

# Vision 1

## Protective mechanisms in the eye

- Several mechanisms help protect the eyes from injury:
  - Except for its anterior portion, the **eyeball** is **sheltered** by the **bony socket** in which it is positioned.
  - The **eyelids** act like **shutters** to **protect** the **exposed part of the eye** from environmental insults. They **close reflex** to **cover** the **eye** under **threatening circumstances**
  - **Eyelashes** **trap fine, airborne debris** such as dust before it can fall into the eye.



## Tears

- **Frequent spontaneous blinking** of the **eyelids** helps **disperse** the **lubricating, cleansing, bactericidal tears**.
  - Due to their **antimicrobial properties**
- **Tears** are **produced continuously** by the **lacrimal gland** in the **upper lateral corner under the eyelid**.
- This **eye-washing fluid flows** across the **anterior surface of the eye** and **drains into tiny canals** in the **medial corner of each eye, eventually emptying** into the **back of the nasal passageway**.
- This **drainage system cannot handle** the **profuse tear production during crying**, so the **tears overflow** from the **eyes**.

## Layers

- **Eye** is a **spherical, fluid-filled** structure **enclosed by three layers** (From outermost to innermost):
  - (1) the **sclera/cornea**.
    - Sclera
      - **Important to maintain** the **spherical structure**
      - **As you go anteriorly** its stops being called the sclera and is **now called** the **cornea**
      - **White in colour**
    - Cornea
      - **Transparent** so that the **light rays** can **reach the photoreceptors** on the retina
        - Since its **transparent** its **avascular**
        - **Gets nutrients** from the **aqueous humor** released by **ciliary processes**
      - There are **pain receptors here**

○ (2) the **choroid/ciliary body/iris.**

▪ **Choroid**

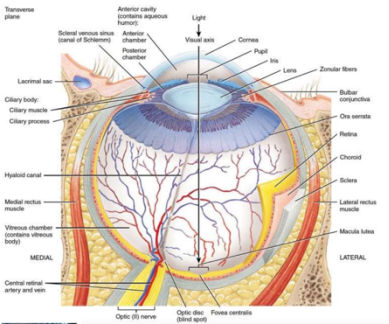
- **Highly vascular** to give **blood supply to the retina**
- **Pigmented** to **absorb light** and **prevent the scattering** of the **light**
- As we go **anteriorly** the **choroid becomes specialized** to form the **ciliary body and iris**

▪ **Ciliary body**

- **made up** of **ciliary muscles** and **processes**

▪ **Iris**

- **Pigmented** and **muscular** (smooth muscles)
- The **smooth muscles contract** and **relax affecting** the **size** of the **pupil**
  - These **smooth muscles** are **stimulated via** the **autonomic nervous system**
- We have **two muscles** in the **iris**
  - **Circular muscles (inner)**
    - When **contraction occurs** here they will cause **pupil constriction** (Circular muscle Contraction Cause Constriction of the pupil)
    - **Innervated** by the **parasympathetic stimulation** of the autonomic nervous system
  - **Radial muscles (outer)**
    - When **contraction** occurs here it will cause **pupil dilation**
    - **Innervated** by the **sympathetic stimulation** of the autonomic nervous system



○ (3) the **retina.**

▪ Has **two layers**

- The **pigmented layer**
  - To **prevent the scattering** of **light**
- The **nervous layer**
  - **Contains** the **photoreceptors**

### Sclera and cornea

- Most of the **eyeball** is **covered by** a **tough outer layer** of **connective tissue**, the **sclera**, which **forms** the **visible white part** of the **eye**.
- **Anteriorly**, the **outer layer consists** of the **transparent cornea**, through **which light rays** pass **into** the **interior of the eye**.

### Choroid

- The **middle layer underneath** the **sclera** is the **highly pigmented choroid**, which **contains many blood vessels** that **nourish** the **retina**.

