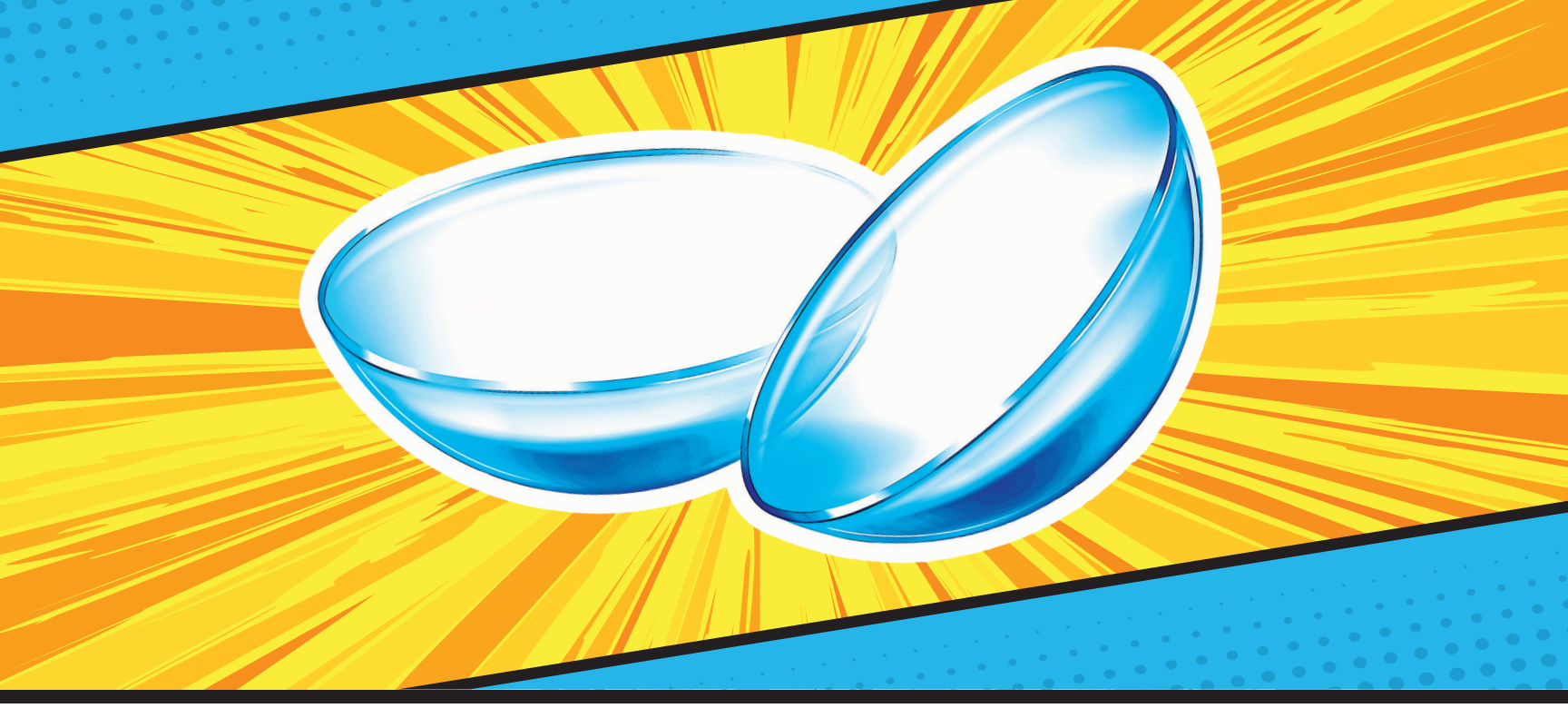

VISION CORRECTION GUIDELINES FOR PATIENTS APPROACHING PRESBYOPIA

Boost your multifocal contact lens fitting rates with effective patient engagement.

BY OSAMA SAID, OD

As your patients in their 40s creep closer to a point where presbyopia starts to become noticeable, they are going to want to know their vision-correction options. Everyone is aware of multifocal spectacles and monovision contact lenses, but there's a good chance not all of your patients know that multifocal contact lenses exist. Mastering the subtleties of patient engagement can help you educate your patients about presbyopia symptoms and introduce them to the benefits of this presbyopic vision correction modality.

UNDERSTANDING PATIENT NEEDS

Patient education encompasses more than simply sharing information on disease states, conditions such as presbyopia, or the latest contact lens features. It's about building a rapport with your patients by fostering a supportive and understanding environment and allowing them to drive the conversation and decision-making. Ask patients open-ended questions about the symptoms they are experiencing and what they feel has changed about their vision needs.

Many patients become aware of the need for reading correction when their working distance vision changes or they notice difficulty seeing print in dim lighting conditions. Because the effects of presbyopia are gradual, patient comfort plays a key role in determining when to intervene. Factors such as daily activities and the onset of symptoms should also guide the decision-making process.

