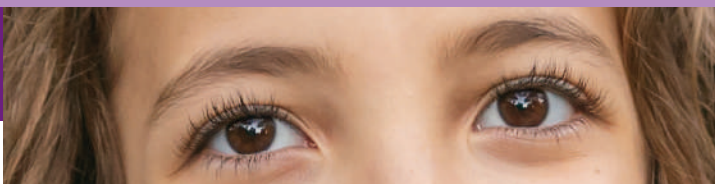




# MAKE CHILDREN'S SIGHT



# YOUR FIGHT™.



**Protect their vision from getting worse as they grow.**

Meet MiSight® 1 day: the only dual purpose contact lens to both **correct vision and control myopia.**<sup>§1</sup>

Through early intervention, **you have the power** to protect their vision from worsening with the **first and only\*** FDA approved<sup>†</sup> product proven to slow the progression of myopia in children, aged 8-12 at the initiation of treatment.<sup>§1</sup> MiSight®, for the love of sight.



CooperVision®

**MiSight®** 1 day  
for daily wear

<sup>\*</sup>Only FDA approved soft contact lens designed for myopia control in the U.S.

<sup>†</sup>Indications for Use: MiSight® 1 day (omafilcon A) soft (hydrophilic) contact lenses for daily wear are indicated for the correction of myopic ametropia and for slowing the progression of myopia in children with non-diseased eyes, who at the initiation of treatment are 8-12 years of age and have a refraction of -0.75 to 4.00 diopters (spherical equivalent) with ≤ 0.75 diopters of astigmatism. The lens is to be discarded after each removal.

<sup>§</sup>Compared to a single vision 1 day lens over a 3-year period.

1. Chamberlain P et al. A 3-year Randomized Clinical Trial of MiSight® Lenses for Myopia Control. Optom Vis Sci. 2019;96(8):556-567

# When Children Can't See Far:

## A Discussion About Myopia in Children



### DEFINING MYOPIA:

**Myopia** – a primary symptom of which is nearsightedness – a common eye health condition in which the eyeball elongates, causing light rays to focus incorrectly in the eye, thus making distance vision blurry.

### THE INCREASING PREVALENCE AND SEVERITY OF MYOPIA IN CHILDREN:

More than 40 percent of Americans have myopia and that number is increasing at an alarming rate, especially among school-age children.<sup>1</sup>

One in four parents have a child with myopia and about three-quarters of children with myopia were diagnosed between the ages of 3 and 12.<sup>2</sup>

Two-thirds of Eye Care Practitioners (ECPs) say the presence of myopia among children in their practice has increased over the past 5-10 years, and 81% of ECPs recognize it as one of the biggest problems impacting children's eyesight today.<sup>3</sup>

### CAUSES OF MYOPIA:

Myopia typically occurs during childhood when the eyeball develops a longer shape, meaning the distance between the front of the eye and the retina at the back of the eye is longer than an eye without myopia. Blurry vision due to myopia is the result of light rays focusing at a point in front of the retina rather than directly on its surface.<sup>6</sup>

However, the upward incidence of myopia can be attributed to different factors, and is occasionally the result of a combination of these factors:

- **Genetics** – Family history plays a role in a child's risk of myopia. If neither parent has myopia, the chance the child will develop myopia is relatively low. But if one parent has myopia, it increases the child's chance of developing myopia by 3x – doubling to 6x if both parents have myopia.<sup>7</sup>
- **Environment** – Environment – Exposure to sunlight, vitamin D levels, dopamine levels and the amount of time a child spends outdoors may have an impact on the likelihood of myopia development. Research shows spending more time outdoors lowers the risk of developing childhood myopia.<sup>8</sup>

### MYOPIA LEVELS:

Myopia usually starts in childhood at mild levels and often progresses.<sup>4</sup> It may increase in severity to moderate and high levels without any interventions. Each level of myopia is defined by a specific diopter (D) range. A diopter is the unit used to measure the correction, or focusing power, of the lens the eye requires to see clearly.

**Mild Myopia:**  
-0.50 to  
-2.75 D<sup>5</sup>

**Moderate Myopia:**  
-3.00 to  
-4.75 D<sup>5</sup>

**High Myopia:**  
-5.00 or  
higher<sup>5</sup>

1 Cooper, Y. (2019, May 1). With Childhood Myopia Rates on the Rise, the American Optometric Association Highlights the Importance of Early Intervention through Annual Eye Exams. Retrieved from <https://www.aoa.org/newsroom/myopia-rates-on-the-rise-sym>

2 Myopia: 2018 American Eye-Q Research. (2018, December 20). Retrieved October 2, 2019, from <https://www.aoa.org/patients-and-public/eye-and-vision-problems/glossary-of-eye-and-vision-conditions/myopia/myopia-research>.

