

HAVE OPTOMETRISTS FORGOTTEN ABOUT LASIK?

That is the wrong question.

BY DEREK N. CUNNINGHAM, OD



It is difficult to understand why procedural volumes have not fully recovered after bottoming out in 2009 when LASIK results are better than ever. There is no shortage of myopes and no other widely used surgical alternative. Safety is well established, and public paranoia seems to have quieted. Several reasons for the stagnant market have been suggested, but this article concentrates on optometry's involvement in LASIK.

WHO FORGOT WHOM?

Optometry as a profession provides roughly 70% of all routine eye care in the United States.¹ In many respects, optometrists are the gatekeepers for most of the eligible myopes in this country. These patients visit their optometrists annually and view them as unbiased sources of information about eye surgery, yet referral rates are not where some refractive surgeons would like.

The question is not "Have optometrists forgotten about LASIK?" but rather "Has the LASIK industry forgotten about optometrists?" In the past 6 years, not one event at a major US optometry meeting has been sponsored by a LASIK industry partner. That includes educational and promotional events as well as exhibit hall participation. How would refractive surgeons' perception of LASIK change if every industry partner had abandoned every meeting they attended since the downturn in the market? The problem is compounded by a complete lack of LASIK marketing to and spending on optometry.

At the same time, pharmaceutical and device companies have been competing for these practitioners' attention, while contact lens and spectacle companies remain heavily involved in optometry meetings. It is easy to see why optometrists give little thought to corneal refractive surgery.

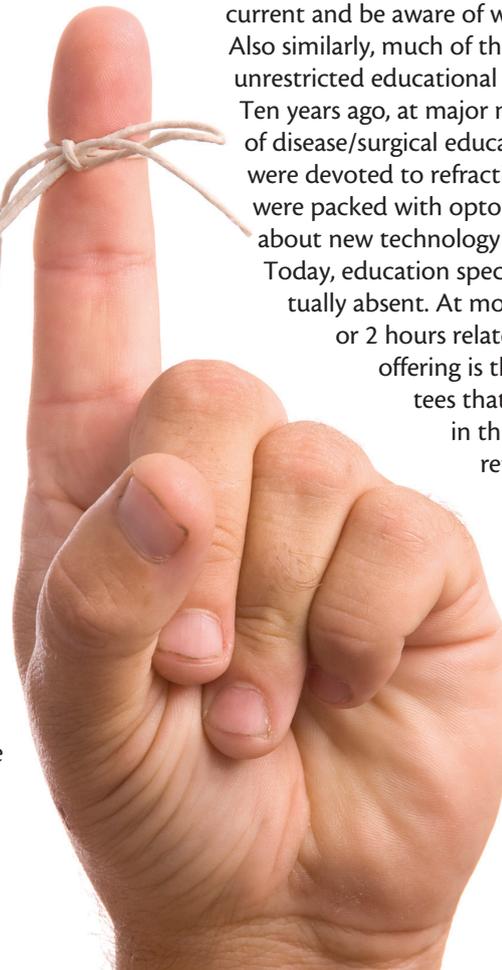
"In the past 6 years, not one event at a major US optometry meeting has been sponsored by a LASIK industry partner."

THE TRICKLE-DOWN EFFECT ON EDUCATION

As in ophthalmology, continuing medical education is a key component of optometrists' efforts to stay current and be aware of what is available to patients. Also similarly, much of this education is sponsored by unrestricted educational grants from industry partners. Ten years ago, at major meetings involving 100 hours of disease/surgical education, approximately 20 hours were devoted to refractive surgery, and the courses were packed with optometrists wanting to learn about new technology and management strategies. Today, education specific to refractive surgery is virtually absent. At most major meetings, maybe 1 or 2 hours relate to the subspecialty, and this offering is thanks to education committees that, realizing the lack of support in this area, actively try to keep refractive surgery relevant.

The trend is evident in optometry's popular trade publications as well. Whereas LASIK articles and sponsors dominated the pages 10 years ago, it is now possible to flip through issues and not find a single sponsor or mention of LASIK.

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AT A GLANCE

- In many respects, optometrists are the gatekeepers for most of the eligible myopes in the United States.
- The LASIK industry has stopped supporting and participating in optometry meetings, ceased marketing efforts directed at optometrists, and dropped educational outreach for them.
- Other industries actively compete for optometrists' attention.

WHAT IS TOP OF MIND?

What someone does every week is what he or she thinks about. Surgeons contemplate surgery. Primary care optometrists are visited several times a week by representatives from pharmaceutical, device, contact lens, spectacle, and insurance companies—every industry except refractive surgery. An annual promotional or educational event in refractive surgery for local referring docs cannot compete with weekly reinforcement by other industries. It is not that most optometrists are against LASIK; they are just reminded of the alternatives every day in clinic.

REENGAGEMENT

How can ophthalmologists reengage optometrists in corneal refractive surgery? One step is to encourage industry partners to interact with optometry. On an individual level, ophthalmologists can look for ways to reestablish relationships. Giving more value than just refractive surgery is a great start. For example, an ophthalmologist might offer to be a resource for a pathology consultation and provide resources that will help referring doctors educate patients on surgical options. How about inviting referring docs to watch surgery again? They may not have seen a LASIK case in over a decade.

It is worth bearing in mind the optometrists who have graduated during the decade since LASIK education was prominent. Reintroducing the basics of the procedure to these practitioners can be influential. A final note: optometrists are better educated and equipped than they have ever been, so it is important for ophthalmologists to talk to these professionals as they would to an ophthalmology colleague for referrals. ■

1. Facts about optometry and optometric services in hospitals. American Optometric Association. Revised August 1997. <http://bit.ly/1NaZy80>. Accessed June 24, 2015.

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