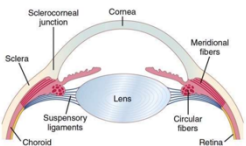
- The **choroid layer becomes specialized anteriorly to form the ciliary body and iris.**
- the **pigment in the choroid and retina absorbs light after it strikes the retina to prevent reflection or scattering of light within the eye.**

## Retina

- The **innermost coat under the choroid is the retina, which consists of an outer pigmented layer and an inner nervous-tissue layer.**
- The **nervous layer contains the rods and cones, the photoreceptors that convert light energy into nerve impulses.**

## Lens

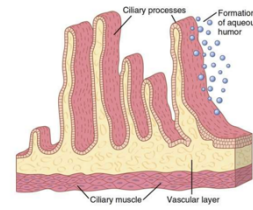
- There are **two types of lenses:**
  - Convex
    - The **lens in our body is convex**
    - The **curve is external**
  - Concave
    - The **curve is internal**
- The **lens is avascular since its transparent (the same goes for the cornea)**
- The **interior of the eye consists of two fluid-filled cavities, separated by a lens, all of which are transparent to permit light to pass through the eye from the cornea to the retina.**
- We have **two fluids in the eye**



- **Anterior to the lens: aqueous humor**
    - Gives nutrition to cornea and lens
    - The **aqueous humor is released by the ciliary processes**
  - **Posterior to the lens: vitreous humor**
- about **70 suspensory ligaments attach radially around the lens, pulling the lens edges toward the outer circle of the eyeball.**
  - **These suspensory ligaments are thin transparent fibers that attach the ciliary body to the lens capsule**
- These **ligaments are constantly tensed by their attachments at the anterior border of the choroid and retina.**
- The **tension on the ligaments causes the lens to remain relatively flat under normal eye conditions.**

## Cataract

- "**Cataracts**" are an **especially common eye abnormality that occurs mainly in older people.**
- A **cataract is a cloudy or opaque area (or areas) in the lens.**
- In the **early stage of cataract formation, the proteins in some of the lens fibers become denatured.**
- **Later, these same proteins coagulate to form opaque areas in place of the normal transparent protein fibers.**

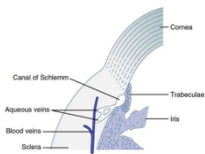


## Intraocular fluid

- The **aqueous humor** is a **freely flowing fluid**, whereas the **vitreous humor**, sometimes called the **vitreous body**, is a **gelatinous mass held together by a fine fibrillar network composed primarily of greatly elongated proteoglycan molecules**.
- **Aqueous humor** is **continually being formed** and reabsorbed.
- **Aqueous humor** is **formed almost entirely** as an **active secretion by** the epithelium of the ciliary processes.
- The **balance between formation and reabsorption of aqueous humor regulates the total volume and pressure of the intraocular fluid**

## Aqueous humor

- The **anterior cavity between the cornea and the lens contains a clear, watery fluid, the aqueous humor**.
- The **aqueous humor carries nutrients for the cornea and lens, both of which lack a blood supply. Blood vessels in these structures would impede the passage of light to the photoreceptors**.
- The **aqueous humor is produced at a rate of about 5 mL/day by a capillary network within the ciliary body**.
- This **fluid drains into a canal at the edge of the cornea and eventually enters the blood**.

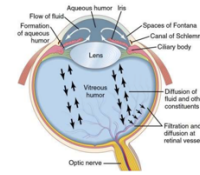


- There is an **angle between the iris and the cornea** which **contains a special structure called the trabeculae** which **has pores for the reabsorption of the aqueous humor to reach the canal of Schlemm** which **contains aqueous veins to go to the blood veins**
- So **overall its reabsorbed to the venous circulation**
- **If the aqueous humor is not drained as rapidly as it forms, the excess accumulates in the anterior cavity, causing the pressure to rise within the eye. This condition is known as glaucoma.**
- When **large amounts of debris are present in the aqueous humor, as occurs after hemorrhage into the eye or during intraocular infection, the debris is likely to accumulate in the trabecular spaces leading from the anterior chamber to the canal of Schlemm.**
- This **debris can prevent adequate reabsorption of fluid from the anterior chamber, sometimes causing "glaucoma,"**
- **However, on the surfaces of the trabecular plates are large numbers of phagocytic cells**
  - **These phagocytes are there to overcome this mechanism in which the debris accumulate**
  - **But when there is a pathological condition there will be too much debris that I cant overcome it so the trabecula will close and so accumulate of aqueous humor increasing the volume which will then increase the intraocular pressure which will then cause displacement of the lens increasing the pressure in the virtuous humor**

causing compression the in the **optic nerve resulting in blindness** this is called **glaucoma**

## Intraocular pressure

- The **average normal intraocular pressure** is **about 15 mm Hg**, with a **range from 12 to 20 mm Hg**.
- **Measured by tonometry**.
  - **Non invasive method**

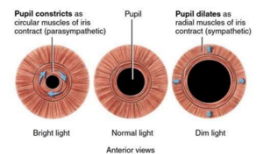


## Vitreous humor

- The **larger posterior cavity between the lens and the retina contains a clear, jellylike substance**, the **vitreous humor**.
  - Has **more proteoglycans than the aqueous humor**
- The **vitreous humor helps maintain the spherical shape of the eyeball**.