For patients who had perfect distance vision before the onset of their presbyopia symptoms, admitting that they need reading glasses can be difficult. When they communicate that their vision has become an issue, reassure them that presbyopia is a normal part of aging.

REVIEWING THE OPTIONS

I tell my patients that maintaining excellent distance vision while using glasses for reading and near tasks is a favorable scenario, but I also explain how we can work together to find the best option that meets their unique needs and preferences. In our practice, patients are counseled on various treatment options, including prescription reading glasses, progressive lenses, and multifocal contact lenses.

For progressive lens options, I explain to patients that these lenses offer a seamless transition between different viewing distances, providing clear vision for near, intermediate, and distance tasks in one lens. For monovision contact lens options, I discuss how this approach uses one eye for distance vision and the other for near vision, allowing greater independence from reading glasses. I also educate patients that monovision affects their stereopsis and depth perception so that they are aware of the inherent difficulties of driving at night with this approach.

> **OFFERING MULTIFOCAL CONTACT LENSES CAN LEAD TO MORE WORD-OF-MOUTH REFERRALS, WHEREAS OMITTING THEM FROM YOUR OFFERINGS CAN LEAD TO PATIENTS SEEKING OTHER PROVIDERS.**

Patient awareness of multifocal contact lenses is relatively low, but those who have tried this modality in the past often reported difficulty tolerating the compromise in distance vision to achieve near vision.[1,2] Despite this, many contact lens wearers have shown a rising interest in contact lenses that can correct for both near and distance vision.[2] With significant advances in multifocal contact lens designs, materials, and ease of fitting over the past few years, we can boost conversion rates and, in the process, improve patient satisfaction with effective patient engagement. The first step is to show confidence in and enthusiasm for multifocal contact lenses by presenting the technology as an option that can enhance patient quality of life.

I recently adopted a percentage-based explanation of advanced multifocal contact lens capabilities that I find resonates well with patients. I explain that multifocal contact lens designs from the past decade provided about 80% distance and reading vision, whereas the latest models provide 95% to 100% distance vision and nearly 100% reading vision. There is much less compromise than in the past. I also explain that fitting modern multifocal lenses is much easier now and that patients usually find the right fit after one or two visits.

In my practice, patients who have never worn multifocal contact lenses and those who have had a less-than-satisfactory experience with them find encouragement in my explanation and often consider a hands-on multifocal contact lens trial, allowing them to experience the benefits firsthand. Most express that the learning curve with multifocal contact lenses is significantly less steep compared with progressive glasses.

Setting realistic expectations is also key. Patients should understand that although multifocal contact lenses might not provide vision equal to that of progressive glasses, they do offer the flexibility and convenience to engage in daily activities comfortably without the constant need for reading glasses. Unlike with progressive glasses, neural adaptation with multifocal contact lenses happens naturally and quickly—especially with newer designs that provide consistently adequate vision.

CHOOSING THE RIGHT LENS

Converting patients from monovision contact lenses to multifocal contact lenses is much easier with a hands-on, streamlined

fitting process. When fitting non-contact lens wearers into multifocal contact lenses, I spend more time discussing the adjustment period and potential benefits, such as improved convenience and visual acuity for various activities.

When we teach patients an effective insertion and removal technique and urge them to evaluate not only their vision quality at distance, intermediate, and near, but also how the lens feels on their eye, they are more satisfied with the process. A few minutes of instruction can also decrease chair time, which is important in a busy optometry practice. If quick adjustments are warranted, I rely on the manufacturer's fitting guide. Making sure that patients feel comfortable

