

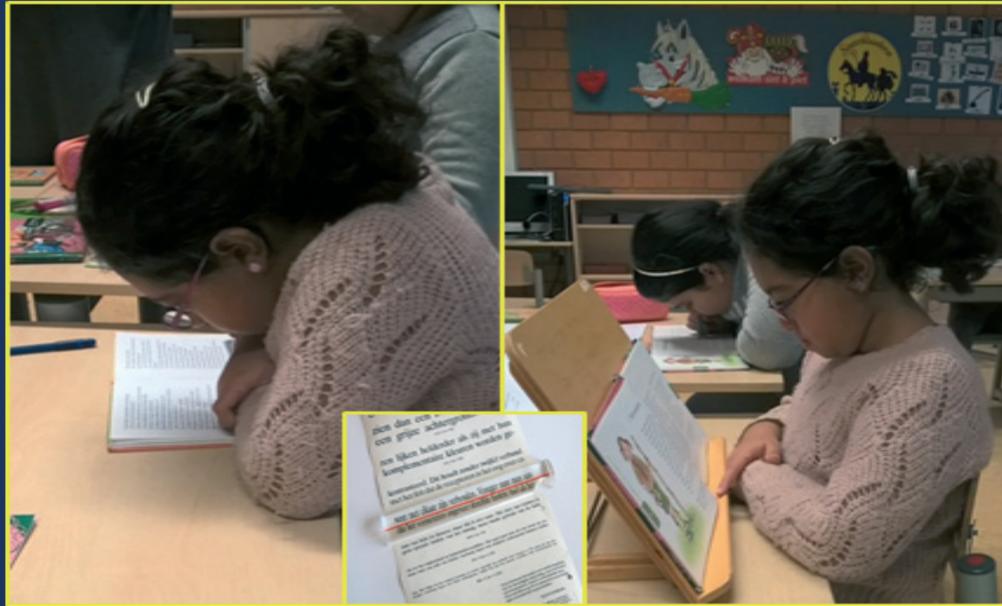
Going to school with a motility disorder of the extraocular muscles



N.W.R. Slingerland- Koliijn¹, J. van Hooft- Hofmann¹, N.E. Schalijs- Delfos²,
C. Stellingwerf¹

¹ Royal Visio ² Leiden Academic Medical Centre

Case report: 9 year old girl with congenital fibrosis of the extraocular muscles (CFEOM) with consequently total ophthalmoplegia, ptosis, exposure keratitis and hypermetropic astigmatism (visual acuity OD:0,5 OS:0,63).



Left: Eye position in primary position and all gaze directions, ptosis, eye movements impossible. Very thin extraocular muscles on MRI.

Right: Reading before and after adjustment with read shelf, reading ruler.

Problem (cause)	Adjustment
Non- ergonomic posture (compensating lack of eye movements with head movements)	Central position in the classroom relative to the smartboard, read shelf, teaching materials laid down on the table not too far apart
No eye contact	Communication at eye level
Reading (reduced visual acuity, no convergence)	Reading ruler, working distance ≥ 30 cm
Stray light nuisance (keratitis)	Back to the light, cap, sun glasses
Difficulties with oversight during physical education (due to absent eye movements)	Ball with little bell, coloured jackets
Questions teacher, payment of tools, materials and advise	Outpatient development guidance and/ or pedagogical and educational therapist Explanation to the teacher about the cause of the visual problems

Conclusion: referral to Low Vision Rehabilitation is also sensible in the case of eye movement disorders. Explanation and practical advises can be given to teachers and tools and materials can be applied for.

*Congenital fibrosis of the extraocular muscles. Whitman M et al. GeneReviews 2016
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