

# The association between relative peripheral refraction and myopia

**Shabbir Saifuddin**

Deptt.of Ophthalmology, Dubai

Received: May 09, 2022, Editor Assigned: May 10, 2022, Reviewed: May 14, 2022, QC No. COS- AA0004;  
Proceeding No: Volume: 10, 2022 Published: June 20, 2022, Invoice No. OLP-00F2

## Abstract

**Objective:** To evaluate the relation between relative peripheral refraction and myopia by studying the characteristics of retinal peripheral relative refraction in children with emmetropia, low myopia or moderate myopia.

**Method:** 90 children (with 165 eyes included) at the age of 10-15 years old, who have attended to Pediatric Ophthalmology Clinic, Dubai Hospital in September 2017 to August 2018, were included in the study. Axial dimensions and peripheral refraction are measured to children. The 90 subjects with 165 eyes included were divided into three refractive categories according to the spherical equivalent based on objective retinoscopic findings under cycloplegia: Emmetropia group ( $>-0.5$  and  $\leq +0.50D$ ,  $n=27$ ), low myopia group ( $>-3.00D$  and  $\leq -0.50D$ ,  $n=112$ ) and moderate myopia group ( $>-6.00D$  and  $\leq -3.00D$ ,  $n=26$ ). Peripheral refraction was measured in uncorrected state along 15 degrees and 30 degrees from central fixation in both nasal and temporal fields. The relative peripheral refraction (RPRE) is described as the difference between peripheral refraction and central refraction.

**Results:** There is significant difference in RPRE among the three refraction groups, the RPRE is increased from emmetropia, low myopia to moderate myopia ( $p<0.05$ ). As changing of fixation angles, it decreases progressively from temporal 30 degrees, nasal 30 degrees, temporal 15 degrees to nasal 15 degrees ( $p<0.05$ ). The RPRE shows relative hyperopia in low and moderate myopia, which is greater at the surrounding retina than macular center ( $p<0.05$ ) and is greater at the temporal fixating angles than nasal's ( $p>0.05$ ) and the axial length is negatively relative with spherical equivalent refraction ( $r=-0.564$ ,  $p=0.001$ ) and is positively relative with RPRE, which is more strong to the temporal fixation angles, as the correlation coefficient in T30 °s', T15 °s', N15 °s' and N30 °s' RPRE are ( $r=0.347$ ,  $p=0.001$ ), ( $r=0.341$ ,  $p=0.001$ ), ( $r=0.199$ ,  $p=0.004$ ) and ( $r=0.199$ ,  $p=0.001$ ), respectively.

**Conclusions:** Peripheral retinal relative refraction status shows relatively hyperopic that increases vary from emmetropia, low myopia to moderate myopia. Occurrence and progress of myopia may have intimate connection with total field retinal hyperopic defocus, but it will play a greater role in the temporal retina.

## Biography

Author received post-graduate degree in Ophthalmology in 1987 from Mangalore University in India and has undergone clinical trainings at London (MOORFIELDS Eye Hospital) and Munich (University Eye Hospital) and has 35 years of experience as an Ophthalmologist. He has published over 30 papers in journals and at various regional and international conferences.

He is presently undergoing training for the MCh Ophthalmology degree