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## Introduction

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As the co-editors of this edition of NeuroRehabilitation, we are very pleased to be able to bring you an issue dedicated to the topic of Neuro-Optometric Rehabilitation. Clearly, there have been many advances in the field of rehabilitation in the last decade but probably one of the most exciting with regard to facilitating functional recovery in patients following acquired brain injury is that of Neuro-Optometric Rehabilitation. The process of visuo-perceptual evaluation in this patient population is quite challenging. Historically, minimal treatment has been rendered to patients with visual dysfunction following acquired brain injury. Rather a 'wait and see' approach has been taken. Often the solutions for the visual dysfunctions that are being prescribed in a manner that neglects the negative functional consequences. For example, eye-patching for diplopia could lead to loss of binocular vision, decreased visual field awareness, loss of depth-perception, and perturbation of midline orientation affecting posture and balance. Given our expanding knowledge base regarding Neuro-Optometric Rehabilitation, we have been able to enhance patient treatment in an interdisciplinary fashion benefiting not only patient function, but also, facilitating the cost efficiency of the rehabilitation process.

This issue of NeuroRehabilitation will review some of the more interesting and exciting developments in the field of Neuro-Optometric Rehabilitation following brain injury. The first chapter, written by the co-editors of the issue, deals with PTVS (Post-Traumatic Vision Syndrome) and VMSS (Visual Midline Shift Syndrome). Dr. Streff provides a review of treatments for hemianopic deficits, particularly as they pertain to ambient visual pathways. A case report is then presented on a patient with traumatic brain injury and associated visual dysfunction by Dr. Ludlam. Dr. Jackowski et al. review the treatment of photophobia utilizing light filtering lenses. Visual field enhancement in TBI is subsequently discussed by Drs. Freeman and Jose. Dr. Politzer discusses advances in partial and selective occlusion for clinical treatment of diplopia. Specific rehabilitation strategies for individuals with visual processing deficits are provided by Dr. Raymond and colleagues. Also included in this issue is a report from the Canadian Household and Institutional Health and Activity Limitation Survey on prevalence rates of traumatic brain injury.

As the co-editors of this issue of NeuroRehabilitation, we hope that you find this topic helpful in the practical management of visual dysfunction in your patient population. There is certainly much work to be done relative to research involving Neuro-Optometric Rehabilitation. We would encourage all readers to consider exploring this important albeit relatively ignored area of brain

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**injury rehabilitation from a research perspective.  
Those persons interested in visual rehabilitation  
should be aware of the following resource:**

**Neuro-Optometric Rehabilitation Association,  
P.O. Box 904,  
Cranford, NJ 07016.**