



Incorporating Myopia Management Into Practice

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VEW 2023

Financial Disclosures

Brianna Rhue

- Co-Founder Dr. Contact Lens
- Co-Founder TechifEYE
- MAB- OSRX Pharmacy
- Principal Investigator- STAAR Study
- Medical Advisory Board- Visus
- Speaker Bureau- Bausch & Lomb Specialty Vision Products
- Speaker Bureau- Coopervision
- PAC- Johnson & Johnson

Melanie Fragozo

- Euclid
- Coopervision
- ABB Optical Group
- Vyluma
- Boston Sight

All relevant relationships have been mitigated.

Goals

- How to KISS myopia management for your practice
- Get back to your why
- How to simplify the myopia management process for success



Invest in Your Future

- Thank you for being here
- Keep learning
- You never know what you will want to do next



The Optometric Oath

With full deliberation, I freely and solemnly pledge that:

- I AFFIRM that the health of my patient will be my first consideration.
- I WILL practice the art and science of optometry faithfully and conscientiously, and to the fullest scope of my competence.
- I WILL uphold and honestly promote by example and action the highest standards, ethics and ideals of my chosen profession and the honor of the degree, Doctor of Optometry, which has been granted me.
- I WILL provide professional care for the diverse population who seek my services, with concern, with compassion and with due regard for their human rights and dignity.
- I WILL strive continuously to broaden my knowledge and skills, so that my patients may benefit from all new and efficacious means to enhance the care of human vision.
- I WILL place the treatment of those who seek my care above personal gain and strive to see that none shall lack for proper care.
- I WILL hold as privileged and inviolable all information entrusted to me in confidence by my patients.
- I WILL advise my patients fully and honestly of all which may serve to restore, maintain or enhance their vision and general health.
- I WILL strive continuously to broaden my knowledge and skills so that my patients may benefit from all new and efficacious means to enhance the care of human vision.
- I WILL share information cordially and unselfishly with my fellow doctors of optometry and other professionals for the benefit of patients and the advancement of human knowledge and welfare.
- I WILL do my utmost to serve my community, my country and humankind as a citizen as well as a doctor of optometry.
- I HEREBY commit myself to be steadfast in the performance of this my solemn oath and obligation.

Plant seeds



Happy Anniversary iPhone



NEWS RELEASE
June 8, 2023

Apple provides powerful insights into new areas of health

iOS 17, iPadOS 17, and watchOS 10 introduce mental health and vision health features, and the Health app arrives on iPad

- ▶ iPhone, iPad, and Apple Watch offer new vision health features that encourage healthy behaviors that help reduce the risk of myopia
- ▶ "Mental health and vision health are important, but often overlooked, and we're excited to introduce features that offer valuable new insights to provide users with an even better understanding of their health. These insights help support users in their daily decisions and offer more informed conversations with their doctors." Sumbul Desai, M.D., Apple's vice president of Health

Apple Health


- Stand goal
- Breathe
- Heart rate monitoring/EKG/Pulse
- Fitness tracking
- Screen time
- Sleep
- Oxygen level
- Mental Status
- Medications
- Noise level

Apple: We have new technology to help you hold your phone further away to protect your eyes


Also Apple: We have new technology to put 2 screens 1 inch away from your eyes!

4:00pm on a Friday

Stop being myopic about myopia management!



November 30, 2022



ChatGPT

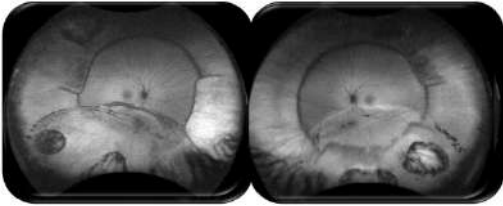
Chat GPT




Chat GPT



-13.00 so what...



Resolution: The Standard of Care For Myopia Management by Optometrists



World Council of Optometry Resolution
The Standard of Care For Myopia Management by Optometrists

1. Defines the evidence-based standard of care as comprising of three main components:

- **MITIGATION** - educating parents and patients on risk factors to delay onset of myopia
- **MEASUREMENT** - regular eye exams (frequency not advised by the WCO) with measurement of refractive error and axial length wherever possible
- **MANAGEMENT** - addressing patient needs today by correcting and attempting to control myopia, for improved quality of life and better eye health today and into the future.

A little about me...



My Myopic Passion



Myopia and the Media



Our Digital Era



FDA approves first contact lens indicated to slow the progression of nearsightedness in children

The Ocular Health | November 13, 2021

Johnson & Johnson Vision's ACUVUE Abiliti OrthoK Receives FDA Approval

May 12, 2021

Johnson & Johnson Vision Receives Approval in Canada for ACUVUE® Abiliti™ 1-Day Soft Therapeutic Lenses for Myopia Management

