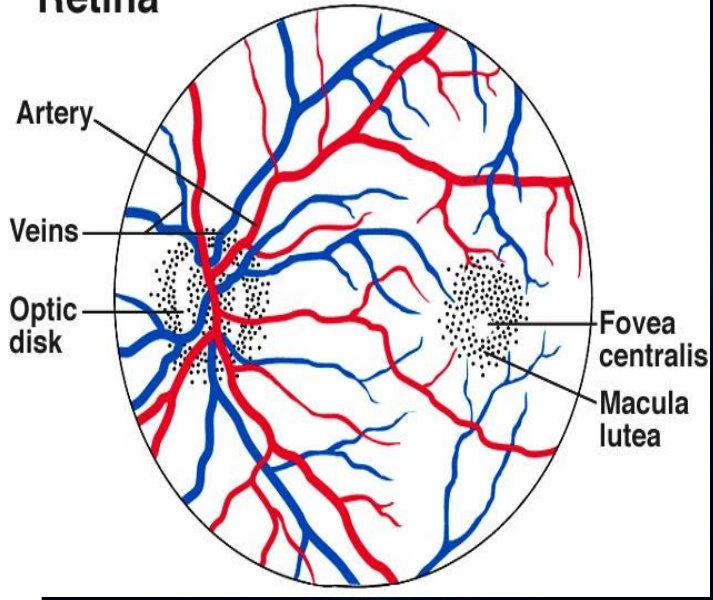
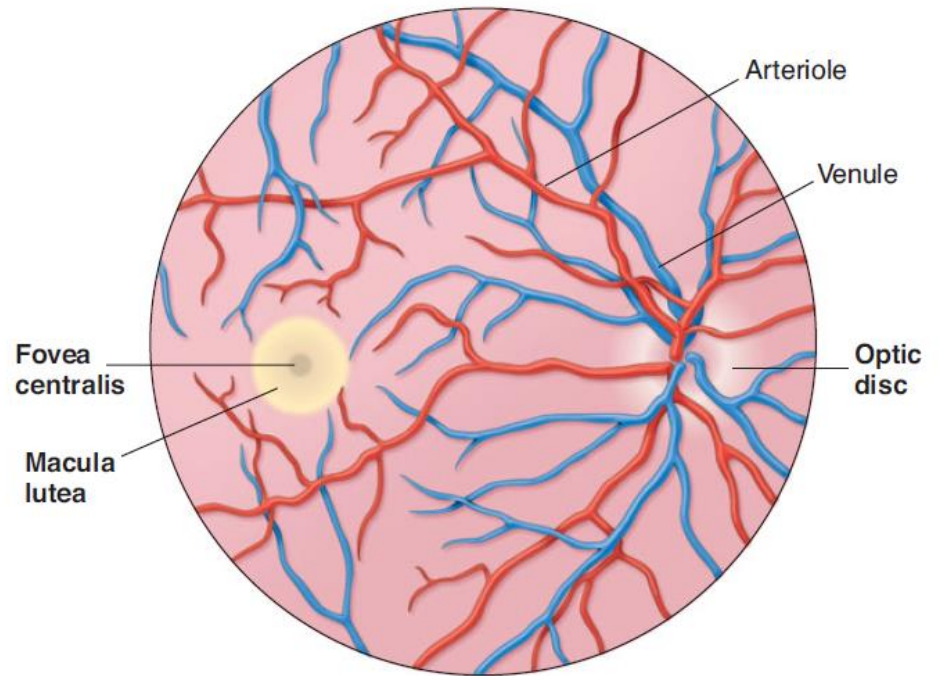


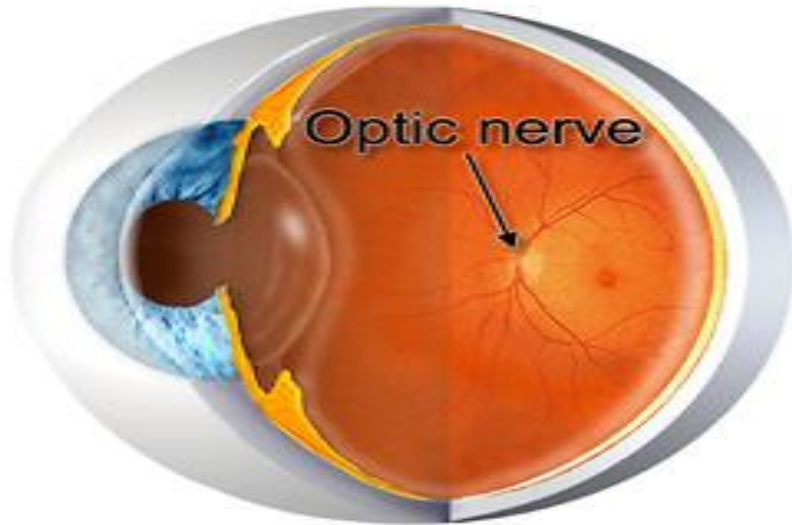
# Retina



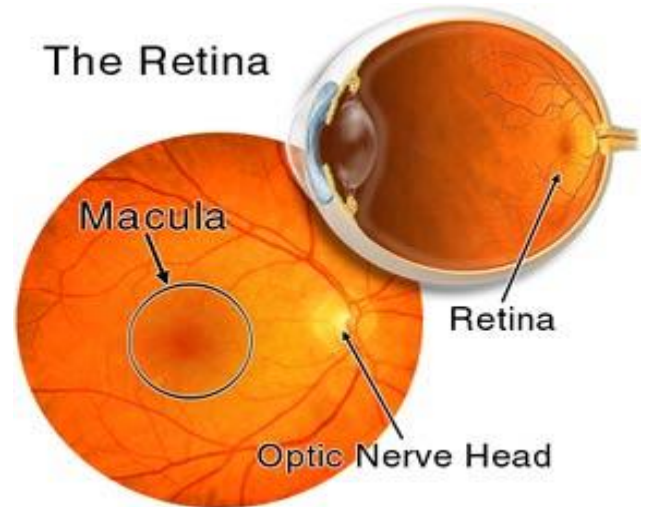
(a)



(b)



## The Retina



## **BINOCULAR VISION for :-**

**1- Large visual field**

**2- cancel the effect of blind spot**

**3- stereoscopic vision**

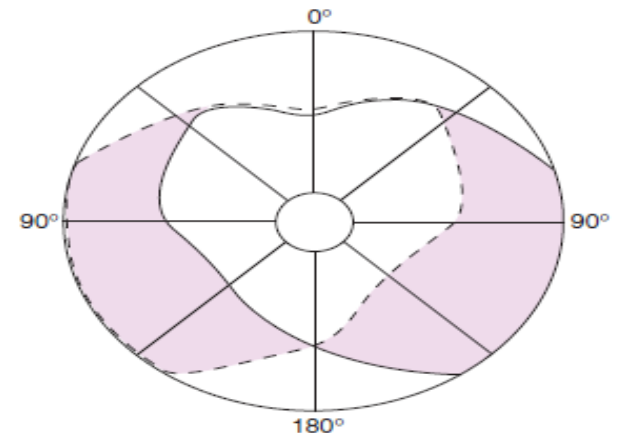
**4- one eye lesion does not affect vision**

**Monocular and binocular visual fields.**

**-The dashed line encloses the visual field of the left eye;**

**- the solid line, that of the right eye. -The common area (heart-shaped in the center) is viewed with binocular vision.**

**- The colored areas are viewed with monocular vision.**



## **Principles of optics:-**

**--Biconvex lens(converge) & biconcave lens(diverge)**

**-Diopter (measure of refractive power**

**R.P = 1meter / Principal focal distance in meters**(The distance beyond a convex lens at which parallel rays converge to a common focal point )

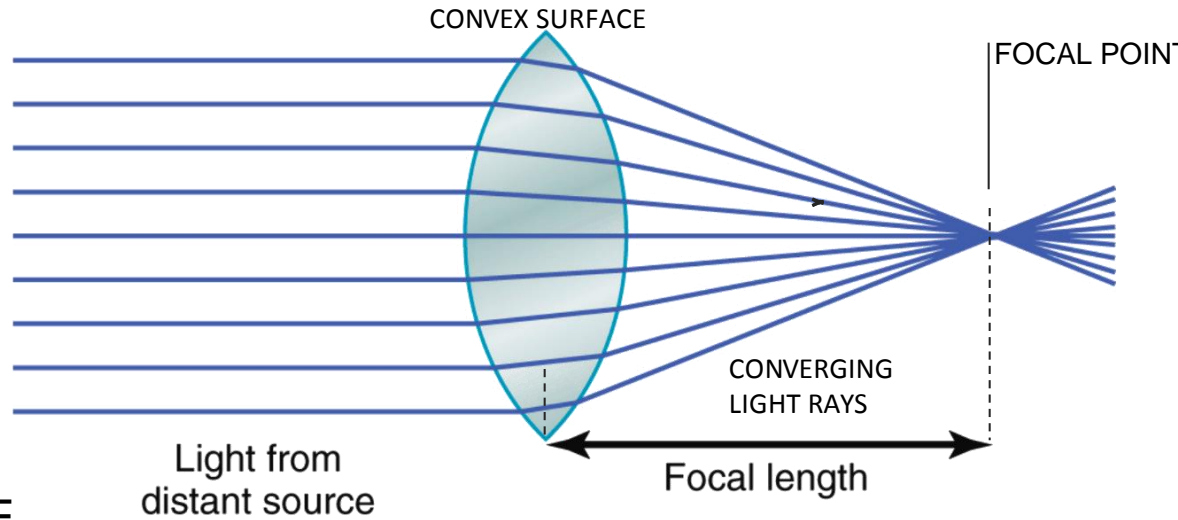
**Exp/if Principal focal distance of a lens is 25cm, so its  
R.P=1/ 0.25 meter = 4D**

