DALTONIANA

NEWSLETTER

OF THE INTERNATIONAL RESEARCH GROUP ON COLOUR VISION DEFICIENCIES

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Nr 4 - 15th may 1972

LITERATURE SURVEY

Absolute judgments of colors using natural color names, by A.CHAPANIS and Ch. OVERBEY (Johns Hopkins Univ. Baltimore, Maryland 21218), Perception and Psychophysics 9/4, 356-360, 1971.

Ten male and ten female subjects, ages ranging from 18 to 24 years, with normal color vision, were required to select from a list of 36 common color names the correct color name for each of 36 Munsell chips shown one at a time in a 1 in sq aperture of a neutral gray screen. These were illuminated by 24 fc. The appropriate set and its color names had been determined in a previous study (Chapanis, Amer. Sci. 53, 327, 1965). On the first trial with no prior training and without even having seen the set of stimuli not a single color was identified correctly by all 20 Sc. On the 10th trial every single one $oar{arepsilon}$ the female Ss identified all 36 colors correctly while the male Ss averaged 34.6. The data suggest that a training period is necessary, however not an extensive one. Application of the results for selection and use of colors for coding purposes, and problems about validity and methodology of absolute judgment experiments in general are discussed to a degree. - Ingeborg Schmidt.

Color name as a function of surround luminance and stimulus duration, by M.H. SIEGEL and A.B. SIEGEL (Albion College: Albion Mich. 49224), Perception and Psychophysics 9/2A, 140-143, 1971.

The effects of both exposure duration and surround luminance upon color naming were studied on 3 normal subjects by using monochromatic stimuli of 28 different wavelengths and with a subtense of 3°. These were viewed oveally through a 3 mm artificial pupil in a white surround screen. The spot was maintained at a luminance of .5 fL. Three stimulus exposure times, .02; .06 and .10 sec were

combined with 3 surround luminances, .1, .5 and 1.0 fL. Some systematic changes in color appearance did result when surround luminance interacted with stimulus duration but changes in surround luminance alone did not have any substantial influence on color position. The data do not present any clear pattern of a Bezold-Brücke shift nor do they indicate the presence of foveal tritanopia. -Ingeborg Schmidt.

On the fine structure of the luminance-time relationship. I - The range where time summation is partial, by L. MARCHE and O. NOVAKOVA (Instituto Nazionale di Ottica, Arcetri, Florence 50125, Italy), Atti Fond. G. Bonchi, 27/1, 40-54, 1972.

The luminance-time relationship is recorded at various eccentricities across the dark-adapted retina, by varying stimulus duration in small steps (5 msec), test spot size being 6'. The fine structure of the plot, in the range where time summation is partial, is such as to challenge the assumption that in this range experimental points are fitted by a single straight line with slope less than unity. This effect is investigated for stimuli of various spectral composition. Its conspicuity seems to be maximum for green light. It is tentatively ascribed to the coexistence, at a given retinal location, of receptive fields with different time constants. - Lucia Rositani Ronchi.

Literature review of human ocular absorption in the visible, by D. VAN NORREN, Institute for Perception RVC-TNO, Report No 12 F 1972-8.

All major studies on human ocular absorption (the macula not included) are gathered. From every paper important data like wavelength interval, age, and a figure of the ocular absorption curve are copied. After a discussion on the age effect, the following curve is proposed, which represents the absorption of the average 30 years old observer: wavelength (nm) 390: density 2.16; 400: 1.70; 410: 1.12; 420: 0.85; 430: 0.67; 440: 0.57; 450: 0.53; 460: 0.50; 470: 0.48; 480: 0.46; 490: 0.44; 500: 0.43; 520: 0.40; 540: 0.38; 560: 0.36; 580: 0.34; 600: 0.33; 620: 0.32; 640: 0.31; 660 - 700: 0.30. - Guy Verriest.

The influence of age on the human visual functions (L'influence de l'âge sur les fonctions visuelles de l'homme), by G. VERRIEST (Dept. Ophthal., Univ. Ghent), Bull. Acad. roy. Méd. Belg. VII, 11/8, 527-577, 1971.

After having sketched the anatomical and histological background, the author describes and precises the different known causes of the age conditionned alterations of the visual functions, particularly the modifications in retinal illumination due to the combined effect of the narrowing of the pupil and of the diminution of transparency of the preceptoral media. There after, the author retraces the evolution from childhood to old age of the different visual functions (absolute sensitivity, dark adaptation, differential sensitivity, visual field, spectral curve of relative luminous efficiency, chromatic discrimination, visual acuity, critical flicker frequency, electroretinogram and visual performance), reporting some personal contributions and guessing if the quantitative aspect of some alterations is sufficiently explained by the known causes. Some conclusions are drawn for what concerns the lighting problems and the priority of some fields of research work. - Author.

