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Attitudes and practices of vision therapy: A survey of Montana optometrists

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ATTITUDES AND PRACTICES
OF VISION THERAPY:
A SURVEY OF MONTANA OPTOMETRISTS

By

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A thesis submitted to the faculty of the
College of Optometry
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Marie Pearson is a 1987 Phi Beta Kappa graduate of the University of Idaho where she majored in Psychology and minored in Biology. In her senior year she served as vice president of Psi Chi, the national psychology honorary. Post graduation plans include moving her family to Montana and practicing in a partnership as the pediatric and vision therapy specialist.
ABSTRACT

Sixty six Montana optometrists responded (68.75% response rate) to a mailed survey concerning vision therapy. Eighty six percent reported they saw at least 1-3 patients per week with binocular vision or perceptual difficulties. Although 60.9% said they did not provide vision therapy for their patients, a total of 65.8% said they sometimes or frequently refer patients. Of those who reported providing vision therapy, most (84%) have five patients or less who they see on a weekly (30.1%) or biweekly (26.9%) basis. The most common thought (71.8%) on vision therapy by non-VT OD's is lack of comfort with their ability to do it, indicating a possible need for more continuing education in this area.

KEYWORDS: Vision Therapy, Montana optometrists, practice management
INTRODUCTION

As a student member of the College of Optometrists in Vision Development (COVD) planning to practice in Montana, I was surprised by the absence of members from that state in the directory. Since COVD is the primary membership organization of practitioners of vision therapy (VT), I questioned the attitudes toward VT and how many optometrists provided VT services for their patients. After a literature search revealed virtually nothing in this area, I decided to address the optometrists of Montana directly. A phone call to the president of the Montana Optometric Association indicated that although there is interest in VT, the rural location of most practices in the state hindered participation at national conferences.

This paper reports the findings from a survey designed to give an overview of optometric practices in Montana and a detailed description of the views of optometrists toward vision therapy including both those who do and do not provide VT services.

METHODS

All 96 optometrists included on the Montana Optometric Association membership list were mailed surveys. As an incentive to return surveys in a timely manner, each doctor who sent a business card along with the completed survey by the deadline received a 5% discount from the Bernell Corporation and one card chosen at random received a $100 gift certificate from Bernell. Sixty six (66.8%) returned surveys. Two were blank because the optometrists were retired. This resulted in 64 surveys included in this report.

RESULTS

The following pages contain a copy of the original survey with totals for each response in bold print. A graphical representation of the results follows that.
SURVEY OF MONTANA OPTOMETRISTS

1. What is your age?
   2 20-29
   26 30-39
   18 40-49
   14 50-59
   3 60-69
   1 70 or over

2. Sex
   56 male
   7 female

3. Where did you get your OD degree?
   0 University of Alabama
   1 University of California
   0 Ferris State University
   6 Illinois College of Optom.
   0 State University of NY
   0 Ohio State University
   0 Northeastern State University
   0 New England College of Optom.
   0 Pennsylvania College of Optom.
   11 S. California College of Optom.
   1 Southern College of Optom.
   0 Inter American University
   0 Southeastern University
   0 University of Montreal
   0 University of Waterloo
   0 Indiana University
   44 Pacific University
   1 University of Houston
   0 Other

4. How many years have you been in practice?
   0 less than 1
   4 1-4
   13 5-9
   13 10-14
   7 15-19
   9 20-24
   12 25-29
   6 30 or more

5. What is your mode of practice?
   37 Solo
   17 Partnership
   8 Group
   2 Chain
   0 HMO
   0 Government/Military

6. What is the population of your city/town?
   0 less than 1,000
   0 1,000-2,500
   16 2,500-5,000
   7 5,000-10,000
   6 10,000-25,000
   14 25,000-50,000
   19 more than 50,000

7. How many patients do you see for full exams in a typical week?
   0 less than 5
   1 5-10
   5 11-15
   8 16-20
   11 21-25
   9 26-30
   6 31-35
   18 36-40
   5 41-45
   2 more than 45

8. How many patients do you see with strabismus?
   8 0
   47 1-3
amblyopia, binocular or perceptual problems in a typical week?

9. Do you provide vision therapy services for your patients?
   25 Yes, go to #12
   39 No, go to #10

10. Do you refer patients for vision therapy?
    7 Never
    7 Rarely

11. What are your thoughts on vision therapy?
    0 Vt doesn't work
    3 Vt is too unscientific
    1 My patients don't need vt
    6 My patients can't afford vt
    5 Insurance won't pay for vt
    3 My patients live too far to come in for weekly appts.