-

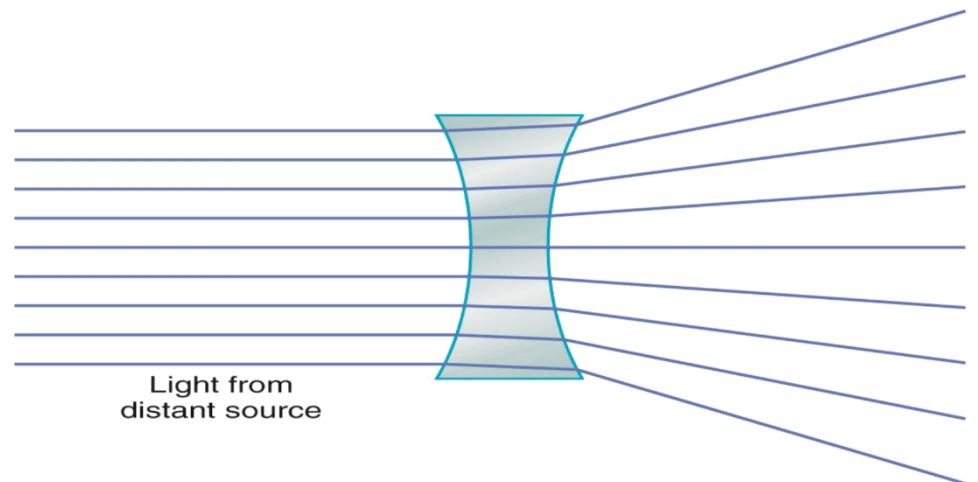
**--The greater the curvature of the lens, the greater the refractive power of the eye**

**Emmetropic eye;-normal eye has image on retina, has dioptric power 59-60D**

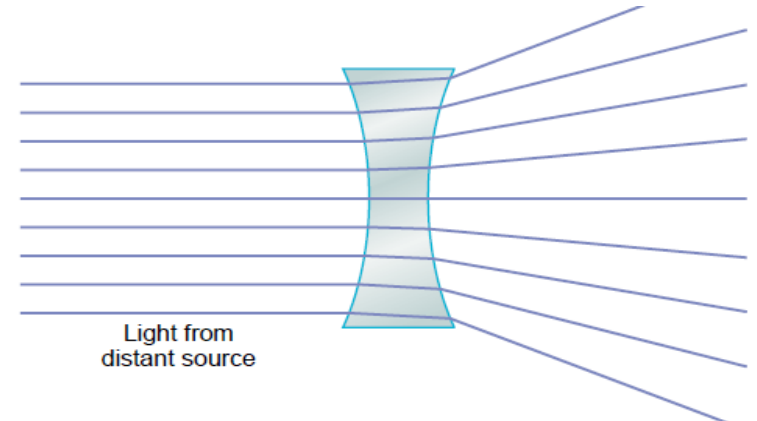
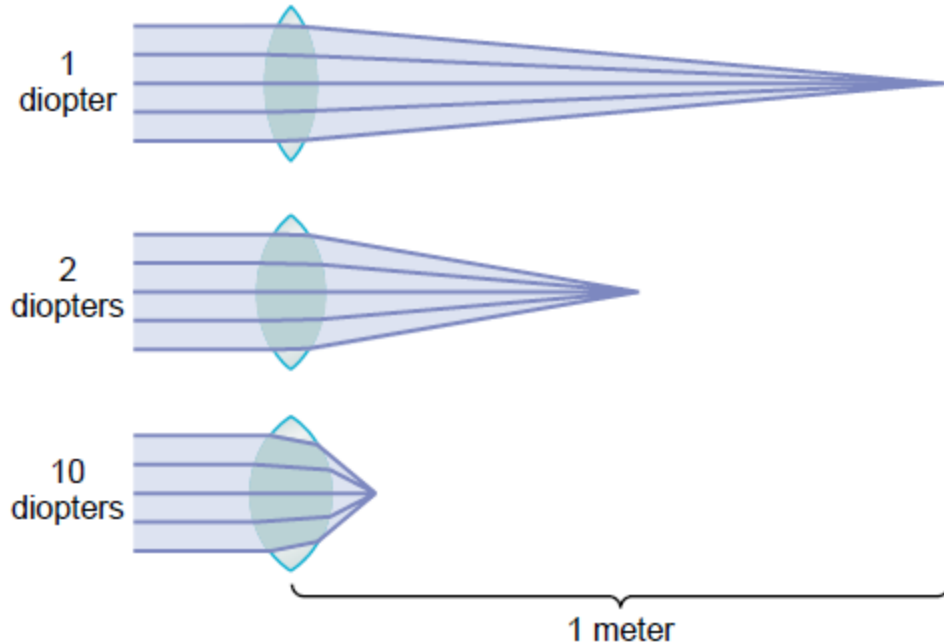
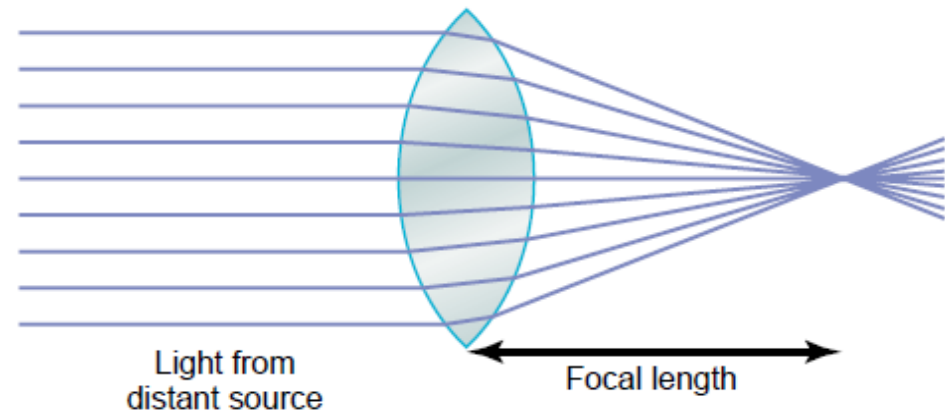
•



IF THE LENS HAS EXACTLY THE PROPER CURVATURE, PARALLEL LIGHT RAYS PASSING THROUGH EACH PART OF THE LENS WILL BE BENT EXACTLY ENOUGH SO THAT ALL THE RAYS WILL PASS THROUGH A SINGLE POINT, WHICH IS CALLED THE FOCAL POINT



**Concave lenses**  
“neutralize” the refractive power of convex lenses. Thus, placing a 1-diopter concave lens immediately in front of a 1-diopter convex lens results in a lens system with zero refractive power



## DIOPTERS AND CONCAVE LENSES

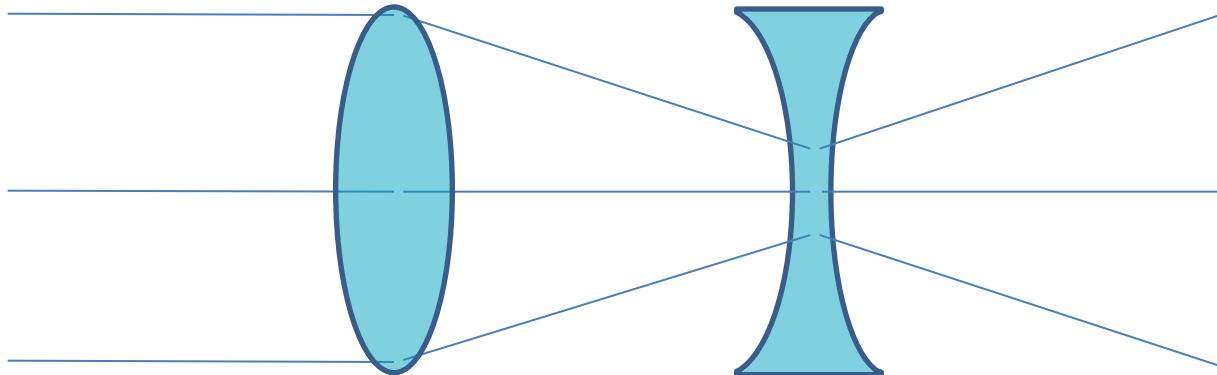
CONCAVE LENSES “NEUTRALIZE”  
THE REFRACTIVE POWER OF  
CONVEX LENSES.

THUS, PLACING A 1-DIOPTER  
CONCAVE LENS IMMEDIATELY IN  
FRONT OF A 1-DIOPTER CONVEX  
LENS RESULTS IN A LENS SYSTEM  
WITH ZERO REFRACTIVE POWER.

THE REFRACTIVE POWER OF  
CONCAVE LENSES CANNOT BE  
STATED IN TERMS OF THE FOCAL  
DISTANCE BEYOND THE LENS  
BECAUSE THE LIGHT RAYS  
DIVERGE RATHER THAN FOCUS  
TO A POINT.

DIOPTERS FOR A CONCAVE LENS  
ARE MEASURED BY HOW MUCH  
IT NEUTRALISES THE REFRACTIVE  
POWER OF A CONVEX LENS

FOR EXAMPLE WHERE A  
CONCAVE LENS DIVERGES LIGHT  
RAYS AT THE SAME RATE THAT A  
1-DIOPTER CONVEX LENS  
CONVERGES THEM, THE  
CONCAVE LENS IS SAID TO HAVE A  
DIOPTRIC STRENGTH OF  $-1$ .



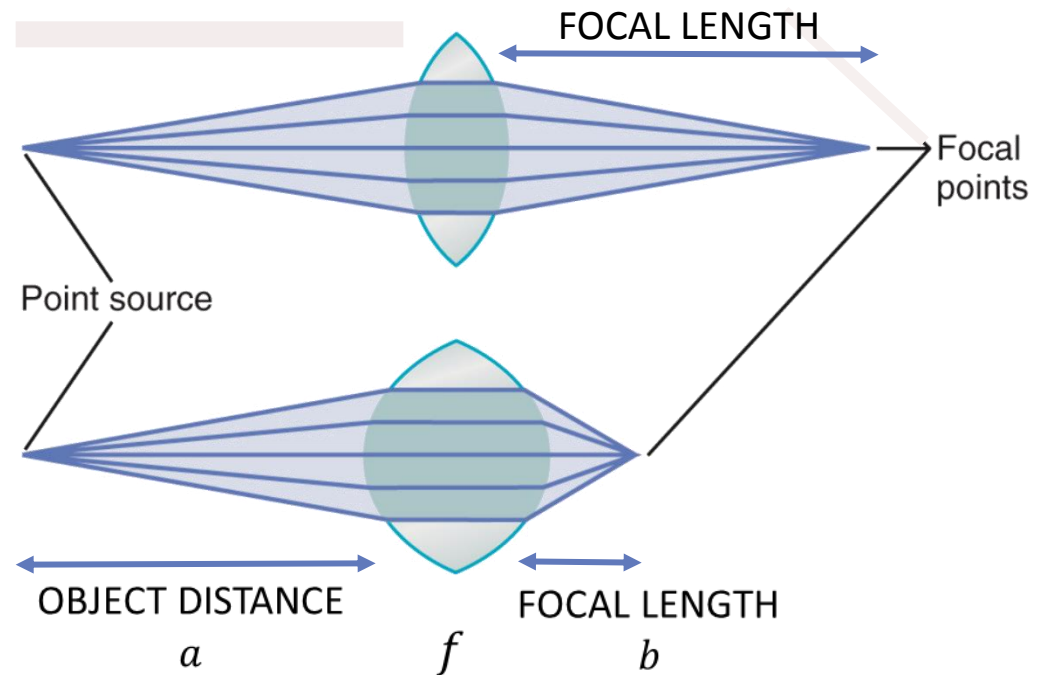
## FOCAL LENGTH OF A LENS

THERE IS A DIFFERENCE IN FOCAL LENGTH BETWEEN THESE TWO LENSES – DUE TO THE CURVATURE OF THE LENS

THE FOCAL LENGTH OF THE LENS IS EXPRESSED IN THE FOLLOWING FORMULA:

$f$  is the focal length of the lens for parallel rays,  
 $a$  is the distance from the point source of light to the lens  
 $b$  is the focal length on the other side of the lens.