Unilateral colour vision disturbance. A family study by E.C. DE VRIES-DE MOL and L.N. WENT (Dep. Hum. Genet., Univ. Leiden, Leiden, Netherlands), Clin. Genet. 2, 15-27, 1971.

A man with a unilateral colour vision defect is reported. The defect of his right eye can best be defined as lying between deuteranopia and extreme deuteranomaly. left eye was unusual in that it gave a normal Rayleigh equation on the anomaloscope but abnormal readings, classical for red-green defectives, with the Ishihara test plates. Two cousins and an uncle had bilateral colour vision defects closely resembling the defect from the right eye of the proband. Various explanations were sought for the findings, but ocular pathology, abnormal sex chromosome numbers, and mosaicism with Lyonization as well as somatic back mutation all seem to be unsati sfactory as such. Three other published cases of a unilateral colour. vision defect, 2 in women and 1 in a man are discussed. as is the presence of bilateral colour vision defects in l each of $\bar{3}$ presumably monozygotic female twin pairs. -Authors.

Contrast phenomena in anomalous colour vision (Kontrastphänomene bei anomalen Farbensinn), by R.G. FREY (II. Augenklinik der Universität Wien), Verkehrs-Medizin 18/10, 450-452, 1971.

After a brief historical survey relating to the introduction of the "Florkontrasttafeln", the author stresses that the so-called augmentation of contrast in defectives is a paradox, as we know that in them all thresholds for red and green are augmented. However the simultaneous contrast would be augmented (Köllner). Following Engelbrecht, it would be better to speak about false augmentation of contrast, especially in the anomalous trichromates. That phenomenon has been differently appreciated as aid in the diagnosis and in the pseudo-isochromatic charts. Although Engelbrecht trayed to improve the utilisation of "Florkontrastproben", 11% of 524 defective could perceived them completely. Hager stated that 9,9% (all deuteranomalous) from 121 defectives were not recognized. The author found that the test was negative in 5,9% of 270

defective and in 8,5% of 270 normal subjects. Beneath a red sheet the "Florcontrastprobe" was not correct in 13,7% of the defectives and in all normal subjects, so that this test is not appropriated for the diagnosis of total colour blindness (Jaeger). Experiments of the author by means of pigmentary tests and in order to detect a so-called pathological contrast augmentation (Velhagen) were performed in 300 defectives and 300 normal subjects; the augmentation was stated in the half of the anomalous triangements and in one tenth of the dichromates. The defectives, who make only a few errors in the reading of the pseudo-isochromatic plates, had also no false augmentation of contrast. — Ernst Heinsius.

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Techniques, merits and limitations of basic tests for color defectiveness, by G. FISHMAN (Eye and Ear Infirmary, Univ. Ill., Chicago, Ill.) <u>Survey Ophtabl.</u> 15/6, 370-373, 1971.

The basic color vision tests are here listed which enable the ophthalmologist to detect color deficiency, to specify its nature and to discern if the defect is acquired or congenital with relatively little preparation. The Ishihara and AO HRR plates are recommended as screening tests. Since each test has its limitations they should be administered together for greater reliability. The Panel D-15 and 100 Hue tests are utilized in classifying protan, deutan and tritan defects. For totally color-blind subjects the Sloan achromatopsia test is a valuable aid in diagnosis. The anomaloscope offers the most reliable quantitative analysis of protan and deutan defects. Acquired defects can be evaluated from interpretation of the results on the same tests. Some basic characteristics support the distinction of acquired from congenital color vision defects. - Ingeborg Schmidt.

The X-chrom lens, by H. ZELTZER, J. Amer. Optom. Ass. 42/10, 933-937, 1971.

The X-chrom lens is a corneal contact lens used monocularly to correct red-green color deficiency. The lens transmits substantially only the orange and med range of the spectrum from about 590 nm to 700 nm and bas a transmultibance of approximately 14% to 40%. Filters of other corors did not yield similar results. The lens is fabricated thin enough to permit at least visual aculty of 20/40 or better. It is effectively used by anomalous teichromats, less effectively by dichromats. It allows differences of shade to be perceived in spectral areas of confusion. Colors have the appearance of becoming more "alive". After a rapid learning process, proper identification of colors is achieved. Binocular use of the lens is ineffective. It can be used in either eye but it seems that on the non-dominant eye it is less annoying. A description of the fitting technique is given. The lens is generally worn a few hours each day but not

always daily depending on the purpose for correcting color deficiency. The author claims that the lens does not interfere with binocular vision. - Ingeborg Schmidt.

