



ヤグチ電子工業株式会社

YAGUCHI ELECTRIC CORPORATION



SUSTAINABLE
DEVELOPMENT
GOALS

地域未来牽引企業

医療機器製造業 (04BZ200026)
第三種医療機器製造販売業 (04B3X10008)
Approved Medical Product Manufacturer and Distributor

1974~1980s

Established as an assembly base for
SONY Walkman® in Japan



1990s

200 mil. units of products manufactured for SONY
Achieved 99.999% production yield
Obtained SONY Green Partners
and various international certifications



2000s

Strengthen OEM business, including
G-SHOCK® manufacturing



For IRIS OHYAMA
Full-scale mass production prototyping
/ rework business



IRIS OHYAMA



Assisting Iris Oyama, whose group sales are 790 billion yen, with mass production prototype

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Provide Full Support for Comfortable Living

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Lifestyle Electrics

Support for your evolving lifestyle

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This streamlined, lightweight, stick vacuum cleaner offers a unique mop attachment that helps you complete your cleaning faster and is the first in the industry. This distinctive appliance is developed by IRIS, a leading housewares manufacturer from Japan.



Blanket Warmer



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With a specially designed cooking container, this unique steam oven allows you to defrost ingredients evenly in addition to offering various cooking programs.



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Yogurt Maker



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Using the improved globe-shaped spiral front guard, this desktop fan enables you to maximize air flow.



Air Purifier with Humidity Control



Dehumidifier with Oscillating Fan

Electronics

Aiming to provide complete assortment of appliances for your everyday life



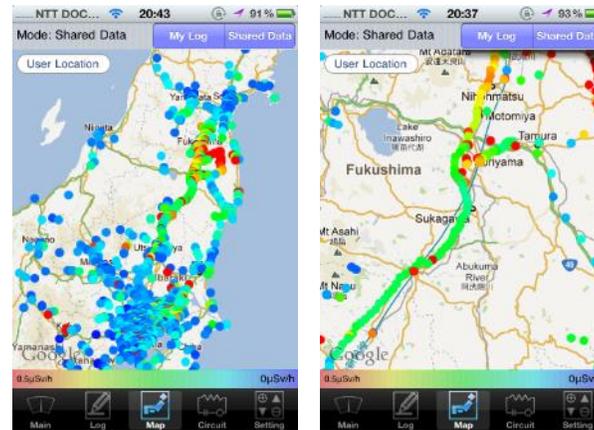
4K TV with HDR "LUCA Series"

Our LED TV creates a high-resolution digital image that reproduces natural colors as you see them in real life.

2011 March 11, Entered the environmental measurement field

First in-house product [Pocket Geiger] launched
World's first smartphone-connected radiation sensor

[Pocket CO2 Sensor] Visualizing the risk of
airborne transmission of COVID-19



- Successful crowdfunding Kickstarter
- 100,000 units sold, share of measured values at more than 1 million points
- Received Good Design Award and German RedDot Design Award



2013 Entered medical device field



occlu·pad[®]
視機能検査訓練器 オクルパッド[®]



Oculpad : amblyopia training tablet

- 1,000 units supplied to ophthalmology clinics in Japan
- Monodzukuri Nippon Grand Award (METI Award)
- Japan Institute of Invention and Innovation (MEXT Award)

Pokémon ®Series

- Pokémon Stereo Test 1,000 units shipped
- Pokémon Occluder 500 units shipped

Medical device manufacturing (04BZ200026)
Type III medical device manufacturing and sales
company (04B3X10008)

Equipment

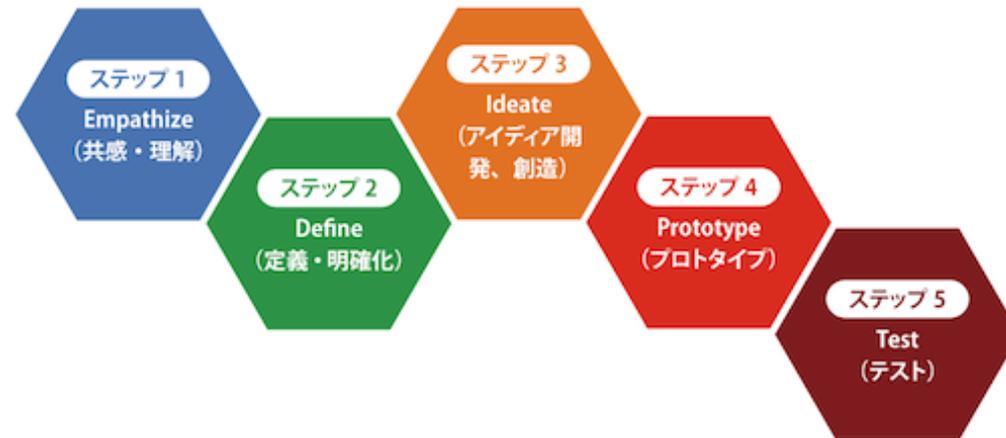
Equipment	Manufacturer / Capacity	Units
Lead-free reflow oven	Senju SAI-638	1
Chip mounter	YAMAHA YSM10	1
Chip mounter	YAMAHA YS100	1
Solder printer	YAMAHA YCP10	1
Substrate visual inspection equipment	MARANTZ 22XPPC7	1
Ditto	Rexxam sherlock-300	1
Constant temperature chamber	Az one DO-30FA	1
In-circuit tester	Okano 510ZII	1
Compact clean room	Approx. 9.27m ²	1
Insulation resistance tester	Kikusui TOS8850	1
Ionizer	Shishido BF-2DD	10
High/constant-temperature chamber	KATO SSE78CRA	1
3D printer	MUTOH cubex trio	1
V-cut breaker	CAB	1



Design thinking method

From prototype to mass production is achieved quickly.

デザイン思考の5つのステップ



Projects by Crowdfunding



USBにつなぐだけ！
映画館の感動を完全再現するポータブルスピーカー誕生
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株式会社JDSound ★ プロダクト ★ テクノロジー/IoT ★ 地域活性化 ★ オーディオ

ホーム 活動報告 35 コメント 2760



Like 4.7K Tweet 埋め込む

世界的ヒット商品を次々と世に送り出してきた音響機器メーカー「JDSound」が、今年は「動画視聴に最適なスピーカー」に挑戦します。動画配信全盛期、あなたの動画視聴環境をガラリと変える革新的なスピーカーを東北の製造技術を結集して作り上げます。

現在の支援総額

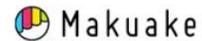
¥ 94,885,800

目標金額 ¥20,000,000

支援人数 7527人 残り 販売中

購入はこちらから

このプロジェクトは現在は一般販売中です。(クラウドファンディングは2018/05/15 23:59に終了しました。)



"まだここにはない"を手に入れよう

探す 始める Makuakeとは?

ログイン

新規登録

TOP > プロジェクト一覧 > プロダクト > GODJ Plus 世界初！A4サイズのクラブハウス。スピーカー付きDJシステム

クラウドファンディング Success! コミュニケーション 373

お気に入り

MONSTER GODJ Plus

A4サイズのクラブハウス。

集まっている金額 **53,037,600円** Success!

目標金額 20,000,000円

265%

サポーター 1,292人

残り 0日

終了しました

GODJ Plus 世界初！A4サイズのクラブハウス。スピーカー付きDJシステム

プロダクト

ツイート

G+ 19

Bookmark 40

Amebaに投稿

WIDGET

Executive Officers



Masatoshi Sato

CEO

General Manufacturing and Sales Manager of Medical Devices, etc..

Joined the company in 1994 and worked with SONY for 20 years in design/production/quality control.

The motto is "Never say no."



Yo Ishigaki, Doctor (Engineering) Master (Fine Arts)

Board of Director/CTO in charge of R&D,
industry-academia/medical-engineering collaboration

Specially Appointed Professor at the University of Electro-Communications

2002 Joined IS Laboratory, SECOM Co. Ltd.

2012: Changed jobs after Great East Japan Earthquake

Amblyopia Treatment by Occlu-Pad[®]



Amblyopia (lazy eye)

Amblyopia is a condition that occurs in children in which one eye has poorer vision than the other. One of the typical symptoms of Amblyopic eye is Strabismus (squint).

