

Dr. Filips is now prescribing Vision Therapy for children and adults who have vision problems that cause them to be slow readers, have poor comprehension, read below grade level, or dislike reading because it makes their eyes uncomfortable. More information is presented in a question and answer format below:

Q. My child has 20/20 vision. Isn't that perfect?

A. No. 20/20 means the person can see small letters far away. It does not say anything about whether the person can see small letters at 16 inches. It also does not predict whether that person can focus, if their eyes are aligned, or they can move their eyes efficiently from word to word.

Q. Our last eye doctor and the school nurse did not find any problems. Why?

A. Most eye doctors do not test for these problems. Dr. Filips is the only eye doctor in this area who treats these problems. There are specialists in this field in Sioux Falls and Omaha that he does work with in some cases.

Q. What should I do as a parent?

A. If your child has reading problems, be sure to tell Dr. Filips before the exam, so he can focus on finding the problem.

Q. What symptoms should I look for?

A. Reading below grade level in an otherwise intelligent child, slow reading, poor comprehension, keeping place with a finger or book mark, having to read out loud to understand the text. Also complaints of blurred vision while reading, discomfort or a tired pulling feeling, and a general avoidance of reading are significant.

Q. Is special testing required?

A. Yes, when problems are found or suspected during the exam, Dr. Filips will reschedule your child for extra testing. He will measure several different eye skills that are necessary for efficient reading and will devise a treatment plan for the skills that are below normal.

Q. Is the therapy done at Filips Eye Clinic?

A. No, In order to keep costs down, Dr. Filips generally does not do therapy in the office. All therapy is done at home with one parent acting as coach. The child and parent must return weekly for evaluation of their progress. Dr. Filips increases the difficulty of the therapy as the patient progresses.

Q. How long will therapy take?

A. Just like physical therapy, results vary, especially depending on

how much effort the patient and coach put into the home therapy. Dr. Filips usually prescribes three ten-minute sessions per day, starting before school during the school year. Most cases are resolved in two months. Skipping sessions rapidly slows the progress.

Q. My child has a developmental disability. Can he be helped?

A. Yes. Progress is slower, usually a minimum of four months. Perfect results may also be unrealistic, but if the child and parent put in good effort significant improvement is expected. Not all children with developmental disabilities have these eye problems, but many do. Vision Therapy does not reverse all of the developmental problems, but it does improve their functioning.

Q. My child is getting extra help with reading in school. Won't that do the same thing.

A. No. A good analogy is the athlete who is a poor basketball player because they have no dribbling skills, even though the rest of their skills are good. In this case, practicing reading is like a coach who just makes the athlete scrimmage more. What we do is like the coach identifying the dribbling problem and assigning dribbling drills until that problem is resolved, then the child is ready to practice reading (or scrimmage).

Q. I have been told my child has dyslexia. Can he be helped?

A. Vision Therapy does not cure dyslexia, however many children do not really have dyslexia because many of these eye conditions have symptoms that mimic dyslexia. Also, even a true dyslexic can benefit from vision therapy if they also have these eye problems.

Q. What will therapy cost?

A. The initial evaluation costs \$170. Each weekly visit is \$70 and there is an initial \$20-\$30 charge for equipment that you will use. We can therefore estimate charges of about \$750 in the typical case.

Q. Will insurance cover this?

A. In most cases yes, (including Medicaid) Of course if you have not met your deductible, you will have to pay that first. The equipment fee and any equipment deposits are not paid by insurance.