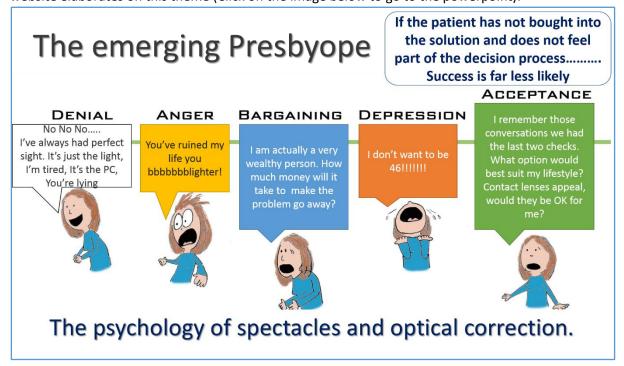


PRESBYOPIA – Needing Reading Glasses

Emerging Presbyopes (click on the image to go to the Presbyopia Leaflet) may be clinically quite straight forward. Psychologically however these patients potentially need a lot of support, especially if they have never traditionally needed

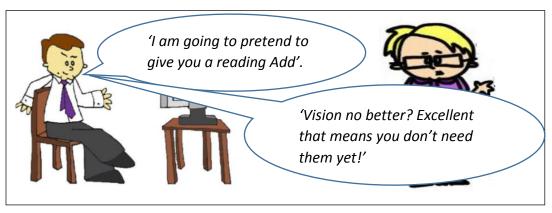


potentially need a lot of support, especially if they have never traditionally needed spectacle correction. Time is essential to allow the patient to come to terms with the problem, and in fact they may go through a denial process. Originally prepared for a 'Student Optometry Conference', our **Patient Speak, Optometry Speak: When Vocabularies Collide** powerpoint on the website elaborates on this theme (Click on the image below to go to the powerpoint).



It is best practice to take a bit of time in a thorough 'Eye Exam' to pre-empt the problem. Start mentioning when the patient is pre-presbyopic!

1. Explain at this stage about presbyopia.



2. Explain, even though you are not suggesting they need readers yet, what it will be like.



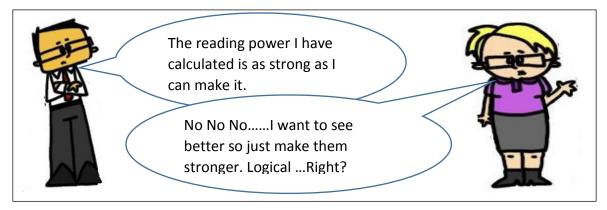
- 3. Explain there are lots of solutions when it is necessary
 - a. If I was asked what is the most inconvenient thing I could give it would be reading glasses.
 - b. Our goal is to improve convenience not make life worse.

Click on the image for: Patient Speak, Optometry Speak: When Vocabularies Collide

Theoretical 'Reading Add Calculations' may be easy for the Optometrist but are meaningless to the patient. A reading Power is presented to the patient which does not relate in any way to the patient's lifestyle needs. Without being part of the calculation, why would the patient accept the



solution you present. The patient may, in fact, have strong pre-conceived ideas:



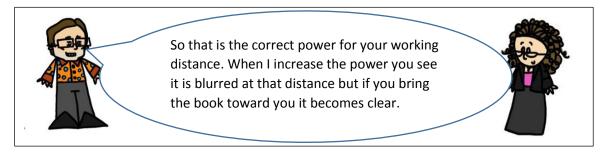
Engage with the patient and make it personal. What would be a natural default working distance for anyone? A Crooked Arms-length is the natural starting point. I actually say something like:



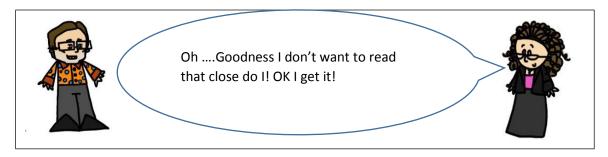
As human beings this is where we do 95% of things up close – Eating a meal, looking at a watch or phone, reading a book or tablet. If you are 8 feet tall a crooked arms-length may be way out but your crooked arms-length is here. (Note we are introducing the idea these are not just for reading they are for everything up close).

Then link to the Patient's **personal history.** Why take precious time to investigate the patient's lifestyle and hobbies if you do not use the information to help the patient? If a personalised assessment of lifestyle is ignored why find out at all?

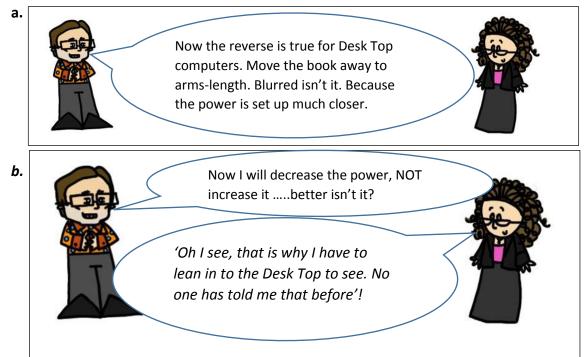
- DEMONSTRATE: Near Add/Distance Blur to demonstrate again what readers will do for distance vision. Introduce alternative strategies <u>Reading Glasses Leaflet</u>.
- 2. DEMONSTRATE: Increase Add Working Distance loss



a. The penny drops as to why you cannot simply make them stronger



3. DEMONSTRATE: Decrease Add and increase working distance



- Reading corrections of any description are general purpose things. They may do 95% of close tasks – BUT specific tasks may fall outside the zone. The patient's life identifies possible needs:
 - a. Too small? (Spot Tasks) BBB Leaflet (Click on the image to Go to the 'Big Bright Bold' Leaflet)

Consider niche products to help once the patient appreciates this is not a reflection of poor sight but rather the task.

- i. Coloured labels on packets
- ii. Crossword numbers
- iii. Knitting patterns

1. What niche products may help?

- **a.** Magnifiers are not just for the visually impaired. Think of a Watch Mender needing a magnifier.
- b. Stronger glasses with shorter Working Distance, if patient accepts the limitations, for Cross Stitch or model making.
- **c.** Spot Lights Light should be considered an optical appliance
- **b.** Near tasks further away. Explain the options. The patient may not need them yet but out of courtesy it is only right the patient is made aware to make an informed decision.
 - i. Desk Tops
 - 1. Degressionals
 - 2. Single Vision Computer spectacles
 - ii. Bridge Degressionals may work
 - iii. Painting How do they paint?
 - 1. Pencil Sketching standard Varifocal
 - 2. From a Picture Single vision readers may do
 - **3.** From a distant scene in oils Long Degressional with hint of Distance?
 - 4. Water colours with ink quite detailed
- c. Inside people/Office workers Nothing is that far away. Is distance vision necessary? An optometrist's working life is a small box we don't need distance vision. Long Degressionals used as 'Inside Varifocals' especially for people who have virtually no distance prescription.

Reading Glasses Leaflet (click on the image) must be

discussed.

'Out of Courtesy' patients should be given all their options including Ready Readers (Builders) and Contact Lenses. When Contact Lenses appeal you are offering a solution to a lifestyle inconvenience not simply an optical appliance.

Cost is not the issue. Lifestyle convenience is!

