Pennsylvania Paraoptometric Association

Welcoming Patients to Presbyopia

Pete Hanlin, ABOM
VP Professional Services
Essilor of America - CDG

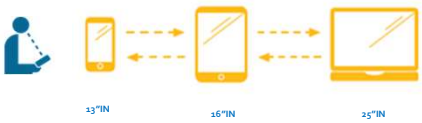
There are **128 million** presbyopes in the US*...

Only Half of Them Wear Progressive Lenses

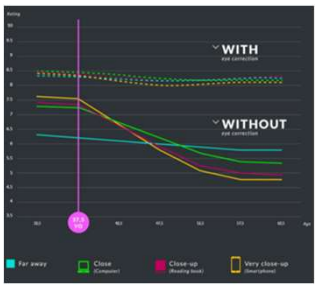
Digital Usage Impacts Near Vision

On average, wearers spend at least
- **Up to 10 hours** on various screens[1]
- Smartphones are checked up to **96 times per day** (once every 10 minutes)[2]

Multitasking requires the ability to see at multiple distances[1]



Presbyopes Quality of vision



Rated from 0-10

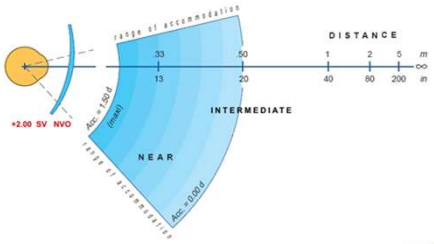
Near Vision quality starts to decrease as young as

37 years old

Total Sample. Presbyopes: USA - BgTSI - Brazil / China / France / India /US (3696 online interviews, wearers and non wearers, 35 - 60yo)

We Can Do Better....

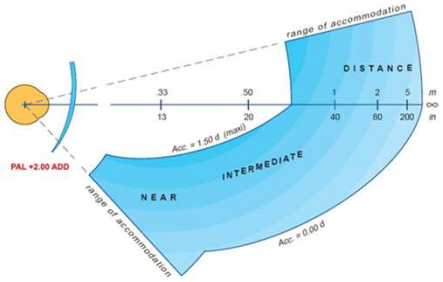
Readers will never solve the *underlying issue*



The Best All In One Solution

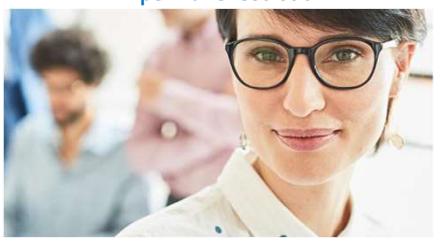
Progressive lenses do better...

- a complete solution to presbyopia



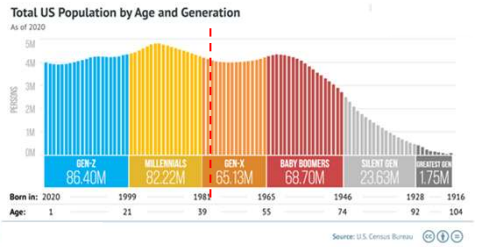
New Presbyopes

The **1st** solution a new presbyope is recommended by their eyecare professional is often their **permanent** solution…



Young Presbyopes Are The Opportunity

The current average age of a progressive lens wearer is early 50's. However, presbyopes should be prescribed progressive lenses as young as **39.5 years old**



What NOT to do

- Do NOT make light of "getting older"
  - Patients do NOT think "it's funny"
- Do NOT pre-judge
  - Everyone can benefit from better vision
  - Everyone wants great vision
- Do NOT suggest readers or bifocals
  - Even though these may "suffice" at age 40, they are not a permanent solution
- Focus on the constraints
  - PALs can be worn part-time
  - The best PAL designs create freedom

Engaging Young Presbyopes

Let new presbyopes show you their visual difficulties*, and describe your recommendation of progressive lenses as a solution to what they describe.

*It may help to have various electronic devices available for the patient to use while demonstrating their visual tasks.

Engaging Young Presbyopes

Pay attention to your patient's description, take notes, and then make a recommendation based on what they've shown you.

The Millennial presbyope wants to know they're getting product designed for **their specific needs**.

