

Therapeutic Contact Lens Fitting Suggestions for EB Patients

with recurrent Corneal Blisters/Erosions, Pain Sensation and/or Epiphora

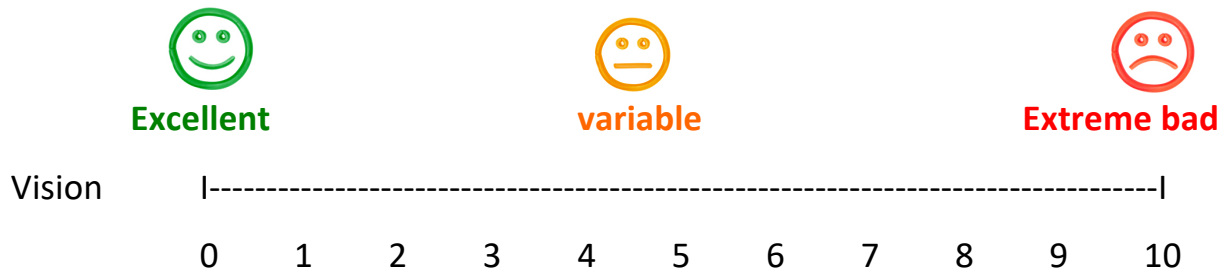
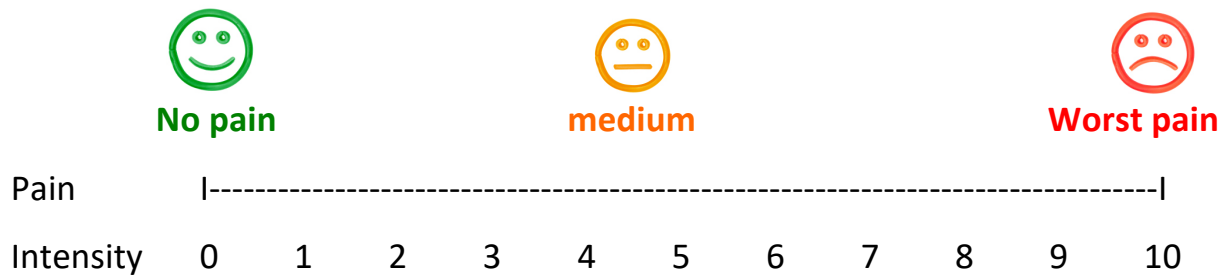
1. EBEye Questionnaire
2. Free Visual Acuity / Corrected Visual Acuity with current Eye Glasses
3. Autorefractor or Sciascopy (*only if Photophobia is not to severe*)
4. Ocular Topography or manual Keratometry
5. Slit Lamp / Biomicroscope Evaluation (*Documented by Photography*)
6. Fluorescein Vital Dye Stain (*Documented by Photography*)
7. Wearing Modality Decision (*Extended/Constant Wear or Daily Wear*)
8. Contact Lens Material Decision (*Silicone-Hydrogel or Scleral Lens*)
9. Base curve, Over all Diameter and Contact Lens Power Calculation
10. Insertion of Trial Contact Lenses with unpreserved Saline Solution

After 5-15 Minutes

11. Check Trial Contact Lenses for spontaneous Comfort, Centration, Fit and Movement/Tear Exchange
12. Educate proper Contact Lens Handling and Hygiene (*for Daily Wear with unpreserved Peroxide H₂O₂ System*)
13. Provide written Handling and Hygiene Instruction (*Brochure*) with Emergency Contact Information
14. Plan Follow-Up Visits depending the Wearing Modality
15. Record Progression by Photography and EBEyes Questionnaire
16. Educate your colleagues about the Possibility of Therapeutic Contact Lenses for EB Patients

EBEye Questionnaire (Feel free to optimize the naming, smileys or colors)

This Questionnaire was created to better understand your actual Eye Pain and Vision Situation and over time. Please indicate your personal feelings in the provided Scale.



Suggested Soft and Hard Contact Lens Materials for EB Patients

Fundamentals:

- Highest possible oxygen (Gas) permeability for extended or constant wear (EW 24h/7d/30d) up to 30 days and 29 nights. Ideal Dk/t > 100.
- Lowest protein and oily deposits possible to reduce “biofilm” on lens surface over time and to maintain good eye health.
- Best possible fit and lowest dehydration properties to maintain highest possible long-term comfort and ideal post-lens tear film exchange.

Silicon-Hydrogel (soft) contact lens brands with FDA extended/constant wear (EW) and therapeutic use approval:

- Biofinity (COOPER Vision, UK) spheric, toric and multifocal, monthly lens for EW
- Air Optix “*Night&Day*” (ALCON, USA) spheric, 2 different base curves available, smaller over all diameter for smaller eyes/lid aperture, monthly lens for EW
- Pure Vision (Bausch&Lomb, USA) spheric, 2 different base curves available, monthly lens for EW
- Acuvue Oasys (JOHNSON & JOHNSON, USA), spheric, toric and multifocal, 2 different base curves available, weekly (!) lens for EW
- ORBIS (SwissLens, Switzerland) spheric, broad range of individual BC and (small) Diameters, Definitive 74 (FilconF3), off-label EW for 1-3 months

Rigid Gas Permeable (hard) contact lens brands for Scleral Contact Lenses, only Daily Wear recommended even all of them have a FDA EW approval !:

- Optimum Extreme/Infinite (CONTAMAC, UK) spheric, toric and multifocal
- XO/XO2 (BOSTON, USA) spheric, toric and multifocal
- HDS 100 (PARAGON, USA) spheric, toric and multifocal