

OSD IS COMING! OSD IS COMING!

We may be a little biased, but we love this issue!

If you know us at all, you've undoubtedly heard our lectures and read our articles on ocular surface disease (OSD) and its effect on our patients and our practices (of course, Justin's material may have a glaucoma spin to it). In the past several years, the eye care community has seen tremendous advances in the diagnosis and treatment of OSD, including new topical therapies and meibomian gland dysfunction (MGD) procedures. There is so much excitement in this space, with recent FDA approvals to benefit our patients. Varenicline nasal spray 0.03 mg (Tyrvaya, Oyster Point Pharma) has been a welcome addition to our dry eye armamentarium and is indicated for the treatment of the signs and symptoms of dry eye disease (DED). Cyclosporine ophthalmic emulsion 0.1% (Vercadia, Santen) received FDA approval for the treatment of vernal keratoconjunctivitis (VKC) in children and adults to help address the severe inflammation seen in this condition. Additionally, Systane iLux2 MGD Treatment System (Alcon) is a next-generation, all-in-one handheld device with new imaging technology to capture infrared photos of the meibomian gland.

Hopefully we'll see additional choices become available in our OSD treatment box, such as lotilaner ophthalmic solution 0.25% (TP-03, Tarsus) to treat *Demodex* blepharitis (see Leslie's article, "Surveying the Options for Treating *Demodex*" on page 37 to learn more), and 100% perfluorohexyloctane (NOV03, Novaliq and Bausch + Lomb), an investigational topical

treatment for the signs and symptoms of DED associated with MGD, which was just submitted to the FDA for a New Drug Application.

At this point, you've probably guessed that this issue's cover focus is on the ocular surface. Our goal is to help you think about dry eye and blepharitis differently. No matter what type of practice setting you're in, OSD affects many of the patients who are sitting in our chairs each day. However, all too often, OSD is overlooked and undertreated, and when this happens, it's our patients who pay the price. The question, then, is: Are we going to proactively look for, identify, and treat OSD?

Our goal for this issue is to provide you with a few pearls to help improve your patients' comfort and quality of vision. You'll find such useful information in the articles of the cover focus for this issue. For those of you who are just starting out on the dry eye journey, check out the article by Christopher Kuc, OD, FAAO, "Five Rules of Thumb for Managing the Ocular Surface" (pg. 22). And for anyone who has purchased MGD devices and wants to know how to bill and code for your services, Myranda Partin, OD, has you covered (see "Struggling With Reimbursements for In-Office MGD Procedures?" on pg. 35).

We'd be remiss to discuss the ocular surface without talking about the role of scleral and hybrid lenses. Roxanne Achong-Coan, OD, FAAO, FIAOMC, FSLs, FBCLA, kicks off this section starting on page 43, and don't skip over the Specialty Lens Case Files to see real examples of these lenses being fit to help patients manage other conditions. Let us know what you think. Happy reading! ■



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