# AN OVERVIEW OF SPORTS VISION

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Don Loran And Caroline MacEwen's Book, "Sports Vision" Is Still The Leading Text In This Country On The Subject.

### INTRODUCTION

Play is an essential facet in the emotional and physical development of a child. At about four years it incorporates rules and becomes a game (Sheridan, 1989) and when individual and team participation occur it becomes a sport (Loran, 1995).

The majority of people who consult eye care practitioners are likely to be involved in sport (The General Household Survey, 1987, Beashel and Taylor, 1992, Mintel, 1993). Thus, Sports Vision or the optimising of safe and efficient vision in sport is an essential part of optometric care to the community.

### **History**

Eskimos were arguably the first to introduce sports spectacles to reduce glare from snow and water (Doland, 1917) although the Chinese may have used transparent coloured pebbles for magnification and light protection (Duke-Elder, 1970). The earliest use of sports spectacles was however attributed to the emperor Nero who reputedly viewed gladiators in combat through an emerald (MacGregor, 1992). In 1886 sports spectacles were offered by Sears, Roebuck & Co and later advertised in the Times of London in 1909. In the 1920's an Oklahoma optometrist, Alexander Skeffington, developed "Behavioural Optometry" which led to sports vision enhancement training on the premiss that visual skills are learned and could be improved (Gregg, 1987, Holland, 1993, Coffey and Reichow, 1995).

## Contact Lenses, Refractive Surgery and Safety

Contact lenses, and to a lesser extent refractive surgery effectively revolutionised sports participation by ametropic players (Contact Lens Society of Great Britain 1948, Rabkins 1994, Efron 1995, Loran 1995 and Rosen 1995) whilst sports headgear and sunglasses protected the eye from the hazards of light in outdoor pursuits (MacEwen, 1995, Obsfeld and Pope, 1995). Sport injury and assault are the major cause of serious eye injury despite the fact that sports vision eye injuries are completely avoidable by the use of protectors which meet the appropriate standards (GSA 1982, ASTM 1988, MacEwen 1989, ASIN7 1992, BSI 1993, North 1993, Easterbrook 1995, Jones 1995, and Obsfeld and Pope 1995).

#### Vision Screening

Since 1979, optometrists have become extensively involved in vision screening of sports people and have been appointed as sports team optometrists (Gregg 1987, Sherman 1990, Ivins 1992, Edmunds 1993, Bausch & Lomb 1995 and Garner and Sherman 1995). Sports participants are more comfortable when glare is eliminated, better protected from eye injury by wearing suitable eye protectors and perform better when visual sensitivity is minimised and visual skills enhanced.

# **SPORTS OPTOMETRY**

Sport participation in the UK, 1992

Sport	<b>Men</b> (Millions)	Women (Millions)	<b>Total</b> (Millions)
Swimming	4.4	5.6	10.0
Rambling /hiking	2.6	1.8	4.3
Snooker	3.5	0.5	3.9
Kept fit /dance	N/A	3.9	3.9
Jogging /training	2.7	0.9	3.6
Badminton	1.8	1.6	3.4
Golf	2.9	0.5	3.4
Cycling	1.9	1.2	3.1
Darts	2.2	8.0	3.1
Weight training	2.1	0.7	2.8
Tennis	1.5	1.1	2.7
Football	2.2	0.1	2.4
Squash	1.5	0.6	2.1
Cricket	1.2	0.1	1.4
Table Tennis	1.1	0.6	1.7
Bowls	0.9	0.4	1.4
Skiing	0.8	0.5	1.2
Climbing	0.5	0.2	0.7
Athletics	0.5	0.2	0.7
Rugby Union	0.6		0.7
Wind surfing	0.3		0.3

Sport participation in the UK, 1992

Source: Mintel, 1993 (Angling and fishing not included.

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Fig 1 - shows the breakdown of visual skills by sport and the relative importance of these skills to each sport – included at end of document.