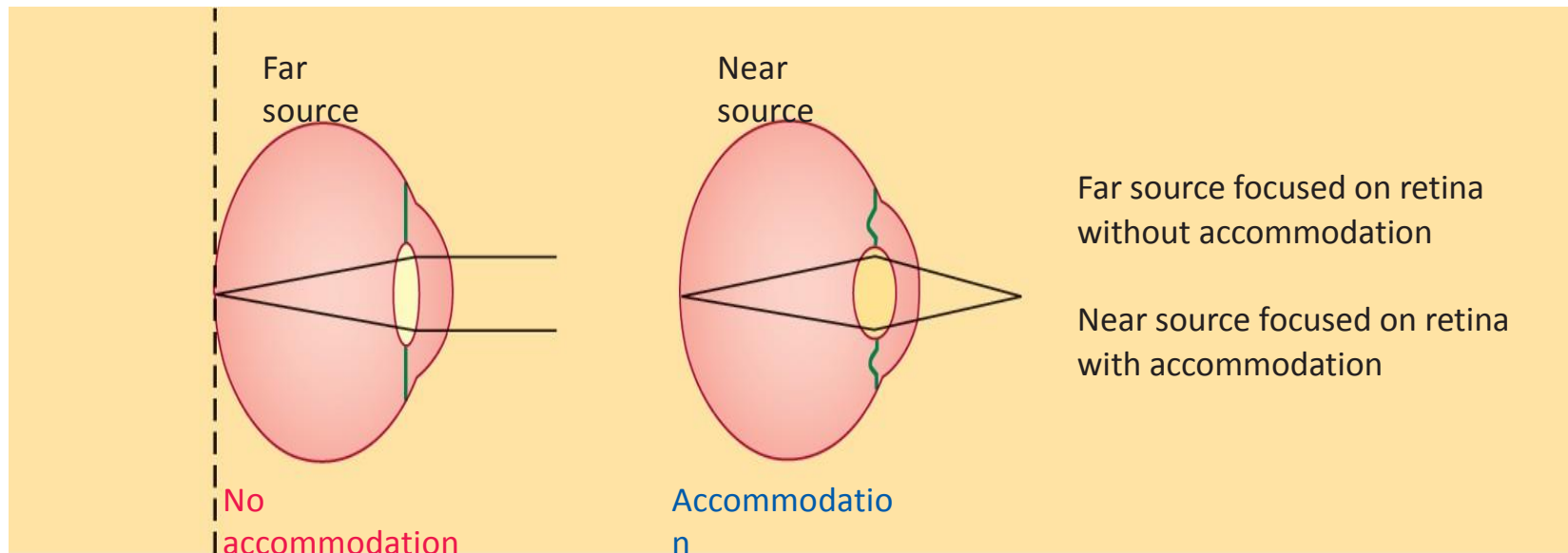
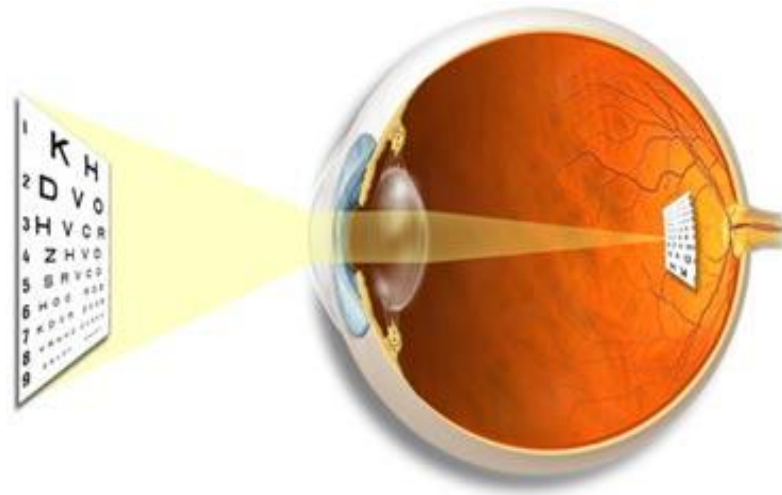
$$\frac{1}{f} = \frac{1}{a} + \frac{1}{b}$$



$$\frac{1}{f} = \frac{1}{a} + \frac{1}{b}$$

## Emmetropic eye

can see all distant objects  
clearly with its ciliary  
muscle relaxed & see close  
objects clearly with ciliary  
muscles contracted  
Normal eye = Emmetropia





# Errors of refraction:- \*

1-Hypermetropia (hyperopia = farsightedness) \*

(small eyeball, focus behind retina, \*

**Or due to weak lens system**

Headache & blurred vision \*

-continuous accommodation to bring image on retina >>>>> muscular effort >>>>> cause headache, prolonged convergence by accommodation->>>> squint

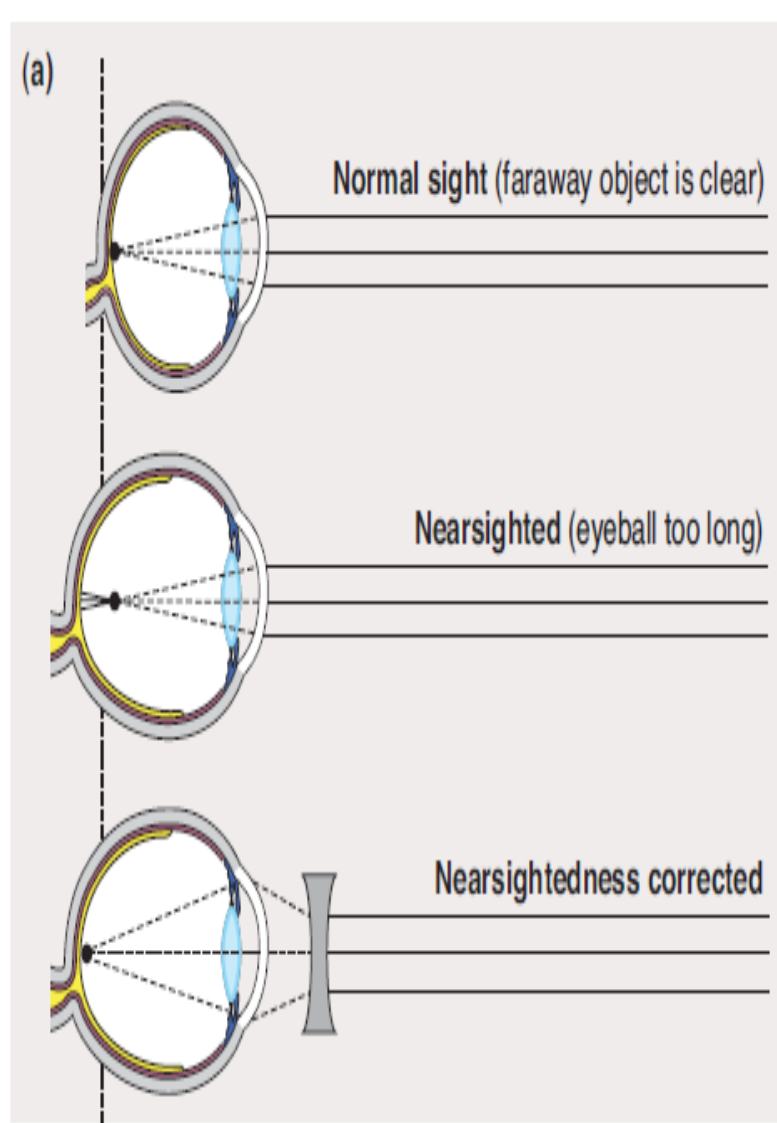
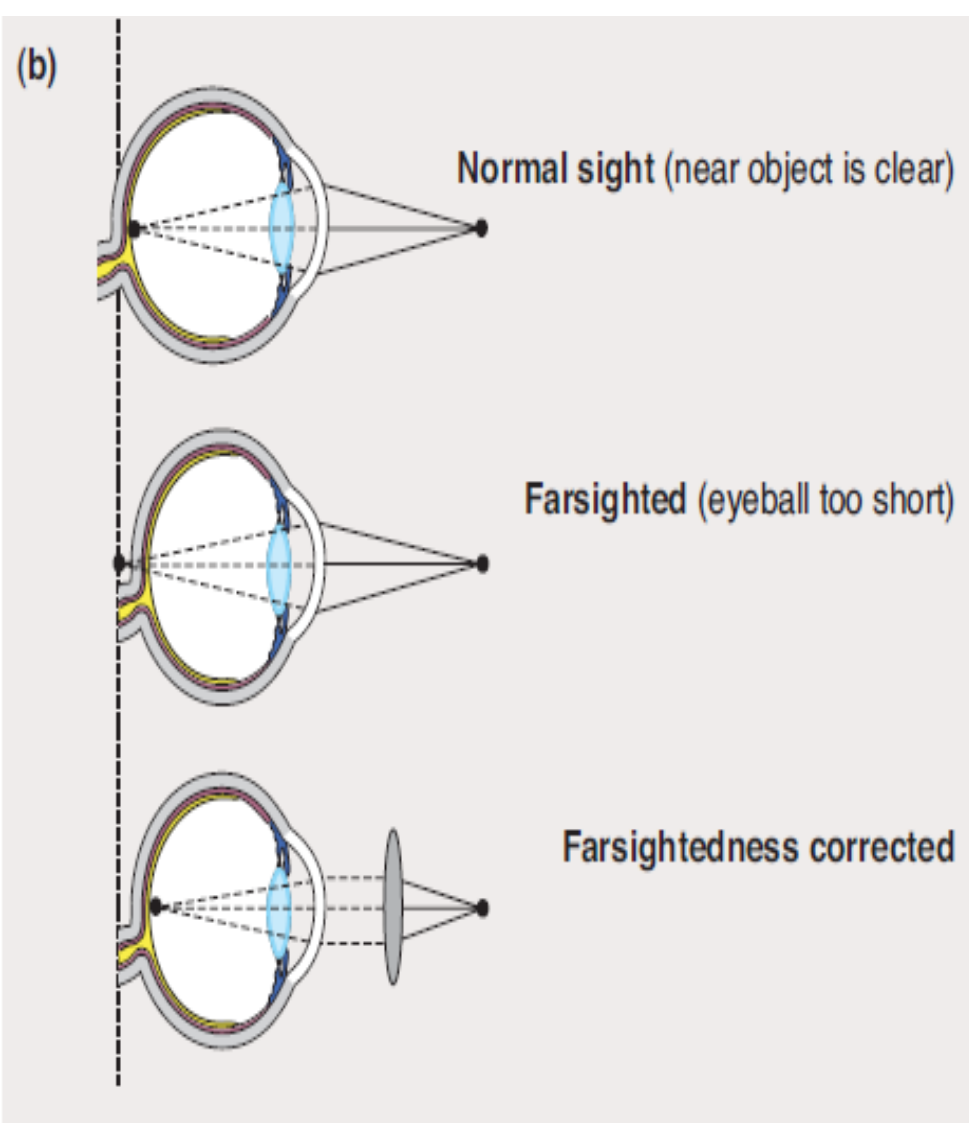
correction by biconvex lens \*

