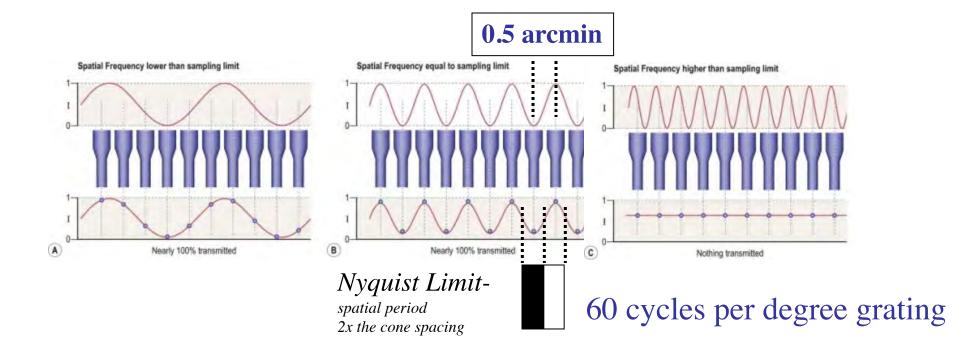
Adler's Physiology of the Eye 11th Ed. Chapter 33 - by Dennis Levi

http://www.mcgill.ca/mvr/resident/

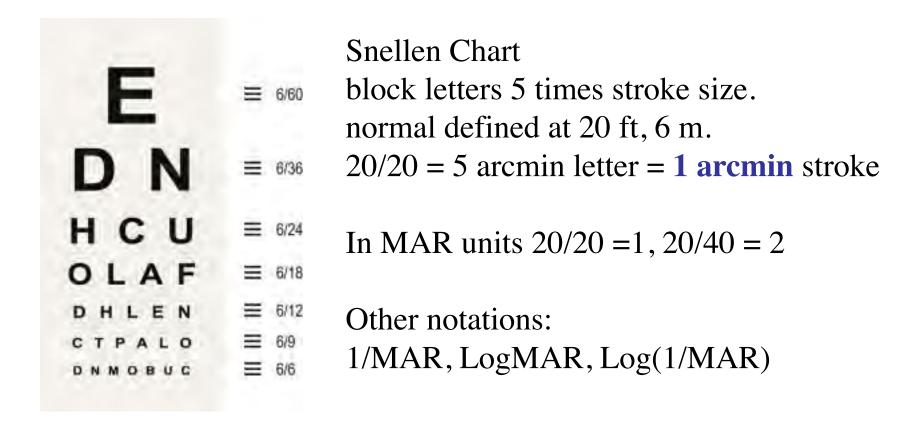


- Keeness of Sight, possible to be defined in different ways
- <u>Minimum Visual Acuity</u> detection of a feature, intuitive, has roots in astronomy, but not a spatial limit per se. Actually limited by contrast sensitivity, depends on background illumination, limit about **0.5** arcsec for a wire.

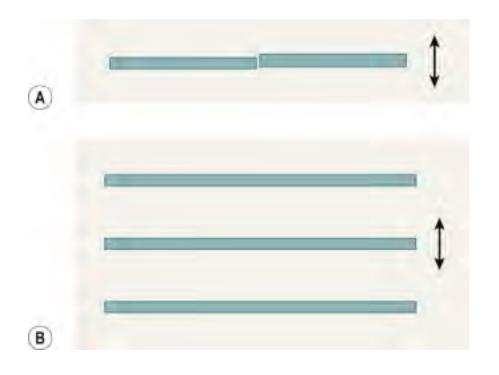
• <u>Minimum Resolvable Acuity</u> - separation of 2 features (i.e., double stars), finest high contrast detail visible, for width of light and dark bar of a grating, limit about **1 arcmin** (0.017 deg) for fovea. Determined by photoreceptor sampling



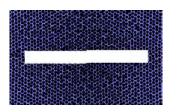
• <u>Minimum Recognizable Acuity</u> - angular size of the smallest Feature that one can recognize or identify

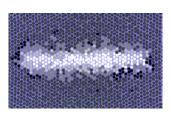


• <u>Minimum Discriminable Acuity</u> - angular size of the smallest *change* in a feature (e.g., position) that one can identify. Vernier acuity is termed a *hyperacutiy*, limit of **3 arcsec** (0.0008deg).

