside of the eye to monitor your eye health. Once dilated, it will take your pupils a few hours to return to normal. In the meantime, you may be sensitive to light or experience blurred vision up close.

Q. Why do I need a low vision examination?

A. If you have trouble with your vision, a low vision examination is recommended. During the low vision examination, measurements are taken of your vision and the amount of magnification needed to perform daily tasks is determined. From these measurements, specific devices can be demonstrated and loaned to you for trial at home. You may continue to work on reaching your goals as long as you need. Additionally, our Certified Low Vision Therapist, Kim Rigdon, is present to teach you to use your devices or technique properly, maximizing your vision and independence. Thus a low vision examination can save you considerable time, money and frustration.

Q. Why do you check for glasses when I have been told glasses won't help?

A. Even though standard eyeglasses may not make a considerable improvement in your vision, your individual prescription is the foundation from which other specialized eye glasses or magnifiers are built. I explain it like focusing the lens of a camera: we must make sure the lens is in focus before we can consider enlarging an image. If simply enlarging an image without first focusing the lens, all we end up with is magnified blur.

A visionary: Dr. Frances Kinne

An individual synonymous with generosity and civic support, Dr. Frances Bartlett Kinne is one of the co-founders of the Eye Research Foundation and the vice president of the Low Vision Center's board of directors.

Her own vision problems led her to join W.J. Knauer Jr. and W. Ashley Verlander in forming the Foundation in 1969. It since has followed its mission of providing vision education to residents of this area.

She was born in Iowa and earned degrees in music education there in 1940 and 1944; her Ph.D., granted in 1957, is from the University of Frankfurt in Frankfurt, Germany.

Married to a U.S. Army

colonel, the late Harry Kinne, she lived in China, Japan and Germany. Dr. Kinne became dean of the College of Fine Arts in 1961, the first time a woman held such a position. The recipient of many awards, she has five honorary doctorates and was the first woman elected president of the International Council of Fine Arts.

In 1979, she became the first female to serve as a college president in Florida when the Jacksonville University board elevated her from her position as dean of the College of Fine Arts. She became Chancellor in 1989 and Chancellor Emeritus in 1994.

Her lists of "firsts" is



Frances Kinne impressive, including becoming the first woman member of the Rotary Club of Jacksonville.

Her friendships with comedians Jack Benny and Bob Hope brought both to Jacksonville on numerous occasions to help her build Jacksonville University.

Our Wall of Honor

Nine benefactors are recognized on the wall in the reception area at the Low Vision Center. The plaques recognize their work for the Eye Research Foundation, the organization that has funded the Center as part of its mission to provide vision help to the people of North Florida.

The main plaque is in honor of W.J. "Jerry" Knauer Jr., the Jacksonville ophthalmologist who started the Eye Research Foundation in 1969. Dr. Knauer retired five years ago.

The surrounding plaques:

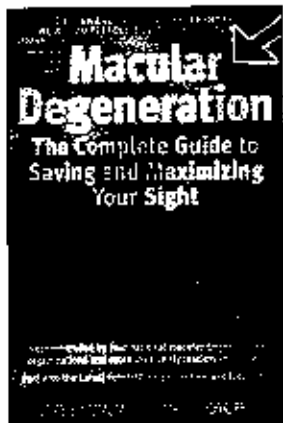
- Dr. Frances Bartlett Kinne, a co-founder of the Foundation, an officer of the Center and a past president of Jacksonville University.

- W. Ashley Verlander, a founder of the American Heritage Insurance Co. who joined Dr. Kinne and Dr. Knauer in founding the Eye Research Foundation.

- William Nash, the former CEO of the Prudential Insurance Co.'s South Central office and owner of the building in which the Center operates. He made the space available for the cause.

- The late George Utsey, who owned the Utsey's Shoes stores in the Jacksonville area and who was an officer of both the Foundation and the Center at his death.

- The late J.E. Davis, a co-founder of the Winn-Dixie grocery store chain and a major



She wrote the book!
Lylas Mogk, M.D. is one of the foremost authorities on Macular Degeneration and her book has received worldwide acclaim.



Meet her in Jacksonville!

Dr. Mogk is the featured speaker at the 15th annual Eye Research Foundation Seminar.

Saturday, March 8, 2008

**Wyndham Hotel, downtown Jacksonville
(formerly the Radisson)**

9:30 a.m. - 11:30 a.m.

No admission fee (and there will be no solicitation for money.)

The seminar is a project of the Eye Research Foundation of Jacksonville; a non-profit organization dedicated to education, treatment and research in vision.

WALL (continued from page 2)

benefactor of the Eye Research Foundation.

- The late Katherine "Kitty Bell" Meyer was an executive at the Barnett Banks of Florida and donated money to help the Foundation in its educational outreach.

- The late Jane M. Wynn was an officer in the Miller Electric Company who helped fund the operation of the Eye Research Foundation.

- The most surprising name you'll see is that of Bob Hope, the late comedian. Mr. Hope was a close personal friend of Dr. Kinne and performed in Jacksonville to benefit both the Eye Research Foundation and Jacksonville University. He also allowed his name to be used in a national advertising campaign to promote good vision.

What lighting is best for you?

As mentioned in past newsletters. There are 3 important rules of low vision. They are called the 3 B's - Bigger, Brighter, Bolder. The first newsletter I wrote about the first B - Bigger. In this newsletter I am going to discuss the second B - Brighter.

Most people, even those without vision impairments need more lighting to see when performing various tasks such as reading, writing, crafts, etc. Many eye conditions affect the retina. The retina contains photoreceptors that are responsible for how we see things in light and dark.