2-Myopia (nearsightedness) \*

(genetic, large eye ball, long antero-posterior diameter, or extensive close work as in studying >>>> cause focus in front of retina \*

-- correction by biconcave lens (to diverge rays before strike <sub>lens</sub>) \*

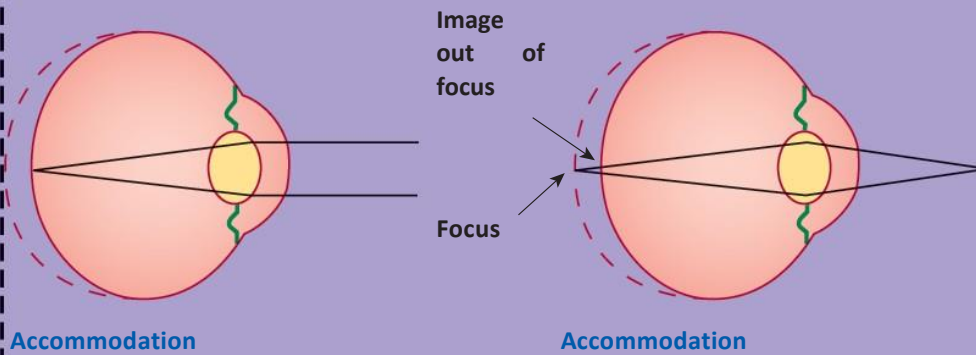
**it can result from too much refractive power in the lens system of the eye or a corneal surface that is too curved**



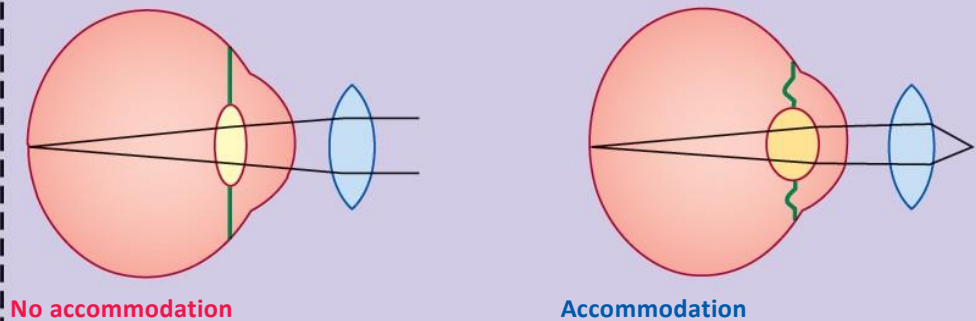
## (c) Farsightedness (Hyperopia)

Eyeball too short or lens too weak

### 1. Uncorrected



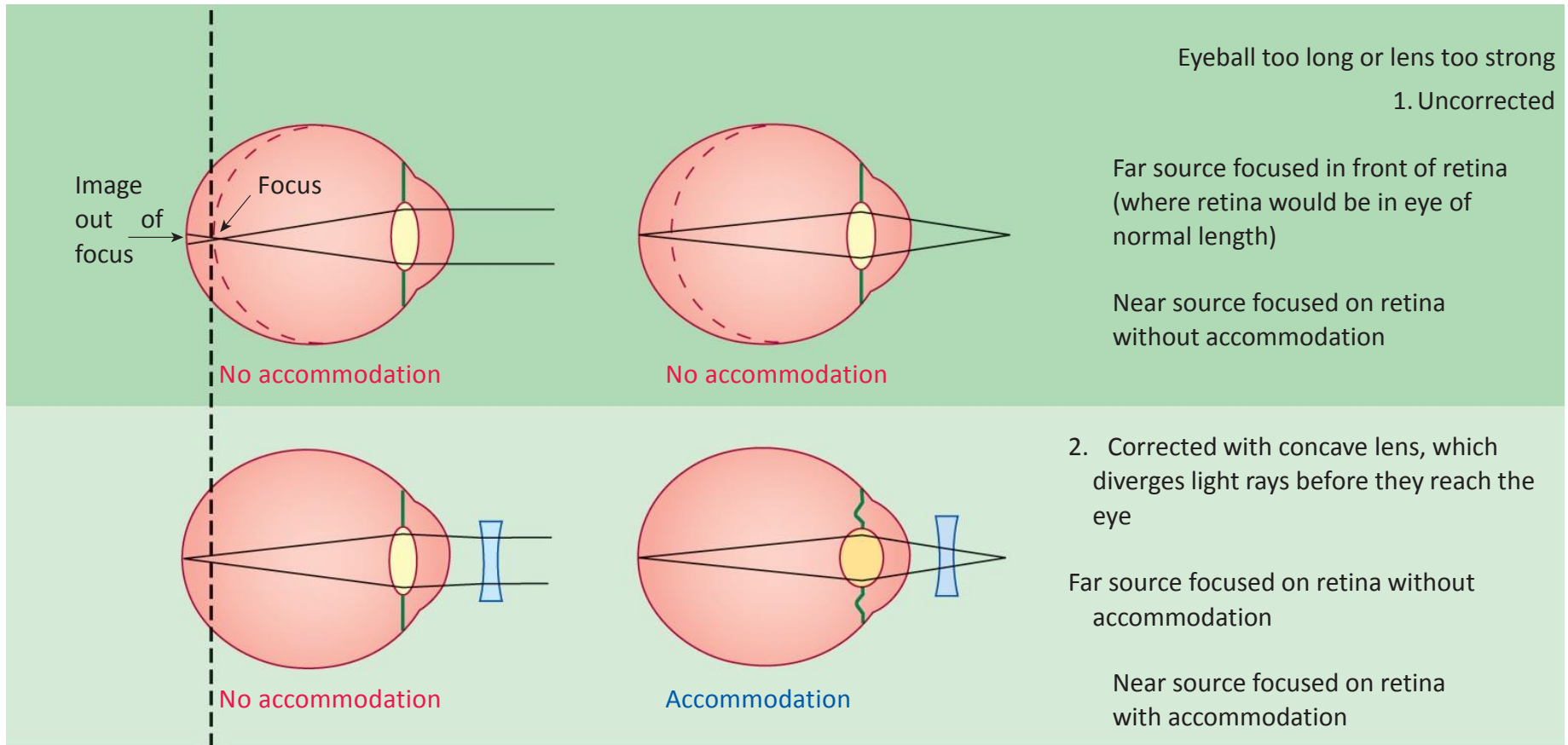
### 2. Corrected with convex lens, which converges light rays before they reach the eye



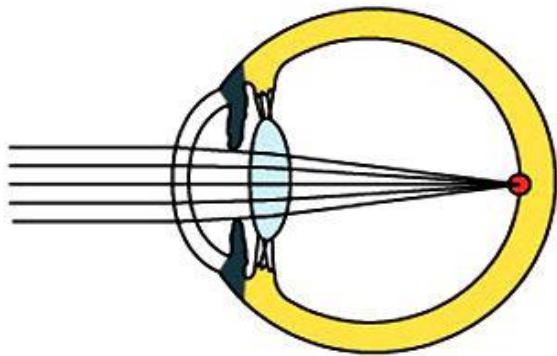
Far source focused on retina without accommodation

Near source focused on retina with accommodation

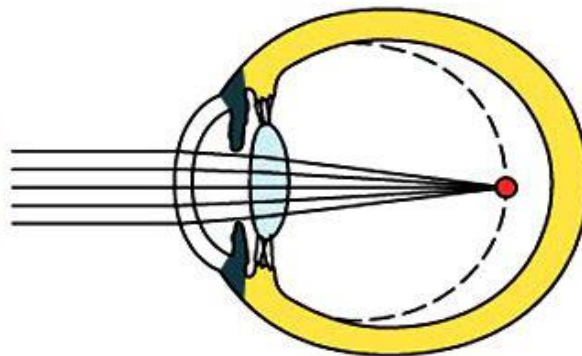
# - Nearsightedness (Myopia)



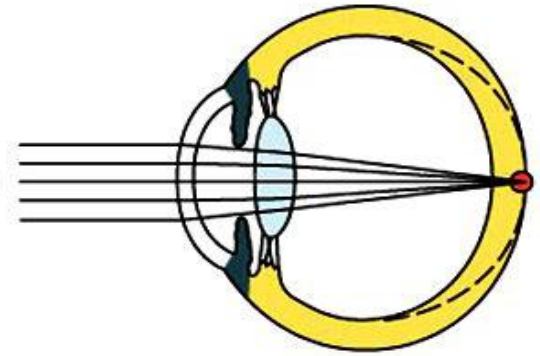
- THE CONCAVE LENS BENDS THE IMAGE OUTWARDS SLIGHTLY – THEN THE EYE LENS CAN REFRACT THE IMAGE INWARDS TO FOCUS ON THE FOCAL POINT OF THE RETINA



