It should come as no surprise that the voice activated smart speaker is a favorite technology product for people with vision loss. Finally a talking technology that is truly uncomplicated and incredibly intelligent.

If you don’t yet have one, chances are you soon will. Amazon dominated the surge in sales, selling “tens of millions” of Echo speakers during the 2017 holiday season. Google held the number two position, reporting they sold a Google Home speaker every second from mid October through December 2017, which calculates to over 7 million purchased.

The voice enabled technology is powered by artificial intelligence, also called virtual assistants and known by the names Alexa, Google and Siri. From the earliest stages of development this smart voice controlled technology has been a dream come true for people who are visually impaired. It really makes life a little easier.
The speakers are available in a range of prices from $50 to $390, depending on the size and audio quality. The functionality of Alexa and Google is consistent in all sized speakers. Apple is just beginning to deliver its own smart speaker, Home Pod at $349. A woofer, custom amplifier and 7 tweeters are expected to provide a highly superior sound, but its intelligent assistant, Siri, ranks a distant third behind Alexa and Google.

Amazon announced they will reallocate company resources to maximize the Echo Alexa business. Google and Apple will do their best to elevate their assistants to try and out-do Alexa. We’ll see plenty more competition from the likes of Microsoft, Samsung, LG and others. That means more choices and even better technology to come.

The thrill of turning on the lights with your voice is here for the asking. The speaker can become the hub for your smart home. Wifi connected outlets make upgrades easy to execute and there are thousands of Alexa, Google and Siri compatible products on the market already.

Here are just some of the things you can do with your smart speaker:

- Play music by artist, song, album or genre
- Get the news
- Set a timer or an alarm
- Listen to popular podcasts or radio
- Find a TV program
- Get calendar events and reminders
- Get weather, traffic, travel and flight information
- Turn on the lights
- Check dictionary for spelling and definitions
- Control the thermostat
• Play games
• Calculate simple and complex mathematics
• Create a shopping list
• Cook with step by step recipes
• Answers a multitude of questions
• Request a Lyft
• Get stock quotes
• Find a restaurant or local business
• Find out what movies are playing locally

The set up process begins with an app downloaded to your smartphone. This is exactly where we became acquainted with our first virtual assistant, Siri. Visually impaired iPhone users were delighted to be among the earliest beneficiaries of this accessible technology, and now it’s nice to see everyone else follow. ■

SHOULD FLOATERS AND FLASHES CONCERN PATIENTS?

by Yale L. Fisher, MD

To understand why floaters and flashes happen, you first need to review a little bit of eye anatomy.

The eye is essentially a ball which I like to divide into three areas of interest. The front (or cornea) is the window that allows light into the the eye. The middle is composed of the iris, pupil and focusing lens. Behind the iris-lens area is a large cavity filled with a clear gel-like substance called vitreous. And behind the gel is the back wall that is lined with a thin “wallpaper” called the retina. Most do not realize that the retina is actually an extension of the brain. So retina is really brain tissue! It is
responsible for transforming light that enters the eye into electrical signals that are processed and interpreted by the rest of the brain into shape and color. You really do not see with your eye. The eye is really a transducer of energy, light into electrical signals. The rest of your brain forms the image.

Why is the doctor so interested in FLASHES and FLOATERS?

The usual normal process of vitreous gel aging and separation from the retina occurs over a lifetime and does not usually cause problems. The gel liquefies and collapses separating from the retina. During this process, the patient may begin to notice small translucent or darker particles occasionally “floating” in their field of view. These floaters represent the projected shadows of fine vitreous particles floating in front of the retina. In some situations, however, the separation of the gel occurs too suddenly or the pull of the gel is too forceful for the delicate retina resulting in retinal tears. Usually, these more violent vitreous separations are associated with more symptoms more noticeable flashes and floaters. (The retina does not have pain fibers only light fibers so when pulled or torn, light flashes are seen). Doctors take all flashes seriously. With careful examination, it is possible to determine if tears occur and treat damaged areas before any further changes follow.

