# Cone-Isolation Contrast Sensitivity The future of color vision testing <br> PAUL HARRIS 

Nothing to disclose

## Ishihara <br> Original Pseudo-Isochromatic "PIP" Plates



## Waggoner PIP-24 Pseudo-Isochromatic in Print and Digitized



## D15 Standard and Desaturated color ordering strategy (abbreviated)



## FM-100 (Farnsworth-Munsell)

Color ordering strategy - extended


## Oculus Anomaloscope Rayleigh color mixing



## Cone-Isolation (CCT-HD)

Digital contrast sensitivity tuned to the specific cone populations


## USAF Comparative Precision

## Color Vision Diagnostic Precision

the foundations for a new gold standard: CCT cone-isolation contrast sensitivity
Specificity
Sensitivity
Correct Dx

USAF clinical comparison of four color vision diagnostic devices from 50 color normal and 50 color abnormal subjects: digitized PIP (pseudo-isochromatic), Anomaloscope (Rayleigh color-mixing), CAD (color-camouflage), and CCT (cone-isolation contrast sensitivity).

## ColorD <br> Paul Harris | 63 M <br> 0.6 m





Video of Cone Isolation Contrast Sensitivity Stimuli

## Data from video

## Normal | Typical

 color visioncontrast threshold range not tested with CCT (original)

## Possible

contrast sensitivity loss or acquired color deficiency

## Color Vision Deficient

genetic or acquired


## Some Cases

## Train engineer's vision problems led to deadly Oklahoma wreck, NTSB rules

BY CHRIS CASTEEL ccasteel@opubco.com • Published: June 18, 2013 12:00 AM CDT • Updated: June 18, 2013 8:07 PM CDT



WASHINGTON - Two years before his failing vision likely contributed to a fatal crash in the Oklahoma Panhandle, freight train engineer Dan Hall told one of his eye doctors that he was having trouble distinguishing the color of train signals.


Hall and his conductor, Brian Stone, were killed, as was John Hall, the engineer on the other train; the two engineers were not related. Juan Zurita, the conductor on the westbound train, leapt off just before impact.

The National Transportation Safety Board investigated the crash for nearly a year and determined Tuesday that the probable causes were Dan Hall's vision problems and Stone's failure to provide the backup assistance required of a conductor.

## Subject: TB

$5^{\text {th }}$ generation working for U.P. in family - 18 months from retirement.
DVA uncorrected: OD 20/12 OS 20/12
NVA uncorrected: OD 20/16 OS 20/16
Binocular Balance: +0.50 OU to 20/20
BVA (Manifest): plan OU to 20/12
Peli-Robson CS: OD 3.2\% OS 2.5\% OU 3.2\%
Linear Sine Wave Grating CS:

- 6 cycles per degree OD $0.8 \%$ OS $0.8 \%$ OU $0.5 \%$
- 12 cycles per degree OD $1.0 \%$ OS $0.6 \%$ OU $0.6 \%$
- 18 cycles per degree OD 1.6\% OS 1.6\% OU 1.6\%


## Subject: TB

## Bulls Eye CS

- Mesopic:18 cpd 12.5\% 12 cpd 3.2\% 6 cpd 1.8\% 3 cpd 0.63\% 1.5 cpd 0.63\%
- Photopic: 18 cpd 2\% 12 cpd $0.63 \% 6$ cpd $0.63 \% 3$ cpd $0.5 \% 1.5$ cpd $0.63 \%$


## Stereo

- Randot Stereo: 20 seconds of arc
- Random Dot 3: 12.5 seconds of arc
- Distance Stereo - Chart 2020: 20 seconds of arc

Visual Fields

- 24-2 all normal
- 30-2 all normal
- Goldmann all normal


## Color Testing

Waggoner PIP-24: 7 of 9 errors

D15 regular and desaturated OD and OS separately, all 4 trials perfectly in order.

