



## ORIGINAL ARTICLE

# Barriers, motivators and enablers for dispensing multifocal contact lenses in Mumbai, India



Nilesh Thite<sup>a</sup>, Ukti Shah<sup>b,\*</sup>, Jasmin Mehta<sup>c</sup>, Janice Jurkus<sup>d</sup>

<sup>a</sup> International Association of Contact Lens Educators, Pune, Maharashtra, India

<sup>b</sup> Dr. Doongerwala's Clinic, Mumbai, Maharashtra, India

<sup>c</sup> Bausch + Lomb, Mumbai, Maharashtra, India

<sup>d</sup> Illinois College of Optometry, International Association of Contact Lens Educators, Chicago, IL, USA

Received 21 July 2014; accepted 26 November 2014

Available online 4 January 2015

### KEYWORDS

Multifocal contact lenses;  
Barriers;  
Motivators;  
Enablers

### Abstract

**Purpose:** To understand the potential barriers, motivators and enablers in dispensing multifocal contact lenses (MFCL).

**Method:** Two focus group discussions were conducted to design questionnaires regarding the prescribing habits for multifocal contact lenses (MFCL). Questions on potential barriers and motivators were included. The questionnaires were distributed among 133 eye care practitioners across Mumbai, India. Practitioners fitting one or less patient per month with MFCL completed the survey describing potential barriers, while those who prescribed more MFCL's per month completed the survey describing enablers and motivators.

**Results:** Responses from 102 practitioners were received. Most common potential barriers in prescribing MFCL were increased chair time (75%), lack of readily available trials (69%) and limitation in power range (63%). Lack of awareness among patients (90%) was the most common barrier from patients' outlook. Professional satisfaction (88%) and better business proposition (82%) were observed as main motivators while availability of the trials (84%) and correct patient selection (82%) were the major enablers. Graduate Optometrists felt dispensing MFCL did not offer a good business proposition ( $p=0.02$ ). Experienced practitioners were observed to be least motivated ( $p=0.01$ ) and believed that their patients found these lenses expensive ( $p=0.02$ ).

**Conclusion:** To enhance the MFCL practice, barriers like lack of awareness and limitations in power range must be addressed. Trial lens availability may motivate practitioners to prescribe MFCL. Further probing is required to understand lack of motivation among experienced practitioners.

© 2014 Spanish General Council of Optometry. Published by Elsevier España, S.L.U. All rights reserved.

\* Corresponding author at: B-803, Saibaba Enclave, Building No-2, Goregaon West, Mumbai 400062, Maharashtra, India.  
E-mail address: [optomukti@gmail.com](mailto:optomukti@gmail.com) (U. Shah).

**PALABRAS CLAVE**

Lentes de contacto multifocales;  
Barreras;  
Factores motivadores;  
Factores facilitadores

## Barreras, factores motivadores y factores facilitadores de la difusión de lentes de contacto multifocales en Mumbai, India

### Resumen

**Objetivo:** Comprender las barreras potenciales y los factores motivadores y facilitadores de la dispensación de lentes de contacto multifocales (MFCL).

**Método:** Se llevaron a cabo dos debates a fin de diseñar los cuestionarios relativos a los hábitos de prescripción de las lentes de contacto multifocales (MFCL). Se incluyeron cuestiones sobre las barreras potenciales y los factores motivadores. Dichos cuestionarios fueron distribuidos entre 133 profesionales de cuidados oculares en Mumbai, India. Los profesionales que adaptaban una o menos lentillas multifocales al mes completaron la encuesta que describe las barreras potenciales, mientras que aquellos facultativos que adaptaban más lentes de contacto al mes completaron la encuesta que describe los factores facilitadores y motivadores.