3 CVI data on file 2019. Myopia Awareness, The Harris Poll online survey of n= 1,005 parents (with child age 8-15) and n=313 ECPs (who see at least 1 child age 8-15 with myopia each month) in U.S.

4 Donovan L, Sankaridurg P, Ho A, Naduvilath T, Smith EL 3rd, Holden BA. Myopia progression rates in urban children wearing single-vision spectacles. *Optom Vis Sci*. 2012 Jan;89(1):27-32.

5 Filtrcroft DJ. The complex interactions of retinal, optical and environmental factors in myopia aetiology. *Prog Retin Eye Res*. 2012 Nov;31(6):622-60. doi: 10.1016/j.preteyeres.2012.06.004. Epub 2012 Jul 4. PMID: 22772022.

6 Mayo Clinic. Nearsightedness. Retrieved October 30, 2019 from: <https://www.mayoclinic.org/diseases-conditions/nearsightedness/symptoms-causes/syc-20375556>.

7 Gifford, P., & Gifford, K. L. (2016). The Future of Myopia Control Contact Lenses. *Optom Vis Sci* 93(4): 336-343.

8 Xiong S, Sankaridurg P, Naduvilath T, et al. Time spent in outdoor activities in relation to myopia prevention and control: a meta-analysis and systematic review. *Acta Ophthalmol*. 2017;95(6):551-566. doi:10.1111/aos.13403.

## LONG-TERM OCULAR HEALTH IMPACTS:

As the eye continues to grow and the amount of myopia increases, ocular tissues change in response to the eye growth, resulting in eye health risks that are not as evident in a non-myopic eye. The more nearsighted a child is, the greater these risks become<sup>5</sup>, and these risks increase exponentially as myopia progresses.<sup>5</sup>

Leaving myopia untreated may contribute to more severe eye health complications later in life,<sup>5</sup> including:

- **Cataracts** – a clouding of the lens of the eye that can cause changes in vision. Though cataracts can affect everyone as they age, they often develop sooner in those who have myopia.<sup>5</sup>
- **Glaucoma** – a condition, usually linked to high pressure inside the eye, that causes damage to the eye's optic nerve, potentially causing irreversible vision loss and blindness. Studies show myopic people have a 2-3x greater risk of developing glaucoma.<sup>5</sup>
- **Retinal detachment** – occurs when the retina, a thin layer of tissue that surrounds the entire inside of the eye, pulls away from supportive layers of blood vessels that provide its necessary oxygen and nourishment.<sup>5</sup>
- **Myopic Maculopathy** – caused by the deterioration of the central portion of the retina, and is a leading cause of severe, irreversible vision loss.<sup>5</sup>

Leaving myopia untreated may contribute to more severe eye health complications later in life.<sup>5</sup>

## MANAGING MYOPIA:

The earlier myopia management starts, the better the outcomes for the child's near- and long-term eye health. In the U.S., 71% of ECPs say it is absolutely essential to slow the progression of myopia among children ages 8 – 15 years old.<sup>3</sup>

Managing myopia progression by even 1 diopter<sup>10</sup>:

- Reduces risk of myopic maculopathy by 40%
- Reduces risk of open-angle glaucoma by 20%
- Reduces risk of visual impairment by 20%
- Saves between 0.5 and 0.9 years of visual impairment

Managing myopia starts with regular comprehensive eye exams so ECPs can determine progression and treatment.

CooperVision's MiSight® 1 day is the first and only contact lens approved by the FDA\* to slow the progression of myopia in children (8-12 years of age at the initiation of treatment).<sup>10</sup> The FDA-approved\* lens is available as part of a comprehensive myopia management approach offered by CooperVision and participating eye care practitioners.

To learn more about the MiSight® 1 day myopia management approach please visit [www.coopervision.com](http://www.coopervision.com).



9 Bullimore MA. The Safety of Soft Contact Lenses in Children. *Optom Vis Sci.* 2017;94:638-46

10 Chamberlain P, et al. A 3-year randomized clinical trial of MiSight® lenses for myopia control. *Optom Vis Sci.* 2019; 96(8):556-567.

**\*Indications for use:** MiSight® 1 day (omafilcon A) soft (hydrophilic) contact lenses for daily wear are indicated for the correction of myopic ametropia and for slowing the progression of myopia in children with non-diseased eyes, who at the initiation of treatment are 8-12 years of age and have a refraction of -0.75 to -4.00 diopters (spherical equivalent) with ≤ 0.75 diopters of astigmatism. The lens is to be discarded after each removal.

