

# EDUCATIONAL MOMENTS®

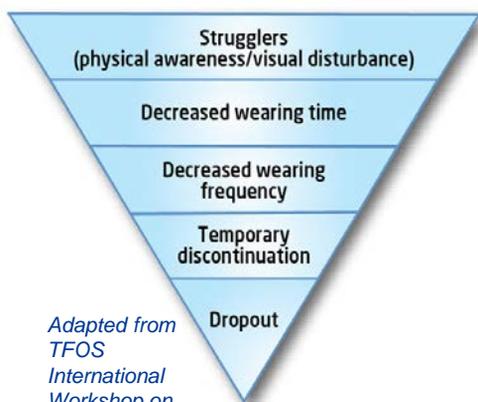
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## Managing the long-term wearer with no change in Rx by Christine Purslow and Simon Donne

### WHY INITIATE A CONTACT LENS CONVERSATION?

As eye care practitioners we have a duty of care to offer patients the opportunity to update their vision correction if we feel they would benefit. We should ensure all our contact lens wearers are as comfortable as possible, with minimal impact on ocular physiology, no matter what their visual correction or history of wear.

**It is our role to encourage patients to voice their concerns and explain there is a range of options available to maintain healthy and comfortable contact lens wear**



Adapted from  
TFOS  
International  
Workshop on  
Contact Lens  
Discomfort<sup>3</sup>

### Managing the drop-out

Discomfort during lens wear is the main reason for dropping out of contact lenses.<sup>1,2</sup>

Many contact lens wearers start and stop lens wear repeatedly over several years.<sup>1</sup>

A seemingly satisfied patient can be just a few steps away from giving up on contact lenses due to discomfort

### Patient and eye care practitioner relationship: a maze of assumptions and unspoken thoughts

#### Practitioner

- May assume that if no dissatisfaction is expressed then everything is 'fine'
- May assume patients will mention any significant milestones, events or activities occurring in their life

#### Patients

- May assume if we don't ask it can't be important
- May feel silly or anxious mentioning lens discomfort – they may think all lenses are the same and are supposed to feel like that
- May say all is 'fine' especially as they may feel expressing dissatisfaction could lead to no longer being able to wear lenses
- May assume that we would advise them of developments/offer upgrades if needed
- May assume that 'no change needed' means current updates aren't relevant to them

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## WHAT TO LOOK AND LISTEN FOR

### Checking compliance though observation

Asking questions to gain an honest answer is the challenge. 'Do you wash your hands before handling your lenses?' often produces a reflex 'yes' answer. Try **observing first**:

- Observe patients when removing lenses
- Observe their care regime – this can reveal non compliance regarding solutions, tap water and hand & case hygiene<sup>4</sup>

**Observation provides an ideal opportunity to reinforce the need for hand hygiene and good lens care and can allow you to ask more appropriate questions such as whether a patient may find it beneficial to change to daily disposables for convenience, if this meets their visual needs too**



### Look out for clinical situations

- Allergy sufferers experiencing symptoms in hay fever season – think about suggesting daily disposables<sup>5</sup>
- Patients occasionally sleeping in lenses – discuss increased risks of overnight wear<sup>6,7</sup>
- Patients who are travelling a lot or going on holidays where solutions are an inconvenience



### Look for non-verbal clues to dissatisfaction

- Watch for 'strugglers' – making unscheduled appointments, collecting lenses or arriving for aftercare appointments wearing spectacles
- Make note of any reduction in purchasing patterns
- Look for patients who seem unhappy or reluctant whilst waiting to see you

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## WHAT TO SAY AND DO

### Avoid closed questions initially

A simple 'how are your lenses?' may result with 'good' or 'fine' as patients may fear being told they have to pay more for lenses, reduce their wearing time or worse still, stop wearing lenses.

Asking the time they tend to put lenses in and take them out rather than 'how many hours do you wear your lenses for?' can present a more realistic picture.



### Keep yourself and your team up-to-date

- Holding regular staff training sessions and fitting them with the latest contact lenses will inspire confidence when talking to patients
- Reassure patients that their current lenses are fine but you can offer them something better. Use your lens knowledge to describe both the features and benefits of the new lenses available

### Using a grading scale

Ask patients to grade their comfort on a scale of 0-10 on application and at the end of day. This can help to overcome reluctance to report symptoms.

### Elicit concerns using open questions and empathy

'You take your lenses out at six every evening – is that because you want to or because you have to?'

'You mentioned you almost feel guilty wearing your lenses for so long during the day – modern lenses allow virtually as much oxygen to your eye as if you weren't wearing any lenses at all'

### Highlight signs to patients

Sometimes there can be a disparity between signs and symptoms. For example, patients can often display limbal redness in the absence of symptoms. Try asking 'do your eyes ever look red when you look in the mirror? – if they say yes you can follow with 'would you like me to try and improve that for you?'



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## FURTHER READING

- 1 Dumbleton K, Woods CA, Jones LW *et al.* The impact of contemporary contact lenses on contact lens discontinuation. *Eye & Contact Lens*, 2013;39:1 92-98. [CLICK HERE](#)
- 2 Richdale K, Sinnott LT, Skadahl E *et al.* Frequency of and factors associated with contact lens dissatisfaction and discontinuation. *Cornea*, 2007;26:2 168-174. [CLICK HERE](#)
- 3 Nichols KK, Redfern RL, Jacob JT *et al.* The TFOS International Workshop on Contact Lens Discomfort: Report of the definition and classification subcommittee. *Invest Ophthalmol Vis Sci*, 2013;54:11 TFOS14-19. [CLICK HERE](#)
- 4 Hickson-Curran S, Spyridon M, Hunt C *et al.* The use of daily disposable lenses in problematic reusable contact lens wearers. *Cont Lens Anterior Eye*, 2014;37:4 285-291. [CLICK HERE](#)
- 5 Hayes VY, Schnider CM and Veys J. An evaluation of 1-day disposable contact lens wear in a population of allergy sufferers. *Cont Lens Anterior Eye*, 2003;26:2 85-93. [CLICK HERE](#)
- 6 Dart JK, Radford CF, Minassian D *et al.* Risk factors for microbial keratitis with contemporary contact lenses: a case-control study. *Ophthalmol*, 2008;115:10 1647-54. [CLICK HERE](#)
- 7 Stapleton F, Keay L, Edwards K *et al.* The epidemiology of microbial keratitis with silicone hydrogel contact lenses. *Eye & Contact Lens*, 2013;39:1 79-85. [CLICK HERE](#)

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### Acknowledgement



**Professor Christine Purslow** is head of medical affairs at Thea Pharmaceuticals UK & Ireland, honorary professor at Plymouth University and senior research fellow at Cardiff University.



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Both are Faculty members at the Johnson & Johnson Vision Care Institute.