#### SPORTS VISUAL TASK ANALYSIS

		Theoretical	profile of th	e visual skills hvol		spectrum of sports (	Gardner and She	eridan, 1995)		
	Msual Acuity	Dynamic visual Acuity	Ocular- motor skills	Eye-han d Co-ordination	Depth perception	Accommodation Vergence facility	Central- peripheral awareness	Msual relaction time	Visual adjustability	Visualisation
Archery	4	1	3	5	2	3	5	1	5	2
lasebáll hit and cricket	4	5	5	5	5	5	5	5	5	5
laseball pitch	3	2	3	4	3	3	5	1	3	5
asketball	3	3	4	5	5	3	5	5	5	5
owling/bowls	2	1	3	5	3	2	4	1	3	4
oxing	2	2	5	5	3	3	5	5	5	4
ricket wicket keeper	4	5	5	5	5	5	5	5	5	3
ricket bowler	3	ž	š	4	š	Š	5	Ĭ	š	Š
ricket felding	4	5	4	4	4	4	š	á	š	ž
yeling (road racing)	5	š	5	4	5	j	š	š	ă	5
arts	ă	ĭ	š	ž	3	3	5	ĭ	7	š
iving	4	'	,	3	,	3	9	'	'	,
rrong spring board and platform)		2	2	2	2	1		2	3	
spinig board and platform)	, 4	2	4	2	<u>,</u>		9	4	, -	9
ootball	4	9	9	õ	õ	3	õ	9	ò	õ
olf	3	ļ	4	õ	õ	3	õ	1	3	õ
ymnastics	ļ	3	3	õ	õ	3	õ	õ	õ	ō
lándball	4	5	5	5	5	3	5	5	5	3
ligh jump	3	3	4	3	5	3	5	4	3	5
lockey(goalie)	4	5	5	5	5	5	5	5	5	3
lurdles	4	4	4	4	4	3	4	3	3	5
(ayaking	4	4	4	5	5	š	5	Š	ď.	Š
	5(b)	3	2	5	5	3	5	5	3	5
fountaineering ool/Snooker billiards	2 ~	i	4	5	5	Ž	3	i	4	5
lace car driving	5	5	5	4	5	2	5	5	5	5
acquetball /Squaish	ă	5	5	ā	š	ā	š	5	š	š
unning	7	1	2	7	1	7	4	3	ĭ	4
	'	'	-	'	'	'	7	,	'	7
hooters										
olay pigelon, skeet, trap,										
unting, long gun)	5	5	4	5	5	5	5	5	4	5
hooters										
ange, fixed distance)	4	2	3	5	2	3	5	1	1	2
kiing	5	ร์	š	Š	5	š	š	Ś	Ś	ŝ
occer (d)	ž	ă	š	Š (c)	š	ž	š	š	š	š
occer (a)	4	7	ž	ž (c)	ž	2	ž	ž	ž	ž
occer goal keeping	7	1	9	1	1	9	0	9	9	ž
wimming		<u> </u>	<u> </u>	<u> </u>	1	<u>!</u>	4	3	ļ	4
ennistable-tennis	4	5	5	5	5	5	5	5	Ó	5
rack—high jump	1	3	3	4	4	3	3	4	4	4
rack-pole vault	1	3	3	5	5	3	4	4	4	5
blleyball	4	5	5	5	5	3	5	5	5	5
Veight lifting	1	1	1	2	1	1	1	1	1	5
Vrestling	2	1	1	3	ż	1	3	5	5	4

A pattern ESO de viations or V pattern EXO deviations can significantly affect performance in these sports.
Contrast sensitivity may be crucial (to the point of being life-saving) in this sport.
Eye-body (foot-head-chest) co-ordination.
Including American Football, Australian rules football, Canadian rules football, Gaelic football, rugby league and rugby union.

# **PRESCRIBING**

SPORT	FEATURES	ACTION
RACQUET HOCKEY CRICKET HURLING	Risk of eye injury, Good visual performance, Glare	Eye protectors, Tints
FOOTBALL Soccer, Rugby, Gaelic, Australian Rules, Sand Soccer	Trauma ball, finger, elbow, good peripheral awareness, depth perception, Foot hand eye co- ordination	Soft contact lenses
FISHING & ANGLING	High acuity, Glare, Spray, Injury from hooks	Plastic lenses, Bifocals with low segments, polarising lenses, Tints
PUGILISM	Unacceptable high risk of eye injury. 68% sight threatening (Giovinazzo et all 987), 12.5%detachments 8% angle recession (Abramson & McDonagh 1982)	Regular eye examinations, including dilation with direct and indirect ophthalmoscopy. Prompt medical attention. Discourage high risk groups.
CYCLING & SKIING	Glare, Wind (drying), Cold, Dust and debris	Resilient plastic wrap-round frames with impact resistant lenses. UV blockers and high optical centres for cycling.
GOLF	Head turn with visual axes stationary, glare. Working distances vary from 4Ocm (card) to 1 metre (ball) and infinity	Large eyes sizes, Tints/ photochromics, Low segment, Add bifocals or single displaced segment (down to right for presbyopic right-hander).
WATER SPORTS	Aquatic environment Tonicity, Osmolarity, pH., Chlorine, Glare & Spray	C E approved goggles (plano or prescription), Scleral contact lenses, Soft contact lenses (under suitable goggles), UV blockers, Saline rinse, Silicone hydrogels for long distance events
SHOOTING	High acuity, Discharging lead & debris	Plastic spectacle lenses, use dominant eye for aiming. Prescription, telescopic sight. Tinted lenses to enhance contrast