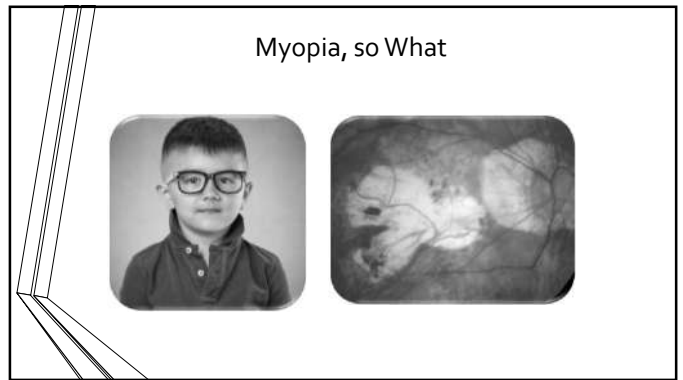
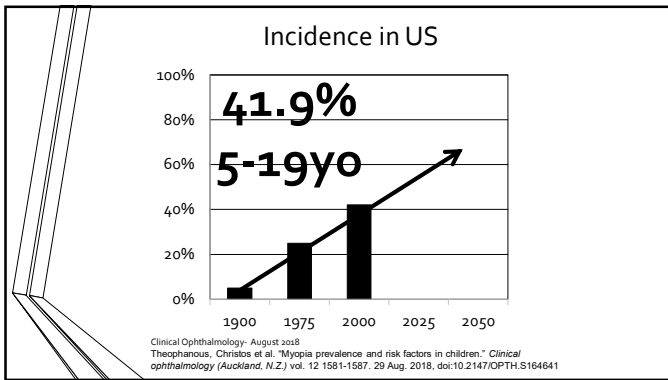
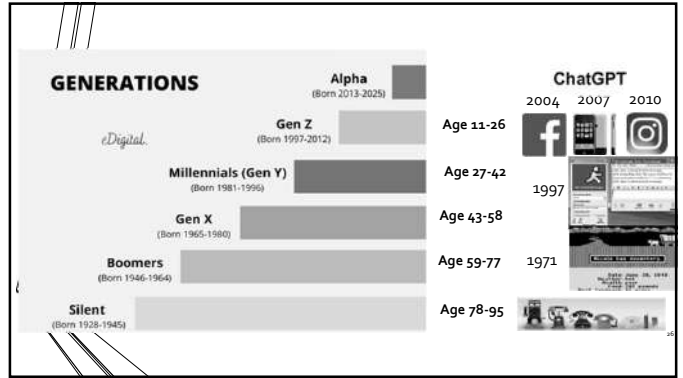
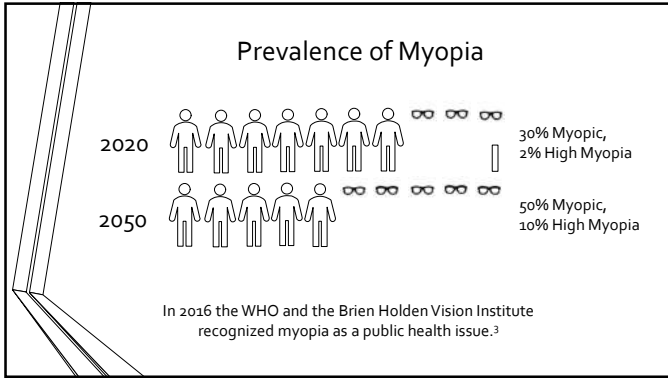


NEVER PROVIDED BY Johnson & Johnson Vision

SHARE THIS ARTICLE

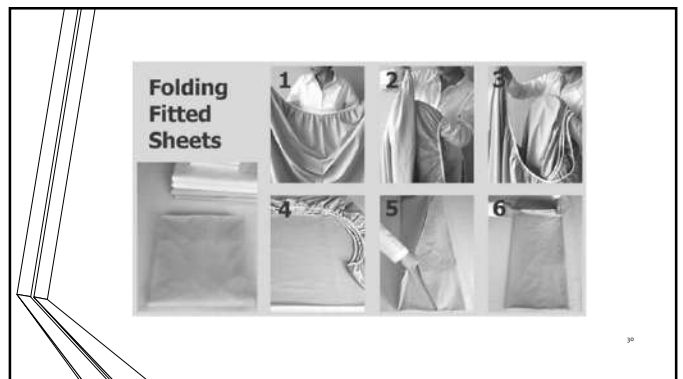
Myopia Guide

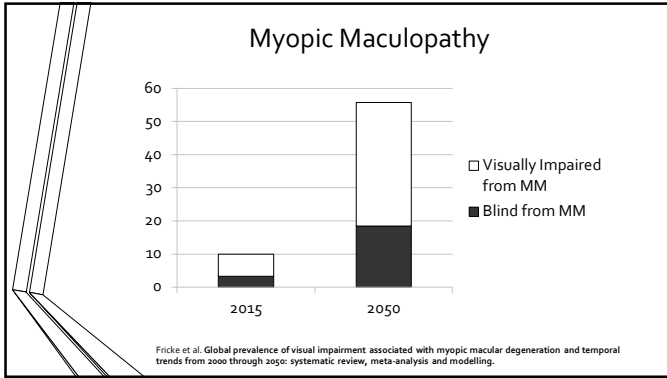




Why the Big Deal?

