

1
00:00:04,550 --> 00:00:03,110
uh june was vision research awareness

2
00:00:06,470 --> 00:00:04,560
month uh one of

3
00:00:08,070 --> 00:00:06,480
my colleagues here at uh nasa public

4
00:00:10,870 --> 00:00:08,080
affairs brandy dean actually got a

5
00:00:12,629 --> 00:00:10,880
chance to talk to one of the doctors

6
00:00:15,110 --> 00:00:12,639
involved in this research taking place

7
00:00:17,189 --> 00:00:15,120
on board the station she was able to

8
00:00:18,950 --> 00:00:17,199
actually get a personal demonstration

9
00:00:20,790 --> 00:00:18,960
and learn a little bit more about this

10
00:00:22,870 --> 00:00:20,800
research taking place on board the

11
00:00:24,470 --> 00:00:22,880
orbiting laboratory

12
00:00:26,550 --> 00:00:24,480
hi welcome to the flight medicine

13
00:00:28,070 --> 00:00:26,560

optometry clinic at johnson space center

14

00:00:30,150 --> 00:00:28,080

where in honor of flight research

15

00:00:31,830 --> 00:00:30,160

awareness month we are here talking with

16

00:00:33,190 --> 00:00:31,840

dr bob gibson who's one of our

17

00:00:34,389 --> 00:00:33,200

optometrists and he's going to tell us a

18

00:00:36,229 --> 00:00:34,399

little bit about some of the research

19

00:00:38,069 --> 00:00:36,239

we're doing with the crew members on

20

00:00:39,590 --> 00:00:38,079

station to find out what might be

21

00:00:41,670 --> 00:00:39,600

causing the vision problem some of them

22

00:00:43,670 --> 00:00:41,680

have when they return from long flights

23

00:00:45,430 --> 00:00:43,680

in space thanks so much for joining us

24

00:00:49,029 --> 00:00:45,440

bob glad to be here

25

00:00:50,470 --> 00:00:49,039

so let's see what what exactly um are we

26

00:00:51,510 --> 00:00:50,480

looking at here

27

00:00:53,830 --> 00:00:51,520

well

28

00:00:55,990 --> 00:00:53,840

this device here is uh

29

00:00:56,869 --> 00:00:56,000

known as optical coherence tomography

30

00:01:01,349 --> 00:00:56,879

which

31

00:01:02,790 --> 00:01:01,359

to look at the various structures in the

32

00:01:05,350 --> 00:01:02,800

back of the eye

33

00:01:07,030 --> 00:01:05,360

as you may be aware a significant number

34

00:01:09,109 --> 00:01:07,040

of our long-duration flyers have

35

00:01:11,350 --> 00:01:09,119

returned from space with structural

36

00:01:13,590 --> 00:01:11,360

changes to the eye we're seeing a

37

00:01:15,510 --> 00:01:13,600

swelling of the optic nerve

38

00:01:17,590 --> 00:01:15,520

wrinkles to the retina and the choroid

39

00:01:19,270 --> 00:01:17,600

in the back of the eye

40

00:01:20,469 --> 00:01:19,280

as well as far sided shifts in their

41

00:01:21,990 --> 00:01:20,479

vision

42

00:01:24,070 --> 00:01:22,000

and to better give us a better

43

00:01:26,070 --> 00:01:24,080

understanding

44

00:01:28,789 --> 00:01:26,080

for these structural changes we have

45

00:01:30,550 --> 00:01:28,799

this diagnostic tool again known as oct

46

00:01:31,590 --> 00:01:30,560

which allows us to

47

00:01:33,510 --> 00:01:31,600

measure the back of the eye

48

00:01:36,069 --> 00:01:33,520

non-invasively

49

00:01:39,590 --> 00:01:37,510

light instead of

50

00:01:42,469 --> 00:01:39,600

ultrasound

51
00:01:44,149 --> 00:01:42,479
ultrasonic devices which use sound waves

52
00:01:45,270 --> 00:01:44,159
we use light waves

53
00:01:46,789 --> 00:01:45,280
to

54
00:01:48,310 --> 00:01:46,799
look at the structures within the back

55
00:01:49,749 --> 00:01:48,320
of the eye within the retina within the

56
00:01:51,429 --> 00:01:49,759
optic nerve

57
00:01:53,190 --> 00:01:51,439
and look for the structural changes and

58
00:01:55,190 --> 00:01:53,200
detect them much much earlier than we

59
