Introduction

Occupational and Vision Therapy have much in common. Many links have been identified between the two. The areas of study and practice; however, no standard protocol has been put into place in the clinical setting. This poster will discuss the differences and similarities between OT and VT, a case report in which OT and VT were used with a patient successfully, and the possibility of integrating both OT and VT for the best outcome of the whole person.

Discussion

Occupational Therapy (OT) is used with individuals diagnosed with physically, mentally, emotionally, and developmentally disabling conditions. OT helps individuals of all ages maintain, recover, or develop skills to assist with daily life. For adults, this is assistance with living a life that is as self-sufficient, independent, and enjoyable as possible. Considered a part of the whole person.

OT and VT: A Partnership Worth Pursuing

• Overcome denial and isolation
• Prosthetic devices
• Health and wellness promotion through engagement in occupations
• Environmental and procedural adaptations to enhance functional performance
• Graded activities or tasks used as pre-requisites for engagement in occupations
• Identifying and assisting in the engagement of healthy and meaningful occupations
• Restoring, developing, or remediating psychosocial, cognitive, and sensorimotor

Case Report

IC, a 2 year old male Caucasian male, was examined at The Eye Center at Southern College of Optometry on June 8, 2012. He presented to The Eye Center, with his mother and paternal grandmother, an OT, due to his mother being concerned about her son’s eyes alternately turning out, which had occurred since the age of six months. IC had been hospitalized at one week old and at two months old for a high fever and had been treated with both oral and intravenous antibiotics. When IC was one year old, a pediatric ophthalmologist recommended that IC have an MRI to rule out any neurological etiologies related to the eye turn. An MRI had not been done at the time of the exam. The only pertinent family history was that IC’s mother had a constant alternating exotropia (CXA).

Vision Therapy

Vision therapy is a sequence of activities individually prescribed and monitored by the doctor to develop efficient visual skills and processing. It is prescribed after a comprehensive eye-examination has been performed and has indicated that VT is an appropriate treatment option. The VT program is based on the results of standardized tests, the needs of the patient, and the patient’s signs and symptoms. The use of lenses, prisms, ocular occluders, specialized instruments, and computer programs is an integral part of any therapy program. Vision therapy is administered in the office under the guidance of the doctor. It includes a number of office visits and depending on the severity of the diagnosed conditions, the length of the program typically ranges from several weeks to several months. Activities paralleling in-office techniques are typically taught to the patient to be practiced at home to reinforce the developing visual skills.

Practice settings for vision therapists include:
• Private or group practice
• Educational institutions
• School systems
• Rehabilitation facilities
• Nursing homes and assisted living facilities

Activities Done at Home

General Notes

Conclusion

Depending upon one’s orientation some overlap, in terms of the scope of practice and areas on which to concentrate between occupational therapy and vision therapy, particularly in the areas of visual perception, eye-hand coordination and visual motor integration. This case is an example of the type of progress an individual can make when VT and OT are utilized simultaneously. It was fortunate to have a relative (his paternal grandmother) who was a trained OT and could work with him at home, and the ability to receive in-office VT at an accessible location. During the period of time he was seen at The Eye center in VT case therapy sessions he also was receiving daily OT “main sessions” with his grandmother. As a result, IC showed excellent and consistent improvement of his eye by the time we were two months into his treatment. We believe that more people could benefit from the synergies that emerge from the use of OT and VT together. This could lead to greater improvements in these children’s lives when both therapies are done together rather than undertaking solely VT or solely OT.