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Kids and Contacts (Age 12 – 18)

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Financial Disclosure

- Clinical Investigator
 - Abbott
 - Bausch&Lomb
 - Alcon Vision Care
 - Cooper Vision
 - Falco Kontaktlinsen
 - Vistakon(Johnson&Johnson)

- Payed Consultant
- Falco Kontaktlinsen Switzerland
- Vistakon(Johnson&Johnson)



- Statements proclaimed by professionals:
 - "Children can't bear contact lenses"
 - "Children lose their contact lenses constantly"
 - "It is not allowed to fit contact lenses on a growing eye"
 - "Contact lenses are too expensive for Kids"
 - "As long as children can't pay for their lenses,
 it 's not appropriate to wear contacts"

Children love spectacles! (Hyperopia +8.0D)



At least parents believe and some optometrists as well!

om to see



No comments!

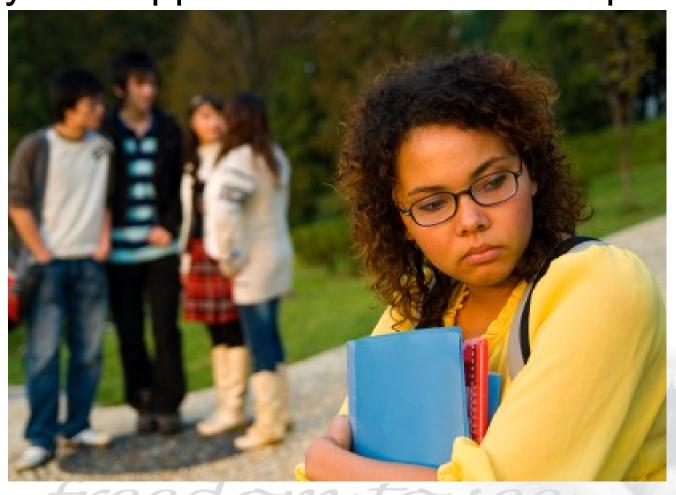
- Several Studies showed that children are capable of wearing and caring for contacts
- Strong evidence for improvement of quality of life
 - Activities / Athletic competence
 - Physical Appearance / Social acceptance
 - Satisfaction with Correction

Rah et al, Optom Vis Sci 2010 Aug;87(8):560-6
Walline et al, Optom Vis Sci 2009 Mar;86(3):222-32
Li et al, Eye Contact Lens 2009 Jul;35(4):188-95
Walline et al, Eye Contact Lens 2007 Nov;33(6 Pt 1):317-21

Activities / Athletic competence



Physical Appearance / Social acceptance



- Case TM with Asperger Syndrom
 - Myopia -3.00 OU but Spectacles not accepted
 - Socially isolated, special needs school despite the fact of high IQ
 - No communication at first visit, nonverbal examination, but fitted with siliconhydrogels
 CW
 - After 1 month, social interaction increased remarkable, holding eye contact, interested in surroundings

Satisfaction with Correction



- Rehabilitation of Sight
 - Aphakia
 - Keratokonus or other diseases
 - High Anisometropia
 - High refractive Error
 - Myopia Progression





- Inflammatory Events
 - Risk of events peaks in late adolescence and early adulthood
 - Children younger than 14 years having the significant lowest risk
 - Neophytes on a daily replacement modality are less likely to experience events

Wagner et al, Optom Vis Sci 2011 Aug;88(8):973-80 Chalmers et al, IOVS 2011Aug; Vol 52, No 9

- Non Compliance Risk Profile
 - Young Male (18-25 years)
 - Myope smoker
 - experienced (more than a year) Siliconhydrogel wearer

Jansen et al, Cont Lens Anterior Eye 2011 Oct;34(5):229-35

 Parents which are experienced contact lens wearer and work in health or education profession

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Fitting Requirements

Age	Radius	n.E.
1 Month	6.80 - 7.00	00 – 03
6 Month	7.00 – 7.20	00 – 03
1 Year	7.20 - 7.40	03 – 04
2 Years	7.40 – 7.60	03 – 04
5 Years	7.60 - 7.80	04 – 05
8 years	7.80 – 8.00	04 – 06

Fitting Requirements

- After the age of 8, exists on average no differences to adults cornea topography
- Corneal Diameter reaches plateau after the age of two (11.50mm)
- Quality of tear layer is much better, compare to adults
 - Only 4.3% children (8 14 years) compared to 56.2% adults report dry eye

Greiner, Eye Contact Lens 2010 Nov;36(6):352-5

Fitting Requirements

- Children and teens deserves the best care and service we can provide:
 - Comprehensive eye exam, including posterior segment
 - Best contact lenses, best fitted
 - Follow up for Neophytes over, at least, one month period of time
 - Regular 6 monthly follow ups



Communication



Communication: Anamnese

- Survey sent home, prior first visit
 - Leads into important discussions at home between Parents and Child, without time pressure in the office
 - Precise information about environment, main complain / wish, ocular / systemic conditions, Medication, History of ocular events / correction etc.
 - Carries the level of professionality and care to your patients

Communication: Parents

- Parents are very warm welcome, despite the fact that all your time will concentrate on their child
- Adressing all their wishes and fears, reassure that is was the right decision to show up today
 - Asking Open Questions is Key here!
 - Only if the eyes of the child stays like they should, contact lens wear will be supported

Communication: Parents

- If Parent is wearing contacts, let them explain:
 - which contact lens type, with which care solution they are using
 - modality of wear and how they make sure to stay in that modality
 - Let them perform their daily contact lens care
- Make sure, that you only advice the best care without any compromise to their child

Communication: Child

- Ensure the child his status of a VIP:
 - It is their time now, not the time of their parents

Speak the level of childhood presented, much

better than speaking is presenting (Talder

Videos on iPad, etc)



Communication: Examination

- Let the child participate in your analysis
 - Explain your next steps of examination
 - Digital Slitlamp with a good Screen is essential to show the results and let all participate
 - Explain the reasons for the course of action (extremely important for contact lens choice and their care solution)
 - Reassure the child constantly that they are doing a great job!

Communication: Handling

- It's time for a coffee break for the parents
 - If possible, work with the child alone
 - First insert the contacts professionally and start with removal counseling first
 - Reassure the kids constantly that they are doing a great job. Especially if they failed a few times!
 - Provide detailed written Instruction or Video, with an after hour emergency number (not so important for the child)

Communication: After Care



Communication: After Care

- Reassure that what ever will happen, you will take care about it
 - Provide an after hour emergency number
- Support your patient in staying compliance
 - Lens timer / Apps for smartphones / set up ideal replacement schedule
 - Arrange the next appointment already and use SMS / App / email as a reminder
 - Give the correct amount of contacts and care solution as package till the next visit

Communication

- Wearing contact lenses is a great deal and provides great freedom to see
- Kids notice extremely fast if it is true what you say and if you are honest in caring about them
- Finally, but most important it is just great fun to work with Kids and Teens!



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