



Offer Your SoftPerm® Patients the *So₂Clear*® Advantage

by Dianne Anderson, OD, FAAO

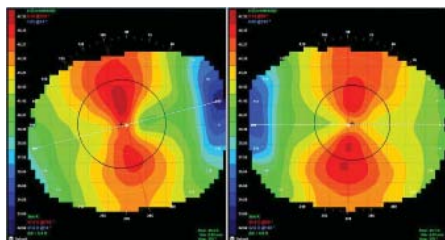
Given the recent discontinuation of CIBA's SoftPerm® hybrid contact lens, practitioners seeking an alternative lens to fit should be aware of the many advantages of the SoClear Corneal-Scleral lens from Art Optical. This revolutionary design combines the comfort characteristics of a soft lens with the optical quality of a GP lens.

The SoClear design works well on regular as well as irregular corneas, and is indicated in patients who are uncomfortable in small diameter corneal RGPs, those who do not get adequate correction from soft toric lenses, and those with high prescriptions where increased wearing time and oxygen permeability is a critical factor. With a central optic zone of 9mm, the visual performance is superior to smaller lens designs. SoClear is available in standard, aspherical cone, and progressive design options. Although diagnostic fitting sets are required, they are readily available and very affordably priced (\$100 USD for each 12-lens set). The fitting process is simple and straightforward and does not require practitioner certification.

I have been fitting SoClear for 2 years and have found it to make a significant difference in my ability to deliver quality vision along with excellent comfort in a variety of different vision conditions. Here are a few examples:

High WTR Limbal Astigmatism

Patient MM, a 16 yo female with high myopia and WTR astigmatism presented as a new wearer for contact lenses. Given the nature of her Rx, I wanted to

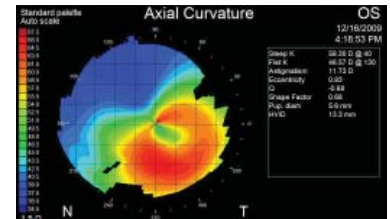


fit her in an RGP material for better vision and ocular health. Small diameter corneal bitoric lenses were uncomfortable and resulted in vision fluctuations with blink. Refitting in SoClear Standard spherical design improved the comfort and vision, covering all of her astigmatism.

(OD=BC 7.58, Diam 14.0, PC Flat 1.0, Rx -7.50, increased CT .05mm, OS=BC 7.58, Diam 14.0, PC Flat 1.0, Rx -2.75, increased CT .05mm).

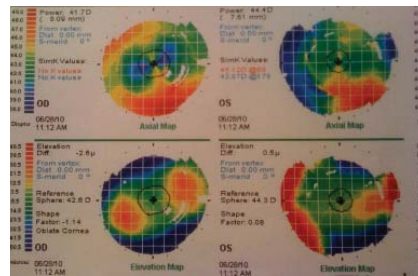
Keratoconus/Severe Myopia

Patient AG, a 35 yo male with advanced keratoconus was currently fit in a soft toric lens when referred to me. Needless to say, his vision was poor. However, due to high myopia and decentration of small diameter corneal lenses, I refit him in the SoClear Aspheric design (BC 6.4, Diam 14.0, STD edge, Rx -25D). This resulted in excellent comfort and centration, and provided the visual advantage of a larger (9mm) central optic zone.



Post-Corneal Graft with Presbyopia

Patient ZB, a 48 yo male with bilateral corneal grafts presented for a contact lens fitting. His right graft was unable to be corrected with spectacles. Topography shows the sunken nature resulting in an oblate shape.



My past experience has shown that fitting oblate corneas in small diameter lenses results in decentration, discomfort and visual distortions. So, in this case, a large diameter RGP is needed. Given the fact that this patient is presbyopic, I ordered the SoClear Standard Progressive design. (OD=BC 7.58, Diam 14.0, PC Steep 0.5, Rx -7.00 +1.75 ADD / OS=BC 7.58, Diam 14.0, STD edge, Rx -5.00 +1.75 ADD).

Dr. Anderson has a bachelor of science degree in biology from Rockford College in Rockford, IL and is a graduate of Indiana University School of Optometry. She is a fellow of the American Academy of Optometry and a member of the American Optometric Association's Cornea and Contact Lens Section. Dr. Anderson maintains a specialty contact lens and anterior segment disease practice within two ophthalmology groups in suburban Chicago. Her major area of interest lies in keratoconus and post-surgical contact lens fits such as corneal transplants. She is a contributor to many optometric journals, a frequent lecturer and a clinical investigator for new contact lens designs and diagnostic equipment.