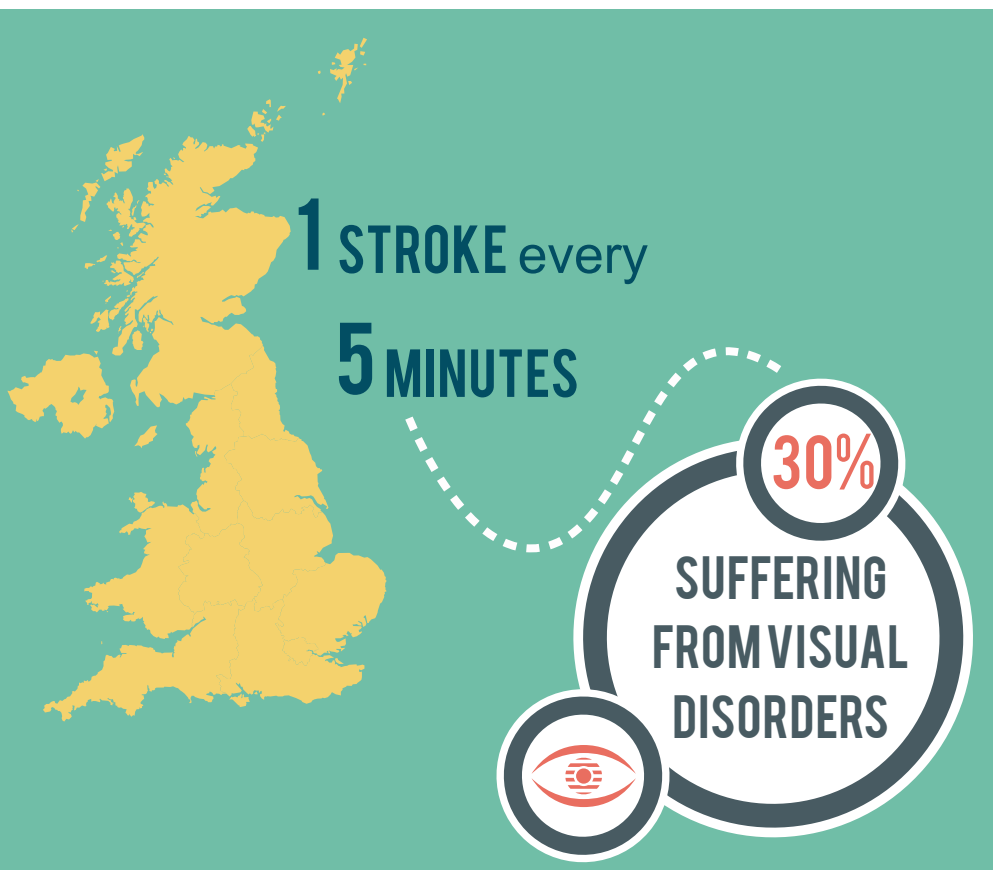


VISION LOSS CAUSED BY A STROKE OR OTHER BRAIN INJURY



WHAT ARE THE TYPES OF VISION LOSS?

Typically, the loss of vision following a stroke or other brain injury is due to damage that has been done to that part of the brain that processes visual information which is transmitted to it using one's eyes as the conduits.



HEMIANOPIA

Loss of vision in half the visual field.



QUADRANTANOPIA

Loss of vision in a quarter section of the visual field.



SCOTOMA

An island-like area of blindness.

NEUROPLASTICITY + VISION RESTORATION

Your brain's natural ability to compensate for injuries and adjust to deal with these changes by creating new neural pathways and adapting as needed.

NEURO (Brain) + **PLASTICITY** (Changeable)



HOW CAN VISION LOSS BE TREATED?

RESTORATION

Vision Restoration Therapy (VRT) and Neuro-Eye Therapy (NeET) provide actual improvement in the range or sensitivity of the patient's field of vision through repetitive stimulation to activate impaired visual functions in areas of partial injury.

- Both therapies are the result of many years of research and supported by more than 25 clinical studies between them.
- Notable improvements were seen in about 70% of the patients in clinical studies. Efficacy was independent of lesion age.
- Therapies are Internet-delivered, can be done at home and fit around the patient's schedule. They are personalised for the vision deficit and updated as the therapy progresses.
- Do not require surgery or medication of any kind.

For more information on VRT and NeET please visit www.sightscience.com

COMPENSATION

NeuroEyeCoach is a computer-based eye movement training program designed to improve a patient's ability to scan the environment quickly and efficiently to compensate for the visual field deficit.

- Systematic training program with 12 levels of increasing difficulty, adapts to responses of patient.
- Therapy is Internet-delivered, can be done at home and fits around the patient's schedule.
- Designed to be relatively quick, it can be completed in 2-4 weeks.
- Professional Models enable patients to perform program in-clinic under supervision, or at home monitored by therapist.

For more information on NeuroEyeCoach please visit www.sightscience.com

SUBSTITUTION

The use of optical aids whereby the sighted field can be extended towards the blind field.

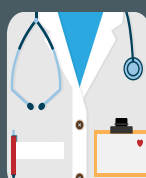
- This is a coping strategy that does not increase sensitivity in the blind field but rather uses prisms to shift optically part of the visual space thereby alerting people to objects and obstacles not otherwise visible to them.
- Peripheral prism glasses use high power prism segments embedded in a regular spectacle lens to expand the upper and lower visual fields of patients with hemianopia.

Find out more on prism glasses and the most recent clinical research published at: <http://bit.ly/240eSwo>

NEXT STEPS:



Take the online vision test on the NovaVision website to identify a possible visual field deficit from stroke or other brain injury.



Talk to your doctor about your vision concerns and possible therapy options.



Contact NovaVision/SightScience Patient Services for more information about vision loss and Internet delivered therapies.



Learn more about neuroplasticity and the visual system in the brain on the NovaVision/SightScience website.