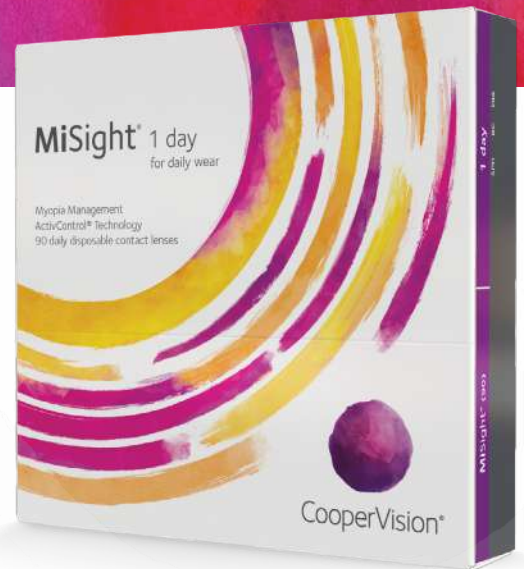
# Prescribe MiSight® 1 day

the **FIRST** and **ONLY** one for myopia control in age-appropriate children\*†

## Myopia Rates are Rising<sup>1</sup>

The progressive and irreversible disease of myopia can interfere with a child's quality of life, making it harder for them to participate in school, sports, or other daily activities.<sup>2-4</sup>

- **Myopia is increasing at an alarming rate:** more than **40%** of Americans are nearsighted, **up from 25%** in 1971.<sup>1</sup> This increase is most notable in school-age children.<sup>5</sup>
- In North America alone, the prevalence of myopia **is expected to increase to 58%** by the year 2050.<sup>6</sup>



## What Contributes to Myopia?

Although **genetics play a role in myopia**, (the odds of a child developing myopia are increased by 3x when one parent has myopia and by 6x when both parents have myopia,) <sup>7,8</sup> the **abrupt increase points to more environmental factors**.

Research shows that **modern lifestyles** may influence the development of myopia.



Insufficient time spent outdoors<sup>9,10</sup>



Prolonged time spent browsing, playing, or working on digital devices like smartphones or tablets.<sup>9,10</sup>



Poor lighting levels<sup>9,10</sup>

## What can you do to help?

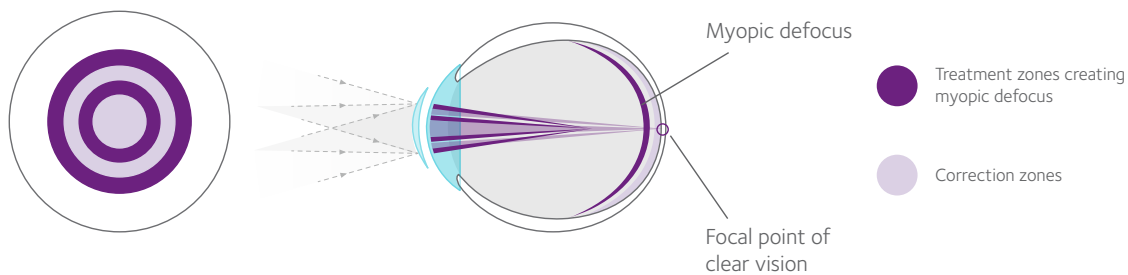
Prescribe MiSight® 1 day, the **FDA-approved†** dual-focus soft contact lens that uses ActiControl™ technology to slow axial elongation in children aged 8–12 at the initiation of treatment.<sup>11-13†</sup>

Over 90% of parents whose children were wearing MiSight® 1 day during a 3-year study rated their children "happy" with the overall experience of wearing contact lenses<sup>14 ††</sup>



# How does MiSight® 1 day work?

The MiSight® 1 day soft contact lens does two things – it provides clear vision *and* may reduce the rate of worsening myopia. It is a single use lens, a safe and convenient way to wear contact lenses.<sup>9-11</sup>



## Results from the 7<sup>th</sup> year of the longest, continuous soft contact lens study for myopia control showed:

Over a 6-year period, nearly 1 in 4 eyes in MiSight® 1 day showed no meaningful progression in refractive error despite this being a key period for eye growth<sup>11\*\*</sup>

MiSight® 1 day slowed the progression of myopia in age-appropriate children by 59% on average, slowed axial length elongation by 52% on average, and 41% of eyes had no progression<sup>11,15\*\*</sup>