3%

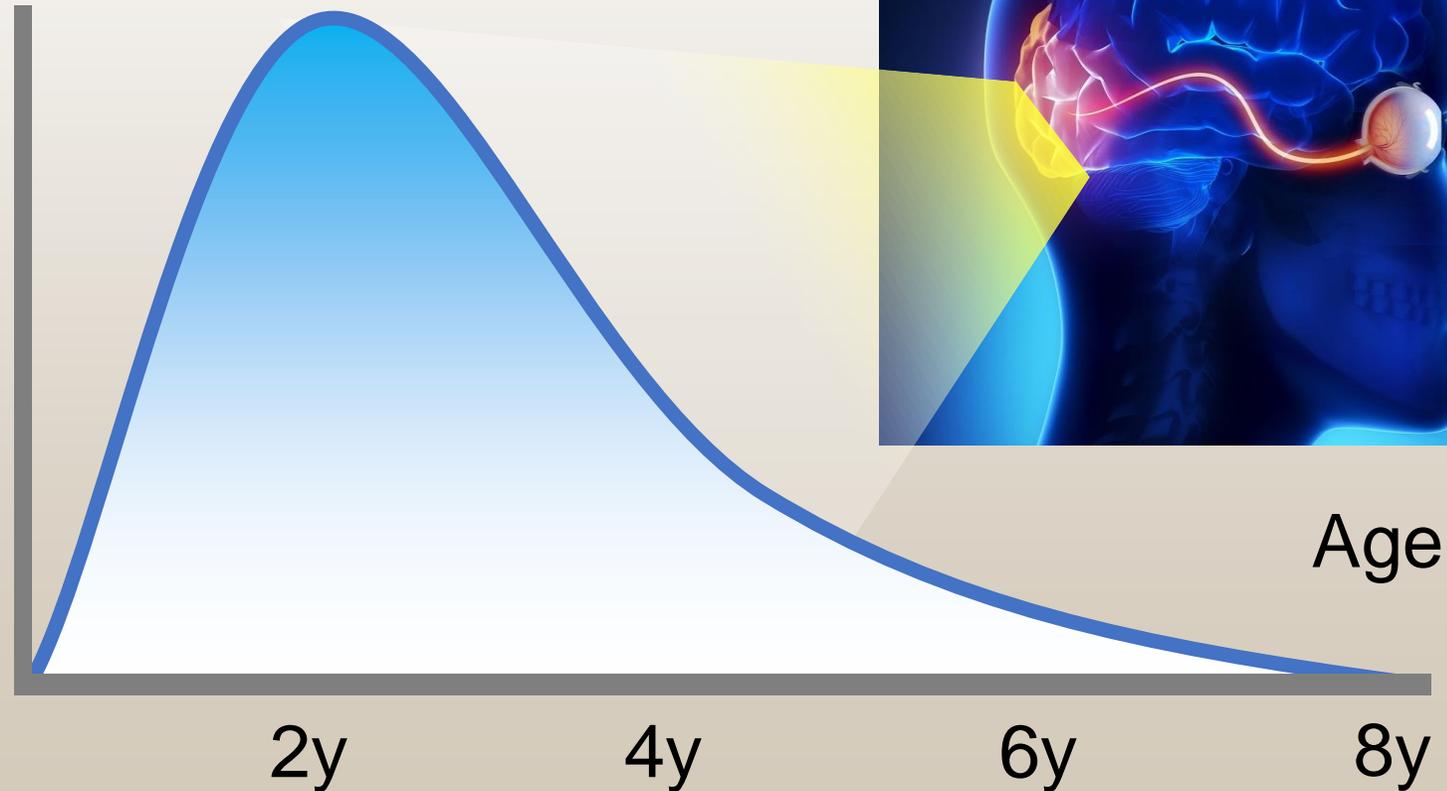
of newborn babies are affected by Amblyopia for every races.



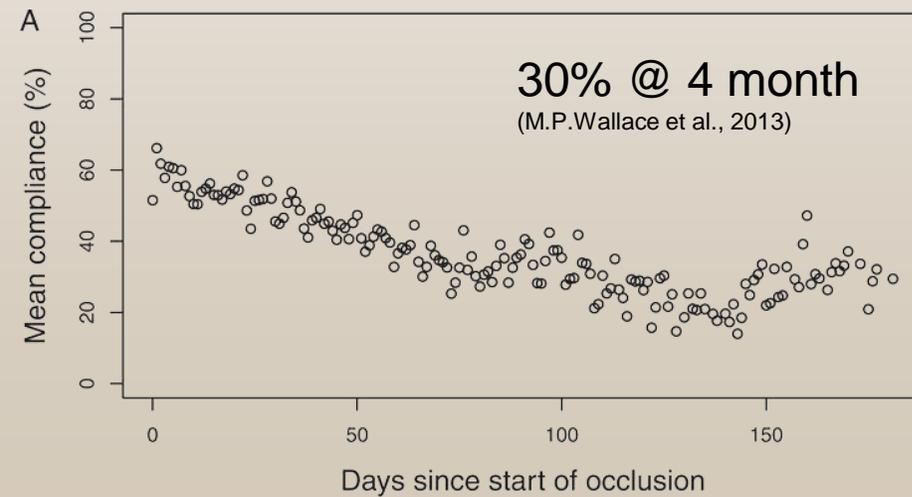
Mostly curable

If Treated Before Six Years Old.

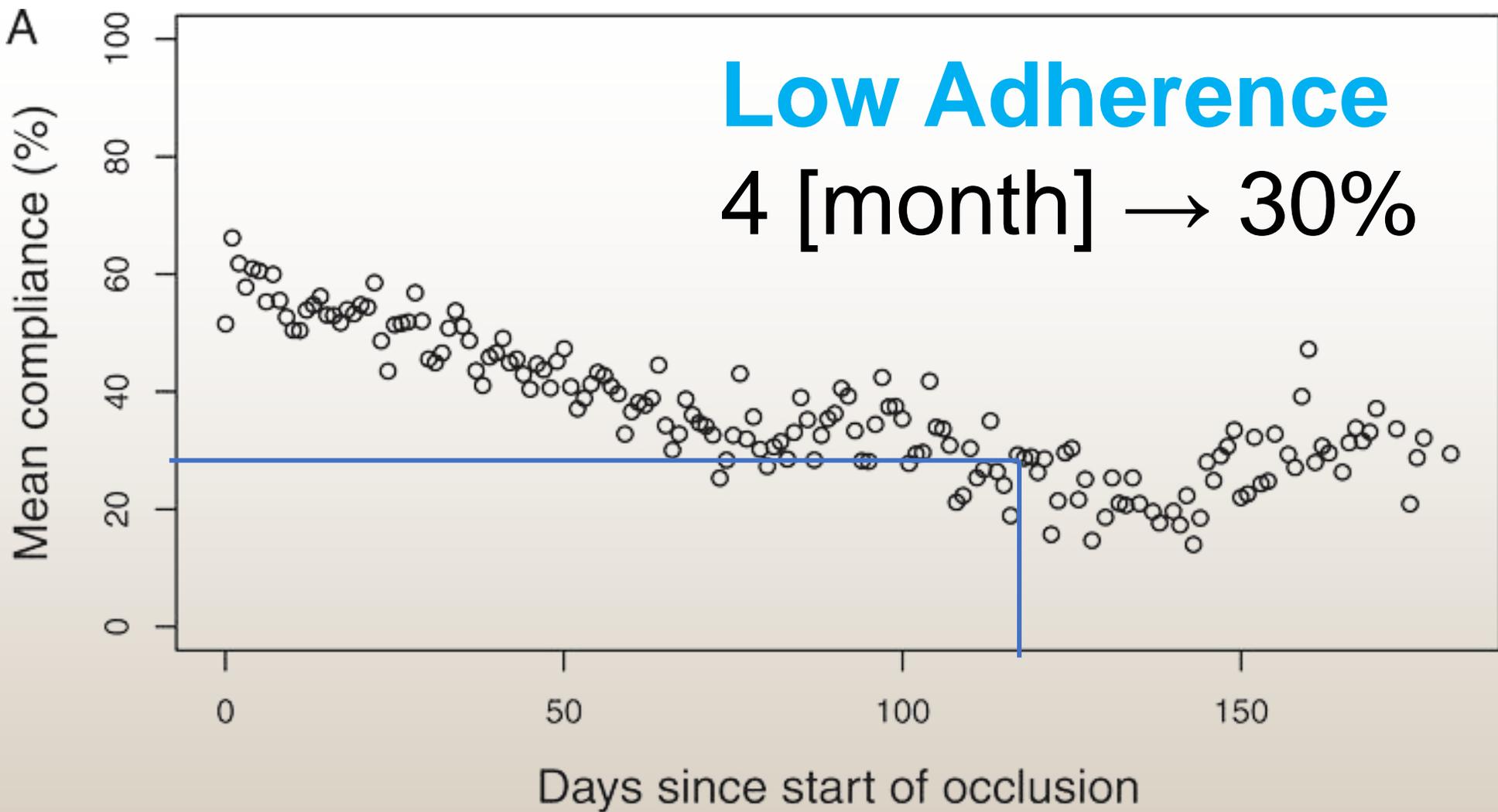
Visual Cortex Plasticity



Eye Patching on Healthy Eye



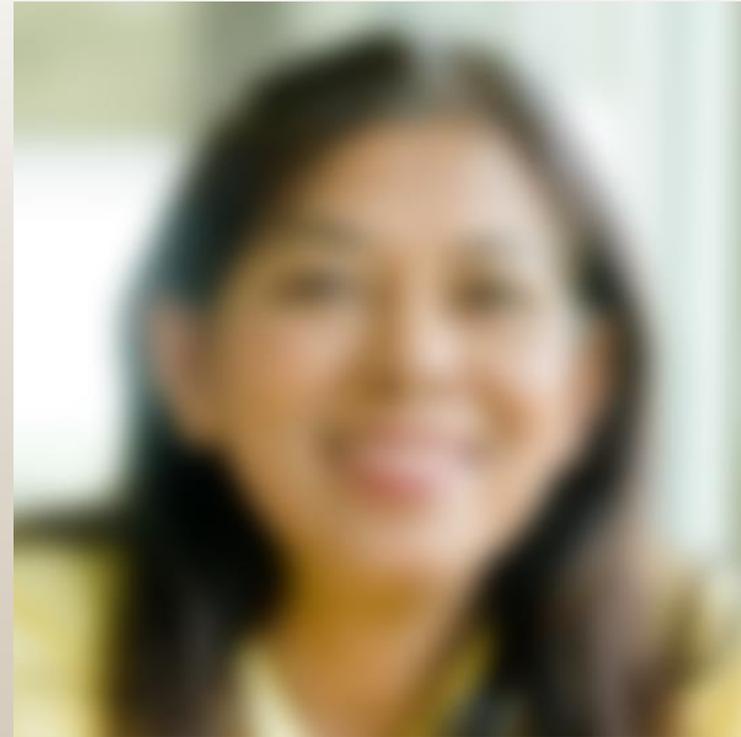
The above images are for illustrative purposes only.
Photo: Adobe stock