- Myopic Maculopathy
 - Stretched blood vessels
 - Peripapillary atrophy
 - Posterior staphyloma
 - Lacquer cracks
 - Geographic atrophy
 - Subretinal hemorrhages
 - Choroidal neovascularization





Myopic Maculopathy

Average Age
47.7 ± 14.2
Years
Range: 7 to 76

Average
Visual Acuity
20/50

Fang Y, Yokoi T, Nagaoka N, Shinohara K, Onishi Y, Ishida T, Yoshida T, Xu X, Jonas JB, Ohno, Matsui K. Progression of Myopic Maculopathy during 18-Year Follow-up. Ophthalmology. 2018 Jun;125(6):863-877. doi: 10.1016/j.ophtha.2017.12.005. Epub 2018 Jan 19. PMID: 29371011.



The Disruptees can become the Disruptors

How many ODs, ethically, have stopped fitting single vision soft lenses on kids who are progressing myopes? No judgement. Even if not doing myopia control, would you fit a multifocal just to get some plus on the eye?

This is almost as ridiculous as saying you'd refuse to give a myopic child glasses because they're likely to progress. I'm all for advocating myopia control but there is not an ethical conflict here.

Like Reply 27

Dear Lord...Myopia is not the plague!! Enough of this fear mongering. Thank God I'm a -3, my daughter a -5.50, and my wife a -6!!! It helps immensely with our CI at 12, 16, 20 XP respectively.

Like Reply 20

1800contacts®

- ### The Game Plan
1. Commit
 2. Kids
 3. Analyze your practice
 4. Educate yourself
 5. Build your program-
 6. Staff training
 7. Invest in equipment
 8. The Myopic Exam
 9. Select the Treatment
 10. Elevator Pitch
-
- 35

Goal

Keep myopia below -3.00
and
Axial length below 26mm

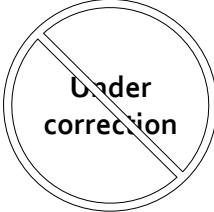
Myopia Control vs Myopia Management

Myopia Control	Myopia Management
<ul style="list-style-type: none"> - Slows the progression of myopia in age-appropriate children • MiSight 	<ul style="list-style-type: none"> - Refers to the decision to implement a strategy to slow down the progression of myopia in a child • Low-dose atropine • Ortho-k • Soft multi-focals

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Single Vision Glasses & Contacts

- Single vision glasses & contacts have **NO** effect on slowing progression
 - 80% of practitioners acknowledged this
- 64% of myopic children around the world are treated with a single vision option



James Wolffsohn: Global trends in myopia management attitudes and strategies in clinical practice – 2019 Update

Step 1: Commit



Rethink "Refractive error"

disease [dih-zeez] SHOW IPA ☆

See synonyms for: disease / diseased / diseases / dis-easing on Thesaurus.com

Elementary Level

NOUR

1. a disordered or incorrectly functioning organ, part, structure, or system of the body resulting from the effect of genetic or developmental errors, infection, poisons, nutritional deficiency or imbalance, toxicity, or unfavorable environmental factors; illness; sickness; ailment.
2. any abnormal condition in a plant that interferes with its vital physiological processes, caused by pathogenic microorganisms, parasites, unfavorable environmental, genetic, or nutritional factors, etc.
3. any harmful, depraved, or morbid condition, as of the mind or society: His fascination with erections is a disease.
4. decomposition of a material under special circumstances: fire disease.




Redefining Myopia

- Old definition: A refractive error in which rays of light entering the eye parallel to the optic axis are brought to a focus in front of the retina when ocular accommodation is relaxed
- A modern definition: Myopia is a chronic, progressive disease characterized by excessive eye elongation, risk of associated sight-threatening complications, and a negative-powered refractive error.

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Step 2

Kids... You have to want and LIKE to see kids

Step 3- Analyze your Practice

Clinic By Refractive Error

Refractive Error	Percentage
Myopia	20%
Hyperopia	10%
None	6%

- Myopia
- Hyperopia
- ▣ None

Step 4- Educate Yourself-

- Brien Holden Myopia Course
 - <https://bhvi.org/myopia-education-program/>
- Myopia Profile
 - Myopiaprofile.com + Myopia Profile Facebook Group
- Vision By Design Conference- Sept 6-10
- Review of Myopia Management
- Bullers2020.com
- MI Sight Certification
- Abiliti Certification
- Treehouse Eyes
- Hoot Myopia
- OK Love

Step 5- Developing your Program

- Develop your program before you start treating your first patient
 - How will you present the options
 - Different visit- Myopia Consultation
 - This is a non-covered service billed outside of any managed care insurance or vision program
 - Evaluate Chair Cost- what you charge maybe different from what your neighbor charges
 - Global fee
 - Per visit fee
 - Missed follow up visits?
 - Handouts
 - Contracts
 - Compounding pharmacy
 - Ortho-k training/in office fitting vs empirical fitting

Step 6- Staff Training


- Answering the phone
 - How to present fees
 - Price shopping
- Your website
- Your office
- Word of Mouth

