

EMPOWERING PATIENTS THROUGH EDUCATION



A patient-centered approach in refractive surgery consultations.

BY MARC BLOOMENSTEIN, OD

For patients seeking refractive surgery, the initial consultation plays a crucial role in shaping their overall experience and satisfaction. My colleagues and I at the Schwartz Laser Eye Center in Scottsdale, Arizona, place a high priority on providing comprehensive patient education about the treatments we offer, which include PRK, LASIK, the EVO ICL™ (STAAR Surgical Company), and clear lens extractions. Although our website provides basic information on the refractive procedures we provide, patients must schedule a comprehensive consultation so they may talk directly with our staff, especially the surgeon. In response to initial inquiries, our front-desk representative will often send an electronic package of information about our services, including a price list, so that potential patients have educational information upfront before they even meet with a physician.

THE RIGHT MESSAGING MAKES A DIFFERENCE

I would advise practitioners to adopt a patient-centric approach that emphasizes finding solutions to their optical needs. When patients present for a refractive surgery consultation, they understand that the purpose is to determine if they're eligible for treatment. Yet, we must remember that these individuals often have thought about this decision for a long time, they've likely done some basic Internet research about refractive surgery (usually about LASIK, specifically), and they're ready to pull the trigger. After we've outlined the pros and cons of each option, if they learn that LASIK is not their best option, it's up to us to reassure them that we can confidently determine the best treatment for them based on our years of clinical acumen. We keep these options very narrow and only discuss the

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option that we think best suits their goals, their lifestyle, and their visual specifications. We provide patients with comprehensive education about the procedure to help them make an informed decision. Our evaluation can take up to 90 minutes and usually results in positive feedback and a high rate of conversion to scheduled elective surgery.

During these consultations, we conduct a thorough eye evaluation to determine the most suitable treatment options for the individual. We want to find the right procedure for the right patient. We consider factors such as eye curvature, corneal thickness, anterior chamber depth, white-to-white, prescription strength, and even the patient's personality when we make our treatment recommendations, and we focus on a procedure's features for the patient, rather than its cost. This tailored approach prioritizes patient well-being over unnecessary surgeries and creates a sense of confidence.

THE EVO ICL: A PATIENT-FRIENDLY REFRACTIVE OPTION

Often, LASIK and other laser vision correction procedures are not the patient's best option. They are pleased to learn about EVO ICL as a lens-based option over laser vision correction, and they like this solution even more once they hear

about its features. My team and I have long appreciated having the EVO ICL to offer as a minimally invasive refractive solution. I became familiar with the ICL technology through my involvement in the original clinical trials for the Visian ICL® as a sub-PI, and I have witnessed patients' success with the platform over nearly 20 years.

All the ICL lenses share the same biocompatible Collamer™ material. The EVO ICL, which gained FDA approval in 2022, provides a wide range of prescriptive correction or reduction of myopia, from -3.00 to -20.00 D and 1.00 to 4.00 D of astigmatism. In the EU, the EVO ICL is indicated for a range of prescriptive correction or reduction of myopia, from -0.5 to -20.0 D with up to 6.00 D of astigmatism.

Additionally, the EVO's optic contains a central port of 360 μm that facilitates aqueous to flow from the posterior chamber to the anterior chamber. This design preserves the physiology of the eye's anterior segment and eliminates the need for a preoperative peripheral iridotomy. Thus, implanting the EVO ICL is much more patient-friendly than previous ICLs, because it doesn't require a separate preoperative appointment.

Candidates must understand how phakic IOL implantation differs from a laser procedure, namely that the EVO ICL is a removable implant, does not induce dry

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eye syndrome,^{1,2} and offers excellent night vision.^{3,4} And, like LASIK, most patients are able to return to work the next day. With the right amount of education and the correct set of expectations, the EVO ICL is a very attractive option to patients seeking refractive surgery.

THE ROLE OF THE CLINIC STAFF

Our support staff plays a critical role in a patient’s refractive surgery journey; they influence the experience and shape how our patients perceive their care at our clinic. Therefore, we invest time and resources into training our clinic staff and technicians about technologies like the EVO ICL. We want the patient to have just one message from all of the team.

One of the most powerful tools for staff education is direct experience. When staff members observe the outcomes of comprehensive testing or surgeries, they gain a deeper understanding of the clinical criteria that define a good candidate for various procedures. This hands-on learning pro-

cess is invaluable and fosters continuous professional development. The doctors in the practice play a crucial role in this as they must dedicate time to educating their staff on the nuances of procedures. Education includes demonstrating the specifics of lens vaults, the effects seen under slit lamps, or explaining why certain conditions might cause temporary side effects like glare or halos. By doing so, staff members can better comprehend the intricate details that influence patient outcomes.

The STAAR ambassador program, which allows a staff member to receive a lens provided by STAAR, has been instrumental in our patient education. This initiative benefits both the practice and the staff, as the staff member can share their firsthand experience of the procedure with patients and other staff members. Someone who has personally chosen and undergone the procedure is an excellent educator and advocate, providing patients with valuable insights that can only be conveyed through firsthand experience.

CONCLUSION

At our refractive surgery center, the patient journey starts with the first contact. Our well-trained staff, who are integral to this process, guide patients from the initial encounter through their postoperative care. Our approach combines transparent communication, personalized care, and continuous staff education to create a patient-centered environment. These elements work together to build patient trust and confidence from the very beginning, ensuring that each individual feels well-informed and supported throughout their journey with us. ■

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Important Safety Information

Important Safety Information for the EVO/EVO+ ICL

The EVO/EVO+ ICL is indicated for phakic patients 21-60 years of age to correct/reduce myopia up to -20.0 D with up to 6.0 D of astigmatism. Careful preoperative evaluation and sound clinical judgment should be used by the surgeon to decide the risk/ benefit ratio before implanting a lens in a patient with any of the conditions described in the DFU. Prior to surgery, physicians should inform prospective patients of possible risks and benefits associated with the EVO/EVO+ ICL. Reference the EVO/EVO+ ICL DFU available at <https://edfu.staar.com/edfu/> for a complete listing of indications, contraindications, warnings and precautions.