**Mean compliance with prescribed dose across all individuals still in treatment.
Days with fewer than 10 individuals remaining in treatment not shown.**

Visual Psychophysics and Physiological Optics | September 2013 Compliance With Occlusion Therapy for Childhood Amblyopia Michael P. Wallace; Catherine E. Stewart; Merrick J. Moseley; David A. Stephens; Alistair R. Fielder

Powerful eye drops for defocusing



occlu·pad[®]

視機能検査訓練器 オクルパッド[®]



Binocular Gaming Tab;

- Safer and More Effective
- Easier for patients to use



Polarizing Filter For the Impaired Eye



Light Reduction Filter For the Good Eye

Eight Games for Vision Training



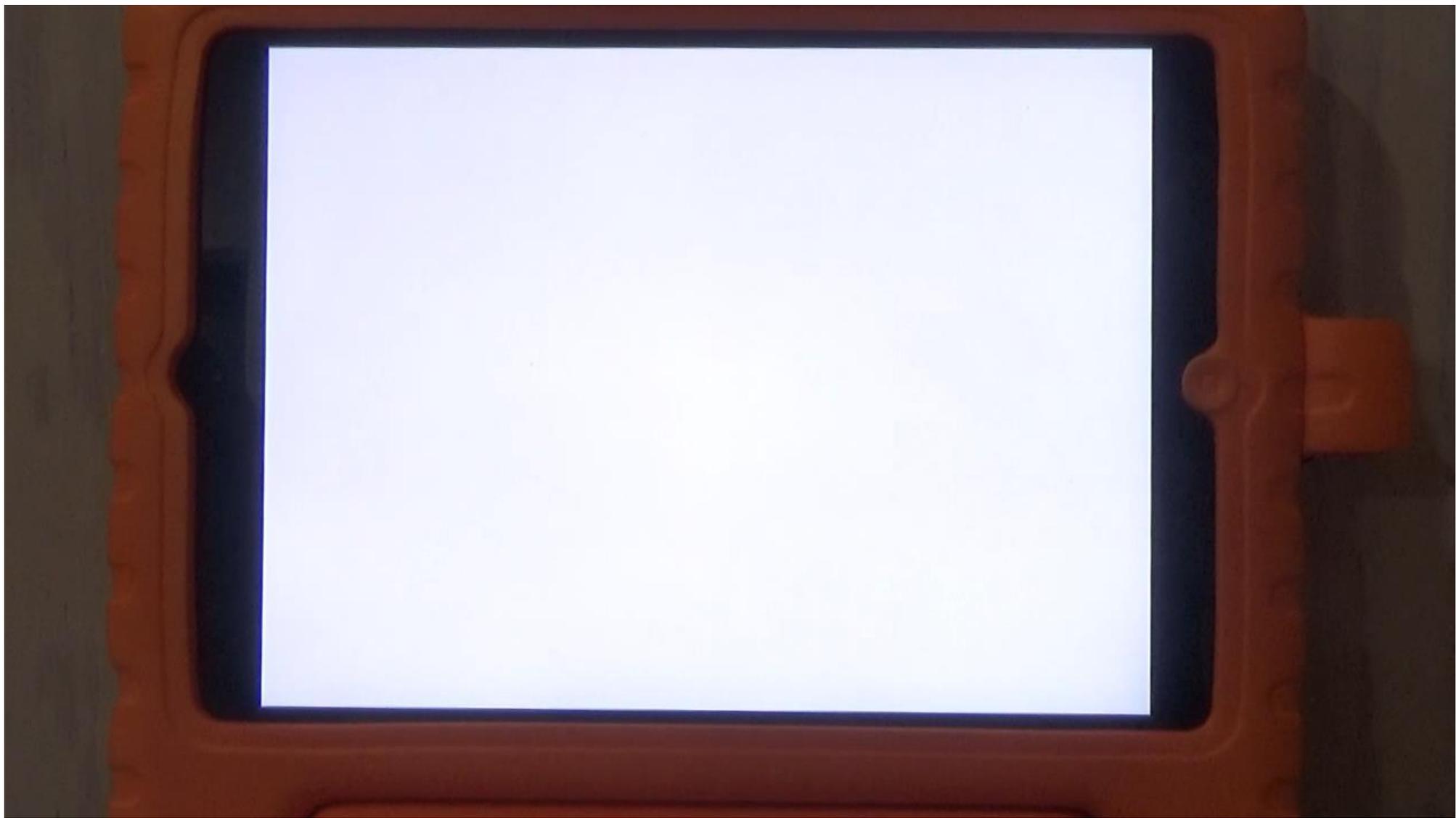
Training Schedule

MONTH _____						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		← Sheep sharing / Vision fixation →				
← Window cleaning / Vision fixation →					← Bird catching →	
← / Vision fixation →			← Egg carrying / Pursuit Eye →			
← Movement (Horizontal) →				← Ball juggling / Pursuit Eye →		
← Movement (Vertical) →						

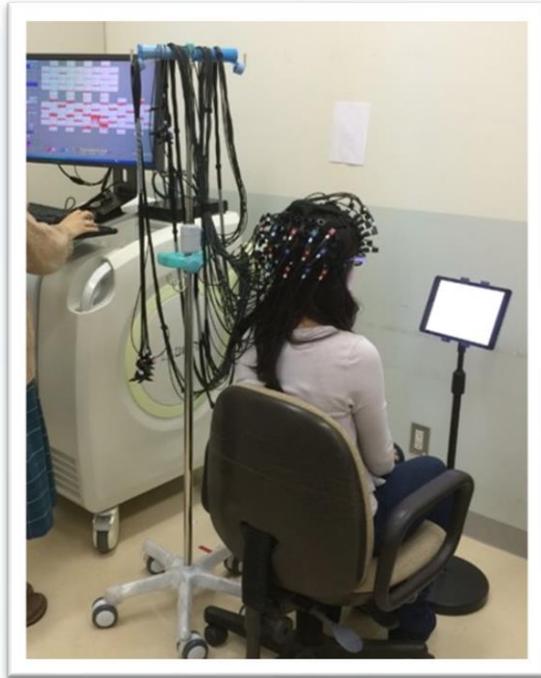


もどる

年	月	日	開始時間	ゲーム種類	プレイ時間
2015年	3月	27日	11:46	さんばつ	00:04:26
2015年	3月	27日	12:06	カプセルトイ	00:00:01
2015年	3月	27日	12:07	カプセルトイ	00:00:02
2015年	3月	27日	12:07	さんばつ	00:00:19
2015年	3月	27日	15:36	動物キャッチ	00:00:01
2015年	3月	27日	15:37	エイリアン	00:00:04
2015年	3月	30日	14:46	さんばつ	00:00:32
2015年	3月	30日	14:48	さんばつ	00:01:59
2015年	3月	30日	14:50	おそうじ	00:00:38
2015年	3月	30日	14:50	おそうじ	00:00:55
2015年	3月	30日	14:51	もぐらたたき	00:01:49
2015年	3月	30日	17:20	もぐらたたき	00:00:03
2015年	3月	30日	19:46	さんばつ	00:08:41



Efficacy of Both eyes Open in Brain activity



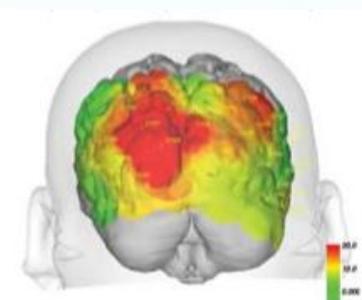
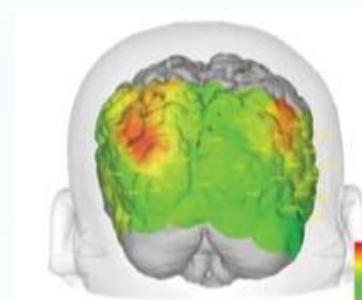
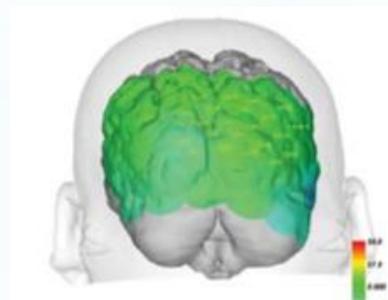
Monocular



Binocular Dichoptic game



(Eye-Hand Coordination)

