3rd Global

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## Effectiveness of partial versus full occlusion in treatment of anisometropic amblyopia

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**Background:** Amblyopia is one of the most common disorders of decreased vision in children, the approximate prevalence is 2-4% and one third of it is due to anisometropia. If not treated in time lead to permanent subnormal vision throughout life, it is totally preventable disease. The recommended treatment is full correction of refractive error after cycloplegia with spectacles and occlusion therapy. Classical method of occlusion therapy is complete full time patching with eye pad, but sometimes it has fewer acceptances to stick to the treatment for both parents and child owing to odd looks. Another form of occlusion is partial occlusion for few hours a day has been tried with varying results.

**Aim:** In this prospective randomised trial, full time complete occlusion when child awake on spectacles have been done and result was analysed.

**Method:** 40 child of anisometropic amblyopia between the ages of 3 to 10 years has been enrolled into study and divided into two groups; group A-20 patients with complete occlusion with eye patch and group B-20 patients with spectacle patching. Inclusion criteria age was 3-10 years, anisohypermetropia within 3-9 diopters with amblyopia and first time attending the clinic. Exclusion criteria-age beyond 3-9 years, previously treated amblyopia occlusion has been given in the ratio of 1:7 i.e. the better eye has been occluded for seven days and amblyopic eye for one that monthly follow up has been done for six months.

**Result:** It has been analysed at the end of six months. All patients showed some improvement at the end of three months and few patients are still under occlusion. Final result will be analysed after two months.

## **Biography**

Nagendra Prasad is an experienced Ophthalmologist based in Patna, where he practices at Buddha Eye and Lasik Laser Centre, which is a centre of excellence for phaco, retina, glaucoma and diabetic eye care. His areas of specialization include Cataract (MICS), LASIK, Glaucoma and treatment of retinal disorders. He is currently Secretary of the Patna Ophthalmological associations. He has done his MBBS and MD in Ophthalmology, and also completed fellowship in vitreo-retinal surgery. After completing his MBBS and subsequent Residency training, he worked as Medical Officer in State health services from February 1991 to June 1992, after which he pursued his MD in Ophthalmology from All India Institute of Medical Sciences (AIIMS), New Delhi. He was then Senior Resident in Department of Ophthalmology at the Regional Institute of Ophthalmology, Indira Gandhi Institute of Medical Sciences, Patna, from September 1995 to August 1998. He then moved into the area of training at the same institute for over eight years, first as Assistant Professor, and subsequently as Associate Professor and Officer-in-Charge, up to December 2006.

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