Step 7- Equipment

- Topography
- Axial length

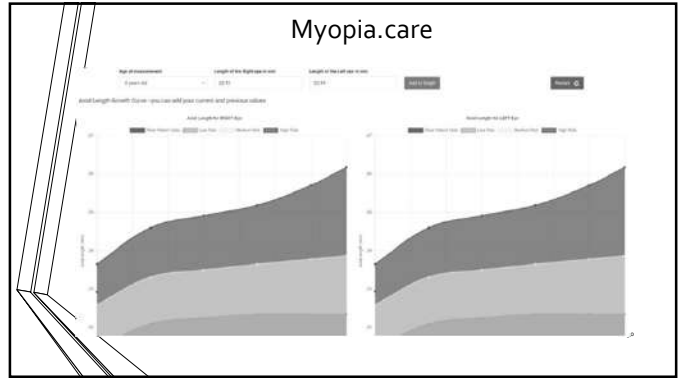
Axial Length Devices

Measuring Axial Length



Dalton	Myself	Dalton	Myself
OD: 22.92	OD: 25.11	OD: +1.00	OD: -5.50
OS: 22.94	OS: 25.17	OS: +1.00	OS: -5.50

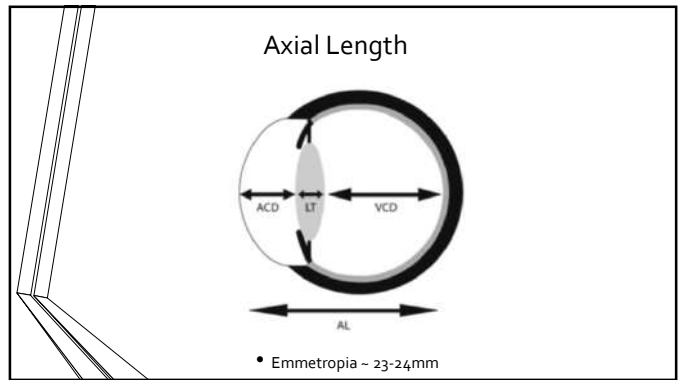
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How easy is it?



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Axial Length

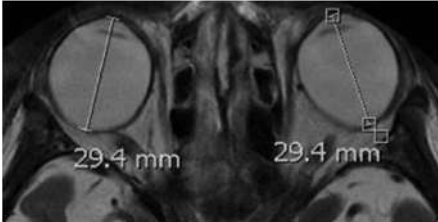


Photo Courtesy of Joshua Pasol, MD

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Axial Length Norms*

Age	Girls	Boys	European	Chinese
6-7 yo	22.75 mm	23.05 mm	22.33 mm	22.77 mm
8-9 yo	23.29 mm	23.65 mm	23.05 mm	24.02 mm
10-11 yo	23.76 mm	24.09 mm	-	-
12-14 yo	23.80 mm	24.25 mm	23.40 mm	24.69 mm

*Caution must be taken when applying this data clinically, as many confounding factors affect these norms, including but not limited to, gender and racial background.

Fuentsanta A. Vera-Diaz, OD, PhD, FAAO. The Importance of Measuring Axial Length. Review of Myopia Management. August 9, 2020 <https://reviewofmm.com/the-importance-of-measuring-axial-length-when-managing-childhood-myopia/>


Axial Length & Refractive Error

	Refractive Error	Axial Length
OD	-4.75-0.75x010	23.91
OS	-5.00-0.75x180	24.11

	Refractive Error	Axial Length
OD	-5.50-0.50x180	27.28
OS	-5.50-0.50x165	27.24

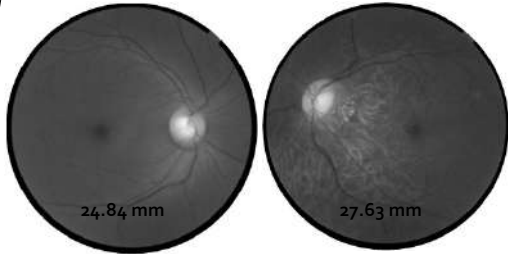
*Refractive error does not necessarily correlate with axial length

Refraction and Axial Length



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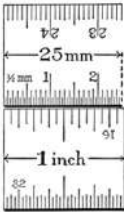
Axial Length and Myopic Disease



24.84 mm 27.63 mm

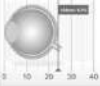

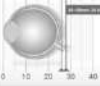


Diopters are easy to measure, but myopia management is about axial length control

Move from diopters → millimeters

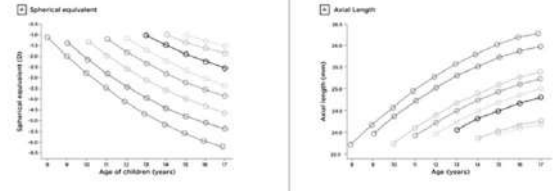


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Risk of Visual Impairment by Age 75

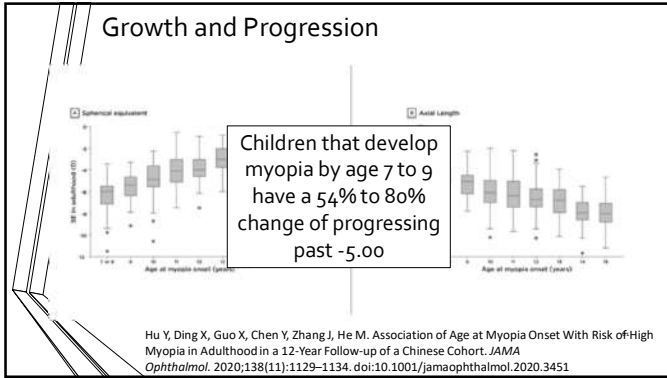
AL < 24 mm	24 ≤ AL < 26 mm	26 ≤ AL < 28 mm	28 ≤ AL < 30 mm	AL ≥ 30 mm
				
