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Blueprint for Success: Strategies for Building a Myopia Control Practice

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1 hour
OD Education
Course Category – General Optometry/Myopia Management

Course Description:

We can't "un-see" what we now know about the fate of the population with respect to myopia and what we as optometrists can do about it! In this course we battle it out I will provide for you the latest research and information and show you how to apply it into practice. We will review each treatment option of myopia management, the most current data available and how that impacts our decision-making process when prescribing in office. The controversy over the use of axial length for myopia management continues. This course will review the most current data and research on axial length acquisition, validity of instruments, purpose of use,

and the pros and cons to implementation. Taking all of this into consideration – how do we implement this into practice and start a myopia management clinic without our clinics.

Learning objectives

- 1) To understand the current global state of myopia and what our obligation is.
- 2) To understand the current data on myopia progression
- 3) To understand the science and clinical application behind each form of myopia management treatment.
- 4) To understand how to calculate expected axial length for a patient at a particular age
- 5) To learn how to make clinical decisions based on axial length data after collecting one data point and after a year of change.
- 6) To understand how to build your myopia management clinic with the help of tools, equipment, communication, and staff support.

Course Outline

- 1. Myopia Management 101
 - a. What we know
 - b. What we can do
 - c. What we can't do
- 2. Our Obligation
- 3. Our Role as OD in the global epidemic of Myopia Management
- 4. Why is myopia Management important
 - a. For Our parents
 - i. To reduce their burden
 - ii. To give their kids a better quality of life
 - iii. Understanding our parents
 - b. For our patients
 - i. For every diopter less myopic, 40% less chance of myopic maculopathy
 - ii. Better refractive surgery candidate
 - iii. Better quality of life
 - iv. More treatment options
 - c. For our practices
 - i. Preventative and proactive treatment for patients
 - ii. Practice builder
 - iii. Helping patients
 - iv. Referrals

- v. Financial benefit
- vi. Move more toward the medical model
- vii. Stop treating the symptoms and start treating the disease
- 5. Key metrics and progression trends
 - a. Emmetropes
 - b. Myopes
- 6. Forms of myopia Management
 - a. Soft contact lens
 - b. Orthokeratology
 - c. Atropine
 - d. Glasses
 - e. Combination therapy
 - f. When to combine
 - g. Outdoor time Recommendations
 - h. Diet Recommendations
 - i. Exercise Recommendations
- 7. Communication
 - a. The art of selling
 - b. Best tips
 - c. How to explain myopia, the options, benefits and risks in 5 minutes!
 - i. Common Questions
 - ii. Explaining myopia
 - iii. Explaining the risks
 - iv. Explaining the treatment options
 - 1. Three categories
- 8. Which treatment option is the best
- 9. Choosing a treatment option
- 10. Involve your patients
- 11. Involve your staff
 - a. Selecting a whisperer
 - b. Role of your staff
- 12. What Baseline data is important
 - a. Refraction
 - b. Topography
 - c. Retinal Evaluation
 - d. Pachymetry

- e. Axial Length
- f. Ant Seg photos
- g. Meibography

13. What is the game plan

- a. 2 year plan
- b. Ideal vs Realistic

14. Hyperopes

- a. What's the plan
- b. What do we know

15. Treatments in more detail

- a. Soft Lenses
 - i. FDA and health Canada approval
 - ii. Efficacy
 - iii. Mechanism of action
 - iv. Parental concerns
 - v. Benefits
 - vi. Troubleshooting MF lenses
- b. Orthokeratology
 - i. Safety
 - ii. Efficacy
 - iii. Mechanism of action
 - iv. Non fitter
 - v. Current Fitters
 - vi. Desire to fit
 - vii. Aberration control
 - viii. Pupil control

c. Atropine

- i. Benefits
- ii. Efficacy
- iii. Studies
- iv. Mechanism of Action
- v. Side Effects
- vi. Long term usages

d. Spectacles

- i. Benefits
- ii. Designs
 - 1. DIMS
 - 2. Halt
 - 3. SightGlass
 - 4. Newest designs
- e. Lifestyle modification

- i. Impact of computers
- ii. Outdoor time
 - 1. How much
 - 2. When?
- iii. Seasons
- iv. Diet
- v. Exercise

16. How to track

- a. Refraction
 - i. Pros and Cons
- b. Axial Length
 - i. Pros and Cons
- c. Eye Growth Stats
- d. How much change is ok
- e. When to make a change
- f. When do we stop

17. Axial length

- a. Important numbers determining risk
- b. Impact of seasonal changes
- c. Impact of growth spurts and age
- d. CLEERE Study results and clinical application
- e. COMET Study results and clinical application
- f. Impact of ethnicity

18. Devices

- a. Ultrasonography
- b. Interferometry
- c. Combo Units
- d. Efficacy for clinical use
- e. Efficacy for research use

19. Predictions

- a. Studies
- b. Growth charts
- c. Axial length calculation formulas
- d. Rate of change per year

20. Clinical Applications

- a. Based on one moment in time
 - i. Expected axial length
 - ii. Formulas
- b. Based on one year of data

- i. Rate of change charts
- c. Based on 3 years of data
 - i. 3-year data charts

21. Red light therapy

- a. Possible to reduce axial length
- b. Update on research
- c. Controversies in safety

22. What is next

- a. Al Devices
- b. Contoured Prism
- c. Hybrid and Scleral Center Distance lenses

23. Implement myopia management tomorrow

- a. You have all the tools
- b. You have the patients
- c. Be prepared
- d. Fees & Follow Up
- e. Create a plan
- f. Know the plan will change
- g. Marketing your services

24. Cases – requiring audience participation

- a. Low myopia, High axial length
- b. Emmetrope, Axial length data
- c. Hyperope, axial length data
- d. Orthok pre and post treatment data
- e. MF contact lens wearer with pre/post data
- f. Atropine and axial length
- g. Two-year data case
- h. Three-year data case