Dispensing PALs to New Presbyopes

However when purchasing lenses, Presbyopes rely strongly on their doctor and optician recommendations

The Eyecare professional recommendation is a key driver for 91% of PAL wearers*

*Eyewear usage and attitude · B3TSI · Quantitative study · 2019 · France, USA, Brazil, China, India · 14216 online interviews wearers and non wearers · 15-65yo

The Psychology Of An **Ametrope**

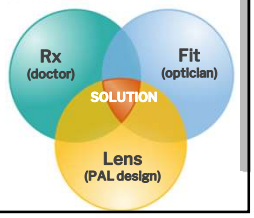
"I may or may not love wearing glasses, but they are a part of my life…

I've always been able to see everything with my glasses- but now they don't work up close (or I have to take them off to see up close)."

The Psychology Of An **Ametrope**

Welcoming the **ametrope** to presbyopia…

- *Everyone* experiences presbyopia
- Presbyopia reduces your ability to focus within arm's reach
- There are **3** keys to resolving this issue…
  - The Right Rx
  - Perfect Fitment
  - A Quality Lens



The Psychology Of An **Ametrope**

Why a PAL is the best solution for an **ametrope**

- Looks just like your current SV lenses (no-line)
- Works just like your current SV lenses
  - No need to take them on and off
  - No "image jump"
  - Similar visual experience*
- Complete solution- now and in the future
  - Presbyopia is an ongoing issue- fix it now

** With the right Rx, best fitment, and a quality lens*

The Psychology Of An **Emmetrope**

"I have strong eyes- I do not wear glasses.

My eyes have always been able to focus on anything I need to see, but for the first time in my life I cannot see some things clearly."

The Psychology Of An **Emmetrope**

Why a PAL is the best solution for an **emmetrope**

- Complete solution- now and in the future
  - Presbyopia is an ongoing issue- fix it now
- "Cheaters" have a lot of shortcomings
  - You haven't had to think about your vision before…
    - ✔ You have to constantly remember / find readers
    - ✔ I'm guessing you receive texts throughout the day?
  - Be prepared to buy a bunch of them
  - Call them what you want, they're still glasses, and they won't look as awesome as what we can provide

All PALs Are Not The Same

When new & young presbyopic patients are asked

"How many progressive lens designs do you think there are?"

5 out of **6** respond:

1 ONE?

All PALs Are Not The Same

Consider the side effects most PAL designs cause…

- Decreased sharpness at near
- Difficulty transitioning between far & near
- Off-balance "swimmy" feeling
- Trouble finding "just the right spot"

All PALs Are Not The Same

Most "less than delighted" PAL wearers believe the problem is…

Rx wasn't correct

"If the doctor twirls the knobs and writes down the right numbers, I will be able to see. If not…"

Glasses were fit / made incorrectly

"If my glasses are made correctly, I shouldn't have to get used to them"

The RIGHT PAL = Happy Patients

However, the right progressive lenses allows your patients to see well and makes YOU look good!

Modern PAL technologies can exceed expectations and generate delighted patients (and referrals).

Provide Sharper Vision

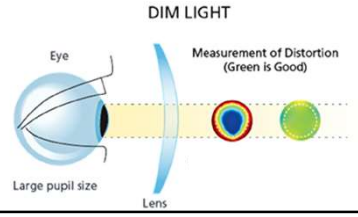
Sharp Vision – the patient's #1 expectation

Presbyopes expect sharp vision in ALL lighting conditions…

Provide Sharper Vision

Sharp Vision – the patient's #1 expectation

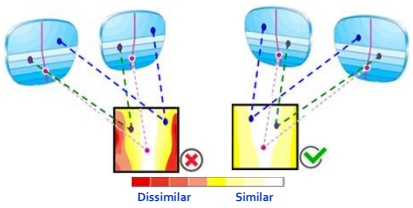
Wavefront control provides sharp vision in all lighting conditions…



A PAL shouldn't require you to use a flashlight app…

Provide Smooth Transitions

Smooth Transitions – for easier vision

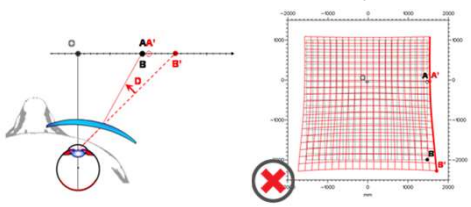


Our eyes were designed to work together, but many PALs challenge binocular vision.

