## Pseudoaccommodation in children

**Background** Some pseudophakic patients implanted with a monofocal intraocular lens (IOL) have good near visual acuity (VA) with their distance correction. The objective was to eval- uate the prevalence of pseudo-accommodation in children af- ter bilateral cataract surgery, without amblyopia, and to define its mechanisms.

**Methods** Observational study that took place in a pediatric ophthalmology department, Paris, France. A total of 68 eyes were included, 40 from 23 children and 28 from 14 adults, with a corrected distance VA above 20/25 and a normal near VA (20/25) with +3 addition. Pseudo-accommodation was defined as a near VA better than 20/50 with the distance cor- rection and without addition. Prevalence of pseudo- accommodation was calculated in each group. In order to determine the possible mechanisms of pseudo- accommodation in children, we compared children with pseudo-accommodation and adults without pseudo- accommodation regarding several parameters: refraction, axi- al length, corneal topography, aberrometry, pupillary diameter and IOL shift after cyclopentolate instillation.

**Results** Among the children group, 36 (90 %) had pseudo- accommodation versus 2 (7 %) in the adult group. We found that spherical equivalent, implant power, corneal multifocality and corneal higher-order aberrations (mainly coma and trefoil) were significantly higher in the pseudo-accommodation group, while pupil diameter and implant shift were not significantly different.

**Conclusions** Pseudo-accommodation has a high prevalence among non-amblyopic pseudophakic children. Several possi- ble mechanisms have been found to explain pseudo- accommodation in children: a high power of the IOL and a small axial length, maximizing the effect of the IOL shift, corneal multifocality and corneal higher-order aberrations.

**Keywords** Pseudo-accommodation · Pediatric cataract · Monofocal IOL · Aberrometry · Multifocality