## Iris

- **Not all light passing through the cornea reaches the light sensitive photoreceptors because of the presence of the iris, a thin, pigmented smooth muscle that forms a visible ringlike structure within the aqueous humor.**
- The **pigment in the iris is responsible for eye color.**
- The **iris contains two sets of smooth muscle networks, one circular and the other radial.**
- **Because muscle fibers shorten when they contract, the pupil gets smaller when the circular (or constrictor) muscle contracts and forms a smaller ring.**
- This **reflex pupillary constriction occurs in bright light to decrease the amount of light entering the eye.**
- When the **radial (or dilator) muscle shortens, the size of the pupil increases.**
- Such **pupillary dilation occurs in dim light to allow the entrance of more light.**
- **Iris muscles are controlled by the autonomic nervous system.**
- **Parasympathetic nerve fibers innervate the circular muscle (causing pupillary constriction), and sympathetic fibers supply the radial muscle (causing pupillary dilation).**

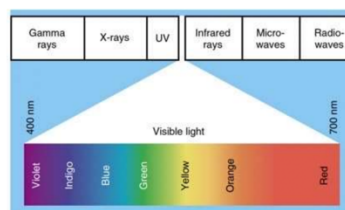


## Pupil

- The **round opening in the center of the iris through which light enters the interior portions of the eye is the pupil.**
- The **size of this opening can be adjusted by variable contraction of the iris smooth muscles to admit more or less light as needed.**

## Light

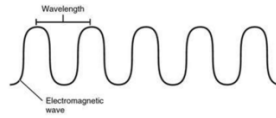
- **Light is a form of electromagnetic radiation. The distance between two wave peaks is known as the wavelength.**
- The **photoreceptors in the eye are sensitive only to wavelengths between 400 and 700 nanometers.**



- **Light of different wavelengths** in this **visible band is perceived as different color sensations.**

## Light waves

- **In addition to having variable wavelengths, light energy varies in intensity**—that is, the **amplitude of the wave (intensity or brightness).**
  - **Wavelength** is the **distance between one peak and another**
  - The **difference in wavelength cause different frequency which means different colours can be perceived**
    - **Longest: red**
    - **Shortest: violet**
  - The **amplitude determines the brightness and intensity of the colour**

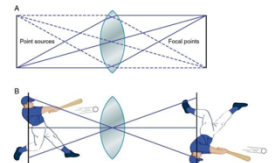


## Light rays

- **Light waves diverge (radiate outward) in all directions from every point of a light source.**
- The **forward movement of a light wave in a particular direction is known as a light ray.**
- **Divergent light rays reaching the eye must be bent inward to be focused back into a point (the focal point) on the light sensitive retina and provide an accurate image of the light source.**
  - This is **how photoreceptors are activated so that I can see**

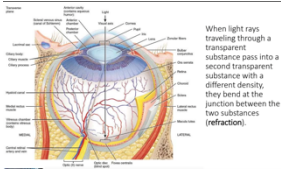
## Types of lenses

- A **convex surface curves outward** (like the outer surface of a ball), whereas a **concave surface curves inward** (like a cave).
- **Convex surfaces converge light rays, bringing them closer together.**
- Because **convergence is essential for bringing an image to a focal point, refractive surfaces of the eye are convex.**
- **Concave surfaces diverge light rays (spread them farther apart).**
- A **concave lens is useful for correcting certain refractive errors of the eye.**
- The **lens system of the eye can focus an image on the retina.**
- The **image is inverted and reversed with respect to the object.**
- However, the **mind perceives objects in the upright position despite the upside-down orientation on the retina because the brain is trained to consider an inverted image as normal.**



## Refraction

- **Refraction occurs due to the light entering transparent structures through different densities**
  - **Refraction is basically bending of those light rays**
- The **lens system of the eye is composed of four refractive interfaces (different densities and structures):**
  - (1) the **interface between air and the anterior surface of the cornea.**



