

## Comparison of the Ocular Surface in Adult and Pediatric Contact Lens Wearers

Katherine Bickle, OD MS FAAO

March 19, 2017

## Contact Lens Market

- 40.9 million CL wearers in the US
- \$2.5 billion market in the US
- \$7.2 billion market worldwide

2016 Fits and refits by material

2016 Soft contact lens fit replacement schedules

Nichols, 2017

## Children in Contact Lenses

- Proportion of pediatric CL wearers
- Reasons for fitting
  - Sports, other activities
  - Patient's request
  - CL material options
  - Cosmetic
  - Myopia control
  - Medically necessary

AOA Children & Contact Lenses Study

## Children in Contact Lenses

- Benefits to practice
  - Patient and parent satisfaction
  - Children may come back for visits more frequently
  - CL's and spectacle purchases
  - Referrals

2016 CL Spectrum Survey	
Patients Seen Each Week	105
% CL-Wearing Patients	33
# CL Fits/Refits Per Week	26
Estimated % Gross Practice Revenue from CLs	32
Estimated % Net Practice Revenue from CLs	27

Nichols, 2017

## Long-term Consequences of Fitting Children in Contact Lenses

- Risk of microbial keratitis
- Ocular surface changes
- Dryness and discomfort leading to contact lens intolerance

## Contact Lens Dropout

**Annual Contact Lens Dropout Rates**

- Rumpakis: 15.9%
- Richdale: 24.1%
- Pritchard: 34.0%

**Reasons for Contact Lens Dropout:**

1. Discomfort and/or dryness (most common)
2. Poor vision
2. Cost
3. Handling and care

## Dry Eye Disease: Background

- Prevalence
  - Wide range reported in studies (5-35% of the population)
- Symptoms vs. signs
  - Lack of correlation of signs and symptoms (Nichols et al, 2004)
- Diagnostic testing
- Etiology
  - Evaporative (86% of dry eye patients, Lemp et al, 2012)
  - Aqueous deficient
  - Combination

## Factors Associated with Dry Eye

- Contact lens use
- Medications (hypertensive, antidepressants, oral contraceptives, antihistamines, glaucoma)
- Systemic conditions
- Acne rosacea
- Ocular surgeries (refractive)
- Environmental conditions (humidity levels, wind)
- Computer use
- Smoking status
- Age

## Pediatric vs. Adult Contact Lens Wearers

- Extensive literature on adult lens wearers while data on children is limited
- Ability of children to understand and cooperate while performing measurements
- Systemic diseases

## Systemic Diseases in Children

- Cystic fibrosis
- Ectodermal dysplasia syndromes
- Juvenile rheumatoid arthritis
- Graft-versus-host disease
- Sjogren syndrome
- Diabetes
- Vernal keratconjunctivitis

## Subjective Comparisons

- Based upon symptoms, the prevalence of dry eye in CL wearers is 2-3x that of non-CL wearers of the same age
- Contact Lens Dry Eye Questionnaire (CLDEQ)
  - Pediatric: 4.3% considered to have dry eye
  - Adult: 56.2% considered to have dry eye

**1. DRYNESS:** A. During a typical day in the past week, how often do you experience dry or irritated eyes? (Rate of dryness)

**2. LIGHT SENSITIVITY:** A. During a typical day in the past week, how often do you experience light sensitivity? (Rate of light sensitivity)

**3. DO YOU THINK YOU HAVE DRY EYES WHILE WEARING YOUR CONTACT LENSES?**

## Subjective Comparisons

- Contact Lenses in Pediatrics (CLIP) Study
  - 84.6% of those ages 8-12 reported their eyes never or rarely felt dry

Question	n	Never		Rarely		Sometimes		Often		Always		p-value
		Children	Teens	Children	Teens	Children	Teens	Children	Teens	Children	Teens	
Itch?	116	44.2	34.4	46.2	48.4	7.7	17.2	1.9	0	0	0	0.24
Get red?	115	36.0	64.1	35.3	25.0	3.0	10.9	3.9	0	0	0	0.13
Burn?	115	63.5	55.6	39.8	36.5	5.8	7.9	0	0	0	0	0.72
Sting?	116	42.3	34.4	48.4	51.6	13.5	18.0	1.9	3.1	1.9	0	0.62
Feel light sensitive?	116	81.5	62.5	26.9	23.4	5.8	10.9	3.9	1.6	1.9	1.6	0.81
Feel dry?	116	50.0	35.9	34.6	31.3	11.5	29.7	1.9	3.1	1.9	0	0.08

