

iCheckKids, SPOT, iScreen and
Plusoptix performance
in a high-risk, young
pediatric eye practice

Robert W. Arnold, MD, FAAP

M. Diane Armitage, certified orthoptist

Alaska Blind Child Discovery

Disclosures

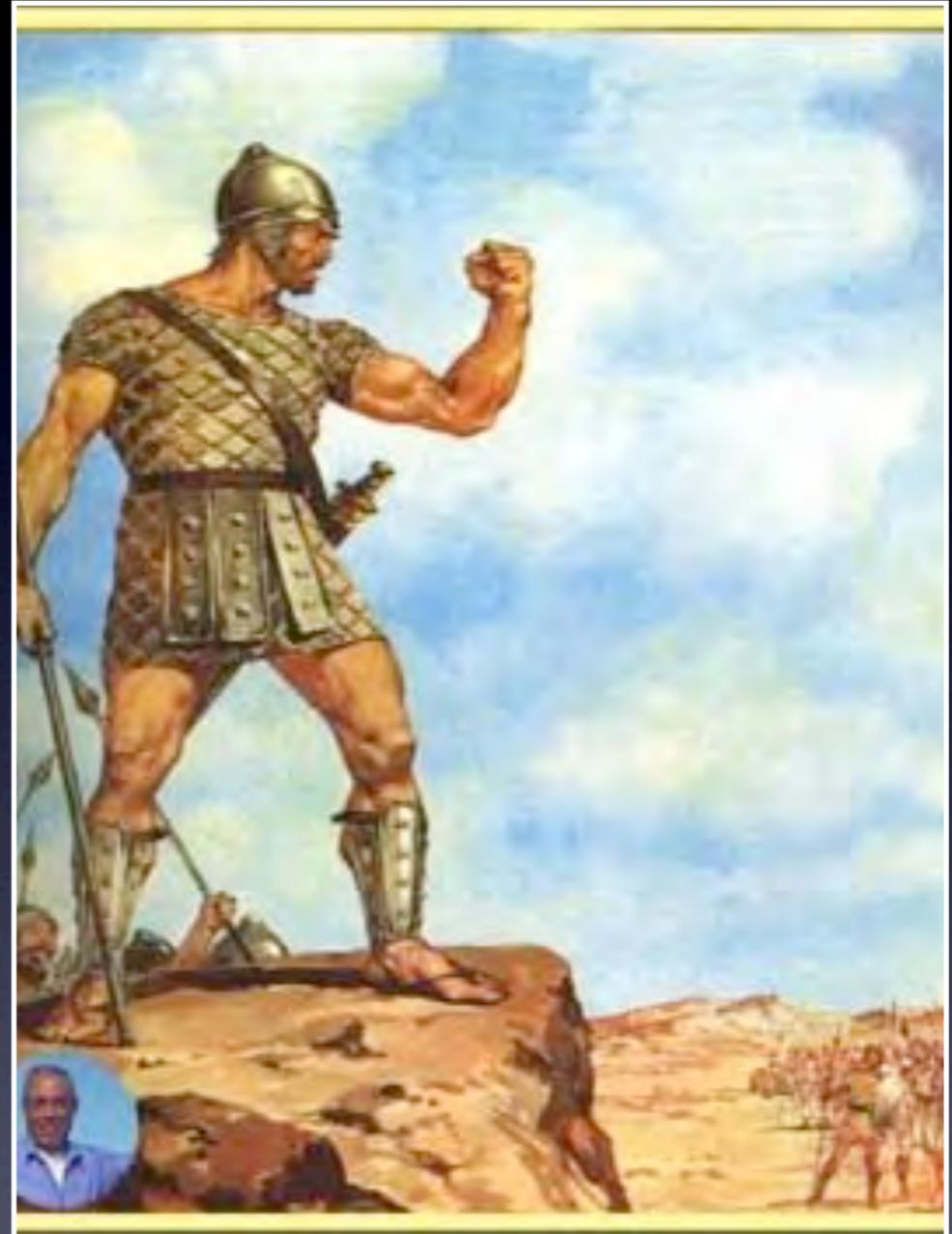
- ABCD has received discounted vision screen technology from several vendors and unrestricted grants from Walmart.
- Neither Dr. Arnold nor Miss Armitage has received direct compensation
- Dr. Arnold on board of Glacier Medical Software marketing ROP-Check
- iCheckkids not yet FDA approved

Historic Battle

- Can Pediatric Ophthalmologists do a better job of battling AMBLYOPIA before it is too late?