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Comments on the X-Chrom Lens, by I. SCHMIDT, J. Amer. Optom. Ass. 43/2, 199-201, 1972.

After reviewing the literature concerning successful attempts to improve color identification in red-green color deficients with the use of colored filters, the effects of Zeltzer's X-chrom lens on binocular vasion and analyzed. Among other effects, that of ensuing lustre when viewing areas of short wavelengths emission is considered. When observing apparently or actually moving objects one should expect phenomena corresponding to the Pulfrich effect; namely distortion in depth, size, and velocity and even nausea (Strickland, Ward and Allen, Rep. 6th Ann. Conference on Motorists Fision and Highway Safety AOA, Chicago, Oct. 22, 1965). This could be expected since the situation would correspond to that of wearing a neutral density filter in front of one eye. - Understandably the world appears more "alive" to the color deficient when using the filter. Unfortunately a report proving that the lens enables the color deficient to identify colors correctly and introduces no new mistakes is missing. In view of driver safety, further evidence is also needed in support of the authors claim that the lens does not interfere with binocular vision. Finally, since patients wear the X-chrom lens for only a few hours per day, and not necessarily on a daily basis, it is not evident why it should be prescribed in the form of a contact lens.

Reply of Harry I. Zeltzer. In his reply to the comment by Ingeborg Schmidt the author points out further advantages of the X-chrom contact lens. Among those are that the lens can be made of different thicknesses and different spectral transmissions within the range of 590 nm to 700 nm to suit different refractions and sensitivities. The benefit one person had from the use of the lens is described in detail although his color defaciency is not specified. His vision was waid to be positially alternating depending on which eye gave him "better color". Dr. Zeltzer points out that drough a learning process colors can be properly identified. When using the lens the subjects mentioned in the original paper per identified all Ishihara plates correctly and demonstrated 100% stereopsis using the Keystone series. The possibility of introducing a Pulfrich effect was not discussed. - Ingeborg Schmidt.

Evaluation of the different tests for establishing disturbances of colour perception by J. KOLIOPOULOS, G. PALIMERIS and D. ANDREANOS (University Eye Clinic Athens, 135, Greece), Bull. hellenic ophthal. Soc. 38, 29, 312, 1970.

The purpose of this study was to give to the Greek ophthalmologists information for establishing disturbate ces of colour vision, in eye clinics and private offices with use only of Ishihara charts and AO-HRR charts, if anomaloscope is not available. Each of the pseudoiso-chromatic mounts of Ishihara and of the AO HRR plotes were evaluated both with regard to person with normal and to 47 persons with abnormal colour perception. On the strength of this analysis the authors selected A charts among the Ishihara ones (viz N° 9, 10, 15, 22 edition 1996) and 4 plates of the AO HRR (viz 3, 4, 12, 16 20 indition 1957) which they consider as best suited. This work is mainly in accordance with the results of Verplost (Arch. Mal. Prof. Méd. Trav. Séc. 29, 293-314, 1968) and others. — John Koliopoulos.

Incidence of colour vision defeate in screening 29.985 young Greeks, P. IORDANIDES and J. KOLIOPOULOS (University Eye Clinic Athens, ..., Greece) <u>Iatrika</u> Chronika (Athens) 11/105, 561-574, 1971.

After a brief analysis of the congenital colour vision deficiencies, the results of screening 29.985 young Greek employees are discussed. The initial examination, the screening one, was performed by the pseudoisochromatic plates of Ishihara and in some cases for more specific diagnosis other methods were applied.

The examination of 21.231 young males revealed 212 (0,99%) protanopes, 241 deuteranopes (1,14%), 254 (1,20%) protanomalous, 978 (4,61%) deuteranomalous and 2 with monochromatic vision. In total 1.678 males (7,94%) had a colour vision disturbance.

The examination of 8.754 young females revealed 1 (0,01%) protanope, 2 (0,02%) deuteranope, 3 (0,03%) protanomalous and 31 (0,35%) deuteranomalous; no case of monochromatic vision in females was detected. In total only 37 (0,42%) females had a detectable colour vision disturbance with the applied screening method. These results are discussed in comparison with available bibliographic data. - John Koliopoulos.

