Refractive error sensing in natural multifocal eyes

Rafael Navarro





Vicente Fernández-Sánchez & Norberto López-Gil

Introduction

Bifocal designs:

Spherical aberration

(aspherical, axicons, etc.)

- Coma
- Combinations of HOA



LENTIS Mplus



Bifocal eyes? Progressive?

Refraction changes across pupil

- Koomen et al., 1949; Ivanoff, 1953
- Charman & Walsh, 1989
- Legras & Bernard, 2011; Legras et al. 2012

Introduction

Human Eyes:

Trough focus visual quality (SA4 ± SA6 induced by adaptive optics)



Introduction

RMS metric versus subjective (clinical) refraction



(López-Gil et al. 2009)

Problem: Individual discrepancies

Discrepancies > 1 D are frequent; in a few cases > 2.5 D

Explanations?

- Wrong aberrometric Metric? But Most metrics give similar results
- Bad subjective refraction? But all methods give consistent values
- Different conditions? Illumination, pupil, individual neural response,...

Unsatisfactory!

Cannot explain large discrepancies

Cue: High discrepancy \leftrightarrow High HOA (coma, SA)



Methods

1.- Data: from 178 normal eyes taken from previous study (*López-Gil et al., 2009*)

Objective refraction: retinoscopy & autorefractometer (Canon T1000) Subjective refraction: Standard & custom Badal system Aberrometry: (irx3, Imagine Eyes)

- 2.- Refractive Error Sensing (RES): Refractive error from aberrometry
- 3.- Identify bifocals > 1 D: 8/178
- 4.- Analysis:

Generalized RES for inhomogeneous/irregular pupils



(Navarro, 2010)

Standard RE sensing in monofocal eyes





Distributions of refractive error

Spherical Equivalent

Monofocal

Bifocal



Multifocals (examples)



Discussion. Part 1

- ✓ A small but significant number (5%) of eyes show bifocal or even multifocal properties
- ✓ They show large amounts of HOA: Poor image quality
- ✓ Highest discrepancies aberrometric/standard refraction

Questions:

- Strategies of the HVS to improve visual quality?
- Role of SCE? neural response?
- Generalization of RE Sensing to account for that?

Generalized RE sensing

✓ Irregular pupil shape



✓ Inhomogeneous pupil transmission (SCE, etc.)

 $Probability(RE) = \begin{cases} 0 & outside real pupil \\ Effective transmission \end{cases}$



Analysis of Eye #43

Refraction (SE)

- Retinoscopy: -0.5D
- Subjective (Badal): -0.4D

HOA:

- Coma: 0.125 μm
- Spherical A.: 0.16 μm
- RMS HOA: 0.29 μm

Spherical equivalent



SE histogram



Analysis of Eye #74

Refraction (SE)

- Retinoscopy: -8.5D
- Subjective (Badal): -8.25D

HOA:

- Coma: 0.56 μm
- Spherical A.: 0.37 μm
- RMS HOA: 0.76 μm

Spherical equivalent





Strategies to improve vision?

(huge amount of coma)

Full pupil

Eyelid Vignetting



Summary & Conclusions

 ✓ The eyes studied often show a complex distribution of RE.
~5% show bimodal or multimodal histograms with peak distances > 1D (multifocality.) These eyes show large amounts of HOA (poor image quality) and discrepancies between aberrometric and standard refraction.

✓ Generalized RE sensing seems well suited to analyze these cases, including irregular and/or inhomogeneous pupils.

✓ SCE or even eyelid vignetting may help to avoid bifocality & improve image quality.

Future work

- Implementation of complete & automatic histogram analysis
- Selection an deep study of potential multifocal eyes.

Thanks for your attention

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