TABLE. Examples of Multifocal Contact Lens Options for the Emerging Presbyope*

LENS NAME	LENS MANUFACTURER	REPLACEMENT CYCLE	MATERIAL	WATER CONTENT	BASE CURVE/ DIAMETER	SPHERE POWER/ADD POWER
Acuvue Oasys Max 1-Day Multifocal	Johnson & Johnson Vision Care	daily	senofilcon A	38%	8.4 mm/14.3 mm	-9.00 D to +6.00 D (0.25 D steps)/Low (+0.75 D to +1.25 D), Mid (+1.50 D to +1.75 D), High (+2.00 D to +2.50 D)
Acuvue Oasys Multifocal	Johnson & Johnson Vision Care	biweekly	senofilcon A	38%	8.4 mm/14.3 mm	-9.00 D to +6.00 D (0.25 D steps)/Low (+0.75 D to +1.25 D), Mid (+1.50 D to +1.75 D), High (+2.00 D to +2.50 D)
1-Day Acuvue Moist Multifocal	Johnson & Johnson Vision Care	daily	etafilcon A	58%	8.4 mm/14.3 mm	-9.00 D to +6.00 D (0.25 D steps)/Low (+0.75 D to +1.25 D), Mid (+1.50 D to +1.75 D), High (+2.00 D to +2.50 D)
Biotrue 1-Day for Presbyopia	Bausch + Lomb	daily	nesofilcon A	78%	8.6 mm/14.2 mm	-9.00 D to +6.00 D (0.25 D steps)/Low (+0.75 D to +1.50 D), High (+1.75 D to +2.50 D)
Ultra for Presbyopia	Bausch + Lomb	monthly	samfilcon A	46%	8.5 mm/14.2 mm	-10.00 D to +6.00 D (0.25 D steps)/Low (+0.75 D to +1.50 D), High (+1.75 D to +2.50 D)
Infuse Multifocal	Bausch + Lomb	daily	kalifilcon A	55%	8.6 mm/14.2 mm	-12.00 D to +6.00 D (0.25 D steps, 0.50 D steps above -6.00 D)
Biofinity Multifocal	CooperVision	monthly	comfilcon A	48%	8.6 mm/14.0 mm	-10.00 D to +6.00 D (0.50 D steps above -6.00 D)/+1.00 D, +1.50 D, +2.00 D, +2.50 D
Clariti 1-Day Multifocal	CooperVision	daily	somofilcon A	56%	8.6 mm/14.1 mm	-6.00 D to +5.00 D (0.25 D steps)/Low (up to +2.25 D), High (up to +2.50 D to +3.00 D)
MyDay	CooperVision	daily	stenfilcon A	54%	8.4 mm/14.2 mm	-12.00 D to +8.00 D (0.50 steps D after +5.00 D and -6.00 D)
Air Optix plus HydraGlyde Multifocal	Alcon	monthly	lotrafilcon B	33%	8.6 mm/14.2 mm	-10.00 D to +6.00 D (0.25 D steps)/Low (up to +1.25 D), Mid (+1.50 D to +2.00 D), High (+2.25 D to +2.50 D)
Dailies AquaComfort plus Multifocal	Alcon	daily	nelfilcon A	69%	8.7 mm/14.0 mm	-10.00 D to +6.00 D (0.25 D steps)/Low (up to +1.25 D), Mid (+1.50 D to +2.00 D), High (+2.25 D to +2.50 D)
Dailies Total 1 Multifocal	Alcon	daily	deltafilcon A	33%	8.5 mm/14.1 mm	-10.00 D to +6.00 D (0.25 D steps)/Low (up to +1.25 D), Mid (+1.50 D to +2.00 D), High (+2.25 D to +2.50 D)

*Not an exhaustive list

AT A GLANCE

- As patients approach the age when presbyopia starts to become noticeable, they are going to want to know their vision-correction options.
- Our role as optometrists is unique because we can help patients recognize the importance of choosing a contact lens based on their particular needs.
- With significant advances in multifocal contact lens designs, materials, and ease of fitting over the past few years, optometrists can boost conversion rates and, in the process, improve patient satisfaction.

handling their lenses is key in their short- and long-term satisfaction.

Our role as optometrists is unique because we can help patients recognize the importance of choosing a contact lens based on their individual needs. I consider factors such as ocular biometrics and dominance when choosing the right multifocal contact lens. No single lens will work for every patient, but lenses that feel comfortable on the eye can increase adoption rate. I like the Infuse multifocal (Bausch + Lomb) because the lens material is infused with electrolytes, osmoprotectants, and moisturizers to minimize eye dryness and discomfort. Patients with symptoms of presbyopia typically do well with the 3Zone Progressive Design of Infuse that allows a smooth transition across distances.

Another option is the Biofinity multifocal (CooperVision), which is made with Aquaform Technology to provide 100% of the oxygen that eyes need to stay healthy. I counsel patients who desire a more customized solution on the benefits of each lens brand (Table).

STAYING RELEVANT

Adding multifocal contact lenses to the range of options you present to patients can help you stay relevant in today's competitive optometric landscape. Patients who are in the age range to start developing symptoms of presbyopia (early 40s) are looking for a solution to these symptoms.[3] Introducing multifocal contact lenses as a correction strategy, incorporating a streamlined fitting approach, choosing the right lens, and working with patients to meet their vision needs can have a positive effect on your practice and increase patient satisfaction. Offering multifocal contact lenses can lead to more word-of-mouth referrals, whereas omitting them from your offerings can lead to patients seeking other providers.

Advances in multifocal contact lens design and material have led to increased patient satisfaction. By not allowing past failures to dim my perception of contemporary multifocal contact lenses, I have dramatically increased my conversion rate to more than 90%. ■

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2. MultiSponsor Surveys. The 2021 Study of the U.S. Consumer Contact Lens Market. December 2021. Accessed March 11, 2024.
3. Presbyopia. Cleveland Clinic. July 6, 2023. Accessed March 11, 2024. my.clevelandclinic.org/health/diseases/8577-presbyopia

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