12. What is the total number patients you have in VT?
    21 0-5
    2 6-10
    1 11-15
    1 16-20
    0 21-25
    0 More than 25

13. How often does each VT pt. come into the office?
    0 Daily
    0 2-4 times per week
    8 Weekly
    7 Biweekly
    6 Monthly
    5 Less than monthly

14. Who works w/ VTpts.?
    25 OD
    0 Vision therapist
    0 Other staff

15. How much do you charge for a VT session?
    7 Less than $20
    15 $21-30
    2 $31-40
    0 $41-50
    0 $51-60
    0 More than $61

16. Thank You for your time.
    15 Additional comments on back
FIGURE 1. AGE OF RESPONDENTS

FIGURE 2. NUMBER OF MALE AND FEMALE RESPONDENTS.

FIGURE 3. SCHOOL OF OD DEGREE.
FIGURE 4. NUMBER OF YEARS IN PRACTICE.

FIGURE 5. PRACTICE MODE.
FIGURE 6. POPULATION OF PRACTICE LOCATION

FIGURE 7. NUMBER OF PATIENTS SEEN PER WEEK
FIGURE 8. **NUMBER OF PATIENTS WITH STRABISMUS, AMBLYOPIA, BINOCULAR OR PERCEPTUAL DIFFICULTIES PER WEEK.**

FIGURE 9. **NUMBER OF OD’S PROVIDING VT.**

FIGURE 10. **FREQUENCY OF VT REFERRAL.**
1. VT DOESN'T WORK.
2. VT IS TOO UNSCIENTIFIC.
3. MY PATIENTS DON'T NEED VT.
4. MY PATIENTS CAN'T AFFORD VT.
5. INSURANCE WON'T PAY FOR VT.
6. MY PATIENTS LIVE TOO FAR AWAY.
7. VT IS INTERESTING, BUT I DON'T HAVE THE SPACE OR EQUIPMENT.
8. I DON'T FEEL COMFORTABLE WITH MY ABILITY.
9. MY SPECIALTY IS IN ANOTHER AREA.
10. OTHER.

FIGURE 11. THOUGHTS ON VT.
FIGURE 12. NUMBER OF PATIENTS IN VT.

FIGURE 13. FREQUENCY OF VT VISITS.
FIGURE 14. FEES FOR VT VISITS.
DISCUSSION

The typical respondent to this survey is a 30-50 year old man in solo practice who graduated from Pacific University between five and 15 years ago (see figures 1-5). Most (69.3%) practice in towns with a population of less than 50,000. The largest group (25.8%) practices in towns with a population between 2500 and 5000 (fig. 6). There is a wide range in the number of patients seen per week from between five and ten to over 45. Some doctors commented that they were semi-retired or chose to work part-time. This profile is similar to a group of rural optometrists described by Hohn (1983) in South Dakota. One difference is the number of women practicing in the state. Less than one percent of the responses from South Dakota were from women, compared to 11.1% from Montana. This is probably due to the increased number of women entering the profession in the last decade.

Most optometrists reported seeing between one and three patients per week with binocular problems which potentially could be helped by vision therapy. This is apparently unrelated to the number of patients seen per week. In fact only one of the seven OD's who reported seeing more than 40 patients per week saw more than three potential VT patients per week. One to three such patients was the standard response given by more than 77% of respondents(fig. 8). Dzik (1992) suggests that practitioners fail to look for binocular problems and so they do not find any, just as those who do not dilate routinely may miss pathology.

Although only 39% include VT in their practice, in general the attitude toward VT seems favorable. Almost two thirds of those who do not include VT sometimes or frequently refer patients(fig.10). Many others, especially in the Missoula area commented that there is no VT practitioner in their area to whom patients can be referred. One doctor wrote that he performed out of office therapy, such as pencil pushups and Brock string. Another doctor suggested a state-wide referral center would be utilized if available. No one reported that VT doesn't work, however a few commented that patients were unmotivated to participate in VT. Only three thought that VT is too unscientific. It could be argued that those who have an unfavorable view just did not return the survey. That is always a problem with this type of research, however the response rate of almost 70% weakens that argument considerably.
It is evident from the chosen responses and handwritten comments that more continuing education in vision therapy would be welcomed. Three doctors specifically commented that more experts in the area of vision and learning disabilities were needed in Montana. Eighteen said they did not feel comfortable with their ability to provide VT. Although many cases of strabismus and amblyopia require months of complex therapy, other problems such as convergence insufficiency can be treated easily with straightforward techniques. Weekend seminars in centrally located areas led by local doctors who have VT experience could be arranged. These could be supplemented by additional reading and guest speakers expert in the areas of esotropia therapy, vision and reading disabilities, and treatment of patients with developmental disabilities. Montana optometrists can then be confident that they have the skills necessary to treat patients with binocular and perceptual problems. These patients should not go untreated because of a lack of knowledge on the doctor's part.

As the demand for information processing increases in our society, it will become more important that an individual's visual system operate as efficiently as possible. This is especially important for young children as they develop their reading and writing skills. Binocular and perceptual problems can have long-reaching effects on their education, productivity and satisfaction in life. There is a great opportunity for optometrists in Montana as well as the rest of the country to utilize their unique training to provide vision therapy for their patients.
REFERENCES
