Stroke and Vision

Visual Field Deficits (VFD)
Some people will experience problems with their vision after a stroke.
Vision problems can affect a stroke survivor’s independence for dressing, feeding, reading, walking, driving and other activities.
The most common type is when half the visual field is cut or missing. In other words, half of what we would normally see is missing. The medical term for this vision problem is “Homonymous Hemianopsia”. It simply means blindness in one half of both eyes.

Stroke survivors suffering from hemianopsia may:
- run into objects
- lose their place when reading
- be surprised by people or objects that seem to appear suddenly out of nowhere
- be afraid to venture out into a crowd as they fear they will get lost

The Occupational Therapist, family members or others may have noticed the stroke survivor:
- is not looking towards the affected side
- hesitates or is slow when looking towards the affected side
- is misidentifying or not seeing objects on the affected side
- has developed clumsiness with their hand on the affected side

What can help?
The general goals of treatment are to boost one’s confidence and help the stroke survivor return to everyday tasks as independently as possible.

Treatment may include:
A. Referral to an Optometrist or Ophthalmologist
   - For formal visual field testing
   - For devices that may help (prisms or optical lenses that increase the field of vision)

B. Referral to the Occupational Therapist who will:
   - Teach awareness of the problem and its affect on function
   - Teach strategies to compensate for the problem which the stroke survivor can practice
   - Provide helpful tips for making seeing around the home easier and safer

C. Other:
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