



# MEDMONT

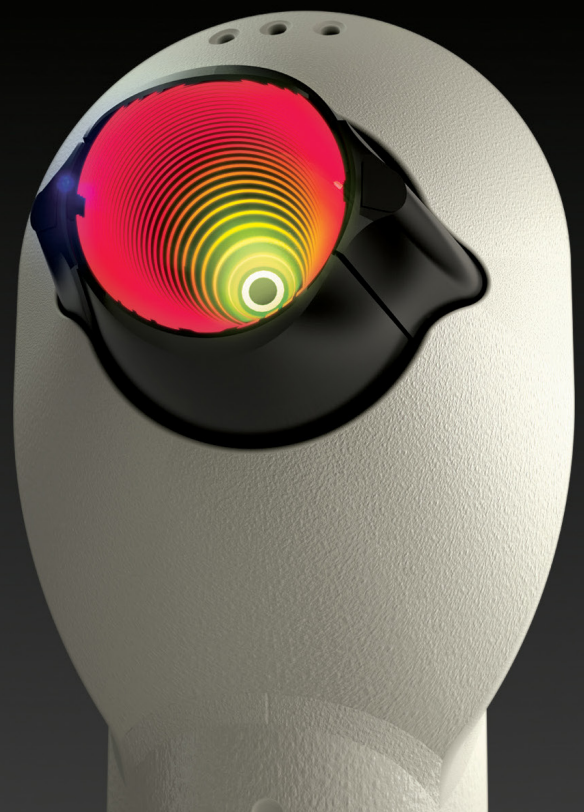
## E300 Corneal Topographer

### INVEST IN THE FUTURE

Professional Service Training | All NEW Studio 6 Software | EyeDream Ortho-k Software

“The Medmont E300 has made a huge difference to our practice. I would encourage all practitioners to invest in the future and stand out from the crowd.”

Keith Williams FBDO CL | Image Optical | Cheshire



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# Invest in the Future

## Diversify, Differentiate and Improve Patient Care with Corneal Topography

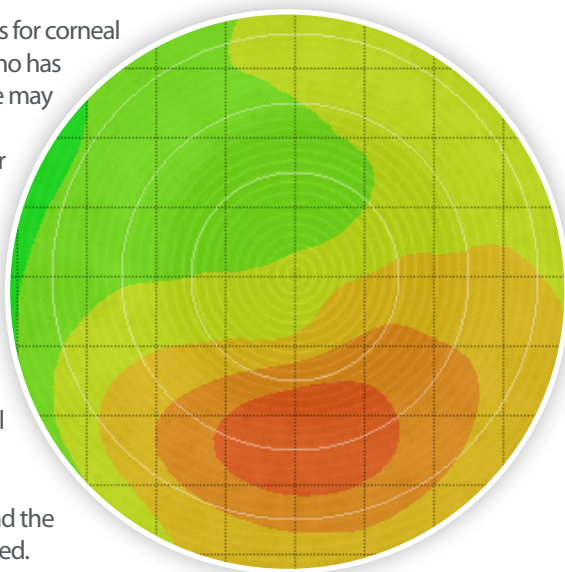
There are many exciting areas of technology that a practice can invest in and we have to make difficult choices about where to spend our money. Every piece of kit we introduce has to earn its keep, both financially and in terms of space. This article, by exploring the various applications associated with corneal topography, will demonstrate the many ways in which a corneal topographer can make a difference to you, your patients and your practice.

### Screening for Abnormalities

A fundamental role of corneal topography is in the screening of patients for corneal abnormalities. It is not uncommon to see a young patient in practice who has lost a line or so of best corrected vision. Without corneal topography we may recognise a number of signs which help lead us to a tentative diagnosis of keratoconus. However, many of us will feel that we should refer on for confirmation of the diagnosis.

With corneal topography, any eye care practitioner can generate a coloured map of the cornea and show the steepening associated with keratoconus, almost instantly. Once a practitioner has confirmed their suspicions they can then make a more appropriate referral if needed.

It is clear that this benefits the patient clinically but how is this beneficial to the practice? This quick scan has demonstrated to the patient that your practice is best positioned take care of their eye health. You will be able to discuss with them the ongoing monitoring of their condition and the likelihood that they will return to you after the referral has vastly increased.

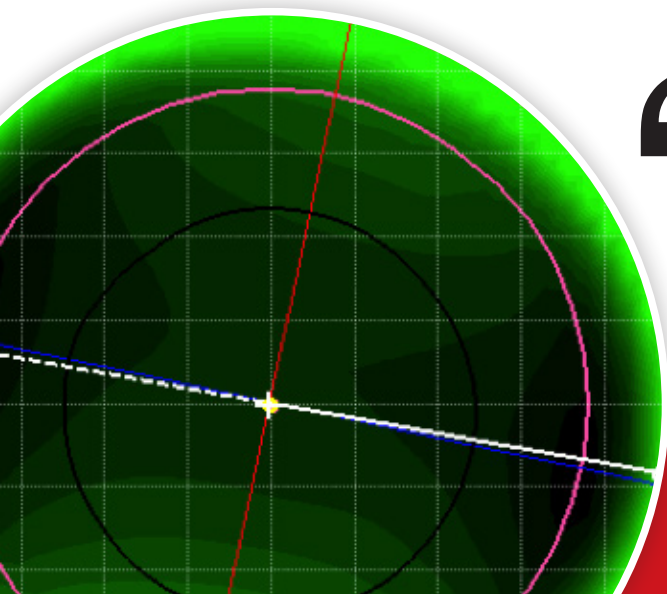


### Contact Lens Fitting and Assessment

Contact lenses are another traditional use of corneal topography. There are many areas of contact lens practice that can be enhanced with a greater understanding of the shape of an individual's cornea.