## MiSight® 1 Day Comprehensive Support:

- Access to **Myopia Management Specialists** to help answer questions and successfully implement MiSight® 1 day into your practice
- Access to **patient marketing materials** and **ongoing education**
- Get listed on the **Practice Locator tool** to drive demand to your practice
- Ongoing patient and parent education and support through **ongoing marketing efforts** to drive awareness and demand for MiSight® 1 day contact lenses



## Become MiSight® 1 day certified today

Talk to your CooperVision sales representative or scan the code to enroll in your online certification

**Indications for use:** MiSight® 1 day (omafilcon A) soft (hydrophilic) contact lenses for daily wear are indicated for the correction of myopic ametropia and for slowing the progression of myopia in children with non-diseased eyes, who at the initiation of treatment are 8–12 years of age and have a refraction of -0.75 to -4.00 diopters (spherical equivalent) with ≤ 0.75 diopters of astigmatism. The lens is to be discarded after each removal.

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‡ Compared to a single vision 1 day lens over a 3 year period.

\*\* -0.25D or less of change. Fitted between the ages of 8–12 at the initiation of treatment.

¶ Children ages 8–15

**References:** 1. Vitale, S et al. 2009. Increased prevalence of myopia in the United States between 1971–1972 and 1999–2004. *Arch Ophthalmol* 127(12): 1632–1639. 2. Holden B A et al. Global prevalence of myopia and high myopia and temporal trends from 2000 through 2050. *Ophthalmology*. 2016; 123(5): 1036–1042. 3. Lamoureux E L et al. Myopia and Quality of Life: The Singapore Malay Eye Study (SiMES). *Invest. Ophthalmol Vis Sci*. 2008; 49(13): 4469. 4. Chua S Y L and Foster P J. The Economic and Societal Impact of Myopia and High Myopia. Ang M and Wong T. (eds) *Updates on Myopia*. Springer. 2020; 53–63 5. Cooper, Y. With Childhood Myopia Rates on the Rise, the American Optometric Association Highlights the Importance of Early Intervention through Annual Eye Exams. <https://www.aoa.org/newsroom/myopia-rates-on-the-rise-sym>. Published March 1, 2019. Accessed May 1, 2019. 6. Holden BA, Fricke TR, Wilson DA, et al. Global Prevalence of Myopia and High Myopia and Temporal Trends from 2000 through 2050. *Ophthalmology*. 2016;123(5):1036–1042. doi:10.1016/j.ophtha.2016.01.006 7. Jiang X, Tarczy-Hornoch K, Cotter SA, et al. Association of Parental Myopia With Higher Risk of Myopia Among Multiethnic Children Before School Age [published online ahead of print, 2020 Mar 19]. *JAMA Ophthalmol*. 2020;138(5):1–9. 8. Mutti DO, Mitchell GL, Moeschberger ML, Jones LA, Zadnik K. Parental myopia, near work, school achievement, and children's refractive error. *Invest Ophthalmol Vis Sci*. 2002;43(12):3633–3640. doi:10.1001/jamaophthalmol.2020.0412 9. Morgan P. C52102: Is myopia control the next contact lens revolution? 2016. Available from <https://www.opticianonline.net/cet-archive/127>. 10. Rose KA, Morgan IG, Ip J, et al. Outdoor Activity Reduces the Prevalence of Myopia in Children. *Ophthalmology* 2008;115(8):1279–1285. 11. Chamberlain P, et al. A 3-year randomized clinical trial of MiSight® lenses for myopia control. *Optom Vis Sci*. 2019; 96(8):556–567. 12. Chamberlain P, Arumugam B, Jones D et al. Myopia Progression in Children wearing Dual-Focus Contact Lenses: 6-year findings. *Optom Vis Sci* 2020;97(E-abstract): 200038.] 13. Chamberlain P, Arumugam B, et al. Myopia progression on cessation of Dual-Focus contact lens wear: MiSight 1 day 7 year findings. *Optom Vis Sci* 2021;98:E-abstract 210049. 14. CVI data on file 2018. MiSight 1 day 3-year study report. 15. Chamberlain P, et al. Myopia Progression in Children wearing Dual-Focus Contact Lenses: 6-year findings. *Optom Vis Sci* 2020;97(E-abstract):200038.



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## Learn more about the positive impacts of MiSight® 1 day

The FIRST and ONLY one for myopia control in age-appropriate children\*†

MiSight.com

Find educational resources, FAQs, blogs and more.



MiSight.com

YouTube

Hear patients teach how to insert and remove lenses and share their MiSight® 1 day experience.



YouTube

Instagram @MiSightVision & Facebook /MiSightVision

See informative posts about myopia, MiSight® 1 day, success stories and eye health.



Instagram



Facebook

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 CooperVision™

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for daily wear

