Betty Slezak’s low vision won’t slow her down.

It won’t stop her from baking her famous banana bread with just a hint of rum, or taking trips this year to visit grandchildren.

And it won’t stop her from living life on her terms.

Several years ago, Slezak was diagnosed with macular degeneration in both eyes, robbing her of her center vision, ability to drive and eventually her daily walks.

So when Slezak’s ophthalmologist suggested she take advantage of the services offered by the

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Through useful low vision tips, Betty Slezak continues to enjoy cooking.

Low Vision Statistics

Recent statistics show that there are millions of people in the low vision community, and that organizations like the Weigel Williamson Center are going to be very, very busy in the coming years.

- More than 60 million Americans are considered to be at high risk for serious vision loss.
- Some 9 million American “baby boomers” report vision trouble, even with contact lenses or glasses.
- Approximately 13 million Americans have age-related macular degeneration (AMD).
- The number of Americans suffering from diabetic retinopathy will skyrocket from 5.5 million in 2005 to 16 million in 2050.
- Fewer than half of the estimated 4 million Americans who have glaucoma are aware that they have it.

When a Lighthouse National Survey was conducted in 1995, it was found that 14.5 million Americans age 45 and older indicated difficulty with at least one of these tasks: recognizing someone across a room, paying bills, identifying different denominations of bills and coins, reading newsprint or headlines, and functioning outside the house or local neighborhood. That number is expected to increase to more than 19 million people age 45 and older by 2030.

(Statistics taken from Ensight Skills Center, Inc. Newsletter, Fort Collins, CO, Jan/Feb 2010)
Dear Friends,

May I express to you my gratitude and appreciation for another exciting year of growth and development at the Weigel Williamson Center. I am in awe of where we started, how far we have come, and how far we have to go.

This past year the Nebraska Lions approved a plan to provide transportation services to clients who live outside the Omaha area. In an effort to increase awareness of our services in greater Nebraska, I recently attended a senior fair in Grand Island and made presentations at the 2011 Nebraska State Fair. As we continue with our efforts to increase community awareness of our services, I would like to challenge all of you who receive our newsletter to make an effort to pass it along to someone else after reading it.

The opportunity remains to support the work of the Center through the Dinsdale Endowment Fund. Such funding assists us in our efforts to continue to provide the time-intensive, in-depth clinical services necessary to meet the needs of those who are struggling with visual impairment.

Thank you for your interest and support. We are just ordinary people, but we are people with a mission—a mission to provide hope and help for all people with vision loss!

Sincerely,

John D. Shepherd, M.D.
Director

LOW VISION SUCCESS STORY

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Weigel Williamson Center for Visual Rehabilitation, she couldn’t wait to get an appointment.

“I was ready to get in there and find out what they could do to help me,” Slezak said.

Very quickly she learned that she had more vision than she realized.

“I may not have my center vision, but I learned I can see so much using my peripheral vision,” Slezak said.

For three months Slezak worked with Evy Katz, an occupational therapist with the low vision center. Katz trained her how to read a restaurant menu using a magnifying glass and how to use a CCTV, a machine that can magnify text, pictures and graphics up to 75 times.

She visited Slezak’s home and helped her enhance the lighting to help her navigate safely throughout her house.

And Katz also referred Slezak to the Nebraska Commission for the Blind and Visually Impaired for mobility training with a cane. Slezak continues to train with the Commission with the hopes of one day continuing her daily walks.

Through the process of her low vision rehabilitation, Slezak gained the confidence to fly to Washington to see her granddaughter and take a road trip to Wyoming to visit a grandson.

At first Slezak was scared, wondering if she would see anything on either trip but when she got there, she soon realized she didn’t need to worry.

“In Washington we rode a ferry and I saw dolphins jumping in the water,” Slezak said. Both trips were memorable moments she will never forget.

Most importantly, Slezak said, she learned to trust and work with the vision she has.