00:01:56,709 --> 00:01:55,200
would otherwise what kind of changes can

60
00:01:58,149 --> 00:01:56,719
you see with this what i guess what

61
00:02:00,950 --> 00:01:58,159
would we look for at the back of the eye

62
00:02:03,350 --> 00:02:00,960
well if i can demonstrate with the model

63
00:02:04,709 --> 00:02:03,360

of the eye here right

64

00:02:06,830 --> 00:02:04,719

here we have the front of the eye known

65

00:02:09,430 --> 00:02:06,840

as the cornea and if

66

00:02:11,270 --> 00:02:09,440

i show you a cross section through the

67

00:02:13,190 --> 00:02:11,280

eye here we have again the cornea we

68

00:02:14,869 --> 00:02:13,200

have the internal lining of the eye

69

00:02:16,309 --> 00:02:14,879

known as the retina

70

00:02:18,150 --> 00:02:16,319

all the nerve fiber layers and the

71

00:02:19,190 --> 00:02:18,160

retina come together that form the optic

72

00:02:20,949 --> 00:02:19,200

disc

73

00:02:22,790 --> 00:02:20,959

which leads to the optic nerve which is

74

00:02:23,910 --> 00:02:22,800

an extension of the brain

75

00:02:25,190 --> 00:02:23,920

and what we're seeing in our crew

76

00:02:27,350 --> 00:02:25,200

members are

77

00:02:28,710 --> 00:02:27,360

wrinkles or folds to the inner lining

78

00:02:30,710 --> 00:02:28,720

the retina

79

00:02:32,790 --> 00:02:30,720

to the layer known as the choroid behind

80

00:02:34,869 --> 00:02:32,800

the retina we're seeing folds in this

81

00:02:37,589 --> 00:02:34,879

region as well and we're also seeing

82

00:02:41,430 --> 00:02:37,599

swelling of the retina and of the optic

83

00:02:43,990 --> 00:02:41,440

disc again also known as the optic nerve

84

00:02:45,670 --> 00:02:44,000

and so this is a machine that can that

85

00:02:48,470 --> 00:02:45,680

allows you to see those things while the

86

00:02:50,710 --> 00:02:48,480

crew is still on orbit right that is

87

00:02:53,110 --> 00:02:50,720

correct it allows us to detect very

88

00:02:55,030 --> 00:02:53,120

subtle changes within just a few microns

89

00:02:57,589 --> 00:02:55,040

of change from what we measure

90

00:02:59,830 --> 00:02:57,599

preflight so we can detect these changes

91

00:03:01,830 --> 00:02:59,840

much much sooner and have a better way

92

00:03:04,229 --> 00:03:01,840

of monitoring these changes over time

93

00:03:06,630 --> 00:03:04,239

and giving us a better understanding for

94

00:03:08,630 --> 00:03:06,640

the mechanisms for these changes

95

00:03:10,550 --> 00:03:08,640

is this something uh like an exam that

96

00:03:12,630 --> 00:03:10,560

people here on earth would be taking

97

00:03:14,470 --> 00:03:12,640

normally as part of their eye exams it's

98

00:03:18,309 --> 00:03:14,480

something that's becoming a very

99

00:03:20,309 --> 00:03:18,319

valuable diagnostic tool and and your uh

100

00:03:22,949 --> 00:03:20,319

ophthalmology clinic it's used for

101
00:03:24,309 --> 00:03:22,959
detecting and monitoring such diseases

102
00:03:26,630 --> 00:03:24,319
as glaucoma

103
00:03:28,309 --> 00:03:26,640
uh other optic nerve diseases as well

104
00:03:29,430 --> 00:03:28,319
and for looking at changes within the

105
00:03:35,350 --> 00:03:29,440
macula

106
00:03:37,110 --> 00:03:35,360
forms of retinal diseases okay so so

107
00:03:39,350 --> 00:03:37,120
this should be at least familiar to some

108
00:03:41,110 --> 00:03:39,360
people here on the ground already yeah i

109
00:03:42,390 --> 00:03:41,120
would think so okay but probably the

110
00:03:44,470 --> 00:03:42,400
first time that we had one in space i'm

111
00:03:46,070 --> 00:03:44,480
guessing how i know we've been doing

112
00:03:47,430 --> 00:03:46,080
these for a little while now so are you

113
00:03:49,509 --> 00:03:47,440

