



Finnish ophthalmologist Dr Lea Hyvarinen displays a distinctively-patterned doll, used in working with visually impaired children, to the Ophthalmological Society of New Zealand conference in Dunedin.

Early action on eyesight urged

By John Gibb

Early intervention, beginning before the age of three months, is essential if best outcomes are to be achieved for visually-impaired infants, Finnish ophthalmologist Dr Lea Hyvarinen says.

Dr Hyvarinen is a Helsinki-based ophthalmologist who has been helping children with visual impairments since the late 1960s, and has also undertaken considerable research in the field in association with the Helsinki University physiology department.

On Tuesday she gave an address on "the effect of visual impairment on the early development of the child"

at the Ophthalmological Society of New Zealand's annual conference in the Dunedin Town Hall.

Dr Hyvarinen, who expanded on her comments in an interview, said New Zealand ophthalmologists had one of the best early intervention systems in the world.

Early diagnosis of visual impairment, an analysis of its extent and nature, and active efforts to provide early stimulation of the cerebral cortex were essential if best outcomes were to be achieved, she said.

She rejected the "wait and see" approach which had once been taken by some health professionals, and said contrasting visual patterns on feeding bottle covers, dolls and other objects could help to stimulate

infants who had impaired sight.

Some infants who would have enjoyed some sight could become blind, in some circumstances, if there was insufficient visual stimulation, she said.

During her address she showed slides demonstrating the use of illuminated "light boxes" to help infants see distinctive shapes more clearly during their early development.

Failure to provide early help could contribute to a host of negative outcomes, including motor function problems, impaired grasp of spatial concepts, inferior balance, and reduced learning and communication skills.

Effective intervention required an interdisciplinary approach,

involving parents, educators, ophthalmologists and other health professionals.

Ophthalmologists and health professionals should not feel guilty about a child's visual problems, Dr Hyvarinen said.

Answering a question from the floor, she said support groups for parents whose children were visually impaired helped to boost morale.

Health professionals should also bear in mind that parental stress arose not only because of the difficulties experienced by their children, but also because of the strain having to repeatedly discuss the problems with several different specialists and other support staff, she said.