



STROKE SA

STROKE
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STROKE CAN AFFECT VISION

Stroke can affect a person's vision in various ways. For people who have had a stroke and their families or carers, one of the first steps in coping with stroke related changes to their vision is to be able to *understand* the nature of the vision difficulty they are experiencing.

Our ability to 'see' (and to understand what we see) is a very complex process involving not just the *eyes*, but many parts of the brain as well. Stroke related vision changes are related to the stroke's effect on areas of the brain. The exact nature of the problem depends on the location of the damage, thus people experience different visual changes.

These may include:

- An inability to see one side of the surroundings.
- Bumping into things on one side.
- A condition known as “Amorosis Fugax” can occur and is caused by a transient blockage of the artery to the eye.
- Difficulty locating objects which seem obvious to other people.
- Ignoring food on one side of a plate or shaving one side of the face.
- Seeing double, or things are hazy or blurred.
- Difficulties moving about or coping with crowds, busy places or many people at once.
- Changes in comfort and security in glare and/or dimly lit situations.
- Changes in ability to read or in the appearance of print.
- Getting lost in familiar environments.
- Experiencing changes in the way things look which are often difficult to describe to others, and may be inconsistent to happen intermittently.

Surprisingly, these problems are commonly reported following a stroke - but they don't always happen - and are not always noticed by the individual themselves, but by family or relatives.

HOMONYMOUS HEMIANOPIA

Homonymous Hemianopia is one of the more common vision impairments following a stroke. Someone with this condition has difficulty seeing one side of the surrounding environment, or will report that one side may appear different from the other. This may affect finding objects, eating a meal, walking about, getting dressed - in short, many tasks at home or in the community.

HOW FAMILY MEMBERS CAN HELP

1. **Identify** the problem (or possibility) and **seek help** to clarify what it is and how best to cope with it. Assisting the individual to make the best use of their remaining vision not only helps that person, it can also help the family.

- 1) Where appropriate the individuals can be offered programmes to help them cope with the difficulties they are experiencing and to improve their independence.
 - 2) Acquired Brain Injury Vision Service is a free service to the client and provided by the Guide Dogs Association. The Association provides a wide range of mobility based rehabilitation programmes aimed at teaching people the most effective way to use their remaining vision while they are mobile. In programmes where the person has had a stroke, any equipment or a Guide Dog is usually *not required*, however, our portable scanner is often used to assist in defining the problem and in the initial training.
 - 3) Acquired Brain Injury Vision Services can help you - you can ring direct yourself, or ask your doctor or treating health professional to make a referral on your behalf. Acquired Brain Injury Vision Service provides a service aimed at assisting the individual, the family and any relevant others to understand the nature of the visual problem.
- 2. Realise** that a person experiencing a sudden change to their vision can become very *frightened or agitated*. They may consider their vision loss a problem of most concern to them. Alternatively, they *may not have noticed* the problem themselves and thus may not realise the effects it has on their safety.

CONTACTS

*For further information or assistance, please contact Acquired Brain Injury Vision Service on
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