6.9%	3.6%	25.4%	26.6%	90.6%

Tideman JW, Snel MC, Tedja MS et al. Association of Axial Length With Risk of Uncorrectable Visual Impairment for Europeans With Myopia. JAMA Ophthalmology. 2015;134:1355-63. 59
<https://www.youtube.com/watch?v=5X5gYt8AHE>



- The earlier the onset the higher chance for high myopia

Chua SY, Sabanayagam C, Cheung YB, Chia A, Valenzuela RK, Tan D, Wong TY, Cheng CY, Saw SM. Age of onset of myopia predicts risk of high myopia in later childhood in myopic Singapore children. Ophthalmic Physiol Opt. 2016 Jul;36(4):388-94. doi: 10.1111/oppo.12305. PMID: 27350183. 60



Axial Length vs Refractive

- 5 Year old- Parents worried about retina and wanted second opinion on what to do
 - Current Spectacle:
 - OD: -8.00-0.75x164 20/100
 - OS: -5.00-1.75x178 20/60
 - Refraction:
 - OD: -10.00-2.00x180 20/60
 - OS: -5.50-2.00x010 20/50
 - Cyclo:
 - OD: -10.00-2.00x180
 - OS: -5.50-2.25x010

5 Year Old

	Refractive Error	Axial Length	K's
OD	-10.00-2.00x180	25.30	49.93@089/47.74@179
OS	-5.50-2.00x010	24.73	48.28@097/45.73@007

Calculating Axial Length with What You Have

Axial Length Estimator

Axial Length Estimate ⓘ

Right Eye	25.81 mm	Left Eye	24.83 mm
	25.30		24.73

<https://coopvision.co.uk/practitioner/clinical-resources/myopia-in-children/axial-length-estimator/calculator>

5 Year Old

TX: Update RX parents education full time wear
 Start Atropine 0.025% 1 drop QHS
 RTC 4 weeks atropine follow up then every 3 months

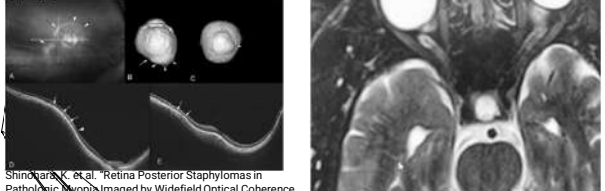
Why the Big Deal

Refraction	PSC Cataract	Glaucoma	Retinal Detachment	Myopic Maculopathy
-1.00 to -3.00	2	2	3	2
-3.00 to -6.00	3	3	9	9
-6.00 to -7.00	5	3	21	41
>-7.00			44	126

Flitcroft DI. The complex interactions of retinal, optical and environmental factors in myopia aetiology. *Prog Retin Eye Res.* 2012;31:622-60.

Axial Length

- Heavy Eye Syndrome
- Kinked Optic Nerves

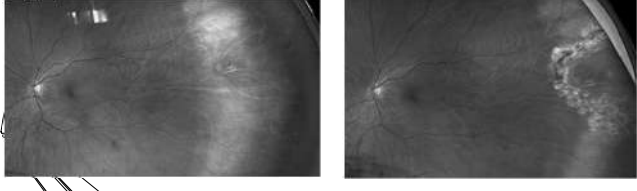


Shinozaki K, et al. Retina Posterior Staphylomas in Pathologic Myopia Imaged by Widefield Optical Coherence Tomography. 2017.

Image Courtesy Joshua Pasol, MD

Why is this all so important?







- 59 year old comes in for annual exam – no complaints
- OD: -3.25 sph
- OS: -3.50-0.25 x 010




Step 8- The Myopic Exam

- History (Family history, near work, outdoor time)
 - Assess the risk factors
- Age of onset, progression (if myopic)
- Visual acuity (uncorrected, best corrected)
- Corneal topography
- Pupil size- dim and light
- Binocular vision (lag, eso/exophoria, AC/A)
- Axial Length (average of at least 5 readings)
- Pachymetry
- Objective/subjective cycloplegic refraction
 - 1% Tropicamide → 2 drops 5 minutes apart
- Anterior/posterior examination
- IOP

Assess the Risk Factors

- Genetics 
- Near Work 
- Outdoor time 
- Education 
- Ethnicity 
- Age of Onset
 - Current prescription 
- Other (prematurity, diet, light exposure)



What is the Cycloplegic Refraction?

