# children prefer MiSight<sup>®</sup> 1 day to glasses<sup>1,2\*†</sup>





\*95-100% of children expressed a preference for contact lenses over glasses at each visit over 36 months. +'How much do you like wearing your contact lenses?' 87/97 (90%) Top box 'I like contact lenses the best' Subjective response at 60 months.



# MiSight<sup>®</sup> 1 day: the first daily disposable soft contact lenses specifically designed for myopic children<sup>3,4</sup>

Innovative MiSight<sup>®</sup> 1 day contact lenses with ActivControl<sup>®</sup> Technology control both axial elongation and myopic progression while fully correcting refractive error<sup>3</sup>



- Two treatment zones create myopic defocus with the image focused in front of the retina rather than behind it to slow axial elongation
- Two correction zones correct myopia in all gaze positions
- The treatment zones are designed to ensure consistent myopic defocus across all prescriptions, changes in pupil size, and variations in lens centration

Proven to slow myopic progression in the longest continuous soft contact lens study for myopia management<sup>3-5\*</sup>

- Slowed the progression of myopia by **59%**, and **41%** of children wearing MiSight<sup>®</sup> 1 day showed no meaningful progression in refractive error after 3 years<sup>3#</sup>
- Excellent visual acuity across all visits throughout 6 years of clinical study<sup>3,4†</sup>
- Minimal impact on ocular physiology<sup>3,4‡</sup>

\*Compared to a single-vision, 1-day lens over a three-year period; rate of progression maintained out to 6 years. #Compared to single vision lens, -0.25D or less of change. Fitted at 8–12 years of age. †VA (LogMAR) >6/6 (20/20) at all visits from dispensing to 6-year visit. ‡No slit-lamp



# Children prefer MiSight<sup>®</sup> 1 day to glasses<sup>1,2\*†</sup>

Daily disposable lenses are the healthiest way to wear soft contact lenses<sup>1</sup>



Children can be **successfully** fitted with daily disposable **contact lenses**<sup>3</sup>

Incidence of corneal infiltrative events (CIEs) may be **lower in** 8–11 year old contact lens wearers than adults<sup>6</sup>

### Children and parents find MiSight<sup>®</sup> 1 day to be child-friendly<sup>1,3,7</sup>

- Nearly **9/10 parents** said their children were "extremely happy" with the overall experience of wearing contact lenses after their children had worn MiSight<sup>®</sup> 1 day contact lenses for 3 years<sup>1</sup>
- Along with feeling better about their appearance when wearing contact lenses, children also feel better about participating in physical activities<sup>8</sup>

Children are able to handle MiSight<sup>®</sup> 1 day lenses confidently soon after initial fitting<sup>3‡</sup>

90% of children are able to apply and remove their contact lenses on their own<sup>3#</sup>



90% of children said they **preferred** wearing their MiSight<sup>®</sup> 1 day contact lenses to wearing glasses<sup>1</sup>

\*95-100% of children expressed a preference for contact lenses over glasses at each visit over 36 months. †'How much do you like wearing your contact lenses?' 87/97 (90%) Top box 'I like contact lenses the best' Subjective response at 60 months. ‡Children new to contact lens wear



# MiSight<sup>®</sup> 1 day: the longest continuous soft contact lens study for myopia management<sup>3-5</sup>

#### Part 1 (Years 1-3)

**Objective:** Assess the **difference in myopic progression** over a 3-year period between children wearing MiSight<sup>®</sup> 1 day and children wearing a single-vision 1-day lens **Design:** Randomised and double-masked study with 144 children, aged 8–12

#### 59% reduction in rate of myopic progression with MiSight<sup>®</sup> 1 day<sup>3</sup>



#### Changes in refractive error<sup>3,4</sup>

#### 52% reduction in rate of axial elongation with MiSight<sup>®</sup> 1 day<sup>3</sup>



#### Changes in axial length<sup>3,4</sup>

n=

n=

• Axial elongation is associated with a higher likelihood of visual impairment<sup>9</sup>

#### Part 2 (Years 4-6)

**Objective:** Compare **the rate of myopic progression** between children new to MiSight<sup>®</sup> 1 day and those who had worn MiSight<sup>®</sup> 1 day for the previous 3 years

**Design:** 108 children continued study with comparator arm switched to MiSight<sup>®</sup> 1 day

#### New and established MiSight<sup>®</sup> 1 day wearers had comparable rates of myopic progression<sup>4</sup>

#### New and established MiSight<sup>®</sup> 1 day wearers had comparable rates of axial elongation<sup>4</sup>

















# 41% of children showed no meaningful progression with MiSight<sup>®</sup> 1 day at 3 years<sup>\*\*</sup>

Refractive error progression with MiSight<sup>®</sup> 1 day vs control: population distribution<sup>3</sup>





# MiSight<sup>®</sup> 1 day is as easy to fit as a single-vision soft contact lens



- With the most up-to-date refraction in the trial frai prescription using the binocular balancing technique
- A cycloplegic refraction is recommended
- Aim for the least minus power

### **Recommended binocular balancing technique:**

Use a +0.75D or +1.00D lens to fog one eye while as

### Select and evaluate MiSight<sup>®</sup> 1 day

- Select initial MiSight<sup>®</sup> 1 day lens from best vision sphere; adjust for vertex distance when greater than -4.00D
- For optimum results, ensure that the vertex-corrected cylinder is  $\leq 0.75D$
- Allow lenses to settle for five minutes and confirm optimal MiSight<sup>®</sup> 1 day prescription using the binocular balancing technique
- Record vision
- Assess fit

**Increase** minus in 0.25D steps *only* if it significantly improves distance vision. **Reduce** minus in 0.25D steps, provided there is no decrease in acuity and no subjective visual impact.

# STEP 3

**STEP 1** 

STEP 2

### Recommendations and follow-up

- Schedule a follow-up visit for one week
- Assess handling technique
- Ghosting and halos are common at first and are a normal sensation with this therapy. Most children will adapt quickly, often within the first week. It is important to communicate this to parents and children before commencement of the trial period

**Recommended minimum wearing time:** 6+ days per week, 10+ hours per day

ame, confirm optimal	Material
	Water content
e	Base curve (mm)
	Diameter (mm)
	Sphere power
	Optical design
ssessing the other.	Dk/t (at -3.00D)
	Handling tint
	Pack size



omafilcon A
60%
8.7
14.2
-0.25D to -6.00D (0.25D steps)
ActivControl® Technology
28
Light blue
30/90/5 (trial)
Daily disposable

Replacement schedule







### Contact your CooperVision Business Development Manager or visit coopervision.net.au/coopervision.co.nz to find out more.

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# Preferred by 9/10 children

to glasses<sup>1,2†‡</sup>



Supported by the Brilliant Futures™ myopia management program

## BRILLIANT $\bigcirc$ FUTURES<sup>\*\*</sup>

MYOPIA MANAGEMENT PROGRAM

### childmyopia.com

