TOPIC:

Vision and Perception After Stroke





- Our brain collects information through all five senses
- Perception is how our brain interprets information to understand our surroundings
- Changes in vision and perception can lead to loss of independence, safety risks and emotional distress



What you should know:

- ✓ When someone has changes to vision and perception it may:
 - not be obvious
 - be easy to overestimate the person's abilities
 - impact mood and cause frustration
 - lead to serious safety risks

NOISIN	Common Changes	What is it	Practical Example	Smart Tips
	Blurry vision	Lack of vision clarity or sharpness	 The person may: have difficulty reading have difficulty finding objects (e.g. white call bell on white sheets or white plate on white table) 	Use large print Create contrast where possible (e.g. use coloured tape on the call bell or dark placemat under white plate)
	Double vision (diplopia)	Seeing two images of a single object	The person may:have difficulty finding objects on a cluttered table	Reduce amount of items and space them out on bedside table
	Visual field loss	Most common - lack of vision in one half of each eye (hemianopsia)	 The person may: not see hazards in their environment causing them to bump into objects 	Tell the person to scan using the 'Lighthouse Strategy' (i.e. imagining the eyes as beams of light sweeping side to side)

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PERCEPTION	Common Changes	What is it	Practical Example	Smart Tips
	Depth perception	The inability to estimate the distance between two objects or between themselves and an object	 The person may: miss the chair when sitting down knock over a glass of water when reaching for it 	Add red tape on edge of table, sink or toilet seat Cue the person to use their sense of touch to help find items Minimize clutter in the space
	Neglect	Decreased awareness of the body (e.g. forgetting their arm) and/or the environment on the person's affected side	 The person may: ignore half of their plate of food roll over onto their affected arm in bed or let their affected arm dangle by their side when sitting 	Bring their attention to the affected arm or plate of food so that they can see it Consider turning the plate or repositioning the arm Monitor their neglected side for pain, injury and skin abrasions
	Apraxia	Difficulty completing actions the way the person wants or needs to, even though they are physically capable	 The person may: use a comb to brush their teeth hold the hairbrush, but not know how to start brushing their hair 	Provide the correct tool, use hand-over hand guidance and do not take over the task unless necessary

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Smart Tips:

- Ensure supervision or assistance with transfers to promote safety
- Decrease clutter and keep space organized
- Slow down and give the person more time
- Be specific when giving instructions
- Keep items in consistent locations

Remember: The individual's care plan may contain specific strategies



- Enhance vision: well-lit environment, prescribed glasses
- For neglect and visual field loss, approach the person from the unaffected side and arrange items on their unaffected side
- For apraxia, use short, simple instructions and break tasks into smaller steps
- Educate family on how they can help the person

Vision and Perception



After Stroke

This document lists some examples of common visual and perceptual changes, but many more exist.

Seek extra support

- ✓ Notify the team if you suspect any changes to vision and/or perception
- ✓ Optometrists and Ophthalmologists can provide assessment/management
- ✓ Occupational Therapists are skilled in vision and perception
- ✓ For more information, visit The Canadian National Institute for the Blind https://www.cnib.ca

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