Age	Normal	Refractive Error @ Risk
6 years old	+1.75 → +1.50	+0.75 or less
7 years old	+1.50 → +1.25	+0.50 or less
8 years old	+1.00	+0.50 or less
9 years old	+0.75	+0.25 or less
10 years old	+0.50	+0.25 or less
11 years old	+0.50 → +0.25	0.00 or less

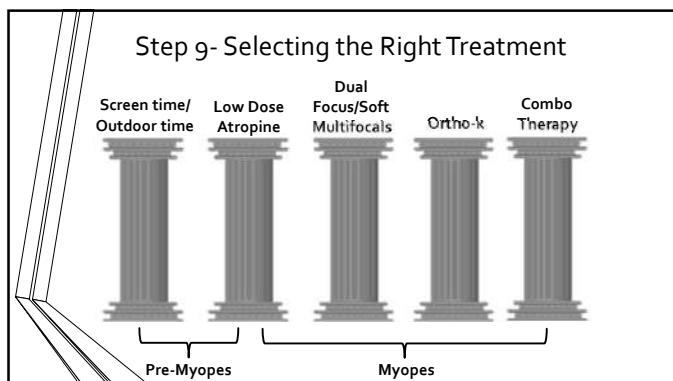
- Tropicimide 1%, 2 drops 5 mins apart
- Follow up every 6 months, sooner if risk factors are high or patient is changing

Pre-Myopes

≡ < +0.75 @ 6-7yo is high risk

- Independent of family history, ethnicity and other optical and environmental factors.⁷
- Fastest change in refraction is year before onset.
- Watch for eso and lag of accommodation

Jones-Jordan LA, Sinnott LT, Manny RE, Cotter SA, Kleinstein RN, Mutti DO, Twilker JD, Zadnik K, Ethnicity ICLEO, Refractive Error Study Group. Early Childhood Refractive Error and Parental History of Myopia as Predictors of Myopia. Invest Ophthalmol Vis Sci. 2020;61(1):115-21



Why Every Diopter Matters

- 3 benefits of lowering a patient's level of myopia for the long-term care
 - Less visual disability when uncorrected
 - Better options for, and outcomes from, surgical myopia correction
 - Reduced risk of blindness associated with higher levels of myopia

Bullimore, Mark A. MCOptom, PhD, FAAO[®]; Brennan, Noel A. MScOptom, PhD, FAAO[®]
Optometry and Vision Science: June 2019 - Volume 06 - Issue 6 - p.463-465

Treatment Goals

- Present the options to the parent and child and decide together what is best
- Set realistic expectations for treatment
- Atropine, MF contacts, Ortho-k all have around 50%-70% efficacy *depending on studies
 - Children will still likely progress depending on age of onset
 - Which ever method you choose you are providing evidence based myopia treatment
- Atropine should be reserved for younger children and contacts lenses should be fit as soon as patient and parent are ready to help slow progression even more
- Dual treatments are becoming more common

So What If No Tx...

Brien Holden Calculator: <https://bhvi.org/myopia-calculator-resources/>



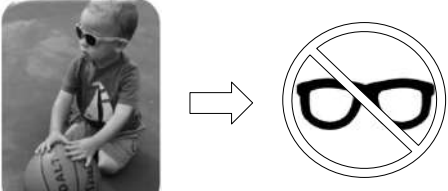
Screen time Recommendations

American Academy of Pediatrics
DEDICATED TO THE SERVICE OF ALL CHILDREN

<p>18 months or younger</p> <p>No screens are still best. The exception is live video chat with family and friends.</p>	<p>18 months to 2 years</p> <p>Limit screen time and avoid solo use. Choose high-quality educational programming, and watch with kids to ensure understanding.</p>	<p>2 to 5 years</p> <p>Limit screen time to an hour a day. Parents should watch as well to ensure understanding and application to their world.</p>	<p>6 or older</p> <p>Place consistent limits on the time spent and types of media. Don't let screen time affect sleep, exercise or other behaviors.</p>
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American Academy of Pediatrics

Get Outside and Play



40- 80 minutes **↓23% to 50%**


Dharani, R et al. "Comparison of Measurements of Time Outdoors and Light Levels as Risk Factors for Myopia in Young Singapore Children." *Eye* 26.7 (2012): 911-918.

Pre-Myopes & Myopes

THE 20-20-20 RULE
Reducing the effects of Computer Vision Syndrome

EVERY 20 MINUTES... TAKE A BREAK FOR 20 SECONDS... AND LOOK AT AN OBJECT 20 FEET AWAY!


2



Relationship between Sleep and Myopia

Relationships between Sleep Duration, Timing, Consistency, and Chronotype with Myopia among School-Aged Children

- 10,142 children surveyed (7-12 yo)
- 42% of children meet the recommendation for sleep (9-11 hours)
- Later bed time and later wake up time increased risk
- Shorter sleep duration had increased risk



<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9325560/>


Optical Correction

CooperVision and Essilor Partner to Accelerate Access to SightGloss Vision Technology & Expand Myopia Management Category

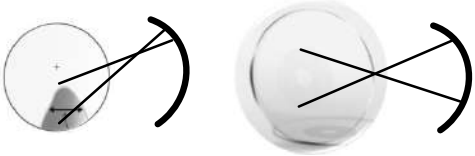
HOYA +MyoVision™ by ZEISS

ESSILOR LENS CHANGING STEELERS™ LENS SHOWN TO SLOW DOWN MYOPIA PROGRESSION IN CHILDREN BY MORE THAN HALF, AFTER ONE-YEAR INTERIM CLINICAL TRIAL.

