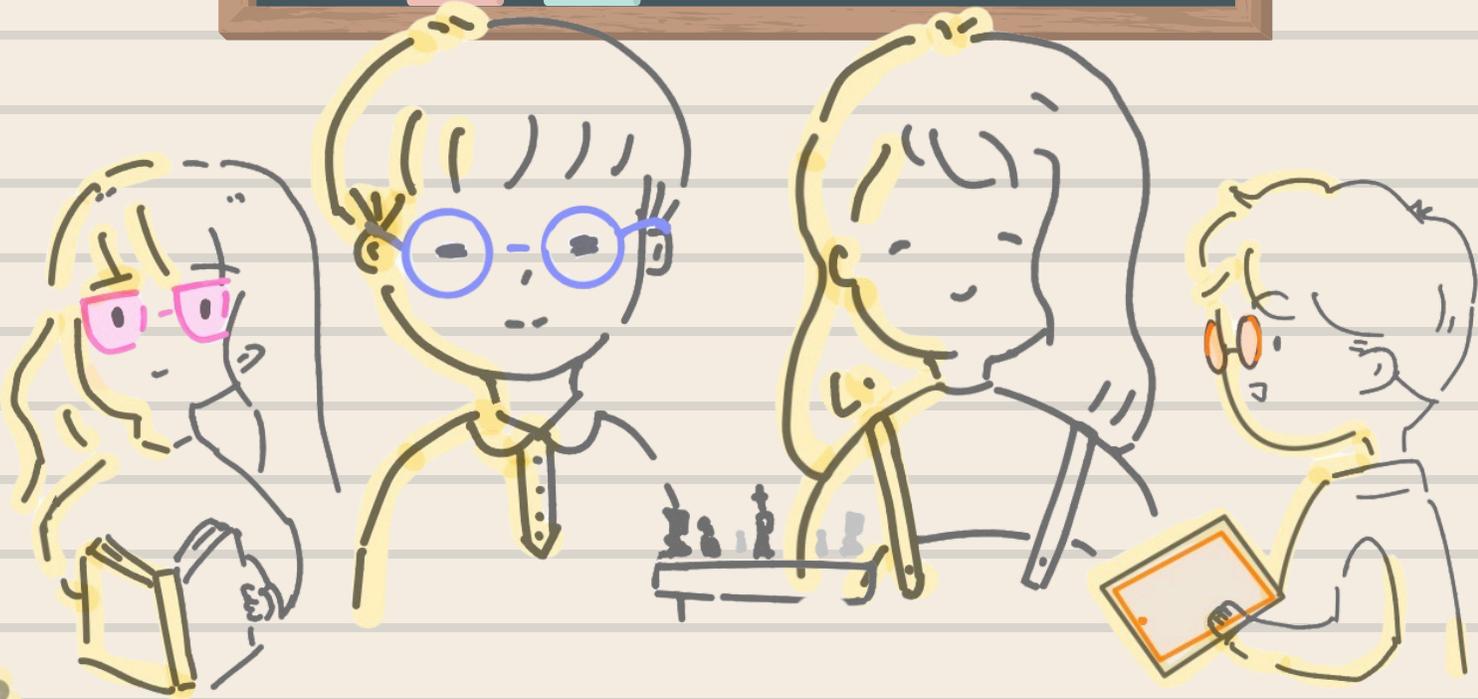


# MYOPIA MANAGEMENT PROGRAM



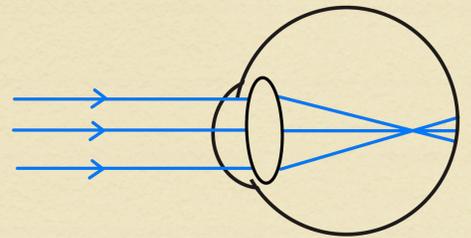
# WHAT IS MYOPIA?

Myopia is referred to as **nearsightedness** or **decreased distance vision**. Light does not focus quite in the right spot, so glasses are used to bring objects into focus on the retina.

