

## Invited Speaker



**Dr. Kathy Dumbleton**  
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### Biography

Kathy Dumbleton graduated from the University of Wales, United Kingdom, completed her pre-registration year at Moorfields Eye Hospital in London, and received her MSc from the University of Waterloo, Canada. She is currently a Senior Clinical Scientist at the Centre for Contact Lens Research, University of Waterloo. Dr. Dumbleton is a Fellow of the British Contact Lens Association, a Diplomate of the Cornea and Contact Lens Section of the American Academy of Optometry, a Board Member of the American Optometric Foundation, and a Council Member of the International Society for Contact Lens Research. Her research interests include the ocular response to contact lenses, silicone hydrogel materials, patient compliance, visual performance, and the measurement of ocular discomfort. Dr. Dumbleton is also the moderator of the “Question and Answer” panel of [www.siliconehydrogels.org](http://www.siliconehydrogels.org) and a frequent contributor to the website. She has published widely in refereed journals and professional publications, and has presented papers and given invited lectures and continuing education courses at conferences worldwide.

### Patient and practitioner compliance with silicone hydrogel and daily disposable lens replacement in the United States of America and Canada

#### Abstract

**Purpose:** To assess current recommendations from eye care practitioners (ECP)s for replacement frequency (RF) of silicone hydrogel (SH) and daily disposable (DD) lenses in Canada and the United States of America; to compare and contrast the rates of non-compliance (NC) with manufacturer recommended RF (MRRF) by both the ECP and the patient, and the reasons given for NC in the two countries.

**Methods:** Invitations to participate in this study were sent by e-mail to ECPs in Canada and the United States of America. A package containing 20 patient surveys was sent to the ECPs who agreed to participate. The questions were related to patient demographics, lens type, lens wearing patterns, ECP instructions for RF, and the actual patient RF. ECPs were asked to provide lens information and their recommendation for RF after the surveys had been completed and sealed in envelopes. All responses were anonymous.

**Results:** Over 2,500 completed surveys were received. There were no differences in the demographics of respondents between countries ( $p > 0.05$ ). Significantly more patients in the USA wore their lenses on an extended wear basis ( $p < 0.001$ ) and patients in the USA wore their lenses for significantly more days per week ( $p < 0.001$ ). 2 week (2W) SH lenses were worn most frequently in the USA and 1 month (1M) SH lenses were worn most frequently in Canada. ECPs recommended longer RFs than the MRRF most frequently for 2W SH lenses and least frequently for 1M SH lenses ( $p < 0.001$ ). The highest patient non-compliance rates were with 2W SH ( $p < 0.001$ ). The most frequent reason for non-compliance with 2W and 1M SH was “forgetting which day to replace lenses”; in DD wearers the reason was “to save money.”

**Conclusions:** Prescribing patterns for DD and SH lenses varied between the two countries evaluated. ECPs and patients were non-compliant with RF of 2W SH more frequently than with DD and 1M SH lenses.