## Subjective Comparisons

### Ocular Surface Disease Index

Variables	Pediatric group (n=45)	Adult group (n=45)
OSDI*	12.82±12.82	35.61±24.85
1. Eyes that are sensitive to light?	1.12±1.23	1.21±1.10
2. Eyes that feel gritty?	0.47±0.70	1.53±1.24
3. Painful or sore eyes?	0.33±0.61	1.57±1.11
4. Blurred vision?	0.21±0.72	1.50±1.23
5. Poor vision?	0.77±1.29	1.58±1.18
6. Reading?	0.08±0.28	1.60±1.16
7. Driving at night?	N/A	1.37±1.20
8. Working with a computer or bank machine (ATM)?	0.62±0.92	1.40±1.03
9. Watching TV?	0.37±0.71	1.48±1.22
10. Windy conditions?	0.58±0.76	1.55±1.19
11. Places or areas with low humidity (very dry)?	0.59±0.86	1.49±1.24
12. Areas that are air conditioned?	0.37±0.69	1.39±1.22

Han et al, 2013

## Subjective Comparisons

### Percentage of Dry Eye by Age

- Canada Dry Eye Epidemiology Study
- Limited number of surveys appropriate for both age groups

## Blink rates

- Adults: 12 blinks/minute
- Children (4-6 years old): 8 blinks/minute
- Infants: (36-53 weeks): ~5 blinks/minute
- Infants (0-17 weeks): 2 blinks/minute

## Meibomian Glands

- Sebaceous glands that secrete the lipid layer of the tear film
- Total number
  - Number in upper eyelid: 25-40
  - Number in lower eyelid: 20-30
- Delivery of meibum through blinking forces

Images: International Workshop on MGD

## Meibomian Gland Atrophy

### Pediatric group fit in corneal reshaping lenses

	Baseline	6 Months	12 Months	24 Months	36 Months
Meiboscure	0.10±0.11	0.11±0.19	0.11±0.31	0.11±0.50	0.19±0.10

## Meibomian Gland Atrophy

### Adult CL and Non CL wearers

	Mean Meiboscure (95% Confidence Interval)	Nonwearers	F Value
Total	1.72 (1.47-1.98)	0.96 (0.71-1.19)	<0.0001
Upper eyelid	0.86 (0.71-1.01)	0.72 (0.24-1.40)	<0.0001
Lower eyelid	0.87 (0.68-1.05)	0.62 (0.48-0.79)	0.026

	Mean Meiboscure (95% Confidence Interval)	F Value
Total	2.04 (1.84-2.24)	0.297
Upper eyelid	0.84 (0.71-1.21)	0.72 (0.62-0.84)
Lower eyelid	1.08 (0.96-1.43)	0.185

Variables	Coefficient	Standard Error	P Value
Diameter of contact lens (mm)	0.066	0.028	0.028
Spherical component of refractive error (D)	0.064	0.054	0.248
Cylinder of component of refractive error (D)	0.117	0.231	0.446
LogMAR score	-0.071	0.285	0.802
Spherical equivalent lens power score	0.480	0.258	0.062
Test retest time (months)	-0.284	0.255	0.130
Schirmer value (mm)	-0.007	0.014	0.602

Arita et al. 2009

## Tear Film Break-Up Time

- Pediatric population
  - 36 subjects
  - Mean age: 7.64 years (2.16-15.83)
  - Mean NITBUT:  $21.76 \pm 4.06$  seconds

Relative frequency of mean NITBUT values in 5 second intervals

Jones and Nischal, 2013

## Non-invasive tear break-up time

- Advantages
  - Non-invasive (no disruption to the tear film)
  - No reflex tearing after dye instillation
  - Data obtained from equipment
- Equipment
  - Oculus Keratograph 5M
  - Tearscope

## Tear Film Break-Up Time

### Pediatric Population

	Baseline	6 Months	12 Months	24 Months	36 Months
TBUT (sec)	13.21±3.58	12.68±6.15	12.90±5.45	12.76±5.17	12.10±5.08

### Adult Population

	NIBUT (sec)	TBUT (sec)
Nichols et al.	11.2±6.8	7.6±10.4
Sengor et al.		7.57 ± 2.67
Maruyama et al.	9.5±1.5	

## Tear Osmolarity

- Normal values
- Inter-eye difference
- Measurements should be performed no sooner than 2 hours after therapeutic eye drops

## Tear Osmolarity

### Pediatric Population

	Baseline	6 Months	12 Months	24 Months	36 Months
Tosm (mm Hg)	301.85±6.03	302.90±3.53	302.24±8.99	303.41±7.72	304.90±7.39

### Adult Population

	Osmolarity (mOsm/L)
Lemp et al.	300.8 ± 7.8
Muselier-Mathieu et al.	294.0
Miller et al.	319 ± 30

## Summary

- There are several indications for contact lens wear in children and children prefer contact lenses compared to spectacles
- Limited knowledge of the ocular surface on pediatric soft contact lens wearers
- Pediatric contact lens wearers appear to have less dry eye symptoms than adult contact lens wearers

Thank you!

[kbickle12@yahoo.com](mailto:kbickle12@yahoo.com)