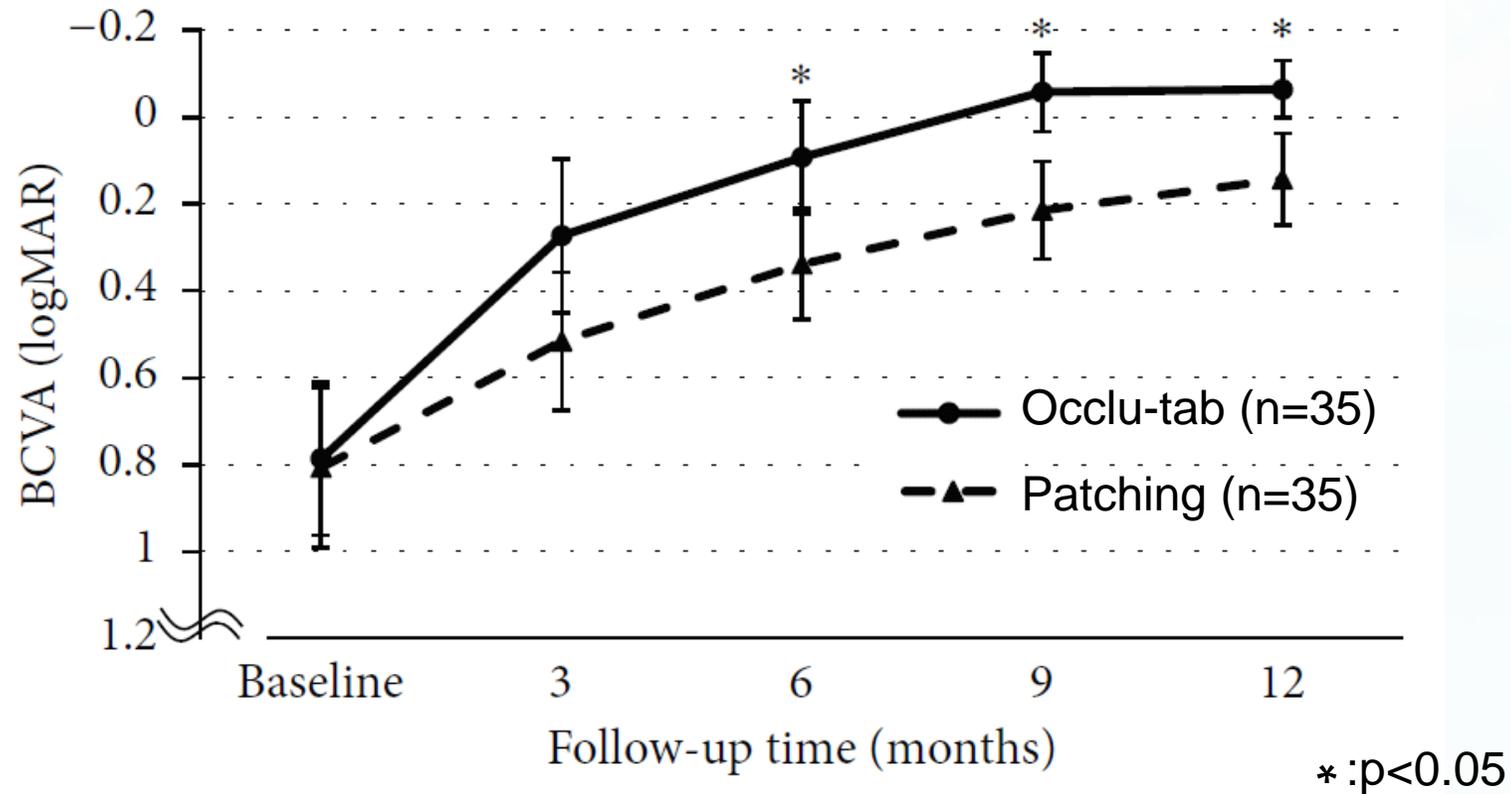


Efficacy of an Amblyopia Treatment Program with Both Eyes Open: A Functional Near-Infrared Spectroscopy Study.

(Iwata Y, Handa T, et al, Am orthopt J, 2016.)

BCVA : Occlu-tab vs Patching

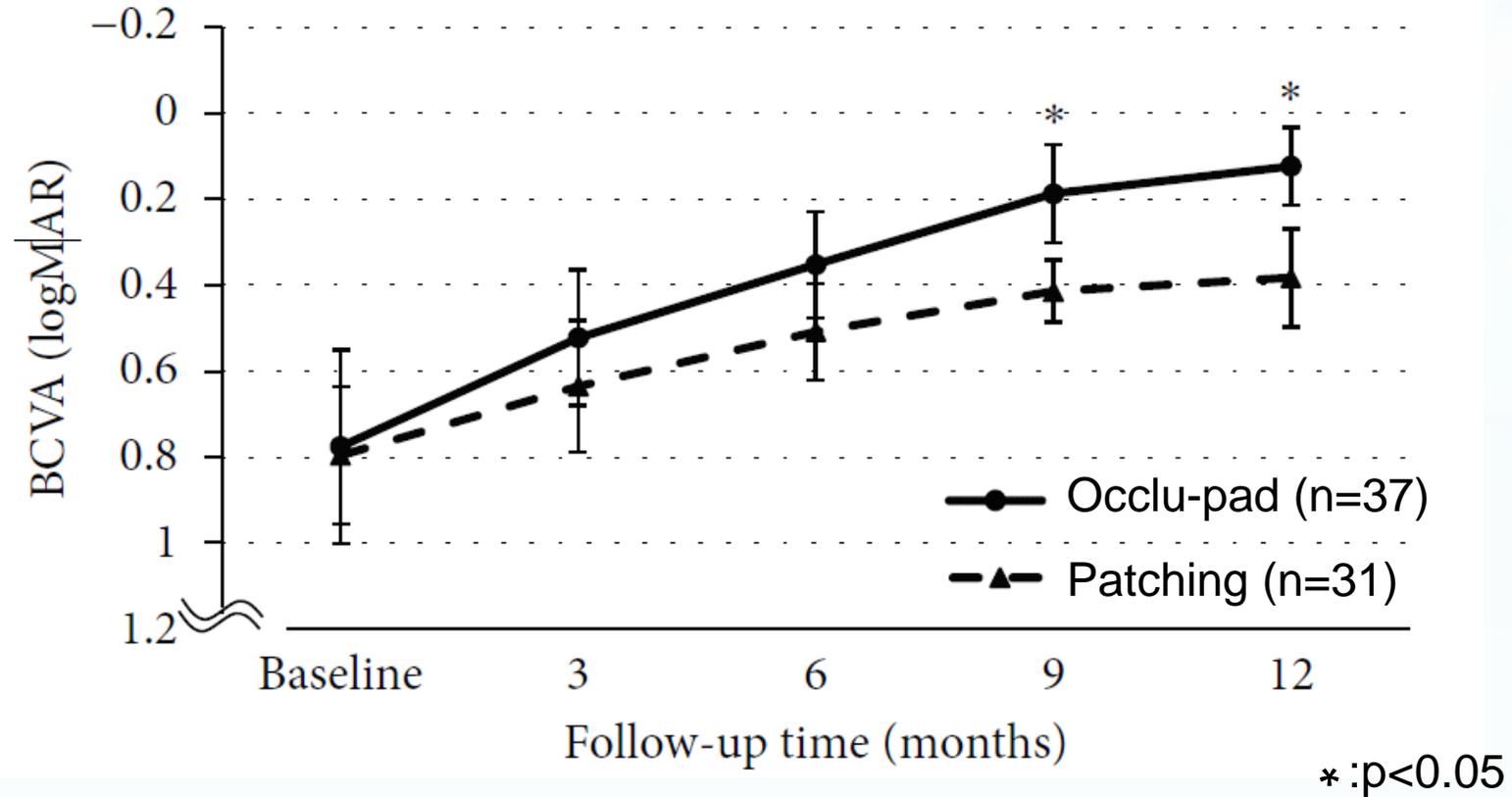
Anisometropic amblyopia



Totsuka S, Handa T, et al. Improvement of Adherence with Occlu-Pad Therapy for Pediatric Patients with Amblyopia. Biomed Res Int, 2018