Myopilux Max Myopilux Pro



Optical Correction




Atropine Treatment Protocol

- 1 drop 0.025% or 0.05%(QHS) daily
- Can start as young as 3 years old
- Slows rate of progression by 30% - 70% concentration dependent
- In the first 6 months, may still see progression

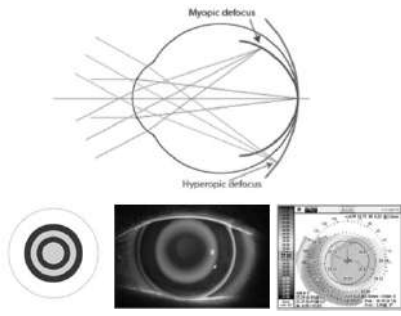


Look for a 2mm dilation in pupil

Atropine Evaluation Schedule

- 4 week follow up (make sure they got their drops and are using them)
- 3 month after starting to ensure no side effects/compliance
- Start assessing treatment efficacy at 6 months
- Assess for progression every 6 months
 - VA
 - Binocular vision
 - A-scan
 - Refraction/Topography
 - If >0.25-0.50 D of change at 1year consider changing dosage
- If stable for 2 years or past the age of 13 → Taper

Controlling Peripheral Focus



MiSight® 1 day myopia control soft contact lenses

Two correction zones to correct myopia so children enjoy clear, spectacle-free vision



Two treatment zones (2.00D myopic defocus) to place the treatment zone image in front of the retina

● treatment zones creating myopic defocus
○ correction zones

MiSight Study

- Three-year randomized, controlled clinical trial (4 study sites)
- 135 children ages 8 to 12 at the start of treatment
- MiSight vs. conventional soft contact lens
- Results – (for the full three-year period) progression in myopia of those wearing MiSight lenses was less than those wearing conventional soft contact lenses
- In addition, subjects who used MiSight had less change in the axial length of the eyeball at each annual checkup.
- There were no serious ocular adverse events in either arm of the study

Slowed progression by:
59%
cycloplegic spherical equivalent (SE)
and
52%
mean axial elongation of the eye

<https://www.fda.gov/news-events/press-announcements/fda-approves-first-contact-lens-indicated-slow-progression-nearsightedness-children>

The Future of Soft Contact lenses for Myopia Management

September 8, 2021

Johnson & Johnson Vision Receives Approval in Canada for ACUVUE® Abiliti™ 1-Day Soft Therapeutic Lenses for Myopia Management



Menicon Bloom Day™


Menicon BLOOM™

Benefits:

- Soft daily contact lens CE approved for myopia control in Europe
- Myopia control and myopia correction combined
- Lens fitting and progress monitoring via optional, easy-to-use Easyfit module
- Direct contact and monitoring of patients through the Menicon Bloom app and Menicon Bloom Easyfit
- Clear agreements between eye care specialist and patient through informed consent
- Very hygienic, clean up of lenses every day

Dual Focus Soft Contact Lens Evaluation Schedule


- Year 1 Follow up schedule
 - 1 week
 - Enroll in the program
 - 1 month
 - Can be done in the office (highly preferred or via telemedicine)
 - Then every 3 months for the first year
- Year 2 Follow up schedule
 - Annual exam
 - Every 6 months if progression has slowed <-0.50D



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Astigmatism >1.25

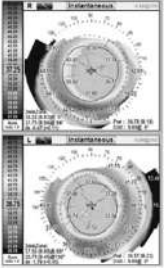
- Extended depth of focus
- Center distance
- Can fit empirically with K's and refraction
- Hybrid Lenses
- Ortho-k



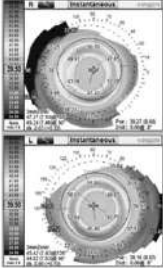
ANNOUNCING!

Which is which?