So, one of the most common questions people ask: What is the best light for someone with a vision impairment?

My comment - every time - is that everyone is different. I don't know everything about lighting and candlesticks and lumens, but I still could not fit everything that I have learned about lighting in this newsletter, so hopefully I can at least give some guidance with a few tidbits I have picked up along the way!

Even if they have the same eye condition, everyone's eyes are different, so not everyone likes the same light. In our office we have lamps displayed side by side to compare light bulbs using the same newspaper article. Although the GE Reveal bulb is chosen by many of our patients, I never assume that it is the best bulb for everyone. Your home may have more windows allowing more natural light to come in, which can sometimes change the style of bulb or wattage that you choose based on how bright the sun is shining on any given day.

I generally give 2 recommendations when I discuss lighting: it should be directed and contained. Many people use ambient lights that are set up in the ceiling, chandelier or an end table lamp, which generally is not the best source. Using a task lamp or gooseneck lamp so that the light can be directed down between your nose and the reading material or task is usually more effective. Many times directing it over the shoulder of the better eye is a big help.

Contained light means that the lampshade should be closed at the top. End table lamps usually have a large

opening at the top and let half of the light escape and spread throughout the room instead of concentrating it on your paper. Many people who have glaucoma, optic atrophy or other eye conditions may have a lot of difficulty with glare. If this is the case, directed and contained light may cause too much glare.

Although many people change their light bulbs to a 100 watt or higher, I generally only recommend 60 watts if properly positioned using the above guidelines. More than 60 watts can get glarey and hot placed so close to your face. As mentioned above, if someone has particular trouble with glare, less than 60 watts may be more effective.

We also have an OTT light displayed in our office. This is a natural daylight bulb that resembles a fluorescent in style, but doesn't seem to have the same glare for many people. It also does not get as hot as many incandescent bulbs. Joann's Fabrics and Micheal's craftstores are among the vendors for these lights, so if you come across the 40% off coupons in the weekly circulars, take one with you if you decide to purchase this style.

Lately there has been a lot of hype about the compact fluorescent light (CFL) bulbs that are so energy efficient. Many of them resemble a corkscrew. Although everyone is different, I do not generally recommend these for directed and contained light. They might work out well in the ceiling to light a room, but many of them will not work in a standard gooseneck lamp.

Many recent reports have also stated that these bulbs can be hazardous to your health if they break in your home because they contain mercury. Some reports recommend calling the EPA if they break! I don't know about you, but I am a klutz. Gooseneck or task lamps are sometimes very lightweight and easily knocked over and I would never want anyone even with good vision to have to try to clean up one of these bulbs!

In conclusion, everyone's eyes are different. So, no matter what bulb style, wattage or light fixture - you are always the best judge of what helps you to see.

- By Kim Rigdon, CLVT



Coming to the Center

MAKING AN APPOINTMENT

It's easier than you believe. Call 389-9989 and our Patient Care Coordinator will make your appointment. If you get a recording, don't worry — you'll get a call-back quickly.

OUR LOCATION

We're almost directly across from St. Vincent's Hospital at 2519 Riverside Ave. You can't miss us — we're the historic home painted light blue and white.

PARKING

It's right next to the building on the right side. There's a handicap place in front, if you need it.

WHAT TO BRING

- Your insurance cards.
- Your Social Security number.
- List of current medications.

WHAT YOU'LL DO

Our Patient Care Coordinator will check you in and make sure she has all the correct information.

You'll then meet the Center's director, Dr. Tiffany Owens, who will review your situation and conduct an examination to determine your needs.

The last step is a visit with Kim Rigdon, a certified low vision therapist who will show you devices which can improve your quality of life.

The entire process will take about an hour and a half. If you have someone waiting for you, they'll be comfortable in our easy chairs and there's plenty of coffee, tea and hot chocolate, too.

Before leaving, you'll make an appointment for a follow-up visit.

YOUR FOLLOW-UP VISIT

Your visit to the Low Vision Center doesn't end when you walk out the door — you also need to make a follow-up visit!

We want to make sure the equipment we gave you is what you need and also to help you with the available resources. Plus, we want to visit with you to make sure that you're comfortable with the devices and that your lifestyle has indeed improved.

It's also a time to review other resources that can help such as the Talking Books program and support groups.

The follow-up should be about two weeks after your visit.



Dr. Tiffany Owens



Kim Rigdon

Can you lend a helping hand?

Some patients at the Low Vision Center are unable to pay for vision devices. If you'd like to "sponsor" a person who needs help, here's a price list. Just send a check to the Low Vision Center and we'll take care of the rest, and we'll send you a letter for tax purposes.

3x LED stand magnifier - \$81.50

MaxTV glasses - \$109

Cocoon sunglasses - \$39.95

4x LED Hand held magnifier - \$45.90

+8.00 half eye glasses - \$78.75

Bold lined writing paper - \$4.73

Pocket folding magnifier - \$27.13

The Low Vision Center

Director

DR. TIFFANY OWENS, O.D.

Low Vision Therapist

KIM RIGDON, CLVT

The Eye Research Foundation of Jacksonville

President

W.J. KNAUER III, M.D.

Vice Presidents

FRANCES BARTLETT KINNE, PH.D.

W. ASHLEY VERLANDER

Secretary - Treasurer

DEBORAH KNAUER

Executive Director

FRED SEELY



This is a quarterly
publication of the
Low Vision Center of
Northeast Florida,
a non-profit clinic
at 2519 Riverside Ave.,
Jacksonville, Florida 32204.

More information about
the center is available
by calling 389-9989.