“If anyone is hesitant about going to the Center, they shouldn’t be. You have nowhere to go but up.”
Low Vision Rehabilitation
More than Magnifiers

When you are given a device by a low vision doctor that allows you to see print that you haven’t been able to see since your vision loss, it can be a great relief. You think “I could read newsprint today!” Then you get home and try to read your newspaper or book. Maybe it doesn’t seem so natural or easy. Perhaps your eyes get tired, your hand gets tired, and you feel frustrated and ready to throw that wonderful device against the wall.

Don’t give up. At the Weigel Williamson Center, low vision rehabilitation is more than just finding the best low vision devices. It’s learning how to properly use the low vision devices—and much more.

Most people with vision loss need training to make the best use of their remaining vision and their devices. Whether you have a hand held magnifier or very strong reading glasses, each device has a specific distance it must be placed from what you want to see.

If you have a central vision loss, you will need to learn to move your eyes across a line of print using your eccentric (off-center) viewing position. At the same time you will need to hold the magnifier at that correct distance. If you have a vision loss outside of your central area of vision, you may need training to move your eyes (scan) across a line of print without leaving out parts of words or sentences. You may also need training to get to the beginning of the next line of print without skipping a line.

Even if you are using your magnifier well, there’s more that low vision rehabilitation has to offer! By using adaptations and by using your remaining vision, you can explore new ways to complete activities you may have thought you’d have to give up. Training may also include exploring community resources and technology. Training with the low vision occupational therapist will give you the skills, support, and encouragement you need to reach your goals.

That new device is just the first step. Don’t stop there. Get the training you need to help you succeed on the rest of your low vision rehabilitation journey.

Question:
I have a friend that had a special test done in your Center. Can you explain how you were able to use the test to help her see better?

Answer:
Sure. We do a special eye test using an instrument called a scanning laser ophthalmoscope. This instrument lets us look at the macular (central) area of the retina and identify the location of the best areas of remaining vision. The best area of vision may not be straight ahead but instead may be off-center. Through training with our occupational therapist, a client can be taught how to line up the better areas of vision and use low vision devices to more effectively carry out activities of daily living such as reading or watching television.

How to Make a Gift
To make a donation to the endowment fund of the Weigel Williamson Center, contact Karen Levin at the University of Nebraska Foundation (402) 502-4921, or klevin@nufoundation.org. Gifts may also be made at www.unmc.edu/lowvision.
Gloria and Roy Dinsdale are passionate about helping others. And they typically do so in a quiet, meaningful way.

For example, their family member, Dr. Howard Dinsdale — Roy’s brother, dedicated himself to the work of the Low Vision Clinic (now the Weigel Williamson Center) at UNMC. The Lincoln ophthalmologist served as director of the UNMC Low Vision Clinic for several years, even after a 1989 car accident left him paralyzed and unable to continue his medical practice. He passed away in 2008.

“Howard was so devoted to the Low Vision Clinic, and he was such a caring, giving person” said Gloria Dinsdale. “We wanted to honor him with a gift to the Weigel Williamson Center to help those with low vision continue to live fulfilling lives.”

The Dinsdales’ recent gift supports the Howard A. Dinsdale, M.D. Low Vision Rehabilitation Endowment Fund. It also continues the couple’s legacy of helping others. The fund was established in 2008 at the University of Nebraska Foundation to support the critical, personalized, time-intensive services provided by the Center’s staff to its clients.

The Dinsdales, as well as their family business, Pinnacle Bank, are known for their generous contributions of time and resources to various organizations and community endeavors. They have been instrumental in helping rural hospitals and recruitment of medical professionals.

Yet their support of the Weigel Williamson Center is particularly important to them.

“When the University of Nebraska Foundation took us on a tour of the Weigel Williamson Center we were overwhelmed with what it offers. Its staff is very caring and professional, and its facilities are equipped with the best technology to help clients improve their lives,” Gloria said. “Our hope is that private support will further enable the Center to reach more people and touch more lives.”