

# Near Point of Discomfort Test:

## A Modified NPC Test To Identify Patients



Those with subtle phorias, particularly those with vertical phorias, have marked difficulty with convergence. But the findings and symptoms they experience are much more than just diplopia with NPC testing. Convergence can exacerbate many other symptoms in those with BVD including dizziness, anxiety, nausea and headache/asthenopia. That's why we have repurposed the NPC test, and now call it the Near Point of Discomfort Test.

The major difference between the traditional NPC test and the Near Point of Discomfort Test is the instructions given to the patient regarding the endpoint of the test.

### How to perform this test

With NPD testing, the patient is told, "Please follow the target all the way to your nose, and tell me to stop if you feel dizzy, nauseous, anxious, eye pain or headache, or see double". The usual BVD patient experiences the additional symptoms before the onset of diplopia, so the measurement is usually larger than that associated with traditional NPC testing.

### What do the results mean?

If patients become symptomatic, coupling positive NPD testing with abnormal head tilt/gait analysis and positive NeuroVisual Medicine Survey results, it is likely that this patient has BVD, and you can be very confident that this patient will derive benefit from a detailed evaluation and treatment by a NeuroVisual Medicine trained optometrist, often resulting in a prescription of microprism.

### Triage Your Patients for Care

To refer your patients with BVD, here's a list of NeuroVisual trained optometrists:

[Click Here](#)

To start treating your patients with BVD by Rxing microprism, explore becoming a NeuroVisual Medicine Trained optometrist:

[Click Here](#)