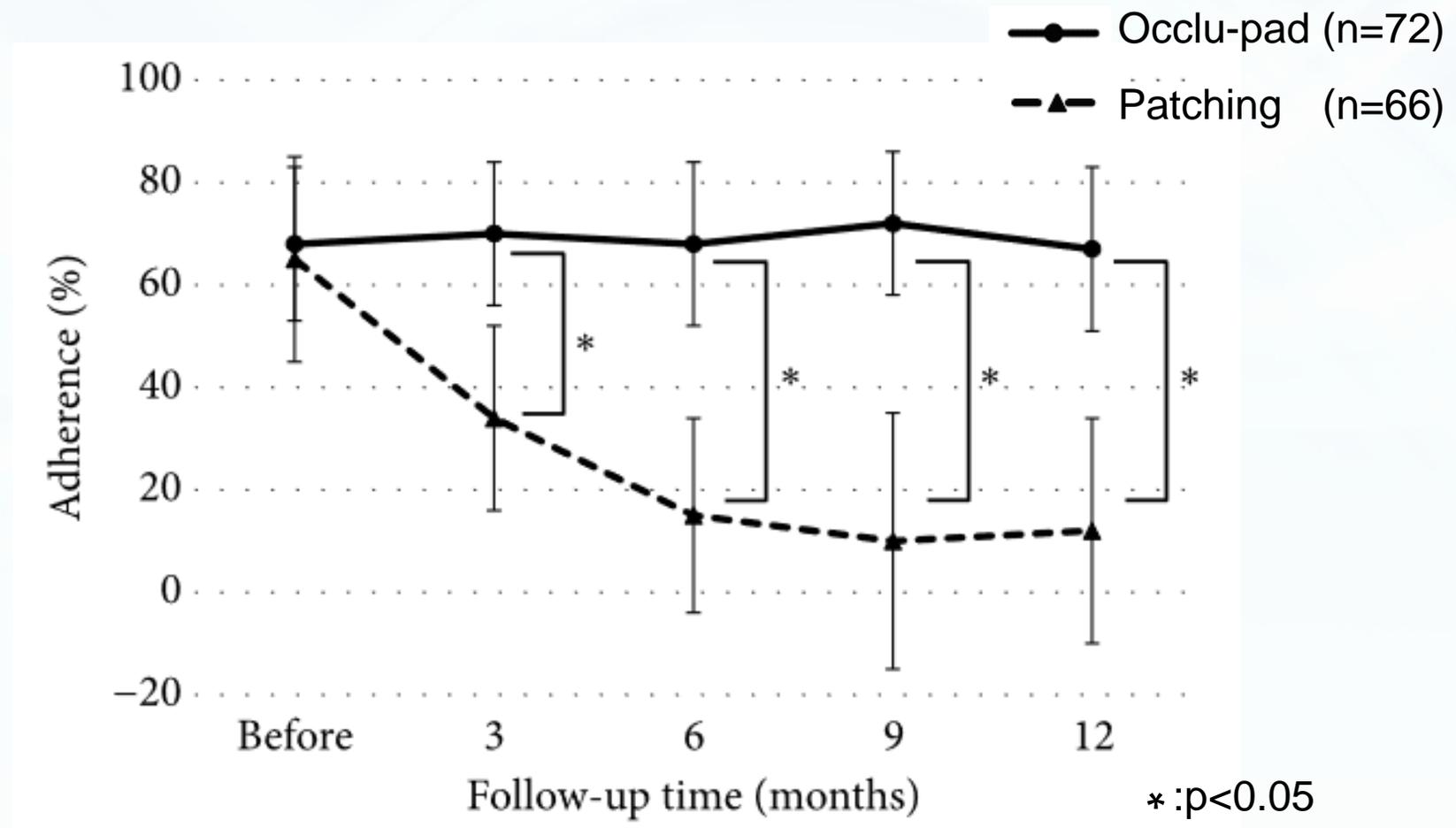
BCVA : Occlu-tab vs Patching

Strabismic amblyopia



Totsuka S, Handa T, et al. Improvement of Adherence with Occlu-Pad Therapy for Pediatric Patients with Amblyopia. Biomed Res Int, 2018

Adherence : Occlu-tab vs Patching



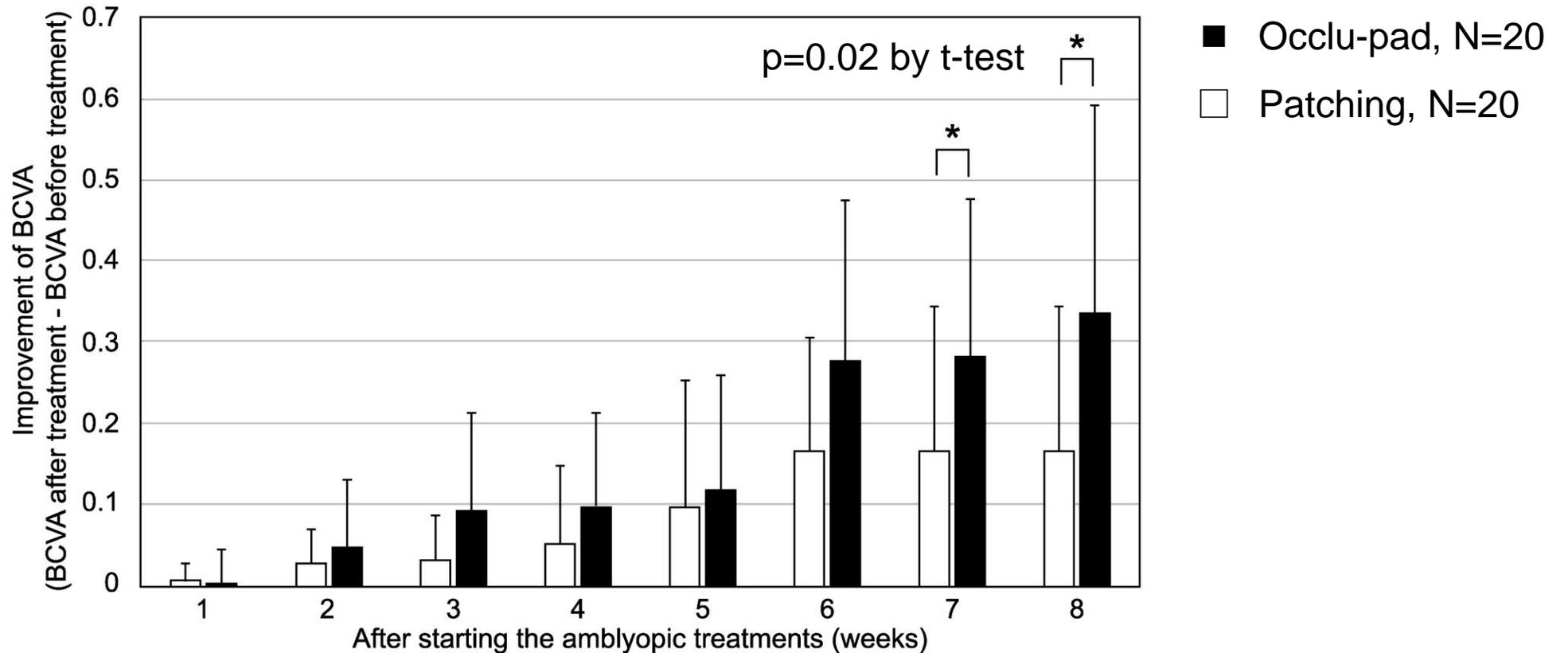
Totsuka S, Handa T, et al. Improvement of Adherence with Occlu-Pad Therapy for Pediatric Patients with Amblyopia. Biomed Res Int, 2018



BCVA : Occlu-tab vs Patching

In Indian Children

RCT (Randomized Controlled Trial)



Handa T, et al. Comparison of the Effectiveness of Amblyopia Treatment with Eye-Patch and Binocular Occlu-Tab for the Same Treatment Duration. Indian Journal of Ophthalmology, in press



New Technology

Modified iPad for treatment of amblyopia: a preliminary study

Tomoya Handa, CO, PhD,¹ Hiroshi Ishikawa, MD, PhD,² Nobuyuki Shoji, MD, PhD,³ Tetsuya Ikeda, MD,³ Satoshi Totsuka, CC,⁴ Toshiaki Gosoku, MD, PhD,⁴ and Kimiya Shimizu, MD, PhD⁴

We report the results of a new amblyopia treatment device used in 17 children with anisometropic amblyopia. The Occlu-pad was created by removing the polarizing film layer from the liquid crystal display screen of an iPad Air (Apple Inc., Cupertino, CA). Patients were asked to wear special glasses that contained a red-green filter on the amblyopic eye and a red-green training game displayed only to the amblyopic eye. A 5-minute corrected distance visual acuity in the amblyopic eye improved after 2 months' treatment on average by 0.26 (logarithm of the minimum angle of resolution).

Occlusion therapy¹ is the primary treatment for amblyopia, but many children find the patching regimen difficult. This leads to concerns about treatment compliance.² Moreover, occlusion therapy risks side effects such as skin irritation, degradation of amblyopia, and psychological issues associated with the inhibition of binocular function. We modified an iPad Air (Apple Inc., Cupertino, CA) to create a new amblyopia treatment device, the Occlu-pad (Yaguchi Electric Co Ltd, Ishikawa, Japan) that displays images that can be seen by amblyopic eyes with polarized glasses. The purpose of this study was to test the Occlu-pad in children with anisometropic amblyopia.

Materials and Methods

This study conformed to the terms of the Declaration of Helsinki and was approved by the Kanazawa University Human Science Ethics Committee. A total of 17 children (12 years of age) with anisometropic amblyopia were treated using the Occlu-pad. The children and parents selected the treatment period.

Author disclosures of potential conflicts of interest and author contributions are found at the end of this article. Address correspondence to Dr. Handa at the Department of Ophthalmology, Kanazawa University, 7-820-8592, Kanazawa, Japan. Email: tomoya.handa@kanazawa-u.ac.jp

Copyright © 2018 by the American Association of Pediatric Ophthalmology and Strabismus. 0885-0666/18/5603-0252/\$16.00

The Occlu-pad (7.96 × 18.75 cm) patients had emmetropia of 10P or prism and center viewing at 30 cm and 3 m. In addition to full refractive correction, all patients had no strabismic amblyopia therapy with either the Occlu-pad or the Occlu-pad in addition to occlusion therapy for 3 hours daily.

The Occlu-pad was created by removing only the polarizing film layer from the liquid crystal display screen of an iPad Air (Apple Inc., Cupertino, CA). Patients were asked to wear special glasses that contained a red-green filter on the amblyopic eye and a red-green training game displayed only to the amblyopic eye. A 5-minute corrected distance visual acuity in the amblyopic eye improved after 2 months' treatment on average by 0.26 (logarithm of the minimum angle of resolution).