Amblyopia still a GIANT problem

Acuity-detected (age 3-4)
average 20/32 best acuity
Late detected microstrabismus
and eccentric fixation
Many never screened



Anti- Instrument Goliath

Acuity-only proponents
(not which but WHEN)

Financial Disclosure advocates =
anti-industry development

Treat amblyopia Late
(Wait until acuity is lost)

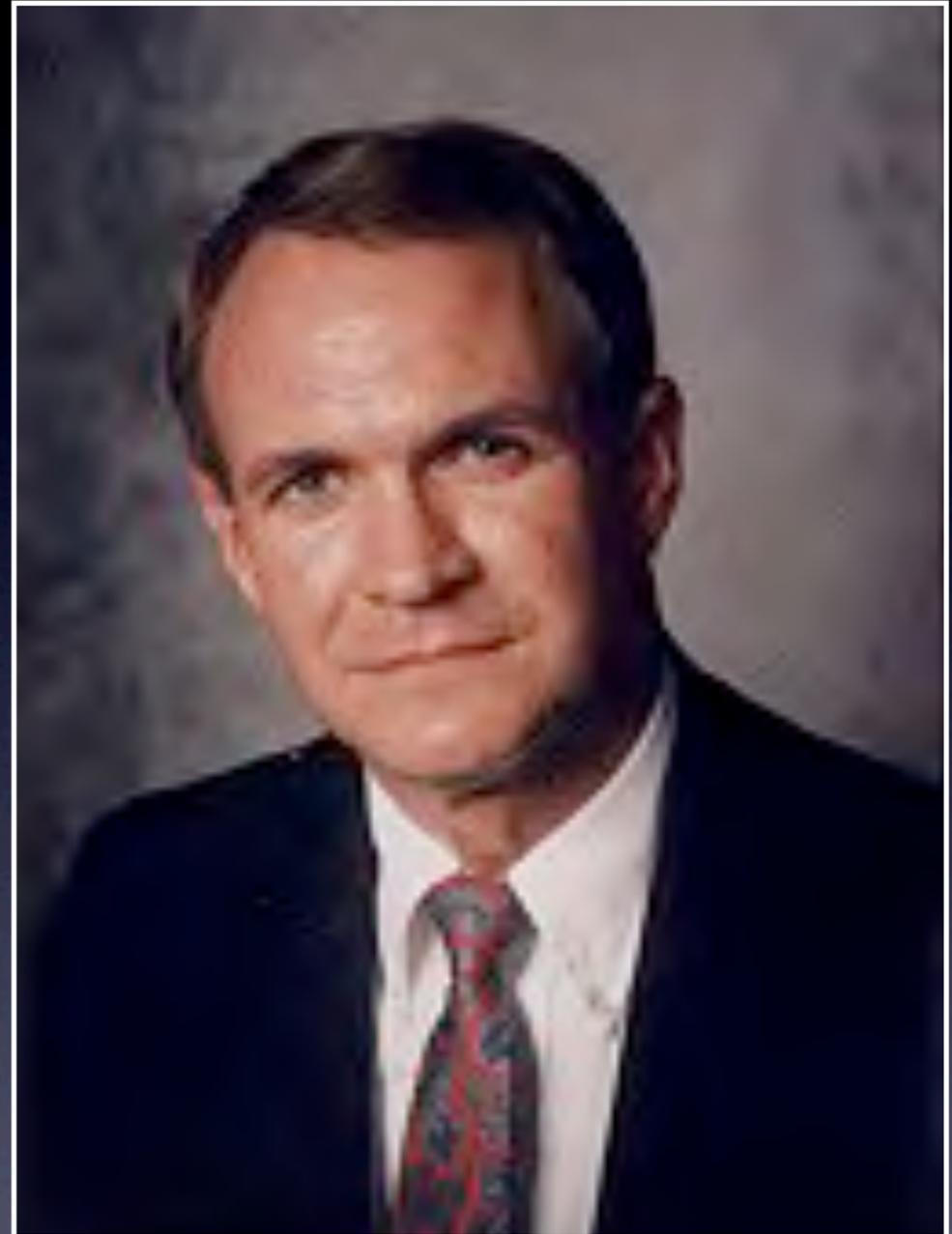
Single Sensitive preSchool vs
AAP series of specific screens



Who will battle
Amblyopia Goliath?

David Guyton

Advanced the merits of Dynamic
Retinoscopy and Brückner Test



Amblyopia GOLIATH Fighters



David Coats



David Wallace



David Morrison



David Stager Sr



David Granet



David Hunter

David Rogers

MTI > Welch Allyn Suresight
with David Plager



David Silbert

With Noelle Matta, comparative validation by AAPOS guidelines of emerging photoscreen technology



Methods

- HIPAA - IRB compliant
- AAPOS 2003 Validation Guidelines
- Consecutive children in pediatric eye practice
- Did not exclude developmental delay

Photoscreeners

- PlusoptiX A-09
- Pediavision SPOT (version 1.0.3, software 1.1.51)
- iScreen 3000
- iCheckKids iPhone 4s