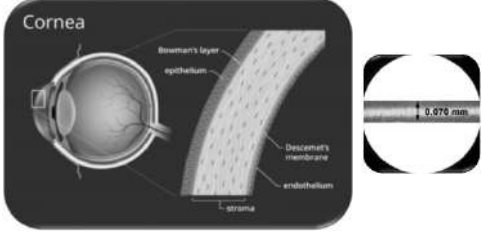
LASIK



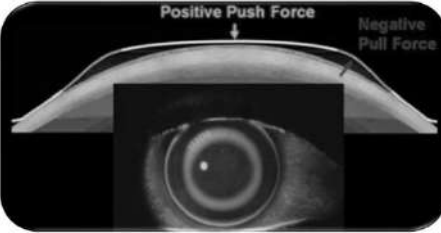
ORTHO-K



Ortho-k and the Cornea



Ortho-K



- NaFL not visible if tear lens is <20 microns

LASIK vs Ortho-k Anatomically

Flap = 90-110 microns

50 microns

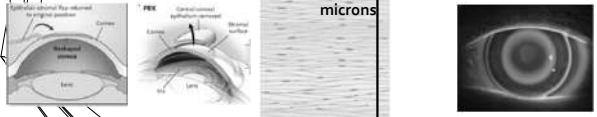
> 8-10 microns = -5.00D

-5.00 Myope = 75 microns

-9.00 Myope = 135 microns

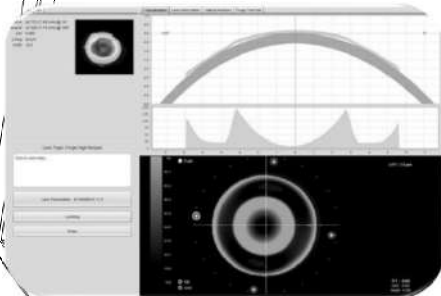
235 microns

500 microns



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Ortho-K



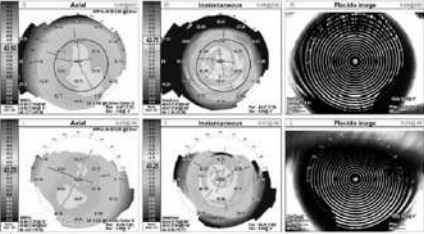
- Refraction
- HVID
- K's
- Topography

Orthokeratology (Ortho-K)

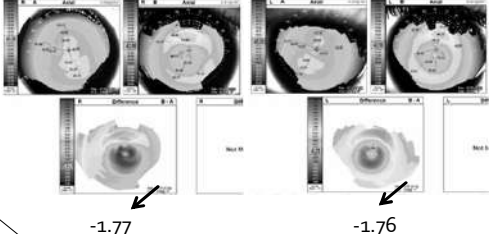


Ortho K Case

- 10 year old:
- OD: -4.75 AL: 25.15
- OS: -4.50 AL: 25.46

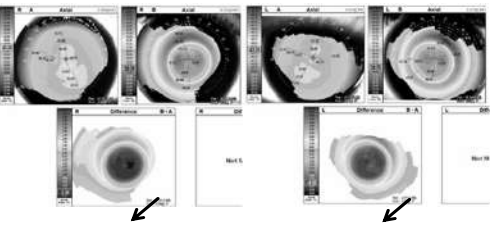


1 Day follow up Difference Maps



-1.77 -1.76

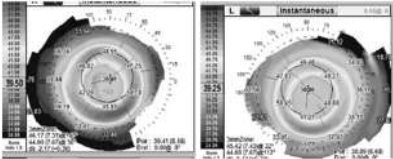
1 Week Follow up Difference Maps



-4.75 -4.75


1 year, 2 year, 3 year follow up

	Enterin g Rx	1 st AL	Year 1	AL	Year 2	AL	Year 3	AL
OD	-4.75	25.19	pl	25.25	pl	25.73	pl	25.62
OS	-4.50	25.46	pl	25.49	pl	25.88	pl	26.10



Ortho K Evaluation Schedule

- Year 1 follow up/evaluation schedule
 - 1 day
 - 1 week
 - 1 month
 - Every 3 months
- Year 2 follow up/evaluation schedule
 - Annual visit (we replace lenses every year no questions asked)
 - Every 6 months if progression has slowed to <-0.50D



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When is my child done with treatment?

- **When they reach ocular maturity or are ready for Refractive Stability**
- **No change in MRX of more than -0.50 in approx. 1 year**

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Step 10- The Pitch Persistence against the Resistance

- You have a myopia clinic already ... Take the time and go after it
- Discuss pros and cons of treatment
- Don't get discouraged by a no
- Have both parents present at consult

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Overtime- Be Ready for Questions!



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What do you need to be Successful


- Patience because you already have patient's
- Handouts/Brochures/Website Information
- Informed consents
- A-scan
- Topographer
- Compounding pharmacy
- Soft Multifocal/ Dual Focus fit set
- Ortho-k fit set or training certification
- Staff Trainings



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Treating Myopia

- The perfect storm:
 - Genetics
 - Indoor vs outdoor time
 - Near work/computers/phones/tablets
 - Online schooling
- There is no cookbook approach as of yet
- FDA approved treatment for myopia management now are the MiSight Lenses and Abiliti ortho-k
- Look at each case individually to decide what is best for the child/parent/family



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Completing the Circle of Myopia Management....

- First pair of glasses
- Fitted with contacts (if right for the child)
- Interested in Refractive Surgery
 - LASIK (SMILE)
 - PRK
 - ICL
- Refractive Cataract Surgery
- Retinal specialist

Summary

- Do something!
 - Educate
 - Refer them out
 - Manage it
- Assess risk factors
- Discuss options
 - No cookbook approach (yet)
 - Decide treatment on patients wants and needs
 - Actively manage progression
- Don't dabble in Myopia Management!

Now What... Monday Morning

- Challenge yourself to be 1% better than you were coming to this meeting
- Staff Meeting- they want to know where you were and what you learned
- 1 year plan broken into 90 day focused sessions
 - Education-
 - Fee structure, staff training
 - Website, brochures, welcome kits
 - Find your tribe

"A Dream written down with a date becomes a Goal. A Goal broken down into steps becomes a Plan. A Plan backed by Actions makes your DREAMS come TRUE!"
-GRENDEL

On behalf of Vision Expo, we sincerely thank you for being with us this year.

Vision Expo Has Gone Green!

We have eliminated all paper session evaluation forms. Please be sure to complete your electronic session evaluations online when you login to request your CE Letter for each course you attended! Your feedback is important to us as our Education Planning Committee considers content and speakers for future meetings to provide you with the best education possible.

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