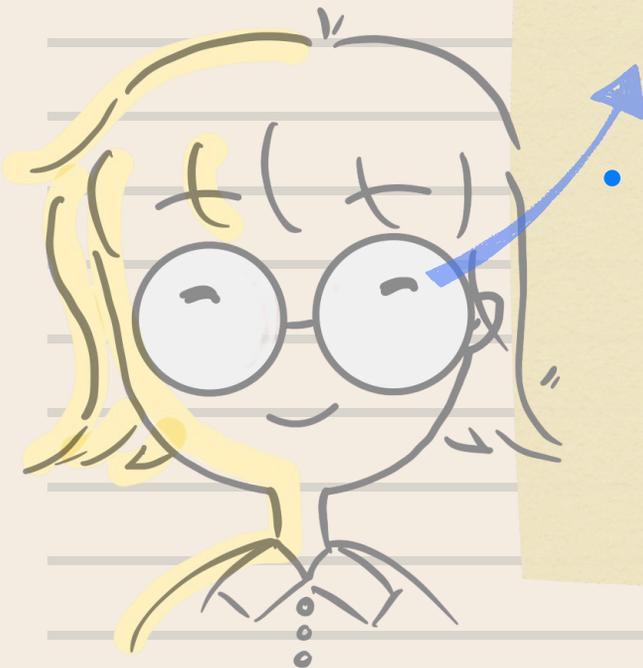
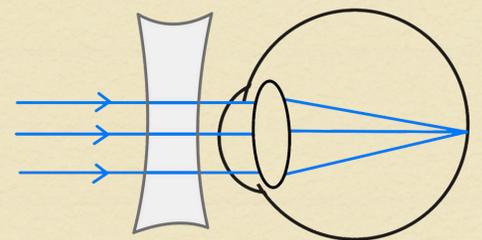
Myopia can **progress or worsen over time**. As a child grows the eye becomes longer, causing light to focus in front of the retina again. Stronger glasses are then needed to refocus the object onto the retina.

Myopia progression can lead to **severe ocular conditions** later in life such as glaucoma, cataracts, myopic macular degeneration, and retinal detachment.

- Myopic eye with light focused in front of the retina resulting in blurred vision.



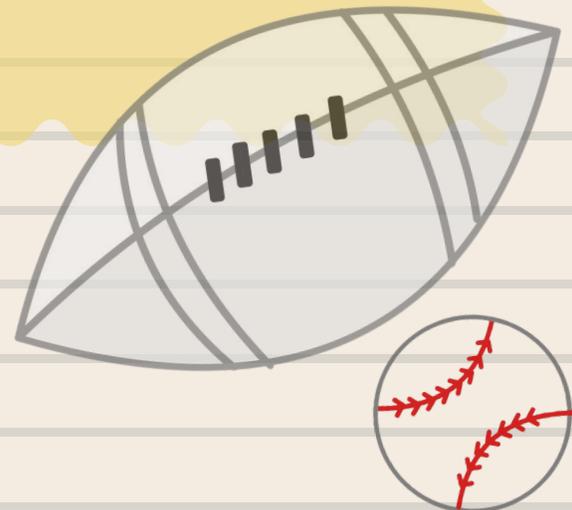
- Glasses used to bring the light into focus on the retina for clear vision.



# WHAT CAUSES IT?

**Genetics:** If one or both parents are myopic, their children are more likely to be myopic. The younger a child is when myopia starts, the more myopic progression may occur, because as children grow, their eyes do too.

1. Using handheld devices or spending a lot of time on activities within arm's reach rather than spending time outdoors increases the likelihood of becoming myopic.
2. **Lifestyle changes to slow myopia progression:**
  - a. The 20-20 rule → Every 20 minutes look away from your screen to something 20 feet away for at least 20 seconds
  - b. Get outside 1-2 hours everyday
  - c. Limit screen time



# TREATMENTS

## for myopia:



Due to prevalence of myopia increasing rapidly (from 25% of the U.S. population in 1972 to 41.6% in 1999–2004 in people ages 12–52 according to a study by the National Eye Institute), and the health implications this has, there has been extensive research on how to slow the progression of myopia. **The treatment methods are called myopia control.**



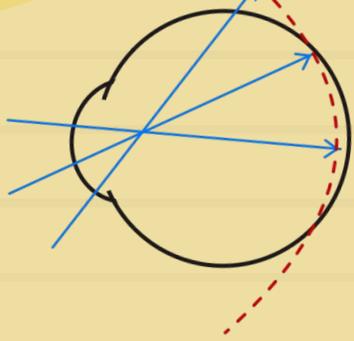
The goal of myopia control is to **slow the progression of myopia but it does not reverse the myopia that has already occurred.** Myopia control may not work for every patient, but studies show high success rates in the **3 methods** our doctors prescribe, each **reducing myopia progression by an average of 50% or more.**



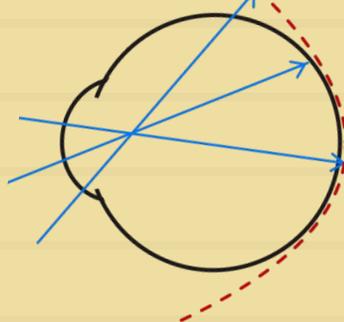
Myopia slows naturally as a child stops growing in the mid to late teens, though some people continue to progress into their 20's. Treatment plans are therefore individual, and are recommended into the late teenage years.