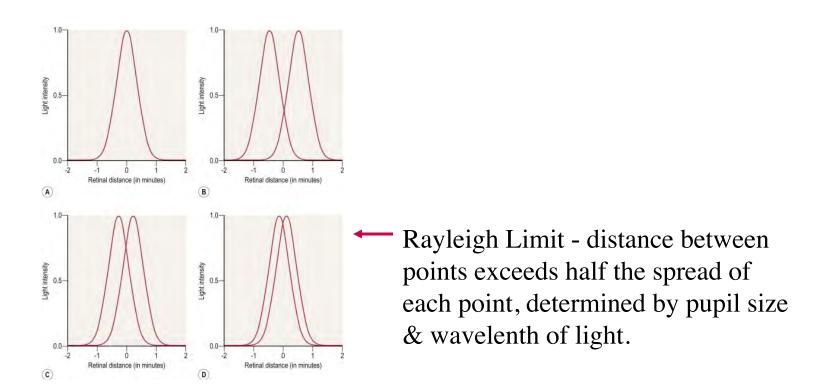


This is 10 times smaller than width of a foveal cone. Optics of eye spread out the photons, and the information to distinguish A from B is present, but it must be cortical neurons that interpolate this information with high resolution.

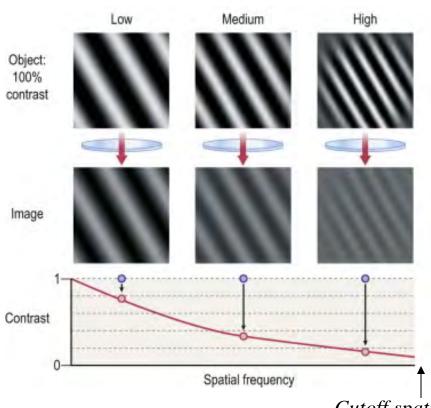




Optics of the Eye - far from perfect, spreads the retinal image, a point becomes a Gausian, called *point spread function* 



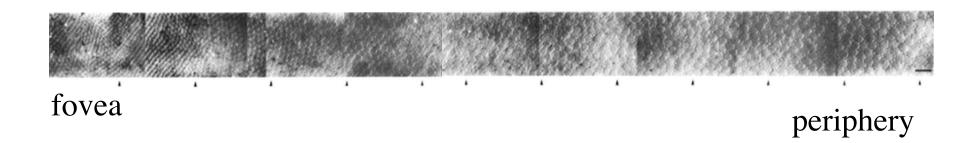
Optics of the Eye - far from perfect, sinewave gratings lose contrast, depending on SF, called *modulation transfer function* 



MTF - ratio of image contrast to object contrast for a range of SF.

Cutoff spatial frequency

<u>Photoreceptor Spacing - photoreceptors are densely packed in a triangular array, with foveal cones spaced about **0.5 arcmin**, so Nyquist sampling limit is 1 minute = 60 cpd.</u>



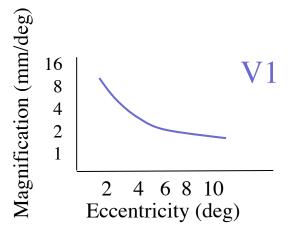
## Cone to ganglion cell convergence:

Fovea: 1 cone ->1 ganglion cell Periphery: many cones -> 1 ganglion cell \*Neurons matched to optics at fovea, but fall dramatically in periphery.

Eccentricity and Cortical Magnification Factor - Many visual Functions decline approx. linearly with eccentricity  $(E_2 = \text{eccentricity at which foveal value has doubled})$ . Peripheral vision is also limited by the CMF, which reflects retinal anatomy, but is further enhanced in cortex.



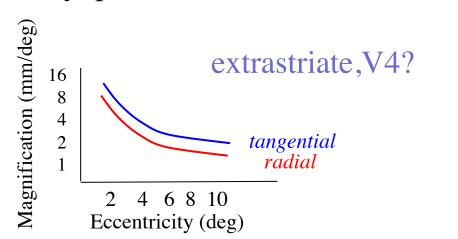
at fovea 1 deg = 20 mmat 10 deg 1 deg = 1.5 mm



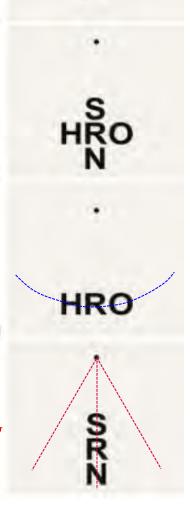
Crowding - In peripheral vision, the identification of a letter, which can be easily identified in isolation, is severely impaired by neighboring letters.

Spatial extent of crowing can be as much as 0.5 times the target eccentricity – significant.

In addition to theoretical interest, this has practical implications for testing vision, for reading, and for amblyopia.



