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Myopia or Short Sightedness—A Review Maithri G*

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Review Article

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ABSTRACT

Myopia, also known as short-sightedness or Near-sightedness. It is a condition of the eye where light Centre in front, instead of on the retina. Myopia causes long distant things to be blurry while close entity appear normal. In this case we can usually see symptoms like headaches and eye strain. Most of the short-sightedness increases the chance of getting retinal detachment, cataracts, and glaucoma. The reduced in age of arrival of myopia is of well treated since the beginning, If myopic the individual will become more in number, then with all the porter increased risks of escort debilitating eye conditions. At beginning levels myopia expand the lifetime economic burden related to loss of efficiency and self-dependence, foremost to a minimize quality of life. Novel data direct the accommodation per se has little direct improvement of myopia condition. Pharmacological involvement that effect modifications in the sclera show promising action, whereas optical intercession depends on a myopic shift in the retinal image are demonstrate effect up to 50% decrease in the progression rate of myopia condition. At present contact lens and spectacle helps to reduce the shortsightedness and are able to notably lower the burden of myopia. These nonpharmacological involvements indicate us regards lowering the overall associated specific action of myopia disease.

INTRODUCTION

Myopia is a Greek work, which literally means "trying to see like a mole". In American English it is termed as 'near-sightedness' and in British English 'short-sightedness' [1-9]. Myopia can be defined as a condition of the eye where, the light that enters does not directly focus on the retina but in front of it, which lead to the image that one sees when looking at a distant object to be out of focus, but in focus when looking at a close object.

STRUCTURES AND PREPARATION METHODS OF NLCs

Symptoms

In normal myopic condition, the persons distance vision become blurry (Figure 1), but generally gives well near vision. In high myopic condition, even the near vision is affected, therefore to see the objects clearly, one must hold the object very close to the eyes. It becomes very difficult to read without their glasses prescribed for distance [10-15]. In myopic condition, the optic nerve becomes tilted and a portion of white sclera could be seen on next to the disc along with a line of hyperpigmentation, which could be seen separated from the retina. The macula gets some retinal pigmentary changes along with sub retinal hemorrhages [16]. In this condition, the retina becomes thin can even be spotted retinal holes along with lattice degeneration on thorough checking and examination. There is also a chance of development of choroidal neovascularization in the macula [17-21].

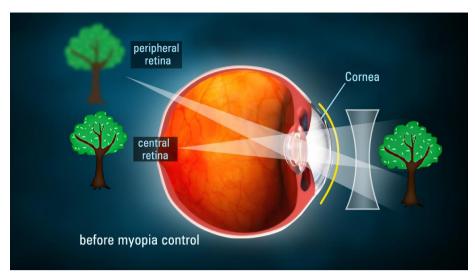


Figure 1: Myopia condition (Blurred vision).

Treatment and care

The ophthalmologists generally prefer the use of corrective lenses for the correction of myopia, which could be either glasses or contact lenses [21-30]. Myopia can also be corrected by refractive surgery, although there might be some side effects. The corrective lenses have a negative optical power (i.e. have a net concave effect) which compensates for the excessive positive diopters of the myopic eye [31-36]. Negative diopters are generally used to describe the severity of the myopia, as this is the value of the lens to correct the eye. High-degree myopia, or severe myopia, is defined as -6 diopters or worse [37-42].

Types

The types of myopia can be divided on many basis, they are.

- By cause
- Clinical entity
- Degree
- Age at onset

Myopia can be divided on the basis of cause

Axial myopia: It occurs due to the increase in the axial length of eye [43-45].

Refractive myopia: It occurs due to the condition of the refractive elements of the eye. Borish further sub classified refractive myopia [46-51].

- i. Curvature myopia: It occurs due to increase in curvature of one or more of the refractive surfaces of the eye, especially the cornea.
- ii. Index myopia: It occurs due to the variation in the refractive index of one or more of the ocular media.

On the basis of Clinical entity, myopia can be divided as

- i. **Simple myopia:** The most common type of myopia, in which an eye that is too long for its optical power or optically too powerful for its axial length [52-57].
- ii. **Degenerative myopia:** It is also known as malignant, pathological, or progressive myopia is characterized by marked fundus changes, such as posterior staphyloma, and associated with a high refractive error and subnormal visual acuity after correction [58-66].

- iii. **Nocturnal myopia:** It is also known as night or twilight myopia, in which it becomes difficult to see in dark areas or not well lighted areas [67-72].
- iv. **Pseudomyopia:** It occurs due to the spasm of the ciliary muscle.
- v. **Induced myopia:** It occurs due to various anomalous conditions, such as exposure to various pharmaceuticals, glucose levels increase, nuclear sclerosis, oxygen toxicity [73-77]. The encircling bands used in the repair of retinal detachments may induce myopia by increasing the axial length of the eye.
- a. Index myopia: It occurs due to the variation in refractive index of the ocular media.
- b. Form deprivation: It occurs when eyesight is hindered in low light or continuous usage of artificial lenses. This type of myopia is reversible.
- vi. **Nearwork-induced transient myopia (NITM):** It can be defined as short-term myopic far point shift immediately following a sustained near visual task [78-83].
- vii. **Instrument myopia:** It occurs due to the continuous usage of an instrument through eyes such as microscope.

On the basis of the degree of severity

- 1. Low myopia: -3.00 diopters or less.
- 2. Medium myopia: Between -3.00 and -6.00 diopters.
- 3. High myopia: Between -6.00 and more.

On the basis of age of onset

- 1. Congenital myopia: This type of myopia occurs in infants during birth and persists till infancy [84-91].
- 2. Youth onset myopia: It occurs in late childhood or teenage and persists till 21 years of age. No surgery is recommended by ophthalmologists [92].
- 3. School myopia: It occurs in school going children who uses their eyes extremely for small purposes.
- 4. Adult onset myopia
- 5. Early adult onset myopia: Age group of 20-40 years.
- 6. Late adult onset myopia: After 40 years.

CONCLUSION AND FUTURE ASPECTS

The condition of Myopia is explained by mismatch theory by many scholars [93-97]. It explains that the human body which had adapted the environment a million years ago was very much different from today's environment. Therefore increase of the non-infectious diseases has occurred such as myopia [98-101].

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