“five smooth stones” 1Sa 17:40



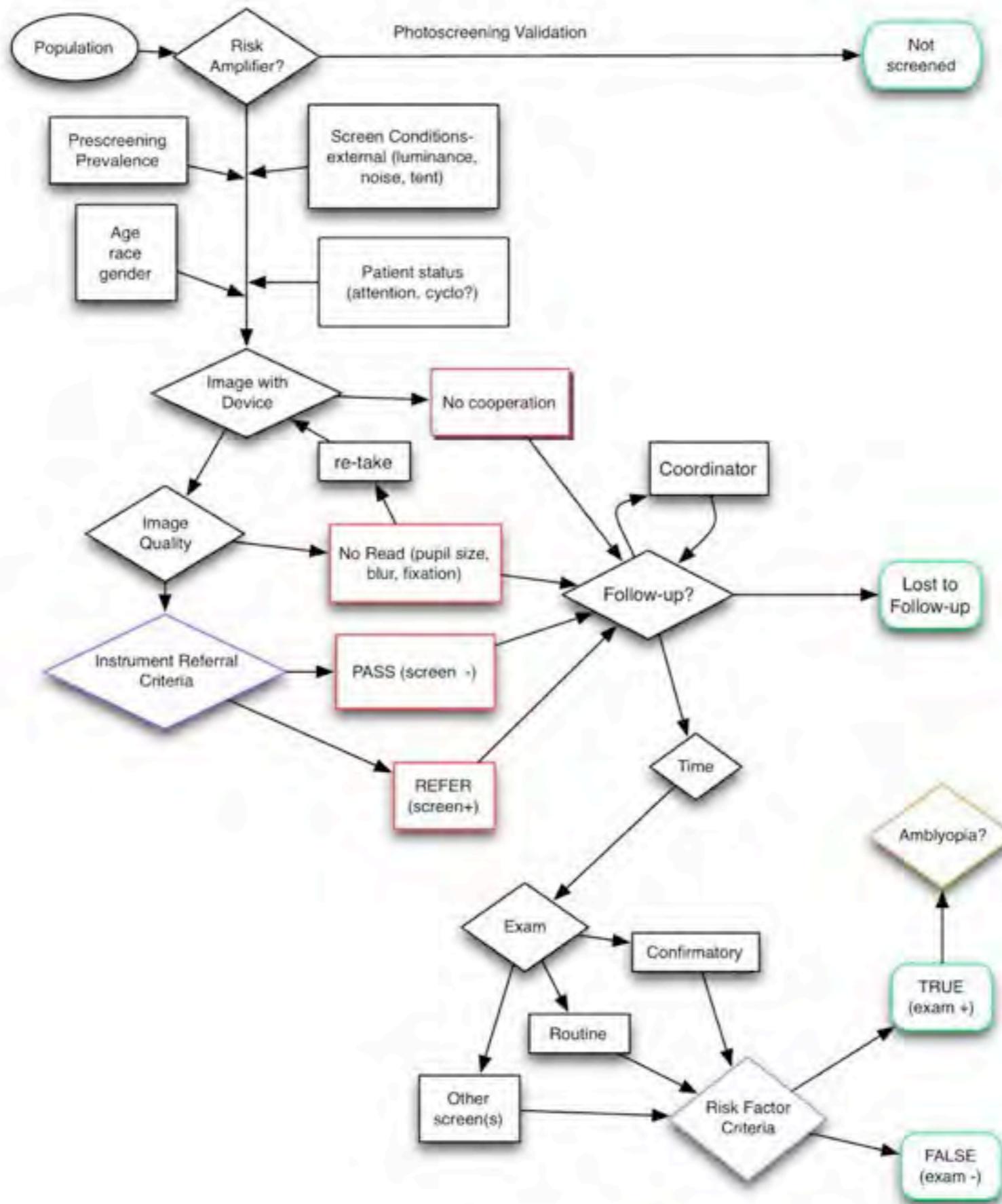
iCheckKids

iScreen

SPOT

PlusoptiX A09

Photoscreeners



Validation Statistics

	Exam +	Exam -
Screen +	A	B
Screen -	C	D

sensitivity $A/(A+C)$

specificity $D/(B+D)$

PPV $A/(A+B)$

NPV $D/(C+D)$

Validation Statistics

	Exam +	Exam -
Screen +	A	B
Screen -	C	D
Screen i	E	F

sensitivity $A/(A+C)$

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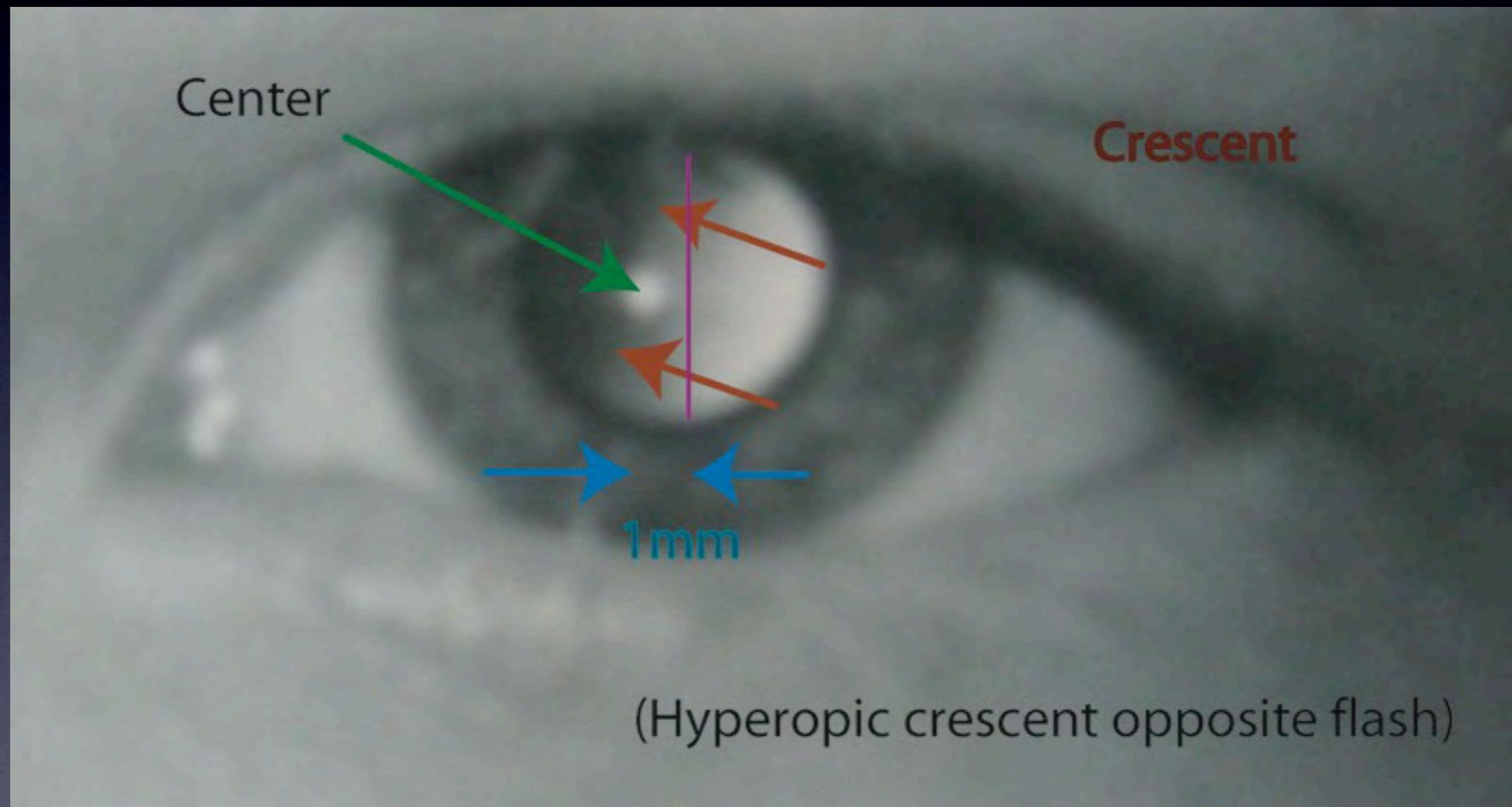
ABCD sensitivity $A/(A+C+E+F)$

ABCD specificity $D/(B+D+E+F)$

ir sensitivity $(A+E)/(A+C+E)$

ir specificity $(D+F)/(B+D+F)$

Delta-Center Crescent





iCheckKids on iPhone 4s

Results

- n=108
- Age: mean 47 months (9-146 months)
- Pre-screen Probability 56% (normal 21%)
- Autism/Delays 10%

Risk Factors

- Refraction:
 - average +0.5 + 1 cyl
 - spherical equivalent from -22 to +6
 - Anisometropia: n=10 over 2.0 diopters
- Strabismus: 11, Nystagmus: 1.

“False negatives”

- Intermittent strabismus (10-30 PD): n=9
- small 1mm cataract: SPOT-, Plusoptix-?, iScreen and iCheckKids-refer

2003 Aapos

	Plusoptix	SPOT	iScreen	iSc-DCC	iCheck
A	34	45	40	55	47
B	5	7	5	6	4
C	7	11	13	5	11
D	37	41	36	42	43
E	19	4	7	0	2
F	6	0	7	0	1
Sensitivity	83%	80%	75%	92%	81%
Specificity	88%	85%	88%	88%	91%
PPV	87%	87%	89%	90%	92%
NPV	84%	79%	73%	89%	80%
ABCD Sensitivity	52%	75%	60%	92%	77%
ABCD Specificity	55%	79%	65%	88%	86%
irSens	88%	82%	78%	92%	82%
irSpec	77%	85%	75%	88%	90%

