

Editorial • Do You Possess Intellectual Binocularity? Have You Developed Intellectual Binocularity?

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As optometrists, practicing from a behavioral model, we are confronted with the challenge of trying to evaluate our patient's binocular process. On the surface it might seem like an easy task. Performing a cover test, measuring phorias, or having our patients complete a Van Orden Star, etc ... the list can go on and on.

The importance of binocularity, or rather the binocular process (the resolution of two disparate images) cannot be overstated. Hopefully, the values of elegant binocularity can be agreed upon as it allows humans to attain performance skills such as catching, grasping and locomotion. It also allows humans to walk over and around obstacles at a greater speed and with more assurance.

Observing, evaluating, and understanding our patient's binocular process affords us the ability to understand how they may, or may not, successfully operate in their world on a daily basis. But is that it? Is there such a thing as 'intellectual binocularity'? Does this type of binocularity develop as a separate capacity, in a reciprocal nature with the binocular process, or as a function of the binocular process?

The term intellectual binocularity was presented at this past year's Clinical Conference on Vision Care, by Dr. Greg Kitchener. Dr. Kitchener was referring to a metaphor that British philosopher Jonathan Glover

had conceived. Glover had said that, 'if we want to understand what sorts of beings we are in depth, we need to achieve intellectual binocularity.'

Glover further detailed this metaphor by saying that having two eyes that integrate slightly different information about one scene to achieve visual depth perception, being able to see ourselves through two fundamentally different lenses (interesting choice of words from a non-optometrist!), and integrate these two sources of information, can give us a greater depth of understanding ourselves.

What are these "two fundamentally different lenses" that Glover speaks of? Is it the ability to see ourselves as either figure, or ground? Is it that simple or that complex?

What about assessing our patient's binocular intelligence? How do we do that? It was mentioned, by Dr. Kitchener, that it might be in our observation if our patients can see the duality in things. The example that was readily described was the simple idea of observing our patients' responses during visual acuities. We ask, "What is the lowest line of letters that you can see to read?" Assuming they have an acuity of 20/20, do they read that line first? Do they start at the 20/60 line?

If they do not possess acuity of 20/20, do they say the bottom row, yet are unable to read it when asked? The question of what the lowest line of letters that can be seen to read is asking the patient to process multiple concepts simultaneously. Does their ability, or inability, allow us to make assumptions of their intellectual binocularity?

This is indeed an example that is easily understood by the optometrist, in an opto-metric setting. Is there a non-optometric setting that might allow us to become aware of one's intellectual binocularity? If you answered, "YES!?" Well, you just won a solar powered flashlight! Congratulations!!