

# Improving contact lens fit and patient retention with Extreme H2O contact lenses

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Contact lens discomfort and contact lens related dry eye are long standing problems eye care professionals are obligated to understand and manage. Research shows that a significant portion of patients drop out of their lenses due to chronic discomfort that is not necessarily caused by ocular surface disease. Recognizing risk factors early, and managing them, can greatly affect patient satisfaction, and ultimately, the profitability of our practices.

A game changer for my patients - and my practice - has been the implementation of HVID testing and the Extreme H2O contact lenses that are available in three diameter options. Using HVID measurements to identify patients with smaller or larger than average corneas, and then using this information to fit a more appropriately sized contact lens, has greatly improved my patients' contact lens discomfort. It has helped me keep patients in contact lenses who would have otherwise dropped out. I have

even been able to get previous dropouts back into contact lenses by fitting Extreme H2O.

With the success in quality of vision, comfort, and fit using Extreme H2O, I have made them my first choice in contact lenses for all of my patients. I even recommend them first for patients with an average HVID due to their high performance. My patients love them and so do I.

The following are examples and images of patients I have successfully fit in Extreme H2O lenses. I show their HVID measurement, which very simply identifies what size diameter and base curve contact lens the patient needs for the best fit. I then show the patient's habitual contact lens on the eye compared to the same eye with the appropriate Extreme H2O lens. I have stained the lenses with fluorescein and taken the photo under blue light to show the lens position more clearly.

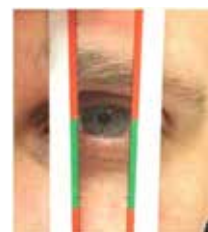
Personally, I have found Extreme H2O contact lenses to be **the most comfortable lens I have ever used**. I have a larger than average HVID and have always had discomfort with contact lens wear, no matter what brand I tried. The larger diameter (14.8) Extreme H2O lenses have changed that for me.

## Matt - a 28 year old who wears Air Optix Aqua

Case History:  
Chronic OSD, uses artificial tears often, no other treatment

CL Rx: -6.50 DS  
DVA: 20/20  
HVID:  $\geq 12.2$

Wears Air Optix and notes discomfort to the point where he has to remove his lenses for weeks at a time.



HVID  $\geq 12.2$



Air Optix Aqua:  
BC=8.6, DIA = 14.2  
"Has to take weekly breaks from CLs"



Extreme H2O Weekly:  
BC=8.7, DIA = 14.8  
"Instantly felt a big improvement in comfort and can now wear comfortably"

With the habitual lens you can see that the lens edge is very close to the corneal limbus. With the Extreme H2O lens (with the larger 14.8 diameter), the lens edge is in a perfect location.

## Liz - a 24 year old who wears Acuvue Oasys

Case History: Unremarkable, just here for her yearly routine eye exam. She states that she wears her glasses sometimes for driving at night or going to the movies. She says she is able to “get by” without glasses most of the time, even though she knows it’s blurry without them. She has tried CLs in the past (AVO 8.4 BC fit last year) but they were never comfortable so she prefers to use her glasses as needed and has accepted the blurry visual acuity the rest of the time.

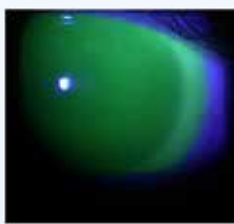
MRx: -1.00 DS DVA: 20/20 HVID:  $\leq 12.2$



HVID  $\leq 12.2$



Acuvue Oasys: BC=8.4, DIA = 14.0, VA 20/20  
“Feels them in her eye instantly”



Extreme H2O Weekly: BC=8.2, DIA = 13.6  
“Noticed less awareness from the first time she put them in”

With Liz’s case, we can see why she didn’t like to wear her old habitual lens. The edge hangs far over her limbus. Again, the Extreme H2O lens fits much better on her smaller corneas and she can instantly feel the difference.

As you can see from these examples, Extreme H2O with three diameter options are a great tool to use on the 20-25% of patients who have a larger or smaller than average HVID. They provide a healthier and more comfortable fit for these patients. They are also a very good contact lens for all patients, even those with average HVID.

The lenses are non-ionic so they are more stable in a hyperosmotic environment that most dry eye patients have. They have been shown to dry out by only 1% during wear, while other higher water content lenses have been shown to dry out by 8% or more. This level of drying out alters the comfort and optics of lenses greatly. Extreme H2O are also not silicon hydrogel lenses, so hypersensitivity is not an issue with the material.

All in all, the Extreme H2O lenses are a great work horse for my practice. They are the number one lens I prescribe, and I highly recommend other optometrists start measuring HVID and using these lenses for smaller or larger corneas to see for themselves.

Three diameter options are available in Extreme H2O Weekly and Extreme H2O Daily.

## Katie - a 26 year old who wears Acuvue 1 Day Moist

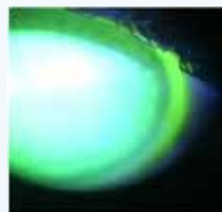
Case History: Unremarkable.

Wears Acuvue 1 Day Moist and notes no comfort issues. However, when probed we find she does have times of the day when her eyes feel “dry” or “tired” - usually in the evenings.

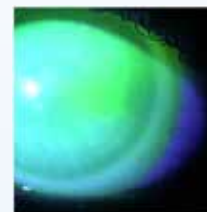
CL RX: -2.50 DS DVA: 20/20 HVID:  $\geq 12.2$



HVID  $\geq 12.2$



Acuvue 1 Day Moist:  
BC=8.5, DIA = 14.2  
“Not bad”



Extreme H2O Daily:  
BC=8.7, DIA = 14.8  
“Instantly feels even better”

With Katie, she didn’t really “have” a problem with her lenses. But because I measure every patient, I identified her HVID as a little larger than average. I then offered her Extreme H2O Daily 14.8 and she liked it better than her habitual lens.