When fitting contact lenses we have traditionally relied on the information that a keratometer offers us, limiting us to the central 3mm of the cornea. For standard contact lenses on a *normal* cornea, this may be enough.

But what if your patient isn't normal? While the majority of modern rigid lenses have been designed to fit the average eye, problems can occur when a patient falls outside the norm. The next step would be to change the fit based on the fluorescein pattern. However, as many of us see few RGP patients, we may feel less confident about making these changes. The contact lens programs available on topographers such as the Medmont E300 can help you overcome this hurdle by producing fluorescein simulations which can be virtually adjusted to help you assess the fit before ordering.



“Dry eye management is an emerging and evermore popular use of corneal topography.”

## Therapeutic Lens Fitting

When fitting therapeutic lenses for irregular corneas it is important to know as much as possible about the shape of the eye before commencing. It is not uncommon for patients with irregular corneas to be misdiagnosed. This can have a profound effect on both the choice of lens to fit and the final fit of the lens selected.

Trying to fit a PMD patient with a lens designed for Keratoconus will normally fail. However, if you are armed with a topography map showing the classic PMD shape then you will be able to choose a more appropriate design from the outset.

Recently there has been a move towards larger lenses, which fit out onto the sclera, for the fitting of irregular corneas. The Medmont E300 makes fitting these lenses, such as the ICD 16.5, a breeze. By compiling 5 maps to create one image with limbus-to-limbus coverage the software module can offer a simulated fit. This can be used to aid the selection of the first diagnostic lens, reducing chair time and helping you to predict fitting changes. Not only does this appear professional, it's great patient theatre too.

## Ortho-k - Overnight Vision Correction

Orthokeratology is an excellent way for a practice to differentiate. Fortunately the days of 100+ lens diagnostic fitting banks and careful fluorescein analysis are long gone. Modern orthokeratology systems, such as No7's EyeDream, use topographical data sent by email to design custom lenses for each patient, reducing chair time and improving success rates.

The simplicity of this system allows the practitioner to focus their skills on patient care and communication rather than lens design. Data shows that EyeDream patients are incredibly loyal to your practice and will refer others to come and see you, whether for Ortho-K or for other services.

## Dry Eye Management

Dry eye assessment is an emerging and evermore popular use of corneal topographers. This is possible because placido ring topographers are strictly measuring tear film reflection. Any defects in the tear film will be shown in the reflected image and can be easily seen by the practitioner.

Tear break up time is a test that almost all optometrists and contact lens opticians will have used. This can be performed invasively or non-invasively. Even the simplest form of invasive testing, using sodium fluorescein, can present problems as the introduction of fluorescein changes the tear film makeup. For these reasons non-invasive tear break up time is preferred.

Most modern topographers, such as the Medmont E300, have a live image of the mires during the capture process. The practitioner can simply ask the patient to blink and stare, and then watch the image of the mires for break up. Doing this with topography rather than keratometry means that you can also check for the location of break up.

## Tear Film Surface Quality Software (TFSQ)

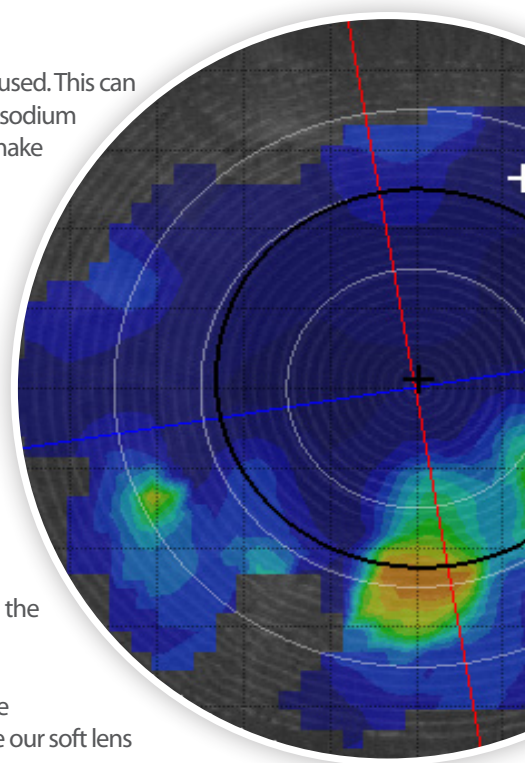
An extension to this very useful aspect of topography capture is the Tear Film Surface Quality analyser. TFSQ offers a new way to view and quantify tear film stability. A good tear film will be blue in colour with break up showing as red patches on the image (see right).

TFSQ data can be viewed as a single image or captured in video form to show the dynamic tear film post blink. There are many practical uses of this technology such as demonstrating the efficacy of dry eye treatment to a patient.

This technology could also be used to objectively show a patient that a soft lens that you are recommending really does wet better than their current lens. We frequently aim to upgrade our soft lens patients to better materials.

**We are always looking for ways to encourage patient loyalty. For many patients the prospect of having a practice that can monitor change and effectively manage their eye health means that they are unlikely to look for care elsewhere. Combine this with the ability to reduce chair time and the opportunity to offer new services and the case for investing in a corneal topographer has never been stronger.**

**Katie Harrop MCOptom | No7 Contact Lenses Professional Services Manager**



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## E300 Corneal Topographer

### INVEST IN THE FUTURE

#### Features Overview:

- Precision optics
- 106,000 analysed points
- 9,600 measured points
- Limbus-to-limbus data capture
- Automatic image capture
- Contact lens fitting module
- ICD 16.5 fitting module
- 1-click integration with EyeDream Ortho-k software
- Tear Film Surface Quality analyser



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