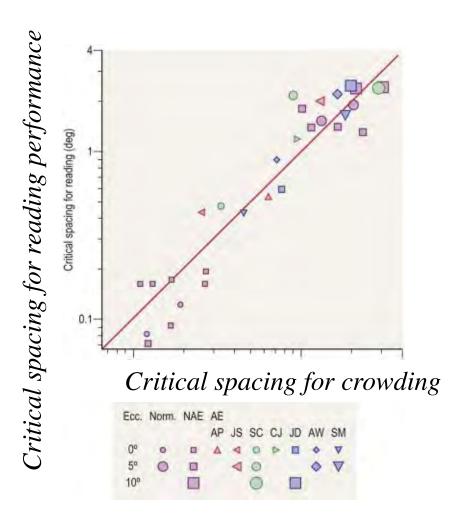
\*radial crowding is worst



B

C

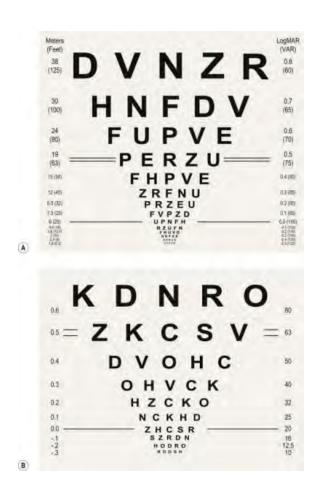
<u>Reading</u> - performance highly correlated with crowding, the Letter spacing seems to be more important than letter size.



<u>Luminance</u> - at moderate photopic luminance, visual acuity Remains fairly constant, however under very low luminance scotopic conditions, acuity is mediated by rods, at around 20/200

<u>Contrast</u> - visual acuity is strongly dependent on visual contrast, around 20/40 for 10% contrast, 20/60 for 5% contrast.

# Clinical Tests of Visual Acuity



### Modern Principles:

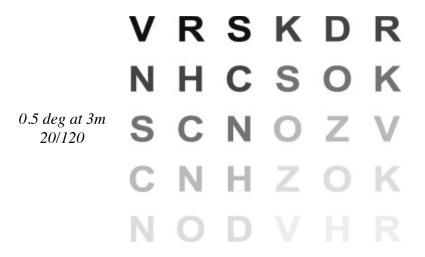
Same number of elements on each line Constant ratio from one size to the next Proportional spacing between letters and lines Nearly equal legibility of optotypes

Hence, V shaped appearance

\*Note however that crowding in periphery and Strabismic amblyopia follows a fixed not Proportional spacing rule

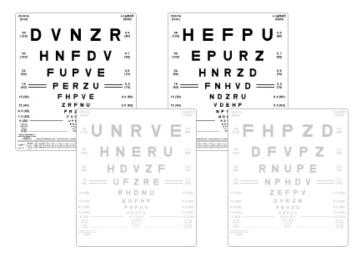
# Clinical Tests of Visual Acuity

#### Pelli-Robson CS Chart



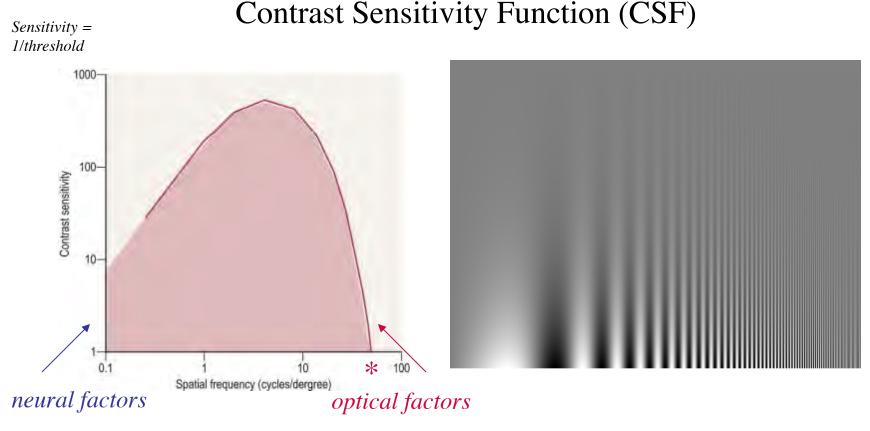
Although not routinely measured, several clinical chart tests of contrast sensitivity are available. They will emphasize different SF depending on letter size.

### Bailey-Lovie Chart



## Vision at Low Contrast

How can we characterize our sensitivity to larger objects, that may not have high contrast?



\* = resolution limit at 100% contrast

# **Contrast Sensitivity Function**

The CSF changes shape under different conditions. This reflects changes in neural substrates, e.g.

- scotopic (less high sf), mesopic, photopic
- static vs. flickering (less high sf)
- foveal vs. peripheral (less high sf)