The monthly training times that were automatically stored in the device in order to confirm treatment compliance were as follows: child 1, 800 min (12 days); child 2, 600 min (26 days); child 4, 240 min (12 days); child 5, 200 min (10 days). Child 3 did not log any hours of playing the training game but, according to the parental accounts, they did play the Web Game on the Occlu-pad every day.

After 2 months' treatment, the corrected distance visual acuity in the amblyopic eye (logarithm of the minimum angle of resolution [logMAR]) values at baseline and at 2 months follow-up were as follows: child 1, 0.3 and -0.08; child 2, 0.22 and 0; child 3, 1.4 and 0.7; child 4, 0.4 and 0; and child 5, 0.1 and -0.08. All patients' visual acuity improved in the patient's amblyopic eyes (Figure 1). In 2 patients who stopped using the Occlu-pad after their initial occlusion/occlusion training period, corrected distance visual acuity in the amblyopic eye (logMAR) was at baseline and 2 months were 0.4 and 0.1 in child 4 and 0.2 and 0.3 in child 7, indicating no improvement visual acuity in these patients' amblyopic eyes (Figure 2).

CURRENT EYE RESEARCH

https://doi.org/10.1097/IIO.0000000000000066

Evaluation of the Effects of the Occlu-Pad for the Management of Anisometropic Amblyopia in Children

Yo Iwata,¹ Tomoya Handa,¹ Hiroshi Ishikawa,² Toshiaki Gosoku,³ and Nobuyuki Shoji³

¹Department of Ophthalmology, Kanazawa University School of Medicine, Kanazawa University Graduate School, Saganbashi, Japan; ²Department of Rehabilitation, Ophthalmic and Visual Science Center, School of Allied Health Sciences, Kanazawa University, Saganbashi, Japan; ³Department of Ophthalmology, School of Medicine, Kanazawa University, Saganbashi, Japan

Purpose: In recent years, amblyopia treatment devices that can be used with both eyes open have been reported. The Occlu-pad is a device that presents images of tablet materials to one eye only under binocular open conditions. This study was designed to evaluate the effectiveness of Occlu-pad therapy for anisometropic amblyopia in a series of cases. In the present study, we evaluated the effectiveness of the Occlu-pad for the management of anisometropic amblyopia without the use of occlusion therapy (patching).

Methods and Results: We implemented Occlu-pad training for 22 children (mean age, 3.1 standard deviation; 4.7 ± 1.2 years) with anisometropic amblyopia. The visual acuity before treatment initiation was 0.25 ± 0.08. The difference in refraction between the healthy and amblyopic eyes was 3.0 ± 0.8 D. The improvement in visual acuity after 3 months and 6 months after training initiation was 0.06 ± 0.09 and -0.04 ± 0.02, respectively; this indicates a significant improvement in vision. The compliance rates for Occlu-pad use during 0–3 months and 4–6 months after training initiation were 86.4% ± 18.9% and 73.2% ± 18.6%, respectively. This indicates a significant improvement in vision. The compliance rates for Occlu-pad use during 0–3 months and 4–6 months after training initiation were 86.4% ± 18.9% and 73.2% ± 18.6%, respectively. This indicates a significant improvement in vision. The compliance rates for Occlu-pad use during 0–3 months and 4–6 months after training initiation were 86.4% ± 18.9% and 73.2% ± 18.6%, respectively. This indicates a significant improvement in vision.

Conclusion: Our findings suggest that the Occlu-pad is an effective tool for the management of anisometropic amblyopia in children.

Key words: Amblyopia, anisometropic, eye patch, game-based treatment, Occlu-pad, visual acuity

Amblyopia occurs in approximately 3%–5% of children. It impairs the development of visual function, and severe cases of amblyopia can interfere with school and social life.¹ Many children with amblyopia receive occlusion therapy (eye patch treatment), the gold-standard treatment modality for amblyopia.^{2,3} However, use of the patching of treating amblyopia with an eye patch is low because of compliance issues and the age of treatment and severity of amblyopia and psychosocial (ie, lack of knowledge about amblyopia and treatment, absence of motivation) causes.⁴ Perhaps, due to these issues, a new device (amblyopia treatment) has been reported to receive 70%⁵ in pediatric patients' approval of playing games before compliance can be expected with game-based amblyopia treatment with eye patch treatment.⁶

Recently, we presented a method and device (Occlu-pad) based on Occlu-pad for amblyopia treatment involving both eyes open under binocular open conditions. The Occlu-pad has three key functions.

Department of Rehabilitation, Ophthalmic and Visual Science Center, School of Allied Health Sciences, Kanazawa University, Kanazawa, Japan; ²Department of Ophthalmology, Ocular Health Center, Kanazawa University, Kanazawa, Japan; ³Department of Ophthalmology, Kanazawa University School of Medicine, Kanazawa University, Kanazawa, Japan; ⁴Department of Ophthalmology, Kanazawa University School of Medicine, Kanazawa University, Kanazawa, Japan; ⁵Department of Ophthalmology, Kanazawa University School of Medicine, Kanazawa University, Kanazawa, Japan; ⁶Department of Ophthalmology, Kanazawa University School of Medicine, Kanazawa University, Kanazawa, Japan.

Received: 27 Jan 2018; Accepted: 15 Oct 2018; Published: 26 Apr 2018

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Special Focus, Pediatric Ophthalmology, Original Article

Comparison of the effectiveness of amblyopia treatment with eye-patch and binocular Occlu-tab for the same treatment duration

Tomoya Handa, Hense Thakkar,¹ Hima Ramakrishnan,¹ Rajesh Shah,¹ Vaishali Pranjapat,¹ Senia Sengul,¹ Ashwajit Joshi,¹ or Ishika¹

¹Department of Ophthalmology, Kanazawa University School of Medicine, Kanazawa University Graduate School, Saganbashi, Japan; ²Department of Rehabilitation, Ophthalmic and Visual Science Center, School of Allied Health Sciences, Kanazawa University, Saganbashi, Japan; ³Department of Ophthalmology, Kanazawa University School of Medicine, Kanazawa University, Saganbashi, Japan

Purpose: This study aimed to compare the conventional eye patch with Occlu-tab—a binocular open type amblyopia training device—and evaluate their effectiveness in amblyopia treatment. **Methods:** In this prospective, multicenter study, 40 patients between ages 5 to 17 years, diagnosed with anisometropic amblyopia (refraction difference of both eyes ≥ 2.5 diopters) and visual acuity (BCVA) of the amblyopic eye 0.1 [logMAR] were treated with Occlu-tab or conventional eye patch for 1.5 per day for 6 weeks. We compared the visual acuity of both groups before and after 6, 12, and 18 weeks of amblyopia treatment. One-way repeated measures analysis of variance and Tukey's test were used to compare the visual acuity of both groups pre- and post-treatment. **Results:** Both groups had significantly improved visual acuity at 6, 12, and 18 weeks compared to baseline treatment (all $P < 0.001$). The improvement in BCVA of the Occlu-tab group (0.37 ± 0.25) was significantly greater than that of the eye patch group (0.14 ± 0.17) after 6 weeks of treatment ($P < 0.05$). **Conclusion:** Amblyopia treatment using binocular open game training with Occlu-tab led to greater improvement in visual acuity than that with a conventional eye patch for the same treatment duration.

Key words: Amblyopia, anisometropic, eye patch, game-based treatment, Occlu-tab, visual acuity

The white-screen technology eliminates the side effects of conventional eye patches and enhances stimulation of the visual field by selectively presenting images to one eye while both eyes are open. Second, scan automatically record the actual treatment time and thus accurately evaluate the treatment duration. Third, it provides a game therapy by using a palm-sized block (with pediatric patterns) that only one eye can see through polarized glasses. This is achieved by putting of the polarizing film in the liquid crystal display of the iPad (Apple). Amblyopia training comprised either the instructional training with Occlu-pad or the eye patch (patching) as a family training. After wearing polarized corrective glasses, visual acuity improvement following amblyopia training with occlusion amblyopia, a significant difference between training methods was observed after 6 months of follow-up. Occlu-pad resulted in better adherence for patients with other anisometropic amblyopia or strabismic amblyopia, a significant difference in adherence was observed after 6 months, compared with patching ($P < 0.05$). Amblyopia training with Occlu-pad supports greater visual acuity improvement and adherence than patching.

Introduction

Amblyopia is reportedly present in approximately 5% of all children.¹ If it is not discovered and corrected during the visually susceptible period, poor lifetime visual acuity can occur, ultimately causing visual impairment among elderly people. Epidemiologic studies² have shown that the rate of falls and blindness in both eyes are twofold higher in amblyopic patients than in people without amblyopia. Treatment of amblyopia is therefore extremely important.