sensitivity = $A/(A+C)$

specificity = $D/(B+D)$

positive predictive value = $PPV = A/(A+B)$

negative predictive value = $NPV = D/(C+D)$

prescreen probability = $(A+C)/(A+B+C+D)$

false positive = $B/(A+B)$

False negative = $C/(C+D)$

ABCD specificity = $D/(B+D+E+F)$

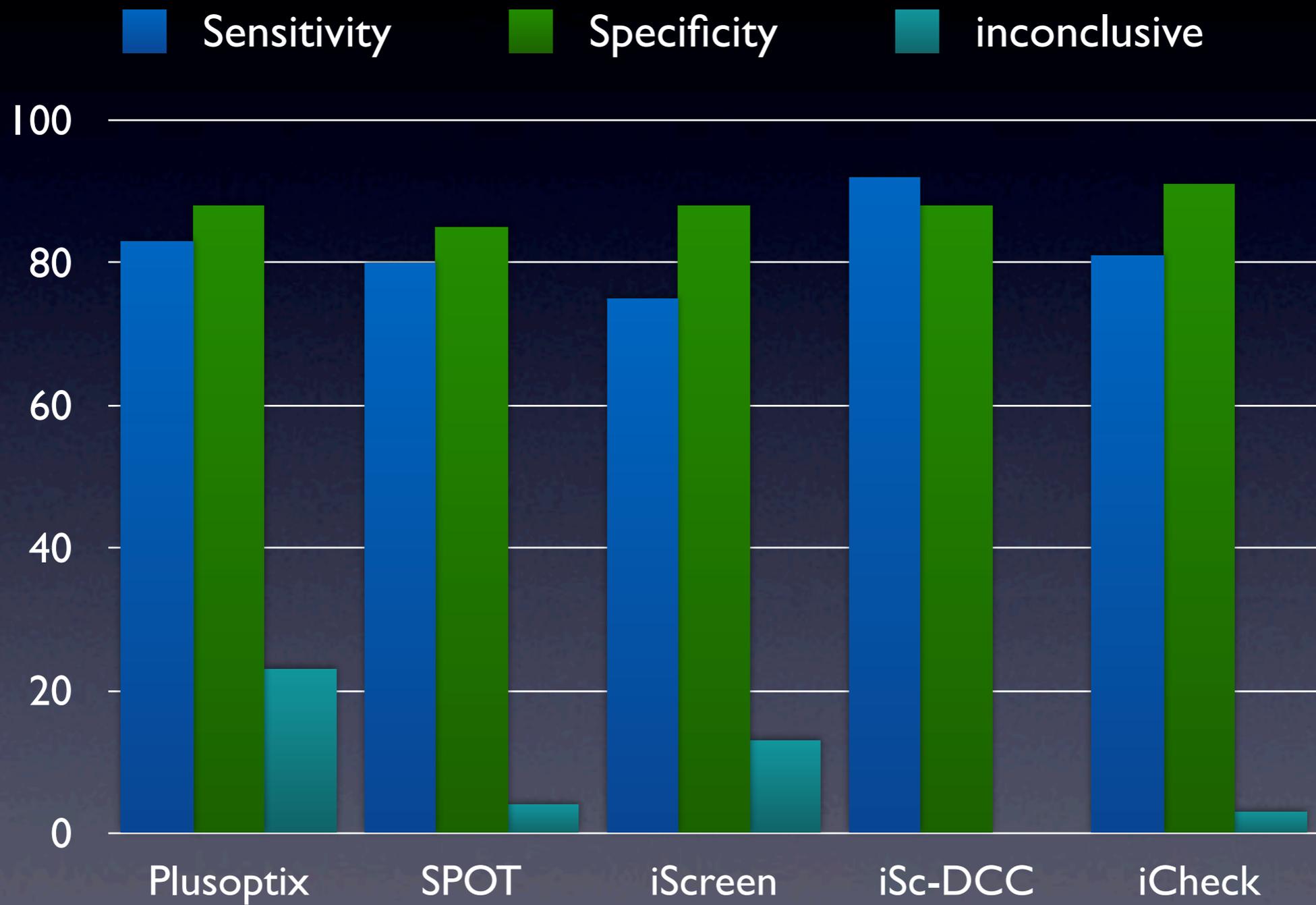
ABCD sensitivity = $A/(A+C+E+F)$

irSens = $(A+E)/(A+C+E)$

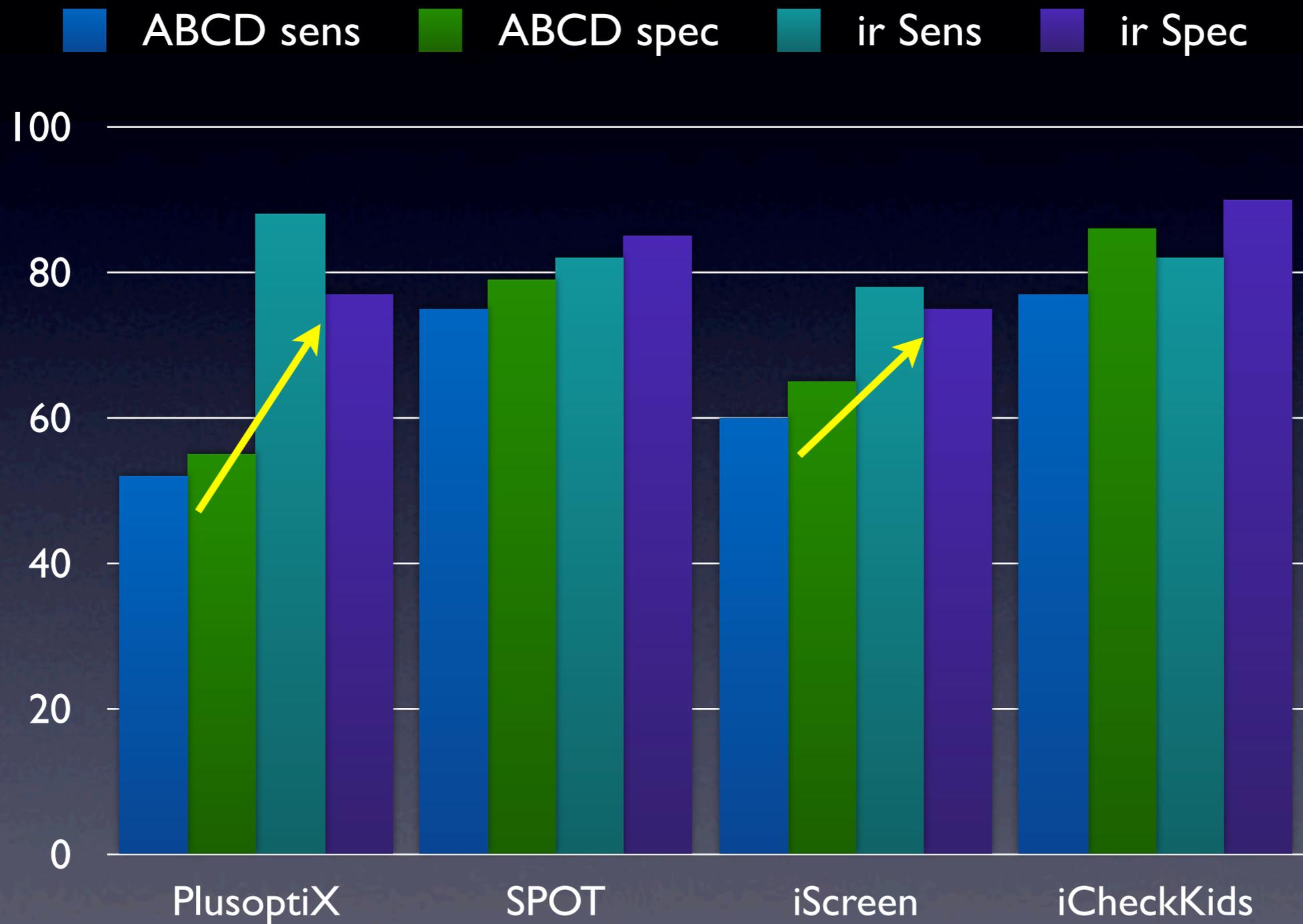
irSpec = $D/(B+D+F)$

	Exam +	Exam -
Sc +	A	B
Sc -	C	D
Sc i	E	F

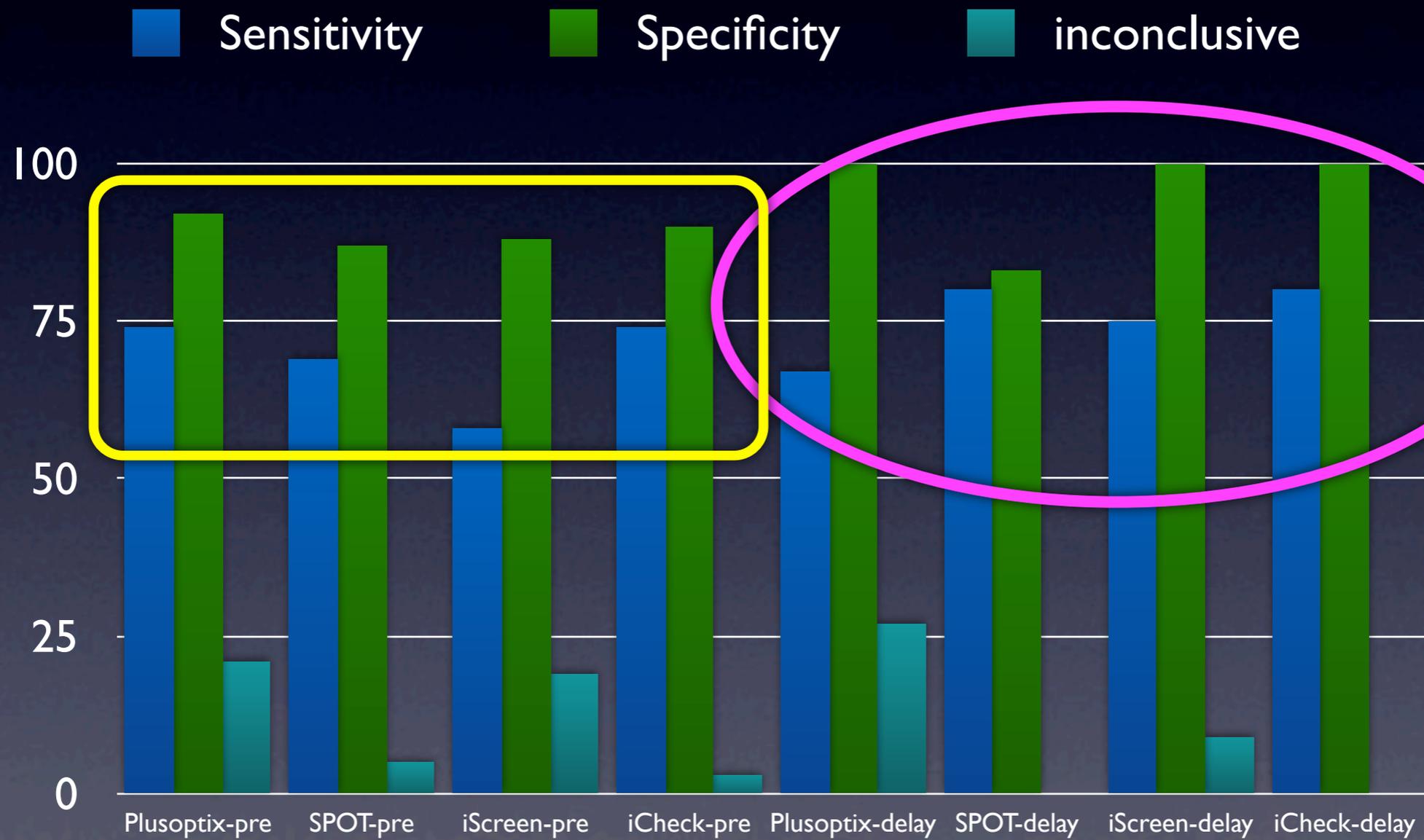
Photoscreen Validation



Inconclusives



preSchool and Delays



Discussion

- **All 4 photoscreeners effective**
- iScreen particularly useful in children with difficult fixation and attention
- iCheckKids yielded useful photoscreen images
- Inconclusive images best considered as “referrals”
- Similar to Matta / Silbert validation studies

Limitations

- High prescreening probability (56% vs 21%)
- Special Needs
- Some older (autistic)
- Same examiner and interpret (DCC)
- Initial experience with iCheckKids

Summary

- New photoscreeners can hit their target, even in high-risk young and special- needs children
- Combined with CPT 99174 and new AAP photoscreen endorsement, effective weapons against the Amblyopia Goliath



David Huang

Adapted iPhone technology to
obtain valid photoscreen images.

Developing interpretation
software.