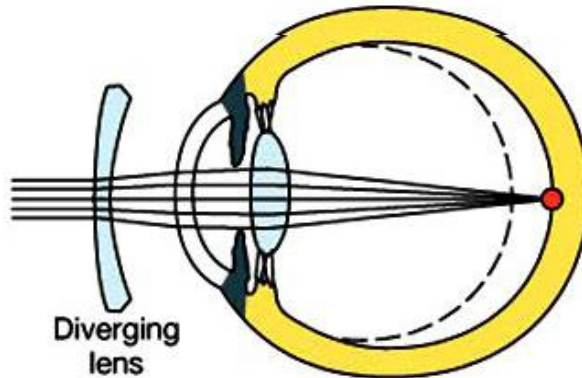
**(a) Emmetropia**



**(b) Myopia**

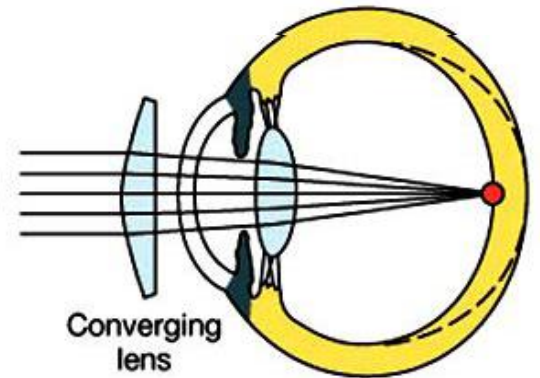


**(c) Hyperopia**



Diverging  
lens

**(d) Myopia (corrected)**



Converging  
lens

**(e) Hyperopia (corrected)**

**3-Presbyopia ( eye near point recedes by age due to loss of accomodation**

**- correction by biconvex lens**

**4-Astigmatism (mainly uneven & ununiform corneal curvature and very little due to uneven lens curvature**

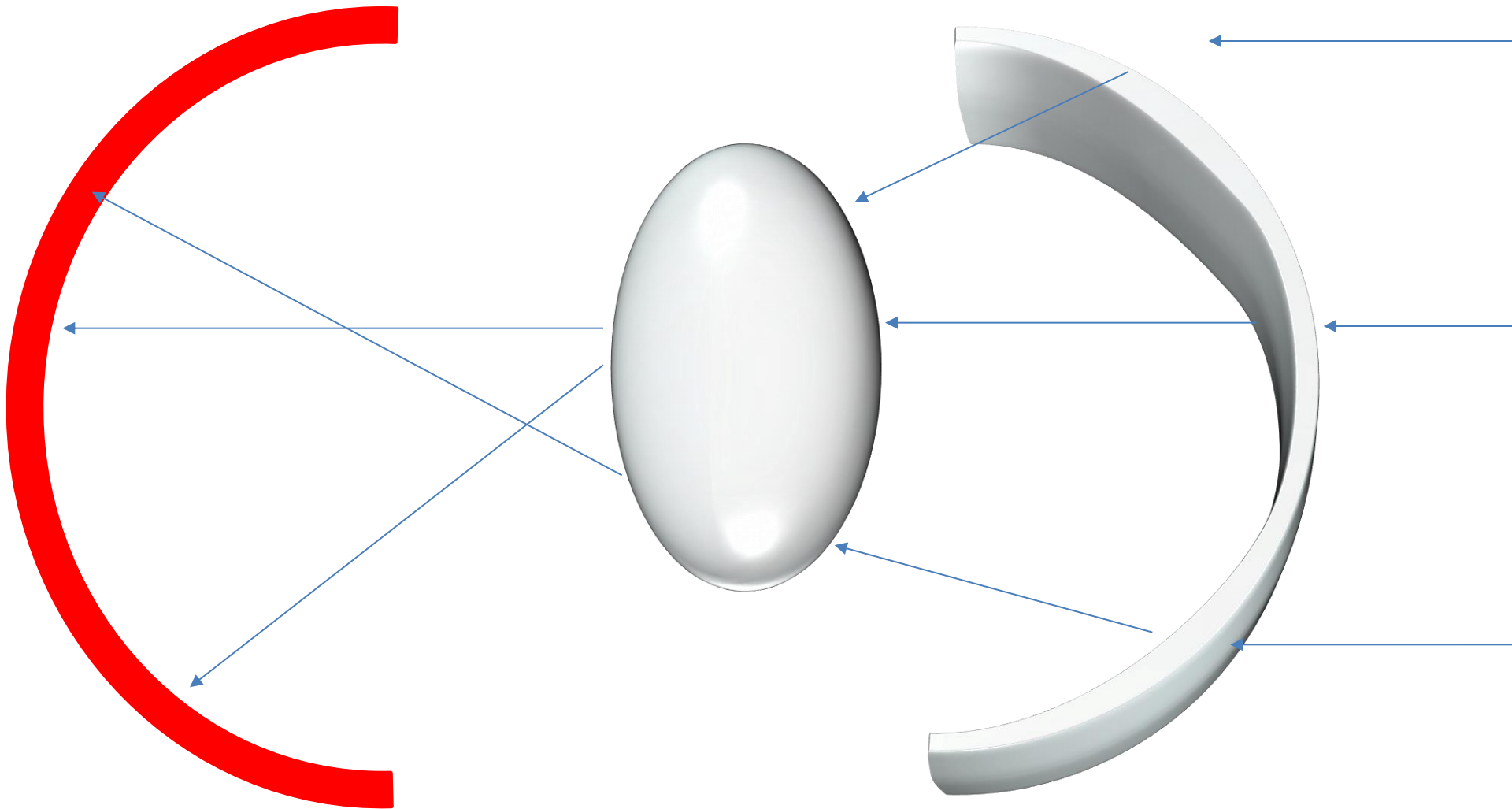
**-rays refracted to different foci >>>>>>>  
blurred vision**

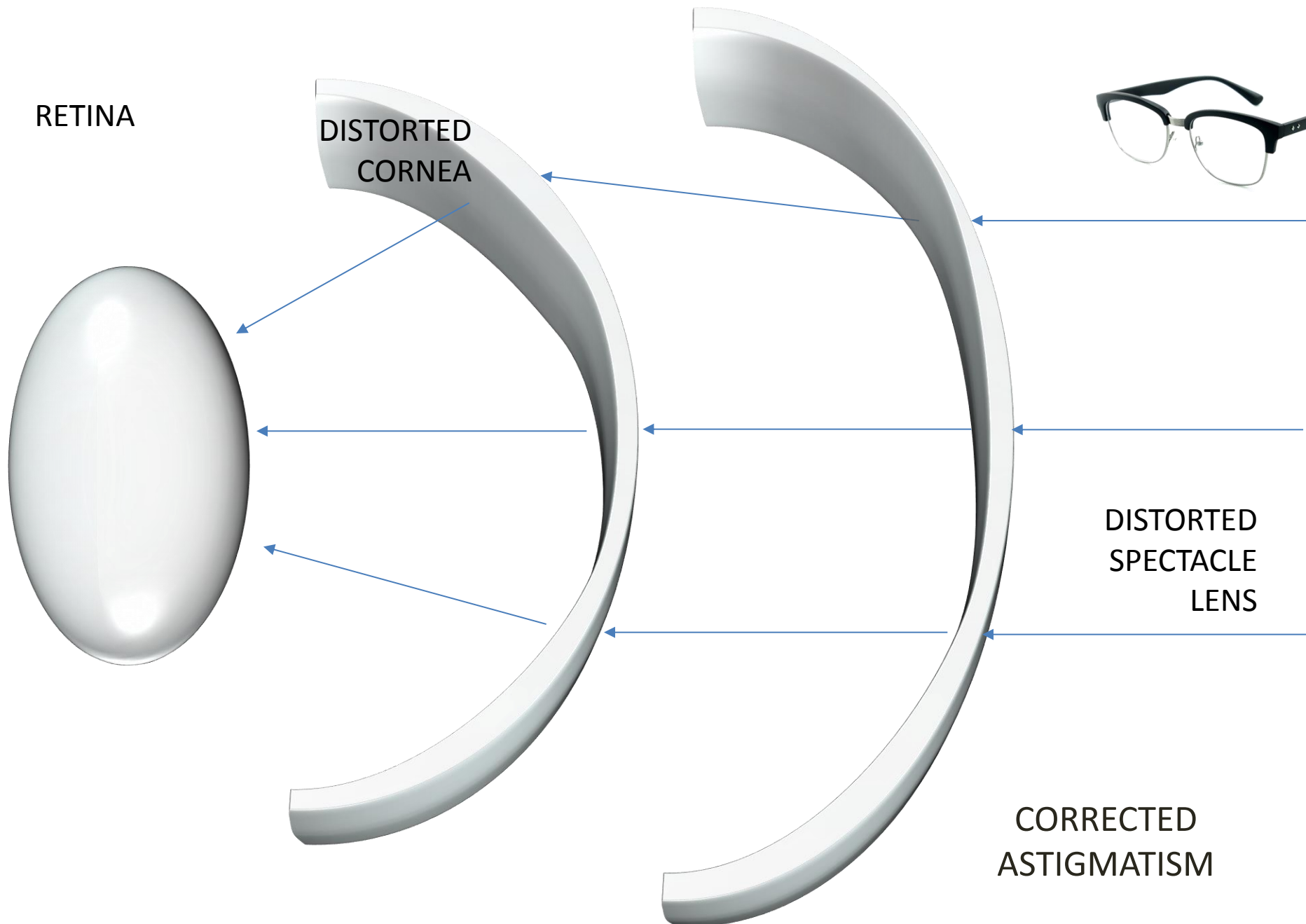
**-correction by cylindrical lens which bends light rays in only one plane ( a focal line)**