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Special Focus, Pediatric Ophthalmology, Original Article

Efficacy of supplemental Occlu-pad therapy with partial occlusion in children with refractive anisometropic amblyopia

Jitendra Jethava, Anura Kanna, Rajesh Shah,¹ Hense Thakkar,¹ Samirika Sharma

¹Department of Ophthalmology, Kanazawa University School of Medicine, Kanazawa University Graduate School, Saganbashi, Japan; ²Department of Rehabilitation, Ophthalmic and Visual Science Center, School of Allied Health Sciences, Kanazawa University, Saganbashi, Japan; ³Department of Ophthalmology, Kanazawa University School of Medicine, Kanazawa University, Saganbashi, Japan

Purpose: To study the efficacy of supplemental occlusion therapy with partial occlusion in children with refractive anisometropic amblyopia. **Methods:** Thirty-one children who did not require any partial occlusion of 3 to 6 months were supplemented with the use of occlusion for 1.5 per day and three weeks treatment at a week. **Results:** The mean age was 10.1 ± 0.5 years (range, 7–14 years). The mean visual acuity at baseline was 0.14 ± 0.02 logMAR. The mean age was 10.1 ± 0.5 years (range, 7–14 years). The mean visual acuity at baseline was 0.14 ± 0.02 logMAR. The mean age was 10.1 ± 0.5 years (range, 7–14 years). The mean visual acuity at baseline was 0.14 ± 0.02 logMAR.

Conclusion: Supplemental occlusion therapy with partial occlusion in children with refractive anisometropic amblyopia is effective in improving visual acuity.

Key words: Amblyopia, anisometropic, occlusion, refractive amblyopia

Introduction

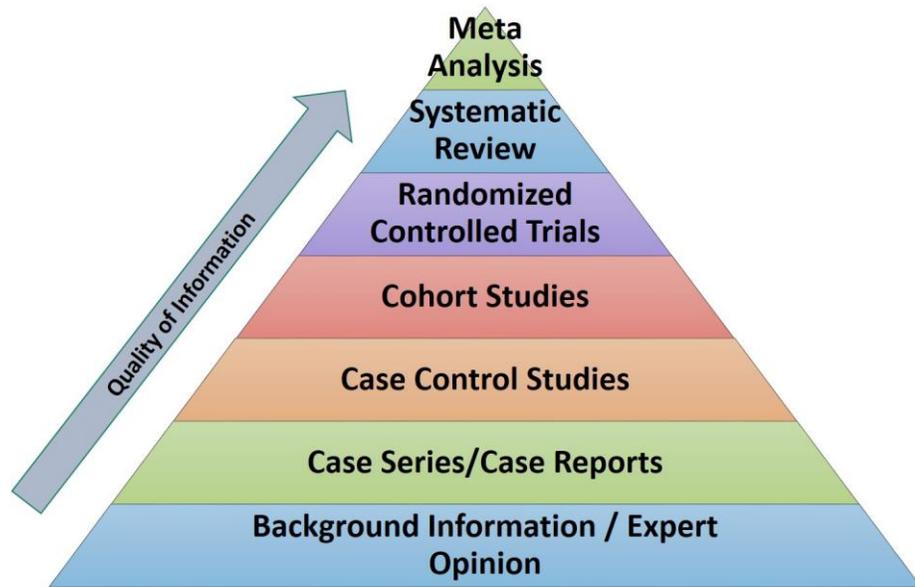
Amblyopia is a common cause of unilateral blindness in children. It results from unequal refractive error between the eyes that results in image blur which may lead to incomplete development of the visual system, and thereby, amblyopia. Patching or occlusion is the gold standard for the treatment of amblyopia. However, 15%–40% of the patients may not adhere to the recommended treatment duration. The long course of the treatment. Most of the visual loss due to amblyopia is irreversible. It is widely documented that the use of occlusion therapy with partial occlusion in children with refractive anisometropic amblyopia is effective in improving visual acuity.

Partial Occlusion and Supplemental Binocular Occlusion have been used in the treatment of amblyopia. The use of occlusion for 1.5 per day and three weeks treatment at a week. Results: The mean age was 10.1 ± 0.5 years (range, 7–14 years). The mean visual acuity at baseline was 0.14 ± 0.02 logMAR. The mean age was 10.1 ± 0.5 years (range, 7–14 years). The mean visual acuity at baseline was 0.14 ± 0.02 logMAR.

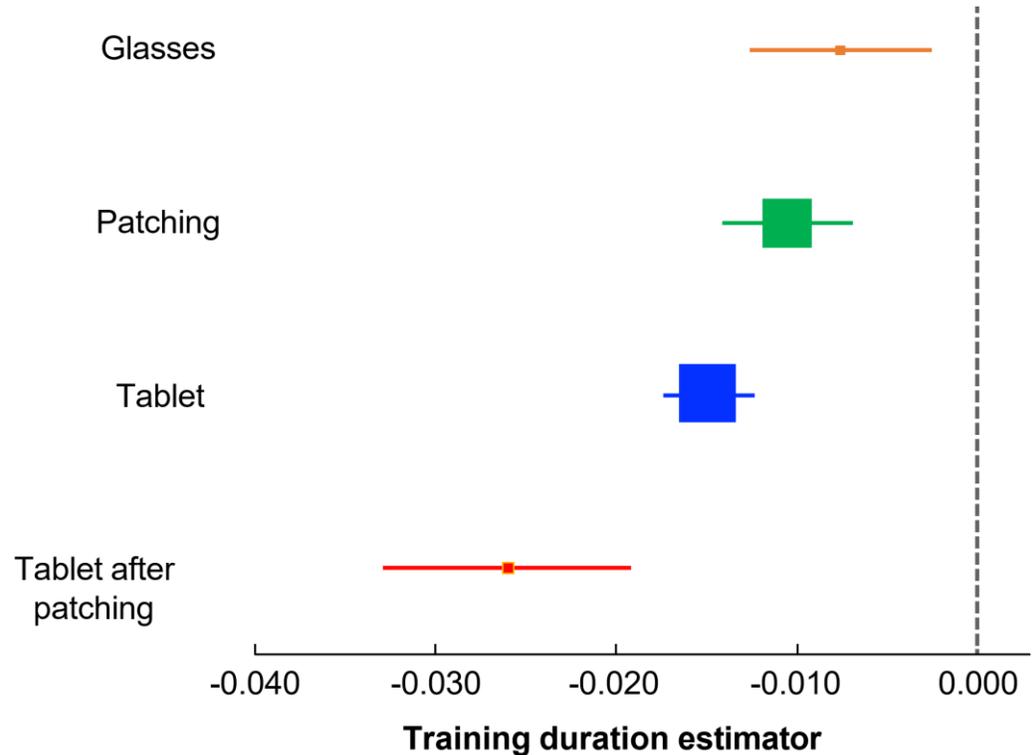
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Meta-analysis combining multiple RCTs (in mid-progress)

Significantly faster visual recovery with patching + tablet combination, tablet, patching, and glasses, in that order



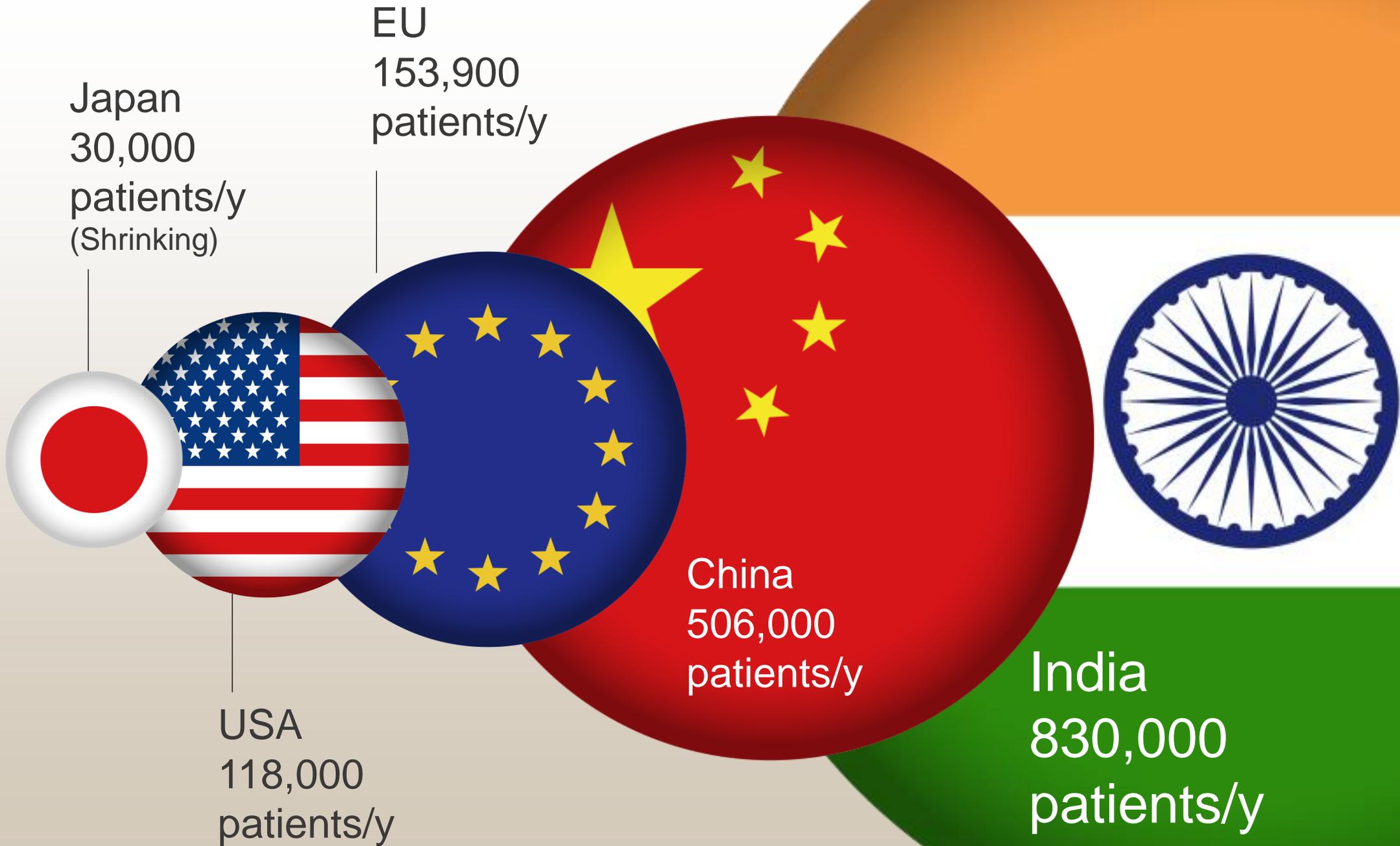
Source:
<https://library.triton.edu/c.php?g=433673&p=3720267>