Clinical and pathological aspects of choroidal ischaemia, by W.S. FOULDS and W.R. LEE (University of Glasgow) and W.O.G. TAYLOR (Ayr), Trans. ophthal. Soc. U.K. 91, 323-341, 12 figs, 21 refs.

Three patients with focal and three with more generalised acute failure of choroidal circulation were investigated: the evidence pointed to damage primarily to the receptor cells of the retina, as shown by the 100-hue test and in one case histological investigation. Other investigations included fluorescein angiography, electro-oculography, dynamic and static perimetry as well as temporal artery biopsy.

In view of these findings a retrospective study of 22 cases of ischaemic optic atrophy was carried out to see if their visual loss might have been due to retinal rather than optic nerve damage; 100-hue tests, which had been carried out in ten cases suggested that this supposition may well frequently be true. - W.O.G. Taylor.

Defects of colour vision after unilateral contical lesions (Troubles de la vision des couleurs après Jésions conticales unilatérales), by A. TZAVARAS, H. HECAEN and H. LE BRAS, Rev. Neurol. (Paris), 124/5, 396-402, 1971.

Eighty nine right-handed patients with unilateral cortical lesions (51 left-sided and 38 right-sided) and 60 controls were given a battery of tests comprising verbal and non-verbal tests, the Farnsworth D-15 and a test which consists of colouring drawings of familiar objects.

A first global statistical analysis of the results of the colouring test shows no significant differences between the two groups of patients with hemispheric (right and left) lesions.

But when we compare the group with right-sided lesions and the group with left-sided lesions without aphasia with the one with left-sided lesions with aphasia, the dasherence of the scores of the colouring test is highly significant (F = 15,4.8). We discussed those results according to the laterality of the lesion and the cluster of deficits.

On the left, the deficits in the werbal and nouverbal tests concerning colours were frequently but not constantly associated.

On the right, they appeared rather isolated, but related to a parietal localisation.

The fact that the deficits are significantly related to aphasia in the group with left side lesions may indicate a linguistic functional dependance as well as an effect of anatomical proximity. - A. Tzavaras.

The defects of perception, denomination and handling of colours after cortical lesions (Les troubles de la ger-ception, de la dénomination et du maniement des couleurs après lésions corticales), by A. TZAVARAS and M.C. GOLD-BLUM, Langages, 7/25, 95-107, 1972.

Following the ambiguous results obtained by tests measuring various aptitudes concerning the perception and handling of colours by subjects with unilateral cortical lesions, a critical review of the relevant physiological, linguistic and neuropsychological litterature has been undertaken.

This has permitted us to consider the existence of a relative independance between the system of colour vision and the linguistic system which integrates and utilises this chromatic information.

With these considerations, one can conceive the presence of discriminative difficulties after lesions of the right hemisphere whereas one can conceive that the treatment of chromatic information in more complex tasks takes

the form of a continuum going from language to colour perception.

Such an hypothesis would be in accordance with the variability of clinical troubles found in left-sided cortical lesions cases. - A. Tzavaras.

LISTS OF THE PUBLICATIONS ON COLOUR VISION DEFICIENCIES OF MEMBERS OF THE RESEARCH GROUP

- 13. Papers of Dr. Egill HANSEN (The University Eye Clinic, Rikshospitalet, Oslo 1, Norway).
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 - 14. Papers of Prof. Ernst HEINSIUS (Allgemeines Krankenhaus Heidberg, Rathenaustr. 35, 2 <u>Hamburg</u> 39, D.B.R.).

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- Zum Farbenwahrnebrung der Farbenuntüchtigen bieck und ihre Bedautung für die Diagnostik sinnstörungen, Arztl. Dienst DB, 30, 148,
- . Die angeborenen Farbensinnstörungen und tung für die verschiedenen Laufbahnen der Effahrt, Zentrabl. f. Verkehrs-Med., schologie und angrenzende Gebiete, p. 10-19,

Abstract of Work on Colour Blindness from Sub Saharian Africa, by P.V. TOBIAS. To be published in Trans. Roy. Soc. S. Africa (1972).