# ASTIGMATISM

DISTORTED  
CORNEA

RETINA





RETINA

DISTORTED  
CORNEA



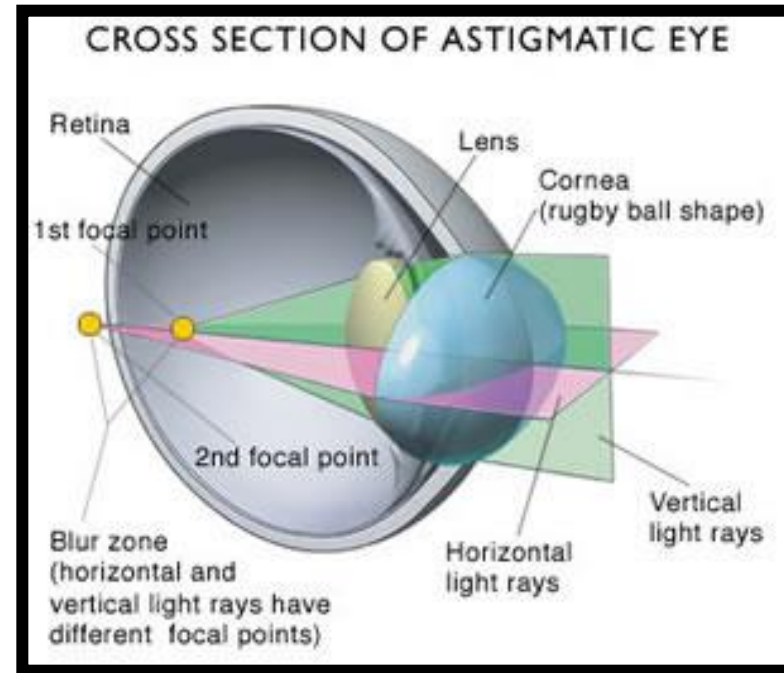
DISTORTED  
SPECTACLE  
LENS

CORRECTED  
ASTIGMATISM

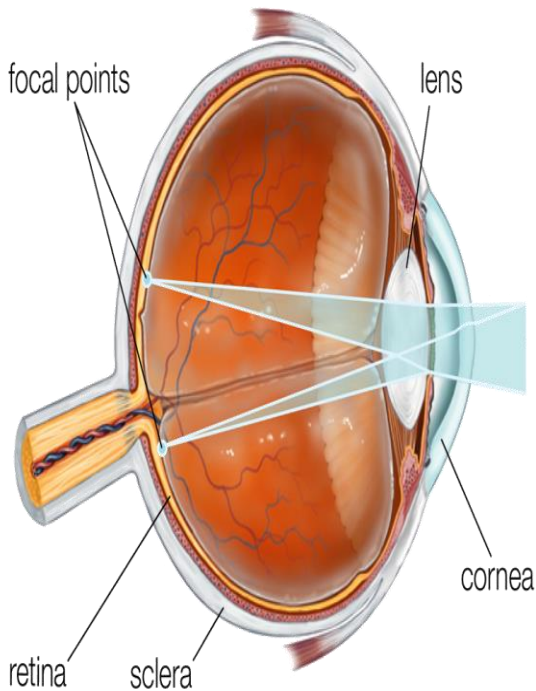


# Astigmatism

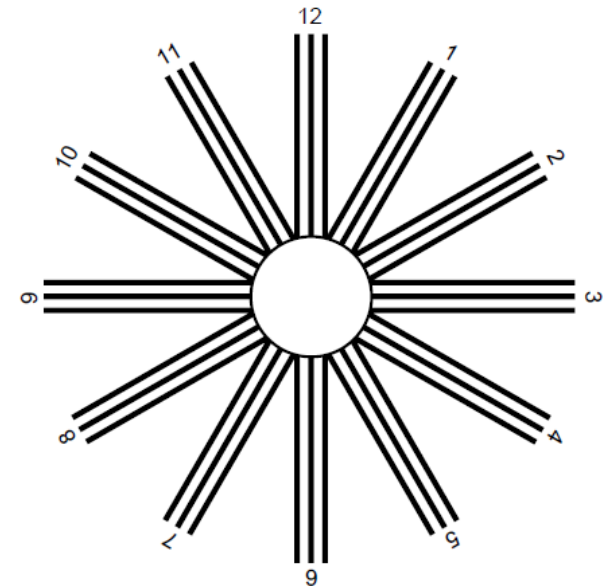
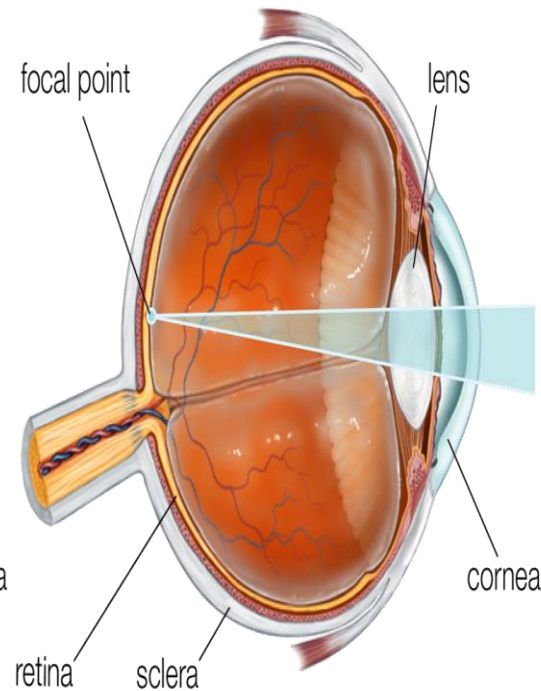
light rays focus at one focal distance in more than one focal plane



Astigmatism



Normal eye



- LAYERS OF RETINA (10 layers), the most important are :-

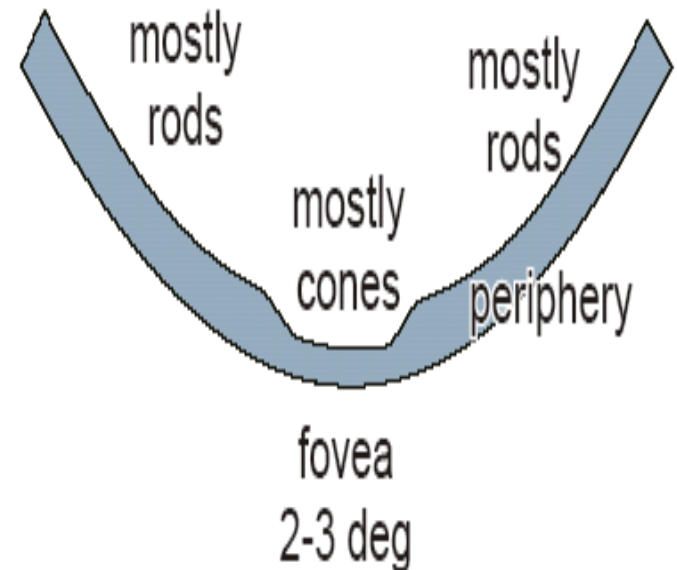
1-pigment cell layer ( vit A ) ( outermost layer) .what is its value?  
(absorb light & prevent its reflection back)

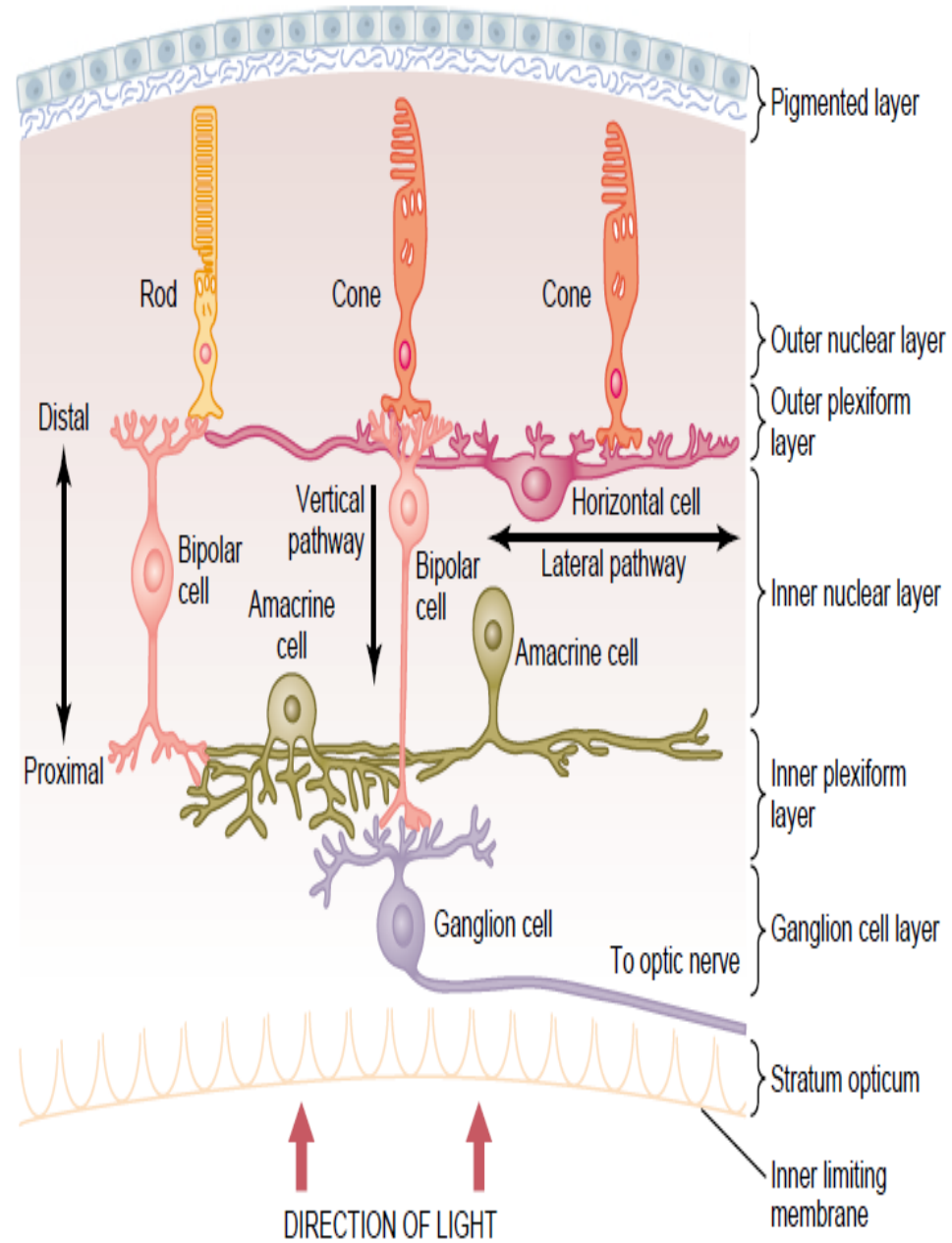
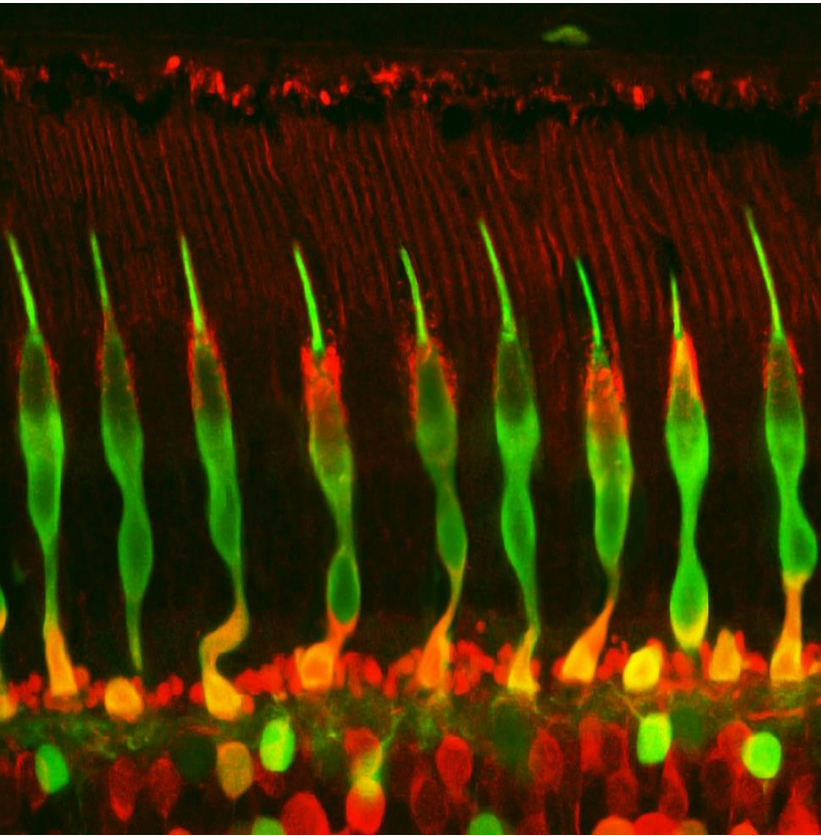
-The pigment layer also stores large quantities of *vitamin A*. This vitamin A is an important precursor of the photosensitive chemicals of the rods and cones.

