



Personal Data

Name : OK_17
 Sex : male
 Age : 17

Numerical Data Analysis

PARAMETERS OF THE IRIS :	S	D
Diameter (pix) =	390	390
Area (pix)	119459	119459
PARAMETERS OF THE PUPILLARY BORDER :		
Diameter (pix)	94	90
Diameter of the pupil in relation to iris (%)	24	23
Normal for current age 28-40%	Miosis	Miosis
Pupil border deformation degree (normal:0%...5%)	18	16
PARAMETERS OF THE PUPIL RELATIVE TO THE IRIS :		
Distance between the pupil and iris centers (%)	6.15	4.10
Normal (lower than 5% of above) or pathology	Pathology	Normal
PARAMETERS OF THE APPROXIMATE ELLIPSE		
Ellipseness degree of the pupil (normal: 95% ... 100%)	90	95
	Pathology	Normal
Pupil form type	ellipse	chord
	Pathology	Pathology
PARAMETERS OF THE PUPILLARY MARGIN :		
Type of the form -	regular	regular
	Normal	Norma

S : Frontal drawing in (10:56 - 0:36) - 2.13 %
 S : Middle-temporal flatness (2:12 - 3:50) - 14.89 %
 S : Middle-nasal flatness (7:56 - 9:26) - 4.26 %
 S : Upper-nasal decentralization.
 S : Oval-vertical form of the pupil.

D : Middle-nasal protrusion (2:44 - 4:12) - 4.44 %
 D : Decentralization of the pupil is normal.
 D : Ellipseness of the pupil is normal.

Chronic inflammatory processes in nasopharynx.
 Tonsillo-cardial syndrome.
 Increased fatiguability.
 Inborn weakness of the pancreas.
 Circulatory cerebral disturbance with risk of spastic variation.

PARAMETERS OF THE AUTONOMIC NERVE WREATH (ANW):	S	D
Diameter (pix)	186	160
Perimeter (pix)	762	584
The ratio between Pupillary and Ciliary belts (%)	31.08	23.33
Normal (25..35%) or pathologic.	Normal	Spastic
Asymmetry of pupillary belt (normal: 0..5%)	5.38	6.25
Type of the ANW form -	Pathology indented	Pathology drawn in Pathology

D: Upper nasal shift.
 D: Basal zone of pupillary belt is constricted.
 S: Lower temporal shift.
 S: Frontal zone of pupillary belt is constricted.
 Functional frustration in correlation between sympathetic and parasympathetic nervous systems. (The origin should be specified?)
 Reduction of lungs ventilation.
 Neurocirculatory dystonia.
 Weakness of smooth muscles. Initial manifestations of pathology in compensation state.
 Chronic duodenitis. Initial manifestations of pathology in compensation state.
 Function weakness of large intestine.
 Increased emotional lability, predisposition to spastic reactions. Overstressed state.
 Metabolic disturbance, decrease of elastotonic features.
 Initial vertebral osteoarthritis.