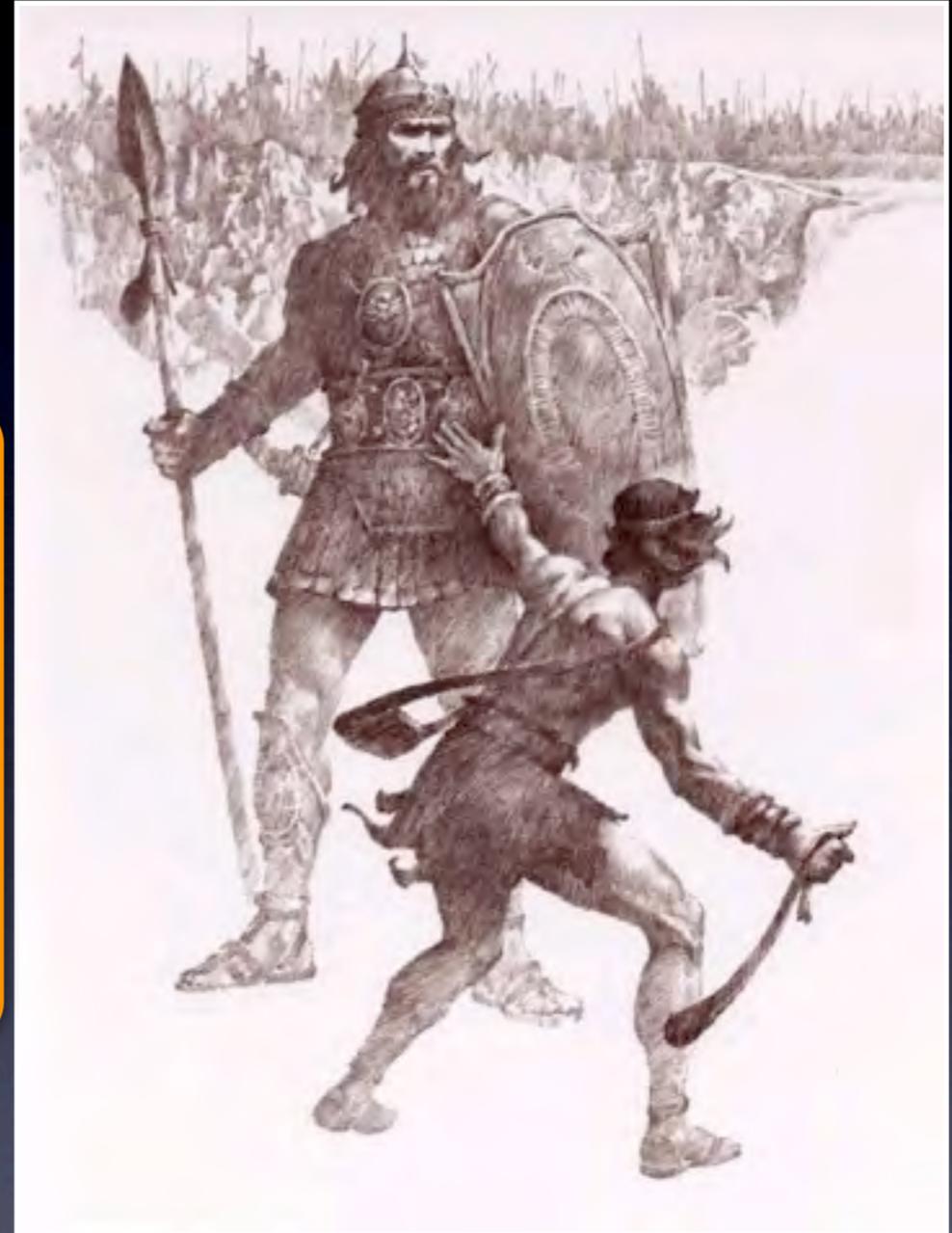
Davids vs Goliath

*Turning Point in the
Photoscreener Battle:*

Charitable
Research

20 years

Practical
Reimbursed
Pediatric
Tool



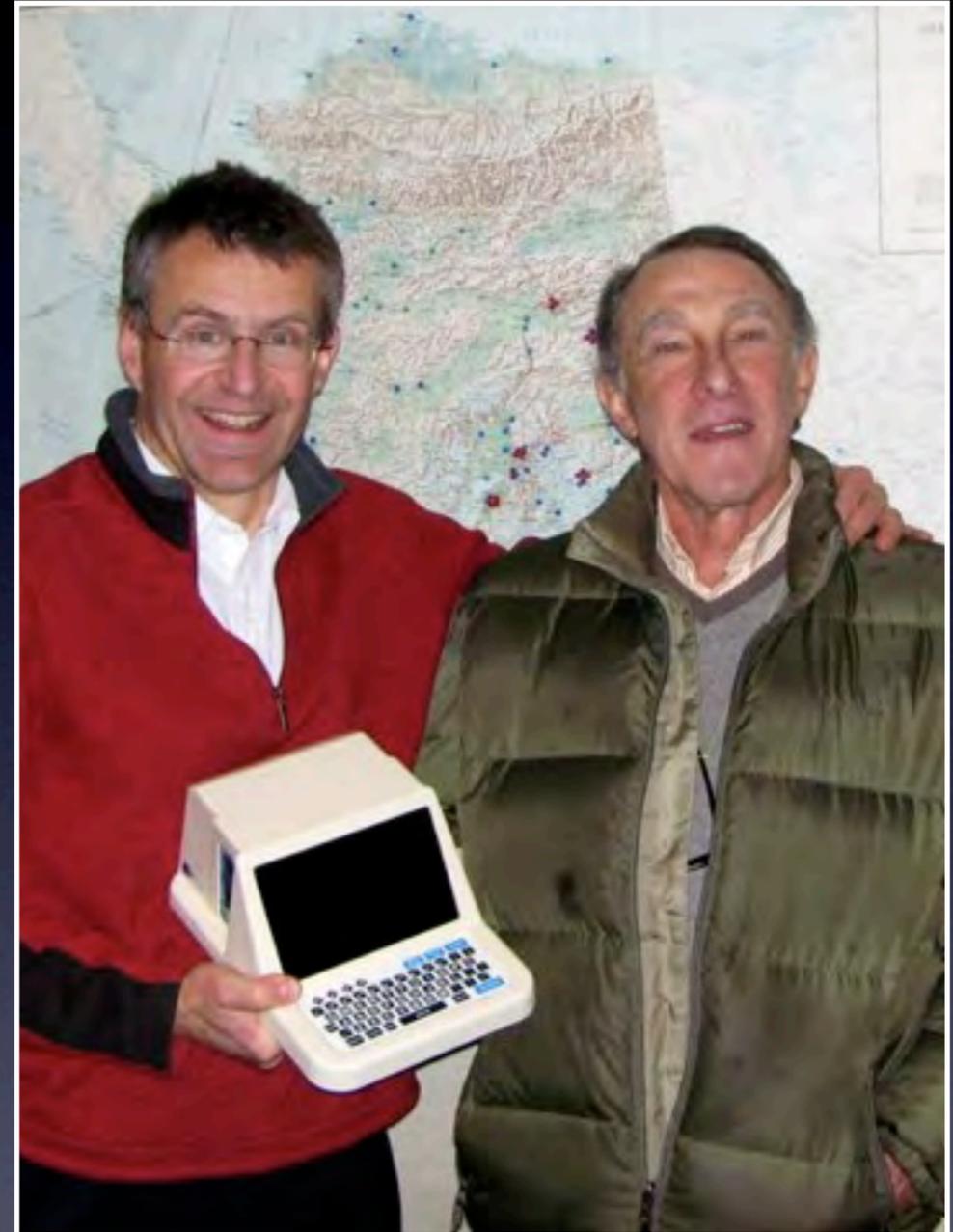
Goliath vs non-Davids

Howard Freedman still
using objective
technology that was
spurred by his
development of the MTI
photoscreener



Goliath vs non-Davids

Jack Bellows founded iScreen
and invested to obtain CPT
99174.



Goliath vs non-Davids

Sean Donahue:
Vanderbilt Ophthalmic Image
Center, MTI and many
photoscreeners, AAPOS
Uniform Guidelines