starting to get good results back

114

00:03:51,270 --> 00:03:49,519

helpful helpful data yes the crew has

115

00:03:52,789 --> 00:03:51,280

been amazing we have with the very

116

00:03:55,830 --> 00:03:52,799

little training that they get they've

117

00:03:58,149 --> 00:03:55,840

done an excellent job performing oct

118

00:03:59,910 --> 00:03:58,159

on orbit and we're we're getting some

119

00:04:01,830 --> 00:03:59,920

useful data it's very limited data at

120

00:04:03,750 --> 00:04:01,840

this point but we are getting some

121

00:04:05,509 --> 00:04:03,760

useful data showing uh

122

00:04:08,470 --> 00:04:05,519

some of the structural changes to the

123

00:04:10,710 --> 00:04:08,480

eye as a result of microgravity exposure

124

00:04:12,149 --> 00:04:10,720

are you getting in uh are you

125

00:04:13,750 --> 00:04:12,159

able to come up with any insight into

126

00:04:15,670 --> 00:04:13,760

exactly what's happening

127

00:04:17,270 --> 00:04:15,680

at this point we really don't know the

128

00:04:19,270 --> 00:04:17,280

the data is fairly limited although

129

00:04:21,349 --> 00:04:19,280

there's some theories that have been uh

130

00:04:23,110 --> 00:04:21,359

suggested one being that

131

00:04:25,270 --> 00:04:23,120

the swelling of the optic nerve and

132

00:04:26,710 --> 00:04:25,280

these changes to the to the retina as

133

00:04:28,790 --> 00:04:26,720

well as flattening of the back of the

134

00:04:31,590 --> 00:04:28,800

eye of the globe

135

00:04:33,350 --> 00:04:31,600

may be a result of elevated pressure

136

00:04:35,270 --> 00:04:33,360

behind the eye within the optic nerve

137

00:04:37,430 --> 00:04:35,280

sheath

138

00:04:40,469 --> 00:04:37,440

so i'll localize

139

00:04:43,350 --> 00:04:40,479

pressure changes due to fluid shifts

140

00:04:46,550 --> 00:04:43,360

which are experienced in microgravity uh

141

00:04:48,230 --> 00:04:46,560

also another theory is that uh

142

00:04:50,150 --> 00:04:48,240

there may be elevated intracranial

143

00:04:51,590 --> 00:04:50,160

pressure within the brain that may be

144

00:04:53,430 --> 00:04:51,600

responsible some of the for some of

145

00:04:55,030 --> 00:04:53,440

these changes there's a condition

146

00:04:56,950 --> 00:04:55,040

terrestrially known as idiopathic

147

00:04:58,870 --> 00:04:56,960

intracranial hypertension which

148

00:05:00,629 --> 00:04:58,880

has its similarities that we see in the

149

00:05:02,550 --> 00:05:00,639

space flight syndrome yet there are some

150

00:05:04,550 --> 00:05:02,560

differences as well and in that

151

00:05:06,870 --> 00:05:04,560

particular condition we see

152

00:05:09,189 --> 00:05:06,880

swelling of the optic nerve uh what we

153

00:05:11,350 --> 00:05:09,199

call papilloedema we see

154

00:05:13,510 --> 00:05:11,360

extension of the optic nerve sheath

155

00:05:16,150 --> 00:05:13,520

flattening of the globe

156

00:05:17,909 --> 00:05:16,160

and typically terrestrially that disease

157

00:05:20,070 --> 00:05:17,919

as a result of elevated intracranial

158

00:05:21,350 --> 00:05:20,080

pressure so there are some similarities

159

00:05:24,310 --> 00:05:21,360

yet differences

160

00:05:27,350 --> 00:05:24,320

from that particular disease okay and i

161

00:05:29,270 --> 00:05:27,360

guess does this machine help us narrow

162

00:05:31,350 --> 00:05:29,280

down the possibilities of what's going

163

00:05:33,029 --> 00:05:31,360

on or is it just help us

164

00:05:34,950 --> 00:05:33,039

understand what's going on

165

00:05:36,550 --> 00:05:34,960

i think both it's going to help us

166

00:05:37,909 --> 00:05:36,560

understand the structural changes that

167