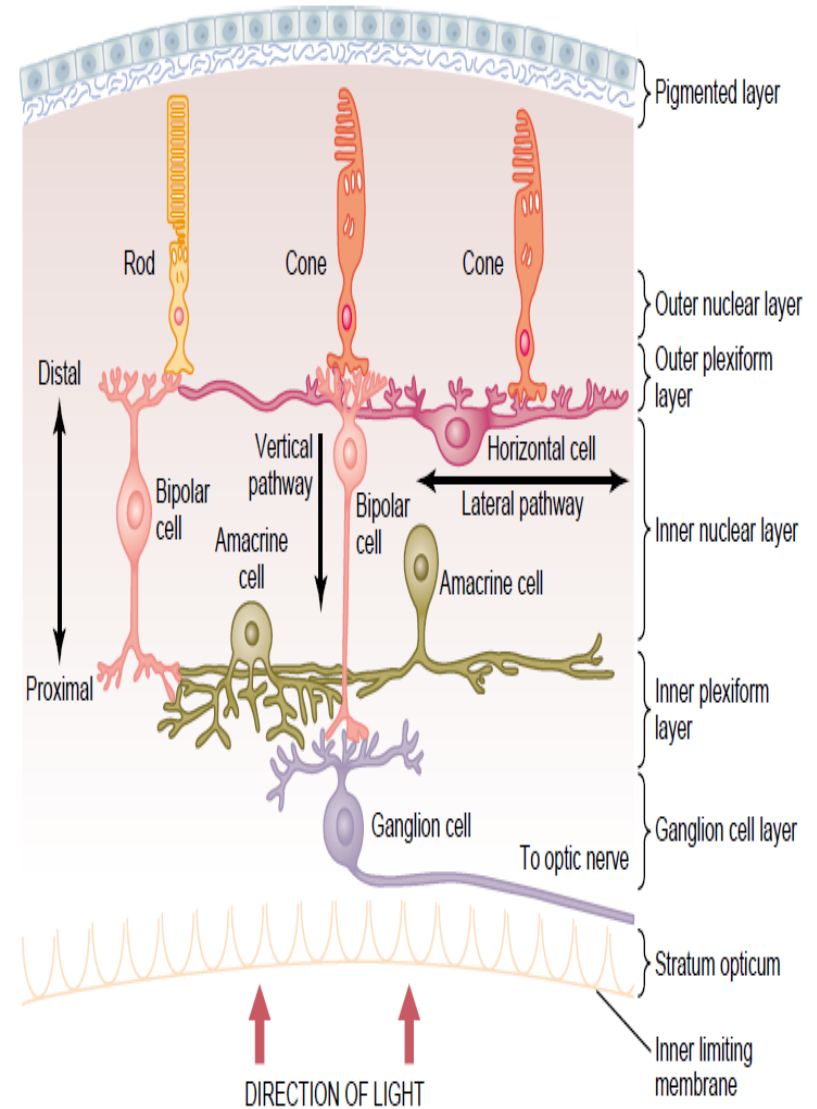
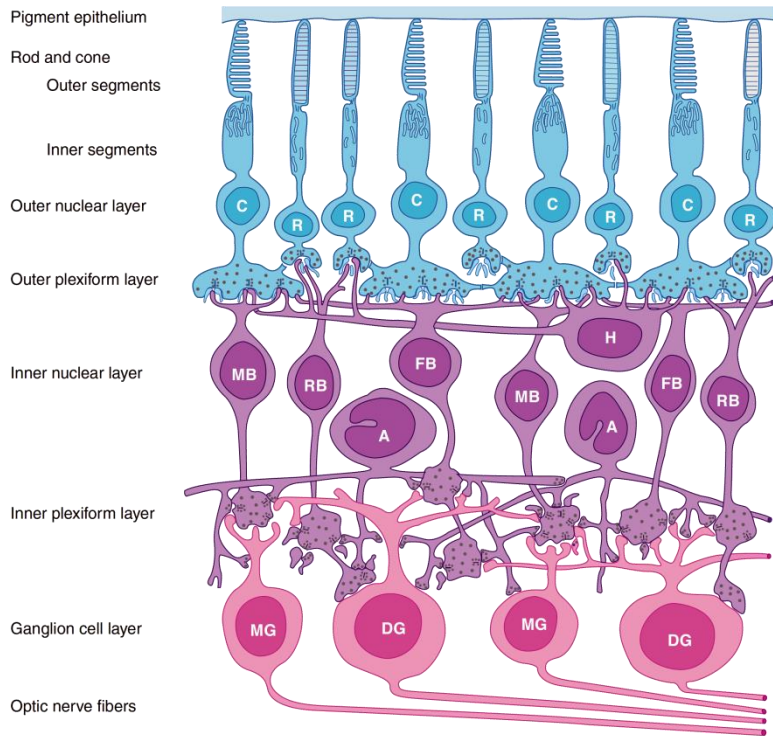
2- rodes & cones ( their outer& inner segments), but not cell bodies( rodes 90-120 million & cones 4.5- 6 million ) - describe their distribution.

photoreceptor cells are responsible for capturing light and transforming this into generator potential to be used by the nervous system

)







## RETINAL CELLS

- THE CELL BODIES AND PROCESSES OF THESE NEURONS ARE STACKED IN ALTERNATING LAYERS
- **there are five basic classes of neurones in the retina**
  - photoreceptors,
  - bipolar cells,
  - ganglion cells,
  - horizontal cells,
  - amacrine cells.

**3-outer nuclear layer( cell bodies of rods & cones)**

**4-outer plexiform layer mainly of Horizontal cells.**

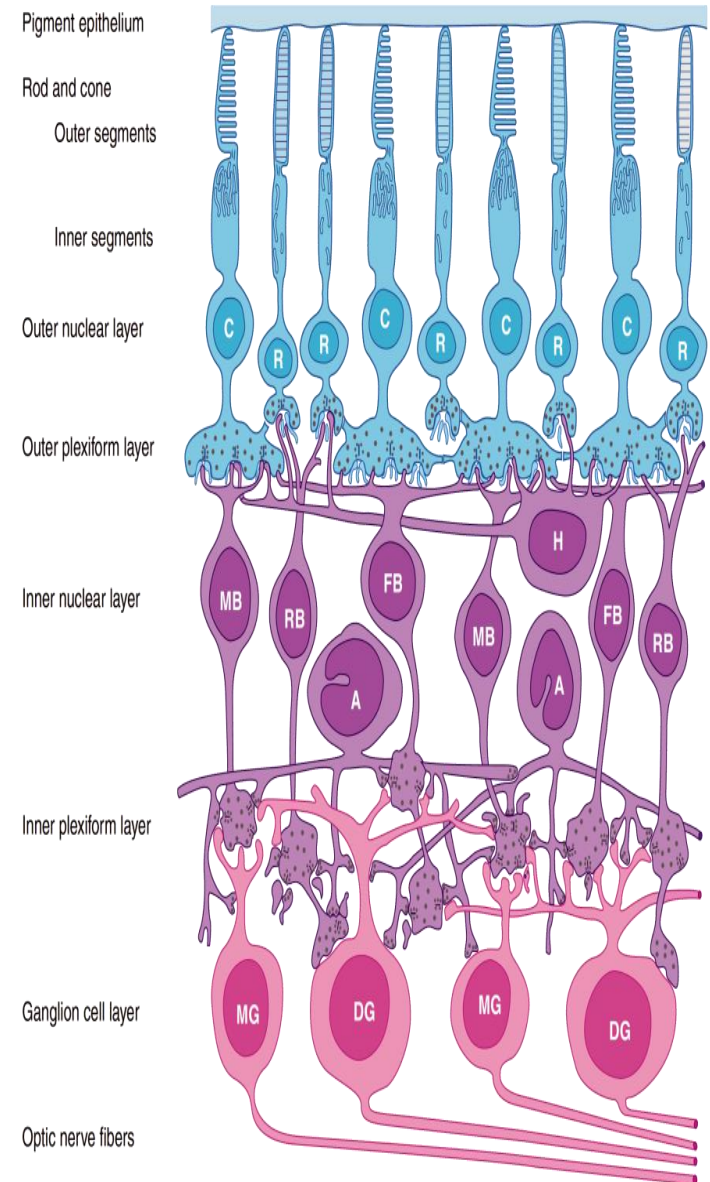
**5-Inner nuclear layer (bipolar cells)**