D-15 is notoriously insensitive to low to moderate deficiencies

Looks right


| COLOR 1 |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  | $\begin{aligned} & \frac{\text { 娄 }}{3} \\ & \frac{1}{3} \\ & \frac{1}{3} \end{aligned}$ | Subject's Response |  |  |
|  |  | Pass | Fail |  |
|  |  | Demonstration Plate |  |  |
| 1 | 48 | $\checkmark$ |  |  |
| 2 | 57 | $V$ |  | 81 |
| 3 | 38 |  | 33 |  |
| 4 | 92 |  | 95 |  |
| 5 | 70 |  | 75 |  |
| 6 | 95 | $\checkmark$ |  |  |
| 7 | 26 | $\checkmark$ |  |  |
| 8 | 2 | $\checkmark$ |  |  |
| 9 | 74 |  | 46 |  |
| 10 | 62 |  | 19 |  |
| 11 | 4 |  | 2 |  |
| 12 | 28 |  | 23 |  |
| 13 | 46 | $\nabla$ |  |  |
| 14 | 7 | $\checkmark$ |  |  |
| 15 | 39 |  | 35 | = |



Farnsworth-Munsell 100 Hue Test


## Farnsworth-Munsell 100 Hue Test



## Severe Deutan

## Normal | Typical

 color vision

## Estimated Psi

| Cone |  | Threshold | Error | Trials | Ave Time | Score | Category ${ }^{1}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Red L | 1.2\% | 4.1\% | 30 | 3.3 | 101 | Normal |
| OD | Green M | 6.6\% | 1.7\% | 30 | 2.4 | 28 | Severe (Deutan) |
|  | Blue S | 10.3\% | 2.4\% | 30 | 2.5 | 119 | Normal |
|  | Red L | 1.5\% | 3.7\% | 30 | 1.8 | 91 | Normal |
| OS | Green M | 5.5\% | 4.0\% | 30 | 1.6 | 36 | Severe (Deutan) |
|  | Blue S | 11.6\% | 1.8\% | 30 | 1.8 | 114 | Normal |



## A Dental Professor Research in: color for reconstruction



## E.P. 29-yo female

Experiencing loss of vision in OS with pain which lasts for several hours.
DVA OD 20/25 OS 20/25 OU 20/20
NVA OD 20/40 OS 20/30 OU 20/25
Binocular Balance: OD +0.50-0.25 165 OS +0.50 20/20 OD, OS, OU PRA: -3.50 NRA: +2.50

VEP's: 5 check sizes, OD, OS, OU all normal with binocular summation and no latency differences and no overall delay.

$T-20-\mathrm{p}-16 \times 16-\mathrm{OU}-85 \%-\mathrm{C}-12 / 12 \mathrm{2} 017$ 10:25:36 AM $T=20-\mathrm{P}=16 \times 16-0 \mathrm{D}-854-\mathrm{C}-12 / 12 / 2017$ 10:28:24 AM $\mathrm{T}=20-\mathrm{P}=16 \times 16-05-85 \%-\mathrm{C}-12 / 12 / 2017$ 10:31:05 AM

|  |  | $\begin{array}{lll} T=2 \theta-P=16 \times 16-0 U-85 \%- \\ C-12 / 12 / 2017 & 10: 25: 36 \mathrm{AM} \end{array}$ | $\begin{aligned} & \hline T=20-\mathrm{P}=16 \times 16-0 \mathrm{D}-85 \%- \\ & \mathrm{C}-12 / 12 / 2017 \mathrm{10:28:24} \mathrm{AM} \\ & \hline \end{aligned}$ | $\begin{array}{ll} \begin{array}{l} \mathrm{T}=20-\mathrm{P}=16 \times 16-0 S-85 \%- \\ C-12 / 12 / 2017 \\ 10: 31: 05 \mathrm{AM} \end{array} \end{array}$ |
| :---: | :---: | :---: | :---: | :---: |
| Left Cursor | Lat | 68.4 ms | 77.1 ms | 68.4 ms |
|  | Amp | -2.37 uV | -3.10 uV | -3.59 uV |
| Right Cursor | Lat | 104.5 ms | 104.5 ms | 105.5 ms |
|  | Amp | 17.58 uV | 9.94 uV | 10.22 UV |
| Delta | Lat | 36.1 ms | 27.3 ms | 37.1 ms |
|  | Anp | 19.95 uV | 13.05 uV | 13.81 uV |

## Houston we have a problem!

## Normal | Typical

color vision
contrast threshold range not tested with CCT (original)

## Possible

contrast sensitivity loss or acquired color deficiency

Contrast Responses by Trial


PSI Graph


| Cone | L | M | S | L | M | S |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Reaction time (secs) | 2.9 | 2.1 | 3.9 | 2.3 | 1.7 | 3.0 |
| Contrast Threshold \% (Alpha) | 2.66 | 3.69 | 229.51 | 5.09 | 5.27 | 241.89 |
| Standard Error (Alpha) | 0.66 | 0.93 | 84.86 | 1.44 | 1.48 | 75.32 |

