# The Effect of Home-Based Dichoptic Therapy on Young Adults with Non-Strabismic Anisometropic Amblyopia on Stereo Acuity [Letter]

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#### Dear editor

I read with marked interest the recent study on dichoptic therapy on adults with never-before-treated refractive amblyopia compared to age-matched normal adults. Most normal subjects would be expected to have normal stereo reaching the "floor" of 40 second of arc, but there was absolutely zero change in normal subjects with several weeks of prescribed therapy. Perhaps the changes would be easier to demonstrate if stereo were reported as log(arc seconds)?

The authors list as a weakness that some patients exceeded the prescribed time of therapy, indicating a higher level of compliance than most forms of amblyopia therapy, which is a good thing. Things that should be listed as strengths in this paper and unique are: 1) adults with never-before-treated refractive amblyopia, 2) weekly follow-up for 8 weeks of therapy, 3) age-matched normal controls got similar therapy and follow-up, and 4) impressive results.

The study focuses on changes in stereopsis with home-based therapy, but also includes important visual acuity findings in the treatment group. The remarkable improvement of 0.21 logMAR from 0.52±0.06 logMAR to 0.31±0.03 logMAR almost rivals the recent Israeli study of Curesight.<sup>2</sup> I wonder if the authors could report visual acuity changes for the control group compared to the dichoptic group? It would be very helpful if the acuity results make it to an update of the abstract.

### Disclosure

Dr. Arnold is a board member of PDI Check, which makes and has a patent on autostereoscopic vision screening; coordinates the Alaska Blind Child Discovery (ABCD), which has received discounted vision screening technology from several vendors; and is an investigator and protocol developer for PEDIG. Dr. Arnold is also a Board member from Glacier Medical Software, outside the submitted communication.

#### References

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