# HOW IT WORKS?

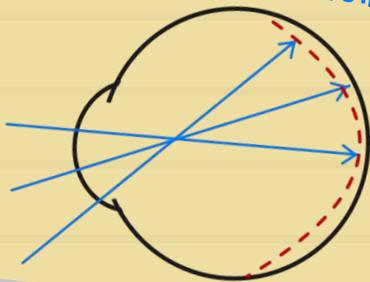
Uncorrected myope



Traditional correction



Optimal correction?



- Treatment mainly employs the use of **Peripheral Defocus**. Light going straight into the eye focuses on the retina with the help of glasses for myopia.
- Due to the curvature of the eye, light from the periphery focuses behind the retina in a way that stimulates the eye to keep growing. This causes a cycle of needing stronger and stronger glasses, i.e. **progression of myopia**.

- Using different lens designs or eye drops, we can focus peripheral light closer to the retina and slow progression.
- We will use a tool to assess the risk of myopia progression and monitor treatment. The Myopia Master measures the length of the eye and can give an overall picture of how the treatment is working.

# TREATMENT OPTIONS:

## Atropine Therapy

A specially compounded eye drop used once daily in each eye for at least 2 years. Individualized treatment plan using different concentrations and durations of treatment.

**Atropine: 0.01%, 0.025%, 0.05%**

**Efficacy: Can decrease myopia progression up to 66% over 2 yrs**



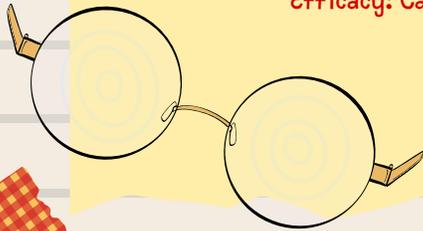
## Stellest (specialty glasses)

FDA approved for myopia control in ages 6–12. Eyeglass lenses use a highly aspheric lens design in concentric rings to create peripheral defocus and slow myopia progression.

**Wear time: 10hrs/day, 6 days/week**

**Parameters: SPH: to -10.00; CYL: to -4.00**

**Efficacy: Can decrease myopia progression up to 71% over 2 yrs**



## Biofinity Multi-Focal (specialty monthly replacement contact lens)

Off label use for myopia control. Monthly replacement soft contact lens worn during the day. These lenses use a dual focus lens to provide clear central vision and defocus peripheral vision to slow myopia progression.

**Wear time: 10hrs/day, 6 days/week**

**Parameters: SPH: to -10.00; MF TORIC CYL: to -5.75**

**Efficacy: Can decrease myopia progression up to 45% over 2 yrs**

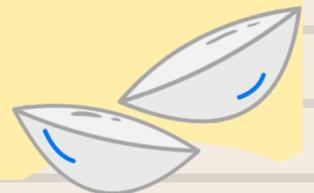
## MiSight (specialty daily replacement contact lens)

FDA approved for myopia control in ages 8–12. Uses the concept of peripheral defocus in concentric rings to slow myopia progression. Daily disposable lenses reduce the risk of infection and eliminate the need for contact lens solution and cases.

**Wear time: 10hrs/day, 6 days/week**

**Parameters: SPH: -0.50 to -7.00; CYL: 0.75D**

**Efficacy: Can decrease myopia progression up to 59% over 3 yrs**



# PROGRAM PRICING:

All these options have the following fees included in the Yearly Total:

‡ Program Fee= \$ 400 year 1; \$ 300 for each additional year

- Program fee covers follow up visits related to **Myopia**

**Management** which includes axial length scans, contact lens or glasses checks, adjustments to treatment plans, and further discussions of program.

	Materials	Yearly Total
Atropine	\$ 312/year (\$78/10 mL → 2x 5 mL bottles)	\$ 712 yr 1 \$ 612 yr 2+
*Stellest	\$ 470	\$ 870 yr 1 \$ 770 yr 2+
**Biofinity MF	\$ 492/year	\$ 992 yr 1 \$ 892 yr 2+
**Biofinity MF Toric	\$ 784/year	\$ 1184 yr 1 \$ 1084 yr 2+
MiSight	\$ 784/year	\$ 1500 yr 1 \$ 1250 yr 2+



These options are not covered by insurances at this time.

\* Prices DO NOT include frames.

\*\* Glasses still required when choosing Contact Lens options.

‡ Excludes comprehensive eye exams

# OUR PROVIDERS:



Reagan Danner, O.D.



Jacob Likus, O.D.



John Facciani, M.D.



Vistar Eye Center:

Contact information:  
540 855 5100

Website:

[www.vistareye.com](http://www.vistareye.com)