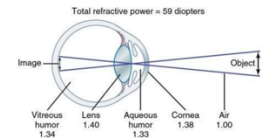
- (2) the **interface between the posterior surface of the cornea and the aqueous humor.**
- (3) the **interface between the aqueous humor and the anterior surface of the lens.**
- (4) the **interface between the posterior surface of the lens and the vitreous humor.**

## Refractive index

- The **refractive index** of a **transparent substance** is the **ratio of the velocity of light in air to the velocity in the substance.**
- The **refractive index of air is 1.00.**
- The **distance beyond a convex lens at which parallel rays converge to a common focal point is called the focal length of the lens.**
  - The **stronger the lens the more the refractive power the more convergence that occurs so the shorter the focal length**

## Refractive power

- The **more a lens bends light rays, the greater is its "refractive power."**
- This **refractive power is measured in terms of diopters.**
- The **refractive power in diopters of a convex lens is equal to 1 meter divided by its focal length.**
- Thus, a **spherical lens that converges parallel light rays to a focal point 1 meter beyond the lens has a refractive power of +1 diopter.**
  - For the **convex lens its positive** while for the **concave lens its negative**



## Refraction (2)

- In the **reduced eye, a single refractive surface is considered to exist, with a total refractive power of 59 diopters when the lens is accommodated for distant vision.**
- About **two-thirds of the 59 diopters of refractive power of the eye is provided by the anterior surface of the cornea (not the lens).**
  - The **lens can change its refractive power by changing its curvature**
  - **Even though the lens only contributed to 1/3 of the refractive power of the eye it plays an important role in refraction due to its ability to accommodate while the cornea is a fixed structure**
- The **principal reason for this phenomenon** is that the **refractive index of the cornea is markedly different from that of air**
- **However, the importance of the internal lens** is that in **response to nervous signals from the brain, its curvature can be increased markedly to provide "accommodation,"**
- The **ability to adjust the strength of the lens is known as Accommodation**

## Accommodation

- In a **young person, the lens is composed of a strong elastic capsule filled with viscous, proteinaceous, but transparent fluid.**



- However, **about 70 suspensory ligaments attach radially around the lens, pulling the lens edges toward the outer circle of the eyeball.**
- **These ligaments are constantly tensed by their attachments at the anterior border of the choroid and retina.**
- The **tension on the ligaments causes the lens to remain relatively flat under normal eye conditions.**
- Also **located at the lateral attachments of the lens ligaments to the eyeball is the ciliary muscle, which has two separate sets of smooth muscle fibers—meridional fibers and circular fibers.**
- **Contraction of either set of smooth muscle fibers in the ciliary muscle relaxes the ligaments to the lens capsule, and the lens assumes a more spherical shape because of the natural elasticity of the lens capsule.**
- **Ciliary muscle is controlled almost entirely by parasympathetic nerve signals transmitted to the eye through the third cranial nerve from the third nerve nucleus in the brain stem.**
- **Stimulation of parasympathetic nerves contracts both sets of ciliary muscle fibers, which relaxes the lens ligaments, thus allowing the lens to become thicker and increase its refractive power.**
- In **children, the refractive power of the lens of the eye can be increased voluntarily from 20 diopters to about 34 diopters, which is an “accommodation” of 14 diopters.**
- **To make this accommodation, the shape of the lens is changed from that of a moderately convex lens to that of a very convex lens.**
- **As a person grows older, the lens grows larger and thicker and becomes far less elastic, partly because of progressive denaturation of the lens proteins. The ability of the lens to change shape decreases with age.**
- The **power of accommodation decreases from about 14 diopters in a child to less than 2 diopters by the time a person reaches 45 to 50 years and to essentially 0 diopters at age 70 years.**
- Thereafter, the **lens remains almost totally nonaccommodating, a condition known as presbyopia.**
- Once a **person has reached the state of presbyopia, each eye remains focused permanently at an almost constant distance; this distance depends on the physical characteristics of each person’s eyes.**
- The **eyes can no longer accommodate for both near and far vision. To see clearly both in the distance and nearby, an older person must wear bifocal glasses, with the upper segment focused for far-seeing and the lower segment focused for near-seeing (e.g., for reading).**

