LOW PRIORITY PROCEDURE - Policy PE3

Filters & Coloured Lenses for Scotopic Sensitivity Syndrome

Policy Summary

Provision of coloured filters and tinted lenses for Scotopic Sensitivity Syndrome (SSS) will not be routinely funded. Funding requests are considered, if there are exceptional circumstances, by the CCG’s Individual Funding request panel (IFR). This partially excluded policy offers some guidance to the referring clinician and the IFR panel when considering such requests.

Background to the condition

Specific reading difficulty (SRD), also known as developmental dyslexia, is the most common specific learning difficulty in the UK. It has been defined as attainment of reading skills below normal for age in the presence of normal intelligence and adequate learning opportunities. It is said to affect 5-10% of school populations, depending on the threshold adopted, and is probably twice as common in males as females.

In 1983 Irlen described SSS, which was said to cause visual discomfort in a subgroup of people with dyslexia. It consisted of six major categories of symptoms:

- Photophobia (sensitivity to light)
- Background distortion
- Reduced visual resolution (the inability to see print clearly and free from distortions)
- Reduced scope of focus (the inability to perceive groups of letters, notes, numerals, or words at the same time)
- Reduced sustained focus (the inability to maintain focus except with the employment of inordinate energy and effort)
- Reduced depth perception/gross motor activities (the inability to judge distance accurately)
Sufferers from SSS were diagnosed by a set of questions constituting the Irlen Differential Perceptual Schedule (IDPS) test and treated with coloured lenses specific to each individual.

**Background to the treatment**

An update from the Royal College of Ophthalmologists\(^1\) issued in 2002 stated that: “No scientific evidence to support the existence of such a syndrome [SSS] has been found. The symptoms elicited by the IDPS are vague and medically would have very little diagnostic significance. Although SSS may not exist, interest in coloured filters or overlays as a treatment for dyslexia has persisted. Much of the literature is uncontrolled or poorly planned, but some good studies have supported it”.

A policy statement issued by the Committee on Children with Disabilities, American Academy of Paediatrics, American Academy of Ophthalmology, and American Association for Paediatric Ophthalmology and Strabismus\(^2\) states that: “Visual problems are rarely responsible for learning difficulties. No scientific evidence exists for the efficacy of eye exercises, vision therapy, or the use of special tinted lenses in the remediation of these complex paediatric neurological conditions”.

Two double-masked placebo-controlled studies and a randomised controlled trial on coloured filters/tinted lenses to help with reading have been published which indicate some possible benefits\(^3\)\(^-\)\(^5\). Two review papers and a randomised, prospective controlled trial on the effect of tinted lenses on reading ability did not show significant improvement in reading\(^6\)\(^-\)\(^7\). There are no proven documented risks to health from the use of individually prescribed coloured overlays or tinted lenses.

Privately available, individually prescribed coloured filters and lenses are available from opticians after assessment with the Wilkins intuitive colorimeter and Wilkins rate of reading test. Irlen Centres in UK also undertake assessment and provide overlays and tinted lenses on a private basis. Costs for these vary from under £100 to around £300.

**References**