SoftPerm® Trial Lens Fitting Guide

SoftPerm® CONTACT LENSES

Simple Six-Step Procedure

1. **Take keratometer readings and convert "flat K" to mm.**
2. **Select the base curve of the diagnostic lens as a function of corneal toricity as follows:**

Corneal toricity (D)	Base Curve (mm)
1.37D or less	Flat K to 0.1 mm steeper than flat K
1.50D to 2.75D	0.1 mm to 0.2 mm steeper than flat K
Over 2.75D	0.2 mm to 0.3 mm steeper than flat K

If deviations from the above base curve selection table are considered, it is best to go with a slightly steeper base curve to avoid a tight-fitting lens. Thus, the final base curve should be within the recommended range or perhaps 0.1 mm steeper.

3. **Performance evaluation**

Allow a minimum of 10-15 minutes equilibration on the eye before evaluating the trial lens. Allow 20-30 minutes if there is initial edge standoff.

- If small bubbles are trapped under the lens on insertion, they should be massaged out or allowed to dissipate before evaluation

4. **Criteria for ideal fit (after adequate equilibration)**
   - Good comfort and good centration without limbal impingement
   - At least 0.25 mm of free movement on upgaze blink
   - Direct patient to look up and observe lower lens margin
   - Have patient blink in upgaze
   - Free movement means the lens margin slides without dragging conjunctiva or superficial vessels
   - Good tear exchange as indicated by a rapid outflow of fluorescein and the absence of trapped tears (see below)
   - Rigid lens optical performance quality
5. **Use the fitting aid Fluoresoft® (non-staining, large molecular weight fluorescein solution)**

Fluoresoft is a useful tool in fit evaluation. Instill one drop in the base curve of the lens before insertion. Observe the pattern immediately after insertion—the fluorescein should flow out quickly.

- Near alignment to minimal apical clearance should be seen in the gas-permeable center
- A faint, even band can usually be seen under the peripheral band of the soft skirt
- A persistent trapped pool of fluorescein is a sign of poor tear exchange and may indicate a tight-fitting lens

Caution: Standard sodium fluorescein should not be used, as it will stain the soft skirt of the lens.

6. **Determine final lens power**
   - Calculate lens power as you would for a rigid lens, taking into consideration the keratometry readings, the base curve, and any resulting tear lens
   - Refine the power as necessary by adding the overrefraction to the power of the diagnostic lens

Problem Solving

Lens Movement

It is essential that adequate lens movement be maintained after full equilibration on the eye. Movement is not usually improved by fitting outside the recommended base curve guidelines. In fact, fitting too flat can have an even greater negative effect than fitting too steep.

If adequate movement cannot be achieved within the recommended guidelines, it is probably best not to fit the patient with SoftPerm lenses. If the eye care practitioner decides it is desirable to proceed with the fitting, she or he should schedule frequent periodic follow-up observations to minimize the possibility of adverse reactions.

Steep Lens

An excessively steep lens may show only minimal movement or movement with conjunctival drag. The fluorescein pattern will show significant apical clearance in the gas-permeable center as well as a pool of trapped tears under the skirt. The trapped tears will dissipate only slowly with blinking. In this case, select a flatter base curve.

Flat Lens

A lens that is too flat will usually not center well and may move excessively with imbal impingement. Comfort is usually compromised. A very flat lens will exhibit edge standoff, especially in upward gaze.

Flat-Fitting Fluorescein Pattern

This may show apical touch in the gas-permeable center. There can also be initial presence of significant interior tear pooling which can give a false impression of a steep-looking skirt. This initial appearance is due to lift-off of the skirt, and unlike the trapped tears under a steep skirt, tears will exchange freely and rapidly when the patient blinks.

Residual Astigmatism

If there is significant residual astigmatism, try flattening the base curve by 0.1 mm. However, this can be a viable solution only when movement and patient comfort are not compromised.

Additional Information

For additional product or fitting information contact CIBA Vision's Technical Consultation department at 1-800-241-7468. CIBA Vision also makes available product fitting and information booklets without charge by contacting a CIBA Vision Customer Service Representative.