00:05:39,189 --> 00:05:37,919

we're seeing and

168

00:05:41,189 --> 00:05:39,199

hopefully help us determine the

169

00:05:43,350 --> 00:05:41,199

mechanisms for these changes

170

00:05:46,710 --> 00:05:43,360

again whether it be localized effects or

171

00:05:48,629 --> 00:05:46,720

maybe elevated intracranial pressure

172

00:05:50,150 --> 00:05:48,639

but it's also a very useful clinical

173

00:05:52,390 --> 00:05:50,160

tool for

174

00:05:55,430 --> 00:05:52,400

for diagnosing these these changes and

175

00:05:56,550 --> 00:05:55,440

monitoring these changes over time okay

176

00:05:58,790 --> 00:05:56,560

all right i think now we're going to get

177

00:06:01,189 --> 00:05:58,800

a demonstration right

178

00:06:02,950 --> 00:06:01,199

we'll do it okay great all you have to

179

00:06:05,590 --> 00:06:02,960

do is you're going to see a bunch of

180

00:06:21,270 --> 00:06:05,600

blue lines just focus on the

181

00:06:24,950 --> 00:06:23,110

okay you can sit back

182

00:06:27,590 --> 00:06:24,960

all right

183

00:06:29,110 --> 00:06:27,600

here's a video of your eye brandi

184

00:06:30,150 --> 00:06:29,120

if you look up here close enough you'll

185

00:06:33,590 --> 00:06:30,160

be able to

186

00:06:37,189 --> 00:06:35,189

can you see moving in the blood vessel

187

00:06:38,550 --> 00:06:37,199

those are your blood cells okay forcing

188

00:06:39,990 --> 00:06:38,560

through the vessel

189

00:06:41,830 --> 00:06:40,000

it's kind of hard to see but if you look

190

00:06:44,070 --> 00:06:41,840

you can see it

191

00:06:45,670 --> 00:06:44,080

so i haven't been to space obviously so

192

00:06:47,270 --> 00:06:45,680

i wouldn't have anything that you

193

00:06:48,870 --> 00:06:47,280

probably are looking for i'm guessing or

194

00:06:51,189 --> 00:06:48,880

is there not actually what we're more

195

00:06:53,029 --> 00:06:51,199

interested in with videos looking at the

196

00:06:55,350 --> 00:06:53,039

the uh what we call spontaneous venus

197

00:06:57,589 --> 00:06:55,360

pulsations 80 of the population has a

198

00:06:58,790 --> 00:06:57,599

spontaneous venus pulsation

199

00:07:00,950 --> 00:06:58,800

uh

200

00:07:02,309 --> 00:07:00,960

and you have one yourself you have a

201
00:07:04,550 --> 00:07:02,319
nice pulse hitting

202
00:07:07,189 --> 00:07:04,560
central vein right here if you look real

203
00:07:09,029 --> 00:07:07,199
close you can see it pulsating

204
00:07:11,350 --> 00:07:09,039
again 80 of the population has that

205
00:07:13,189 --> 00:07:11,360
that's that's considered normal okay uh

206
00:07:15,589 --> 00:07:13,199
if you have a spontaneous venous

207
00:07:17,909 --> 00:07:15,599
pulsation however and all of a sudden

208
00:07:20,150 --> 00:07:17,919
disappears that's not normal it could be

209
00:07:22,390 --> 00:07:20,160
indicative of elevated pressure

210
00:07:25,110 --> 00:07:22,400
behind the eye or even elevated pressure

211
00:07:26,950 --> 00:07:25,120
within the within the brain okay

212
00:07:28,469 --> 00:07:26,960
well thank you so much for for showing

213
00:07:31,350 --> 00:07:28,479

us this and giving us the demonstration

214

00:07:33,270 --> 00:07:31,360

it's very interesting and i i think

215

00:07:35,990 --> 00:07:33,280

i think it helps us understand a whole

216

00:07:37,589 --> 00:07:36,000

lot better what the crew is doing on

217

00:07:38,950 --> 00:07:37,599

orbit to find out more about their own

218

00:07:40,950 --> 00:07:38,960

eyes so

219

00:07:43,990 --> 00:07:40,960

really appreciate it again this was bob

220

00:07:46,469 --> 00:07:44,000

gibson talking with us inside the flight

221

00:07:47,830 --> 00:07:46,479

medicine optometry clinic at the johnson