Show responses

## B.C. 61-yo female

HTN since 1985, high cholesterol
$1^{\text {st }}$ exam at SCO: 10/27/17
DVA with Rx: OD 20/15 OS 20/15 OU 20/15
NVA with Rx: OD 20/20 OS 20/25 OU 20/25
Binocular Balance: OD +0.25-0.50 x 59 OS +0.25 20/20 all
Brought back for DFE 11/16/17

- Scattered punched out lesions OU
- Pigmentary changes throughout
- CD OD .35/.35 OS .65/.65
- 24-2 OD ok - possible arcuate superior OS

Nidek Micro-Perimeter


## Normal | Typical

color vision
 with CCT (original)

## Possible

contrast sensitivity loss or acquired color deficiency

Color Vision Deficient genetic or acquired


Contrast Responses by Trial


| Cone | L | M | S | L | M | S |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Reaction time (secs) | 3.7 | 3.1 | 2.6 | 2.0 | 2.4 | 2.5 |
| Contrast Threshold \% (Alpha) | 1.95 | 1.97 | 58.35 | 2.48 | 3.98 | 65.78 |
| Standard Error (Alpha) | 0.78 | 0.55 | 19.54 | 2.58 | 1.12 | 22.62 |
| Show responses | $\checkmark$ Show range |  |  |  |  |  |

## 58-yo male

9/7/17 sent in by outside OD
Type 2 diabetic - elevated A1C in June 7.3\% - on steroid for pneumonia - BP 140/88

DVA with Rx: OD 20/15-3 OS 20/15-1 OU 20/15-2
NVA with Rx: 20/25+ all
ASEG - nothing interesting
PSEG OD shows Drusen scattered but not in OS.
NOTES: OD appears like intermediate AMD. $2^{\text {nd }}$ opinion by another doctor: Could be CACD but very asymmetric. Spectralis shows choroidal irregularity and Drusen affecting the RPE layer.

## Multi focal ERG <br> OD <br> OS



## mfERG Ring Analysis


$\mathrm{Nl}(\mathrm{nV} / \operatorname{deg} 2)$
-36.76
4.57
-3.03
-1.89
-1.37
-0.22
-1.88
$\mathrm{Pl}(\mathrm{nV} / \mathrm{deg} 2)$
52.04
10.65
6.34
3.35
2.56
2.45
2.57
Diff(nV/deg 2$)$
88.81
6.08
9.37
5.24
3.93
2.67
4.46

## 

N1 (nV/deg2)
$\square$
$\square$
$\square$
$\square$
$\square$
$\square$
$\square$ $\begin{aligned} & -20.42 \\ & -6.37 \\ & -2.14 \\ & -0.14 \\ & -2.42 \\ & -1.23 \\ & -2.61\end{aligned}$

| $\square$ |
| :--- |
| $\square$ |
| $\square$ |
| $\square$ |
| $\square$ |
| $\square$ | \(\begin{aligned} \& -20.42 <br>

\& -6.37 <br>
\& -2.14 <br>
\& -0.14 <br>
\& -2.42 <br>
\& -1.23 <br>
\& -2.61\end{aligned}\)

| $\square$ |
| :--- |
| $\square$ |
| $\square$ |
| $\square$ |
| $\square$ |
| $\square$ | \(\begin{aligned} \& -20.42 <br>

\& -6.37 <br>
\& -2.14 <br>
\& -0.14 <br>
\& -2.42 <br>
\& -1.23 <br>
\& -2.61\end{aligned}\)

| $\square$ |
| :--- |
| $\square$ |
| $\square$ |
| $\square$ |
| $\square$ |
| $\square$ | \(\begin{aligned} \& -20.42 <br>

\& -6.37 <br>
\& -2.14 <br>
\& -0.14 <br>
\& -2.42 <br>
\& -1.23 <br>
\& -2.61\end{aligned}\)

| $\square$ |
| :--- |
| $\square$ |
| $\square$ |
| $\square$ |
| $\square$ |
| $\square$ | \(\begin{aligned} \& -20.42 <br>

\& -6.37 <br>
\& -2.14 <br>
\& -0.14 <br>
\& -2.42 <br>
\& -1.23 <br>
\& -2.61\end{aligned}\)

| $\square$ |
| :--- |
| $\square$ |
| $\square$ |
| $\square$ |
| $\square$ |
| $\square$ | \(\begin{aligned} \& -20.42 <br>