**6-inner plexiform layer.(amacrine cells) the inner plexiform layer is interposed between the inner nuclear and ganglion cell layers.)**

**7-Ganglion cell layer**

**8-Optic nerve fibers ( 1.2 million fibers)**

- # Horizontal cells (outer plexiform layer)  
(Make synaptic connections with receptors)
- # Amacrine cells (inner plexiform layer)  
(make synaptic connections with ganglion cells)

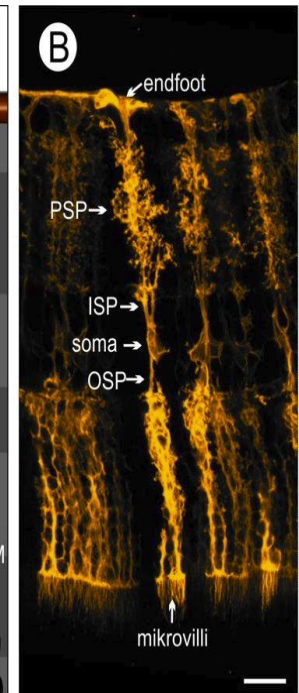
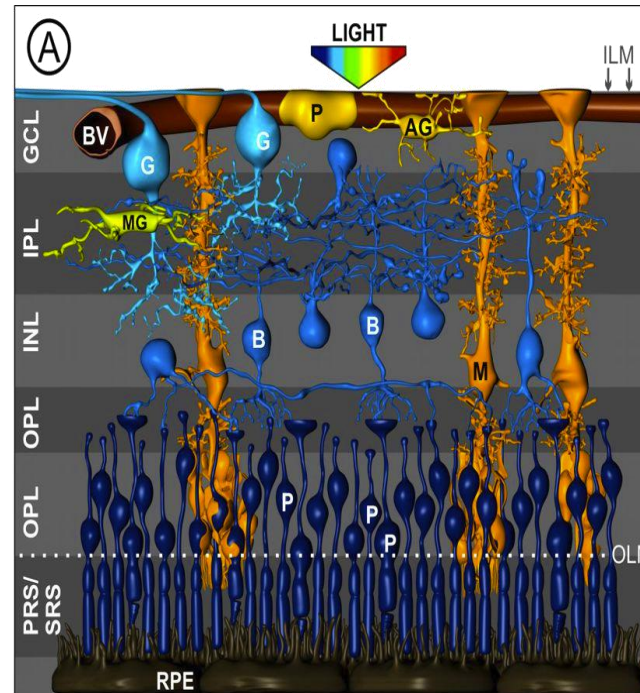


# Müller cells are the major glial element of the retina.

- located in the inner nuclear layer
- form architectural support structure providing metabolic support to retina
- maintaining synaptic levels of neurotransmitters.

**-they can be -**  
differentiate into a neural progenitor following injury to the retina,  
-act as light conductor which funnels light to the rods and cone CELLS.

**MÜLLER CELLS ARE SHOWN IN ORANGE**



# Light pathway in the eye:

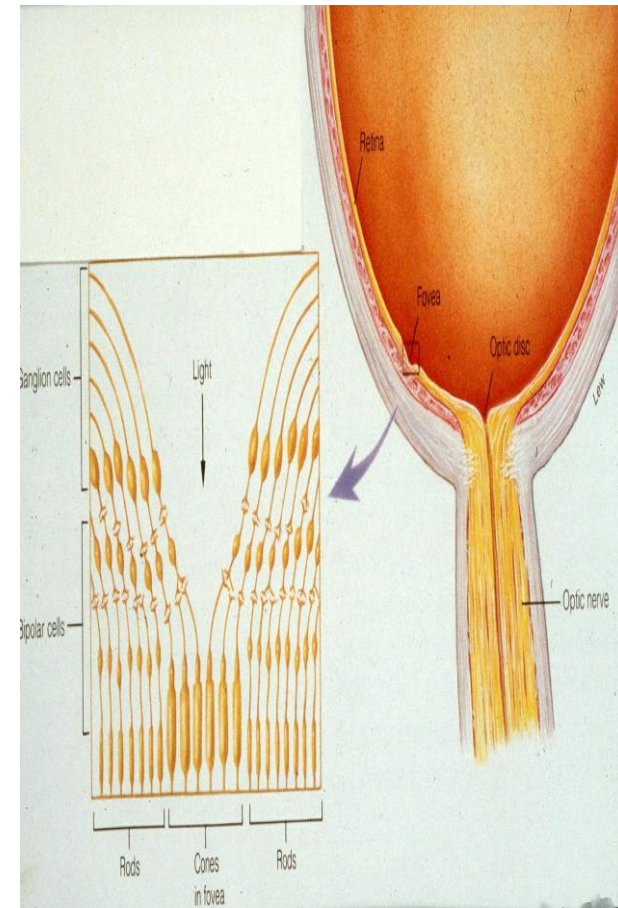
**After light passes through the lens system of the eye and then through the vitreous humor, it enters the retina from the inside of the eye**

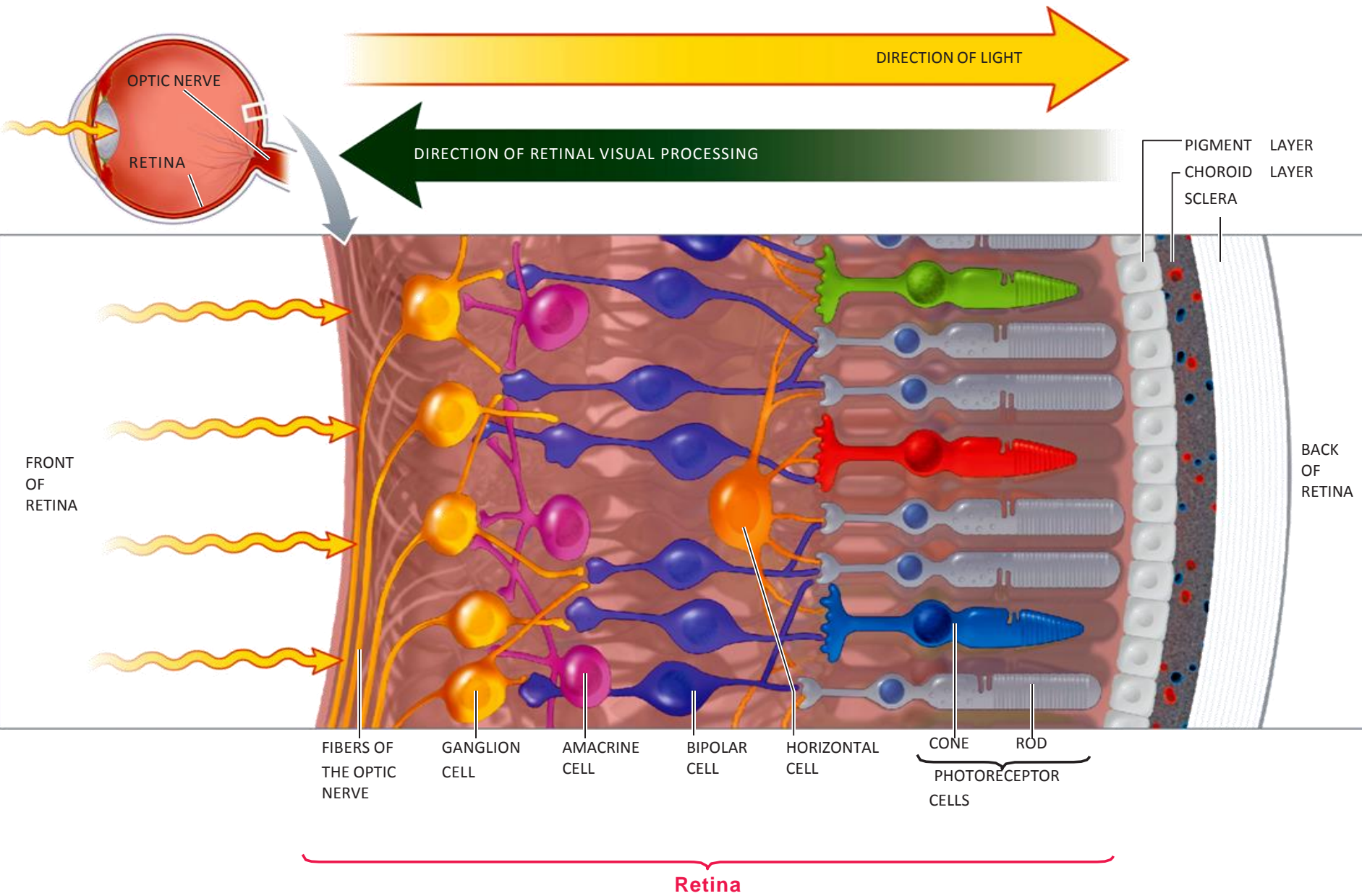
**-it passes first through the ganglion cells and then through the plexiform and nuclear layers before it finally reaches the layer of rods and cones located all the way on the outer edge of the retina**

**--Light absorbed by pigment cell layer that contain melanin pigment  
- impulses pass from rods & cones to rest of layers finally to ganglion cell layer ----- to optic nerve**

**The visual acuity is decreased by this passage through such non- homogeneous tissue.**

**-However, in the *central foveal region of the retina*, the inside layers are pulled aside to decrease this loss of acuity. This allows light to pass unimpeded to the cones.**





OPTIC NERVE

RETINA

DIRECTION OF LIGHT

DIRECTION OF RETINAL VISUAL PROCESSING

PIGMENT LAYER

CHOROID LAYER

SCLERA

FRONT OF RETINA

BACK OF RETINA

FIBERS OF THE OPTIC NERVE

GANGLION CELL

AMACRINE CELL

BIPOLAR CELL

HORIZONTAL CELL

CONE

ROD

PHOTORECEPTOR CELLS

Retina



*Thank you for  
listening*



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