# **PROTECTION**

# **OCULAR HAZARDS IN SPORTS**

- High velocity projectiles at head height (ball, shuttlecock)
- Ancillary (elbow, finger, fist, ball or racquet)
- Environmental (sun, water, etc)

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The proportion of Eye Injuries Arising From Sports Participation (LORAN, 1992)

SPORT	%	PARTICIPANTS (Millions)
Soccer	45.4	2.4
Squash	16.2	2.1
Badminton	12.6	3.4
Rugby	10.8	0.7
Tennis	7.8	2.7
Cricket	4.2	1.4
Hockey	3.0	< 0.3

Eye injuries in sport.

Black eye	Hyphaema	Vitreous haemorrhage
Orbital blow-outs	Rupture of the lids	Retinal detachment
Conjunctival haemorrhages	Cataract	Choroidal tears
Corneal abrasions	Sub-luxation	Rupture of the globe

## THE USE OF EYE PROTECTORS

Sports where eye protection is particularly advisable are; water sports, snow sports, racquet sports, hockey, football and cricket.

# HIGH EYE-INJURY RISK AND MONOCULAR ATHLETES

Eye protection is essential and if difficult or impossible (eg. boxing and soccer) athletes should be cautioned against participation

## **VISION SCREENING**

Team sports optometrists may conduct vision screening in

- Consulting Room
- Sports Place
- Sports Clinic

## **TESTS (Include)**

Diagnostic	Analytical
Static Visual Acuity Ocular Dominance Fixation Disparity Speed of Stereopsis Accommodation / Vergence Facility Contract Sensitivity	Auto-Refraction (or Retinoscopy) Dynamic Visual Acuity Eye/Hand Reaction and Response times Eye/Foot Reaction and Response times

## DATA FROM B&L OLYMPIC VISION SCREENING 1992 and 1994

N = 1206

1:2 No Previous Eye Exam

1:4 Visual Difficulties

1:6 Contact Lenses

1:6 RGP:SCL

# **VISION ENHANCEMENT**

Low Tech I Routine:	High Tech I Specialist:
Visual Acuity, Contrast Sensitivity, Colour Testing, Eye/Hand Dominance, Mallet Test, Brock String, Vision & Balance, Depth Perception. Flipper Lenses	Dynamic Acuity, Glare Recovery, Wayne Saccadic Fixator, Acuvision 1000 (eye hand and foot co-ordination) Reaction time Peripheral Awareness

## **ROUTINE**

Optometric principles are well established and in themselves provide the justification for an interest in sport.

- (a) Optometric examinations, prescribing spectacles, contact lenses, polycarbonate & tinted lenses.
- (b) Frequent examination including indirect ophthalmoscopy I visual fields of high risk sport participants, eg. boxers.

## **DEBATE**

There is a debate about whether sports vision training can improve peak athletic performance. There are arguments for and against this question.

#### AGAINST IMPROVEMENT

- Traditionally anecdotal
- No scientific evidence (Cockerill, 1999)
- Test familiarity (Wood & Abernethy, 1997)
- Placebo therapy improves 1:3 (Hill, 1999)
- Elite athletes do not possess superior hardware\* (Williams, 1999)
  - \* Vision processing can be conveniently divided into two components:
    - 1. Hardware, the eyes themselves and how they collect information (Optometry)
    - 2. Software, which deals with how this information is perceived and used (Psychology)

#### FOR IMPROVEMENT

- Soccer and visual skills correlate in young elite soccer players (Loran & Griffiths, 1999, p<0.01).
- All Under -14 players rejected by Nottingham Forest Football Club showed deficiencies in soccer related visual skills (Loran & Griffiths, 1999).
- Intuitively appealing.
- A significant improvement in performance occurred following visual training in: -Baseball (Worrel, 1996) -Volleyball (KJuka et al, 1996) Hockey (Calder, 1998)
- Elite athletes show superior perceptual skills (Williams & Grant, 1999) This skill can be trained especially in younger players (Williams & Grant, 1999)
- A debate at the first International Conference of the Sports Vision Association, 1999.
   The Audience consisted of Optometrists, Ophthalmologists, Dispensing Opticians, Sports Scientists, Sports Psychologists, Manufacturers and Coaches. The motion was that visual enhancement training improves visual performance.

The Result: 85% for the motion.

### Sport Vision Services Online

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