インド Gujarat 州立市民病院
眼科 Kalpit Shar 医師

アイパッチは不快なので、なかなか長続きしません。
皮膚のかブレや社会的な抑圧にさらされる事もあります。



Japan
30,000
patients/y
(Shrinking)

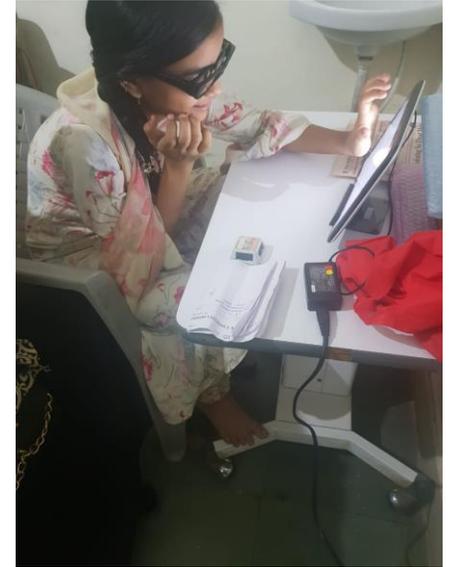
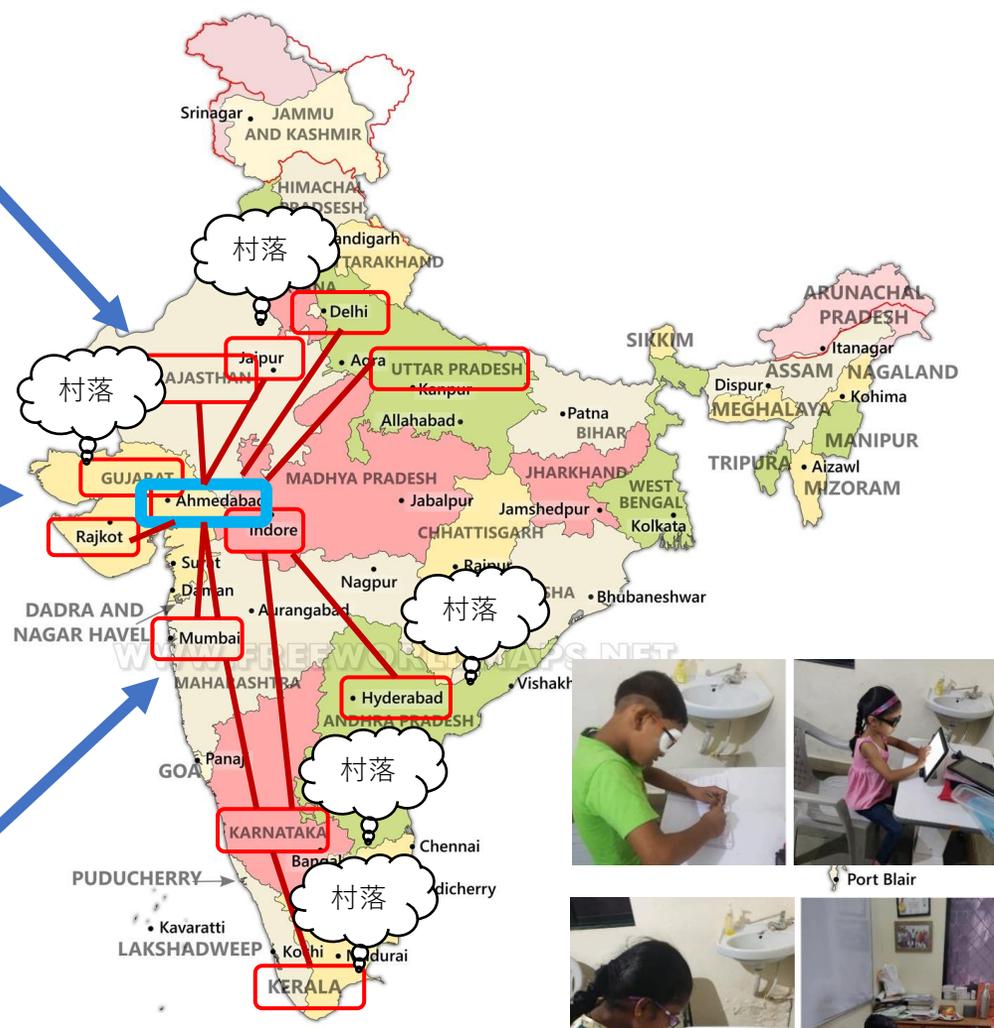
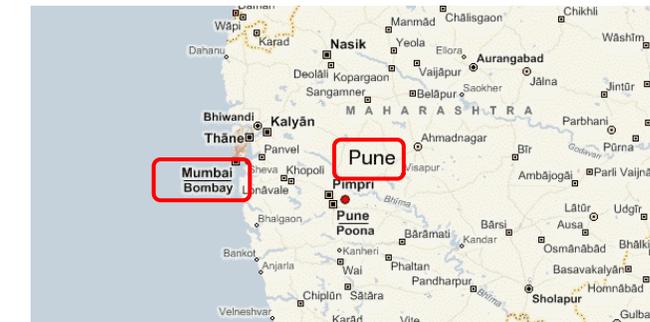
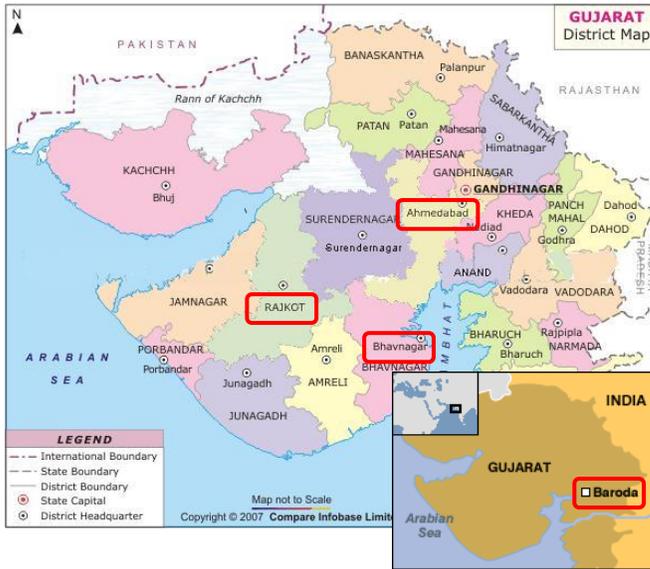
EU
153,900
patients/y

USA
118,000
patients/y

China
506,000
patients/y

India
830,000
patients/y

Clinical studies in India



No.	Organization name	Region	Class.
1	M&J Institute, RIO Ahmedabad	Gujarat	Public
2	Stavan Eyeclinic, Ahmedabad	Gujarat	Private
3	GMERS Sola, Ahmedabad	Gujarat	Public
4	Ramkrishna Mission hospital, Rajko	Gujarat	Public
5	Baroda Children Eye Care, Baroda	Gujarat	Private
6	Max vision Eye Care, Jaipur	Rajasthan	Private
7	C H Nagari Eye Hospital, Ahmedabad	Gujarat	Public
8	K J Somaiya Eye Hospital, Mumbai	Maharashtra	Trust
9	Alakh Nayan Eye Hospital, Udaipur	Rajasthan	Public
10	BPA Jamnabhai School of Optometry	Gujarat	Public
11	Vismit Eye Clinic	Maharashtra	Private
12	Rajawadi Hospital	Maharashtra	Public
13	Shradha Health Care Pvt. Ltd.	West Bengal	Private
14	Salt Lake Clinic	West Bengal	Private
15	iKure	West Bengal	Others
16	Subset Systems	Gujarat	Others
17	Bareja Eye Hospital, Blind People's Association	Gujarat	Public
18	Tejas Eye Hospital Run by Divyajyoti Trust	Gujarat	Trust
19	Children Eye Care and Adult Squint clinic (Amber clinics)	Gujarat	Private
20	Ram Krishna Eye Hospital	Uttar Pradesh	Private
21	Bhalanetra Super Speciality Eye Hospital	Maharashtra	Private
22	SEWA Rural	Gujarat	Trust
23	Prime Eye Care	Gujarat	Private

We are

- Looking to collaborate with national hospitals such as AIIMS
- Looking for people interested in marketing and manufacturing in India
- Looking to collaborate with researchers for Amblyopia treatment through video games