You Should NOT Have to Pause Netflix to Read a Text

Eliminate The Swim

Confident Vision – no one likes swimmy vision

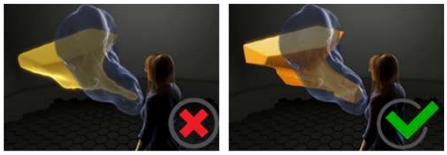


Magnification causes most PALs to create an off-balanced feeling (which many wearers describe as "swim").

It's Easier to Go Down Stairs That Are NOT Moving

Expand Near Vision

Volume of vision – expand "the right spot"



Before presbyopia, every spot in the lens is the right spot for every activity. Most PALs require the wearer to search for "just the right spot."

90% of Visual Activities are Within Arms Reach…

The RIGHT PAL = Happy Patients

All PALs are NOT the same…

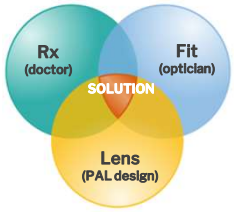
Progressive design plays a crucial role in restoring near vision for presbyopes…

- **Sharp Vision** – even in low light
- **Smooth Transitions** – for easier vision
- **Confident Vision** – even on stairs
- **Volume of Vision** – eliminate the "right spot" search

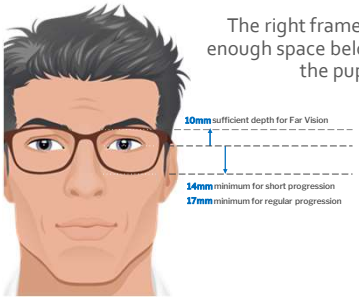
The RIGHT FIT = Happy Patients

Even the best* PAL design depends upon the skill of an optician.

**Proper fitment becomes even more important with technologically advanced PALs.*



The RIGHT FIT = Happy Patients



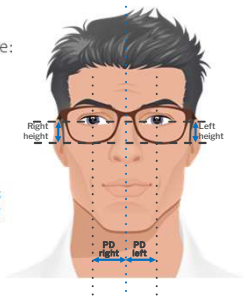
The right frame will provide enough space below AND above the pupil…

The RIGHT FIT = Happy Patients

The most important measurements to ensure optimum PAL performance are:

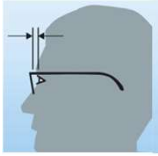
- Monocular PD
- Monocular Fitting Hgt

To ensure these measurements are accurate, the frame should always be pre-adjusted…



The RIGHT FIT = Happy Patients

Pre-adjust the frame to an optimal fit

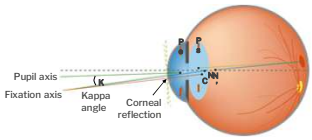
Vertex Distance	Pantoscopic Tilt	Face Form (Wrap)
		
✓ Optimal = 10-14mm ✓ Average = **12mm** ✓ Small vertex is ideal	✓ Optimal = 8°-12° ✓ Average = **8°** ✓ Avoid negative panto	✓ Optimal = 4°-12° ✓ Average = **7°** ✓ Avoid negative wrap

*If the frame cannot be adjusted to approximately **12mm**, **8°**, and **7°** consider specifying **position of wear***

When Dispensing A PAL

Never measure a PD with a ruler…

Pupil Center vs. Corneal Reflection

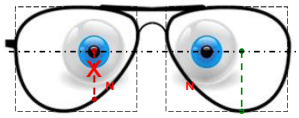


Measure fitting height to pupil center, but PD to corneal reflection

- Fixation axis passes through the corneal reflection
- Pupil does not dilate symmetrically

When Dispensing A PAL

Be sure to measure fitting height from the center of pupil to the "bottom of the box"



- intentionally fit too low
- measured to frame edge directly below eye
- failure to account for bevel
- frame shape excludes near

The most common error resulting in poor performance / adaptation is fitting a PAL too low.