\& -6.37 <br>
\& -2.14 <br>
\& -0.14 <br>
\& -2.42 <br>
\& -1.23 <br>
\& -2.61\end{aligned}\)

| $\square$ |
| :--- |
| $\square$ |
| $\square$ |
| $\square$ |
| $\square$ |
| $\square$ | \(\begin{aligned} \& -20.42 <br>

\& -6.37 <br>
\& -2.14 <br>
\& -0.14 <br>
\& -2.42 <br>
\& -1.23 <br>
\& -2.61\end{aligned}\)
Pl $(\mathrm{nV} / \mathrm{deg} 2)$
28.00
4.82
4.00
4.11
2.10
1.36
2.40

Diff(nV/degz)
48.42
11.18
6.14
4.25
4.52
2.59

## ColorDx CCT-HD Results



## CCT-HD Data


## Historical Methods: Lower Sensitivity and Specificity

100s of Substances and Pharmaceutical Agents Can Cause Color Vision Defects

The
opportunity is to augment clinical data with a new test of vision function assessing cone function.

| acetohexamide <br> adrenal cortex injection | ethambutol ethionamide | mescaline | rrantidine escinnamine |
| :---: | :---: | :---: | :---: |
| alcohol | famotidine | methazolamide | reserpine |
| amobarbital | fludrocortisone | methohexital | quinine |
| aspirin | uphenazine | methylphenobarbital | radioactive iodid rantidine |
| atropine | glaucoma | metlylprednisolone metoclopramide | rescinnamine |
| beclomethasone | glibenclamide | metoclopramide <br> metronidazole | reserpine rifampicin |
| betamethasonebroxyquinolone butalbital | glimepiride | multiple sclerosis | rimexolone |
| carbamazepine | glipizide | nalidixic acid | rosiglitazone |
| carbon dioxide | griseofulvin | naproxen | secbutalbarbital |
| cataracts | hashish | nitrofurantoin nizatidine | sildenafil (Viagra) |
| chloroquine | herbal medicines | norepinephrine | sulfacetamide |
| chlorpromazine | homatropine | organophosphates | sulfafurazole |
| chlorpropamide cimetidine | hydrocortisone | oxazepam | sulfamethizole |
| cisplatin | hydroxychloroquine | penicillamine | sulfamet\|1oxazole |
| cortisone | ibuprofen | pentobarbital perphenazine | sulfasalazine |
| deferoxamine denileukin diftitox | indometacin | phenelzine | sulfathiazole tadalafil |
| dexamethasone | influenza virus vaccine | phenobarbital | tamoxifen |
| diabetes | iodide and iodine solutions \& | phenytoin physostigmine | thiabendazole |
| dicyclomine | compounds | pilocarpine | thietllylperazine thioacetazone |
| diiodohydroxyquinoline | isocarboxazid isoniazid | pioglitazone | tllioridazine |
| dimethyl sulfoxide | isotretinoin | piperazine | tioguanine |
| disulfiram dronabinol | lidocaine | prednisolone | tobramycin |
| epinephrine | linezol | prednisone | tolbutamide |
| ergometrine | idlorazepam | primidone | tolterodine |
| ergotamine tartrate | LSD | prochlorperazine | tranexamic acid |
| erythromycin |  | promethazine | tranylcypromine |
| estradiol | marijuana | propantheline | triamcinolone |
| estrogen \& | medrysone | psilocybin | vardenafil |
|  | mepacrine | pyridostigmine | vigabatrin vincristine |
| progestogen | mercaptopurine | quinidine | voriconazole |
| combo products |  | quinine radioactive iodides | waliarin |
|  |  |  | zidovudine |
| Source: Fraunfelder, Please reference | er, Chambers. Clinical Ocular Toxicology cular Toxicology for categorization of col added to highlight common substances | ders Elsevier, 2008: 320. Availab ion defects by certain, probable, neglected in relationship to acq | se at: Elsevier and Amazon onditional/unclassified. ion defects. |

How about some vanilla color deficiencies?

'Cut-off criteria are physician-selected from custom, or user input score method ranges and corresponding assigned categories.


${ }^{1}$ Cut-off criteria are physician-selected from custom, or user input score method ranges and corresponding assigned categories.


## Billing and Diagnosis Codes

Extended Color Testing: 92283
approximately \$65

- Deutan H53.53
- Protan H53.54
-Tritan H53.55


## Questions \& Answers

Paul Harris, OD
Professor, Southern College of Optometry
1245 Madison Avenue
Memphis, TN 38104
901-722-3273