Often a tear may be associated with many floaters, not just a few minor shadows, but large clumps. These larger and
more numerous floaters often represent the clotted blood that exudes from vessels at the edge of the torn retina. These clots absorb over time, the floaters appear to decrease. The tear or tears do not repair themselves and some permit liquid to invade beneath the retina producing first a blister of retinal tissue around the tear(s). With time and eye movement, more and more fluid infiltrates under the retina creating a larger separation of the retinal “wallpaper”. When larger separations are present they are called retinal detachments. A detached retina is seen by the patient as an increasing shadow or veil-like black area within the normal field of view. Detachments require more extensive treatment (often surgery) to reattach the separated areas.

So floaters may be simply a normal aging process (common) or a symptom of something more ominous. Most individuals go through the process of vitreous gel separation without tear formation, however, it is always prudent to have a careful exam until the gel separation is complete and symptoms subside. Strong flashes and many floaters are more alarming symptoms and are more often associated with damage that may require immediate attention. Early detection is the best way to improve the chances for success in treating retinal tears and avoiding detachments with potential serious vision loss.

An examination is always better sooner than later.
One of the most frequently asked questions from people living with low vision is: How do you read the restaurant menu? There are many good options for accomplishing this task depending on the degree of visual impairment.

This is all about making adjustments, and accepting that picking up a menu and reading it the way you once did, may not be something you can reenact. Keep in mind the goal is to select food you will enjoy, not to read every dish on the menu. Here are some of the ways we can successfully overcome the challenges of menu reading and return to savoring the culinary and social experience.

- **Flashlights & Magnifiers**
  It is not at all unusual to see people in dimly lit restaurants pull out their mobile phone flashlight and point it at the menu. The same goes for magnifiers, sometimes in the phone, sometimes on their own with the light built in. So no need to feel different — everybody’s doing it.

- **Online Menu** — Making a menu selection in advance will allow you to relax. Google search “menu” + the restaurant name to review choices.

- **Ask** — It is perfectly fine to ask a companion to read some sections from the menu to you, but try to ask for specific categories like, “What are the salads or soups?” Also, ask if there is a large print menu.
• **Specials** – Ask the wait staff for the specials of the day or for their recommendations in specific categories.

• **Seeing AI** – The iPhone app from Microsoft has 2 channels that can be useful for menu reading. The Short Text channel can be pointed at sections of the menu and will instantly read it back to you. The Document takes and reads back an entire page.

In essence, just put this struggle down and figure out the easiest method of selecting your menu items and enjoying the food, the company, the conversation, and the atmosphere. It’s even okay to say, “I’ll have what she’s having.”

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**LOW VISION GOURMET**

**RASPBERRY COULIS RECIPE**

*by Pamela Loeb and Bernard Landou*

A sweet sauce for dressing up desserts and savory dishes.

**Ingredients:**
- 1 package frozen raspberries, thawed
- 1/3 cup granulated sugar
- 1/4 cup water
- 1 tablespoon liquor (optional)

Mix together berries, sugar and water in a small saucepan. Cook over medium heat, stirring until little bubbles form around the edge, about 5 minutes. Remove from heat and let cool. Press sauce through a strainer to remove seeds.

Taste for sweetness and add sugar if needed. Makes about 1 cup. Refrigerate and use within 3 days.
It’s amazing that just a few ingredients can transform such a wide array of foods. Take a look.

**Baked Goods:**
chocolate, angel food, lemon and other cakes including, of course, cheesecake.

**Cold Stuff:** ice cream, gelato, sherbet and sorbet. **Fruit:** watermelon, cantaloupe, honeydew, etc.

**Savory:** picture a plate with 2 golden brown, fried in butter, cheese blintzes cradling a mega-dollop of sour cream that borders on a pool of ruby-red raspberry coulis. And Eve settled for an apple.

Finally, if the occasion or mood warrants, you can make the dishes even more special by adding a liquor such as Grand Marnier, Mandarine Napoleon or Framboise. Should you elect to do so, add 1 tablespoon of your chosen liquor to the berry mixture as it cooks.

Utterly simple sauce makes food magic.