CORRESPONDENCE

School Avoidance From the Point of View of Child and Adolescent Psychiatry: Symptomatology, Development, Course, and Treatment

by Dr. phil. Dipl.-Psych. Martin Knollmann,
Dr. med. Susanne Knoll, Dr. med. Volker Reissner, Dipl.-Psych. Jana Metzelaars,
Prof. Dr. med. Johannes Hebebrand in volume 4/2010

Pathophorias—A Common Cause of Learning Disabilities and School Failure

As in almost all studies relating to school failure, the authors assume that the reasons are intellectual, psychological, or social, and their therapeutic approaches are consistent with that perspective. However, I wish to point out here that one crucial aspect is never mentioned—namely, visual impairment in the sense of pathophoria.

I am an ophthalmologist and, for 15 years, I have been working intensively with children with severe school problems such as dyslexia or concentration problems (attention deficit hyperactivity disorder, AHDS), accompanied by behavioral disorders, all of which will result in demotivation, refusal to perform, placement in schools catering for special needs for low-achieving pupils or those with behavioral disorders, or in complete refusal to attend school.

An analysis of binocular vision almost always found associated heterophoria (misalignment of the visual axis of both eyes), especially in the Polatest according to the H. J. Haase measuring and correction method. Correcting this problem usually resolved the perception problems spontaneously and improved school performance. Especially the refusal to read or write disappeared; children became calmer and concentrated better and for much longer periods of time. The basic problem of school refusal was solved.

Since visual defects may be hereditary, at least one parent was often affected by the same problem but went without treatment, and, because of poor school results, they found themselves in a low socioeconomic stratum—a truly vicious circle.

In the context of refusal to perform in school, children should be examined for possible heterophoria. Unfortunately, these aspects have not yet been properly recognized by conventional ophthalmology, which makes it difficult to find ophthalmologists that can help with such differentiated diagnostic evaluation and correction, so that often, specialized optometrists have to step in. In the past, this has caused problems in terms of status policy, but for the affected pupils it has certainly been a blessing.

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In Reply:

Gorzny rightly points out the importance of possible visual impairments for the development of learning difficulties/school performance, which may be crucially involved in the development of school avoiding behavior (cf. the figure showing individual factors relevant for the pathogenesis). Unfortunately we are not aware of any studies on this topic, and as far as we know, possible associations between auditory impairments (in the sense of an auditory processing disorder) or other functional disorders and successive school avoidance have not been investigated either. We wish to remind readers of the extremely heterogeneous causes of school avoiding behaviors, which necessitate an interdisciplinary approach to the problem—including consultation with an ophthalmologist if the indication exists. In our own clinical practice in an outpatient clinic for school avoiders, this is our default approach. If visual impairments are suspected, an ophthalmologist is consulted, and if auditory disorders are suspected, then we initiate a pediatric audiology examination. The current state of research, however, allows only for a rough sketching out of individual risk factors and their importance.

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Conflict of interest statement

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