Trere is remarkable homogeneity in the incidence of red-green colour-blindness throughout sub-Saharian Africa (Roberts 1967: 7-13). The frequencies of all available series range from about 1.6 per cent to 4.6 per cent. (Toblas unpublished data and 1966 pp. 173-174; Robers ors cit. pp. 9-10). Relatively New series have been examined in Southern Africa. Results available are 2.95 per cent in 407 Tswana in Botswana (Squires 1942), 2.8 per cent in 250 adults and 4.6 per cent in 285 children of the Valley Tonga of Zambia (Tobias 1966 p. 174), 3.7 per cent in 80 Plataeu Tonga of Zambia (Tobias op. cit. p. 174), 2.7 per cent in 75 male Bushmen of Botswana (Tobias op. cit. p. 120), 1.0 per cent in "nearly 200" Bushmen males (Jenkins and Brain 1967; p. 19), and 1 individual out of 19 Hottentots tested (Jenkins and Brain op. cit. p. 19).

Data for other parts of sub-Saharian Africa range from 1.59 to 2.46 per cent (Roberts op. cit. p. 9).

In all, Africans have a low frequency of colourblindness, comparable with the low values of indigenes in Australia, Brazil and Fiji and of North American Indians (Post 1962 pp. 131-146). From this distribution, Post has suggested that colour blindness was a disadvantage in hunting communities and those with "Simple or primitive cultures"; in those who have had pastoral-agricultural economies and setled habitats for at least three millennia, there would seem to have been a relaxation of selection pressures. Thus, he suggests that the incidence of alleles for red colour deficiencies may have increased in European populations from 0.5 to 2.0 per cent during 120 generations, and for green colour defects, from 1.5 to 6.0 per cent. Attractive as this hypothesis is, Adam et al. (1967 pp. 297-306) have drawn attention to the great variations that exist even within some of the populations farhest removed from the primitive habitat for example, the frequency of colour blindness is twice as high among Europeans as among Japanese. Furthermore, we are ignorant of the extent of the selection of pressures on the various alleles governing colour vision. Post's hypothesis certainly deserves further exploration : it is at least worthy of note that among the hunter-gatherer Bushmen of Southern Africa, the frequency of colour blindness when jenkin's and Tobias' series are considered together is lower than among the Southern African Negro populations tested.

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(By courtesy of Maurice H. Luntz).

OFFICIAL COLOUR VISION REQUIREMENTS

GERMAN FEDERAL REPUBLIC (1972)

	Colour vision requirements	Tests
Private car driving	No limitations	
Lorries, taxis, busses	Deutans, tritans and protans with Q>0.5 accepted	Two specified pigmentary tests + anomaloscope
Railways cat.A	Normal	Three specified pigmentary tests + anomaloscope
cat.B	Norma1	Stilling + Nagel-Vierling (+ anomaloscope in doubtfull cases)
Tramways, subways	Normal	Two specified pigmentary tests (+ anomaloscope in doubtfull cases)
Aviation profess.	Normal	Pigm. tests + anomaloscope
private	Anomalous trichrom. exceptionn. allowed	Pigm. tests (+ eventually anomaloscope)
Marine (deck)	Normal	Two specif. pigm. tests (e.g. Stillin-Velhagen, Ishihara or Boström) + anom. in doubtf. cases
Army (aviation)	Norma1	Stilling (or Ishihara) + anomaloscope
Postage (some cat.)	Strong defects excluded	Pigm. tests (+ anomaloscope in doubtfull cases)

E. Heinsius

HUNGARY (1972)

(Civil purposes)

Colour vision requirements

Tests

Private car driving

Protanopes and achromats excluded Stilling (or Rabkin, or Ishihara) + (if the testee

makes a mistake) Nagel

anomaloscope

Lorries, taxis,

Normal

Same tests

busses

Railways (traffic) and aviation

Normal

Stilling (or Rabkin, or Ishihara) + Nagel

anomaloscope (always!)

Mailath.

CORRESPONDANCE

Relative to the discussion on the effect of coloured contact lenses, Dr. Jay M. Enoch may be interested in a rather old paper I contributed to the subject, namely : Characteristics of Tinted Contact Lenses, by G.V. BALL, Brit. J. physiol. Opt. 21/4, 219-223, 1964 - G.V. Ball.

COMMUNICATION

I received a check of 5 U.S. dollars from the Mitsubishi Bank Ltd (Tokyo) without mention of the name of the member who paid so his fee. This member is asked to let me know his identity. In this connection I remember that all members from the non socialist countries must pay their fee to our treasurer, Prof. R. Lakowski, as indicated in Daltoniana, nr. 1, p. 9 - G. Verriest.

Of course, it is before 31th July 1972 (and not before 31 July 1973, as indicated erroneously on the form to be returned) that all members of the Research Group were individually and urgently required (in <u>Daltoniana</u>, nr. 3) to let me know by means of this form if they intend to participate and to present a paper at our next symposium in Edinburgh. -