## DENIAL OF VISION (ICD-9-CM 377.9 and 300.11 or V65.2) 2/8/99 Robert W. Arnold, M.D. and Carl E. Rosen, M.D. Pediatric Ophthalmology Neuro-Ophthalmology Ophthalmic Associates, Anchorage and Wasilla, Alaska

Children and adults will occasionally complain of decreased vision even though a thorough examination of the anatomy and subconsious physiology of the eye reveals either no defects or inconsistent results. This is defined as "denial of vision", a form of cerebral visual deficiency.

An analogy can be made between the eye and a camera. The visual system can be compared to a video camera (the eye), cables (optic nerves), the video player (the brain) and a monitor screen (the occipital cortex). In order to actual "see", someone awake and alert must be observing the monitor screen and doing something about it (i.e. reading the eye chart, looking at a small object and following it with eye movements). The difference is that the video system is not alive and our eyes and brain are. We need oxygen, nutrients, blood, blood vessels, etc to see.

If we are asleep, our eyes can be open and looking at an event but we don't "see" it. The same can happen with disruptions of our brain alertness by seizures in epilepsy. Other times, our awareness of vision can be obscured by anxiety or fear.

In adults, blurring or decreased vision often brings up fears of a stroke or brain tumor. This may also be true for very young children though they may not verbalize it so well. A cycle of moderately or temporarily decreased vision may produce fear, leading to decreased awareness of vision, and more fear, etc.

Seeing well requires good eves, a good brain, alertness, self esteem and a lack of fear. The analogy for seeing is being able to drive from Anchorage to Kenai in the winter. Even if you have an excellent car, and get started well, you will never get to Kenai if you slip off the highway and become high-centered on a February snow berm near Girdwood. The other cars, even some rusty old beaters, are driving by. The car becomes frustrated. The car worries it will never get there. Gunning the engine causes the rear wheels to spin in mid-air. The gas gauge, a measure of self esteem, drops. Often, if you have time, Denial of Vision will improve over time without any special treatment. This is like letting the snow berm melt and driving to Kenai in April. Further diagnostic testing sometimes slows the recovery of vision. This is like having a mechanic drain the fuel tank and radiator to check for too much or little water- resulting in less gas to drive when you get going again. Positive encouragement fills the gas tank. Avoid watching the progress of the other cars. Sometimes reading or distance glasses can give a little boost (like shoveling and pushing the car off the berm); glasses usually are not needed in the long run.