**Resultados:** Se recibieron respuestas procedentes de 102 facultativos. Las barreras potenciales más comunes de la prescripción de MFCL fueron el incremento del tiempo de consulta (75%), la falta de disponibilidad de lentes de prueba (69%) y la limitación del rango de potencia (63%). La falta de concienciación de los pacientes (90%) fue la barrera más común desde la perspectiva del paciente. Como principales factores motivadores se observaron la satisfacción profesional (88%) y la mejor propuesta comercial (82%), mientras que la disponibilidad de lentes de prueba (84%) y la correcta selección del paciente (82%) fueron los principales factores facilitadores. Los Optometristas Graduados pensaron que la dispensación de MFCL no ofrecía una buena propuesta comercial ( $p = 0,02$ ). Se observó que los facultativos experimentados estaban menos motivados ( $p = 0,01$ ), y pensaban que sus pacientes consideraban que estas lentes eran caras ( $p = 0,02$ ).

**Conclusión:** Para mejorar la práctica de las MFCL, deben abordarse las barreras tales como la falta de concienciación y las limitaciones del rango de potencia. La disponibilidad de lentes de prueba puede motivar a los facultativos a prescribir MFCL. Hace falta investigación adicional para ayudar a comprender la falta de motivación entre los facultativos experimentados.

© 2014 Spanish General Council of Optometry. Publicado por Elsevier España, S.L.U. Todos los derechos reservados.

With the aging of the population globally, the contact lens industry perceived tremendous potential in the presbyopic market. Efforts were thus made to create better corrective lens options for these patients. The concept of bifocal contact lenses has a history since 1938, when Feinbloom from New York described a segmented Bifocal CL and a Trifocal CL (Moss, 1962). In 1957, DeCarle in London developed simultaneous-vision bifocal CLs that were free from the problem of rotation, which became the basis for current bifocal CL (DeCarle, 1989). In the latter half of the 1980s to the 1990s, nonspherical progressive MFCL (Stein, 1990) and diffraction CL (Freeman and Stone, 1987) were developed, and a large number of bifocal CLs were made. Today, a wide range of both rigid gas permeable and soft multifocal contact lenses (MFCL) – as an option for correcting presbyopia – are available globally.<sup>1</sup>

Lens design, lighting and contrast are known to affect the visual performance of these lenses. The early MFCL designs were found to decrease contrast sensitivity and stereoacuity for the patient thus affecting the adaptation to these lenses.<sup>2-4</sup> Studies with lenses designed to overcome these issues have shown that high contrast acuity is not significantly affected with bifocal contact lenses.<sup>5</sup> Recent study done with simultaneous MFCL lens design showed good results in achieving required visual acuity and visual performance under – real life conditions.<sup>6</sup> Few studies also reported that advances in the lens design found no

significant decrease in stereoacuity with MFCL as compared to spectacle correction.<sup>7,8</sup>

Considering these advancements and better patient satisfaction with the newer designs, MFCL are expected to be the preferred choice for correcting presbyopia as compared to other contact lens correcting options.<sup>8</sup>

However, a survey on contact lens prescribing patterns conducted in India showed that only 33% of presbyopes were prescribed MFCL, while the recent global survey showed that half of all patients in the presbyopic age range are prescribed multifocal contact lenses, while only 10% receive a monovision correction.<sup>9,10</sup> Few studies also observed that practitioners preferred fitting monovision lenses over MFCL, which may be due to the ease of fitting and availability of wide power range.<sup>8,11,12</sup>

There is no clarity on the factors governing the prescribing and dispensing of MFCL. This study was thus conducted to get a better understanding of the barriers perceived by practitioners in India, which could be the major reason to limit the popularity of these lenses. We also wanted to identify the motivators and enablers from the practitioners who have been successfully dispensing these lenses and the impact of factors like, years of experience, type of practice and different optometry training levels contributing to the prescribing of these lenses. As optometry is not a regulated profession, these factors could also play a role in contact lens dispensing in India. Understanding and addressing these

Download English Version:

<https://daneshyari.com/en/article/2695021>

Download Persian Version:

<https://daneshyari.com/article/2695021>

[Daneshyari.com](https://daneshyari.com)