Subjective Dryness Symptoms Improve When Adapted HEMA Soft Contact Lens Wearers Change to Lotrafilcon Silicone Hydrogel Soft Contact Lenses Bill Long¹, BS, FAAO; Sally M. Dillehay¹, OD, EdD, FAAO; John McNally¹, OD, FAAO; Joseph T. Barr², OD, MS, FAAO

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Purpose:

Dry eye symptoms among contact lens wearers have been reported as a leading cause of discontinuation of contact lens wear.¹ Patient reported symptoms of dryness are often the only diagnostic criteria used by practitioners for diagnosing and managing dry eve.^{2, 3, 4} Some investigators have reported improvement in contact lens-related dry eve symptoms when adapted HEMA hydrogel wearers change to silicone hydrogel (SiHy) enses.^{5, 6} Five trials with lotrafilcon A and B lenses were analyzed retrospectively to investigate the performance of this material for improvement of dryness symptoms.

Methods:

Five trials involving 1,279 adapted HEMA wearers who were changed to lotrafilcon A or B SiHy lenses were analyzed for subjective patient evaluations of dryness during the day (DD) and dryness at the end of day (ED): 1 trial with lotrafilcon A for up to 30 night wear, 3 trials with lotrafilcon A for daily wear, and 1 trial with lotrafilcon B lenses for daily wear. Subjective evaluations with habitual HEMA lenses were compared to evaluations after wearing lotrafilcon SiHy lenses.

Results:

At 1 month, statistically significant improvements with lotrafilcon A for up to 30 night continuous wear were found for DD (p<0.0001, n=282) and ED (p=0.002, n=282). At 1 month, statistically significant improvements with lotrafilcon A for daily wear were found for DD (p<0.001, n=81; p<0.0001, n=60; p<0.0001, n=96) and ED (p=0.0017, n=81, p=0.0001, n=60, p<0.0001, n=96). At 2 weeks, statistically significant improvements with lotrafilcon B for daily wear were found for DD (p<0.0001, n=750) and ED (p<0.0001, n=750). On average, 46% (range 33% to 51%) of subjects reported improved DD and 32% (range 28% to 51%) improved ED.

Conclusions:

Changing to lotrafilcon A or B silicone hydrogel contact lenses provides improvment for some adapted HEMA wearers from symptoms of contact lens-related dryness during the day and dryness at the end of day.

Profile of Subjects in Trials:			
	Trial	Polymer	Subject Profile
	3 Year US Trial	Lotrafilcon A	67% females 37.6 ± 11.1 years old
			90% were adapted CL wearers
	1 Month Asian US Trial	Lotrafilcon A	66% females 31 ± 10 years old
			All were adapted SCL wearers
	1 Month Italy Trial		68% females
		Lotrafilcon A	31.7 ± 10.9 years old
	1 Month Nordic Trial		70% were adapted CL wearers 74% females
	T Month Northe That	Lotrafilcon A	32.3 ± 9.3 years old
			53% were adapted CL wearers
	2 Week US Trial	Lotrafilcon B	70% females
	1	1	28.8 years old





Summary For Dryness At The End of The Day:



Conclusions:

dryness at the end of the day.

References

2000. 19(4): p. 483-486. Acknowledgement

Clinical Conference.

Profile of Wearing Schedules in Trials:

Trial	Polymer	Wearing Schedules in Trial
3 Year US Trial	Lotrafilcon A	Up to 30 night continuous wear
1 Month Asian US Trial	Lotrafilcon A	Daily wear
1 Month Italy Trial	Lotrafilcon A	Daily wear
1 Month Nordic Trial	Lotrafilcon A	Daily wear
2 Week US Trial	Lotrafilcon B	Daily wear

Summary of Results:

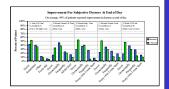
	Visits			Wilcoxon Signed-Ran
Trial & Polymer	Analyzed	Symptoms Analyzed	Ν	Test Results
3 Year US Trial	Baseline &	Dryness during the day	292	-0.23 change (p<0.0001)
Lotrafilcon A	1 Month	Dryness at end of day	292	-0.18 change (p=0.0020)
1 Month Asian US Trial	Baseline &	My eyes feel dry during the day	81	-0.42 change (p.<0.001)
Lotrafilcon A	1 Month	My eyes feel dry at the end of the day	81	-0.37 change (p=0.0017)
1 Month Italy Trial	Baseline &	My eyes feel dry during the day	60	-0.52 change (p<0.0001)
Lotrafilcon A	1 Month	My eyes feel dry at the end of the day	60	-0.55 change (p<0.0001)
1 Month Nordic Trial	Baseline &	My eyes feel dry during the day	- 96	-0.45 change (p<0.0001)
Lotrafilcon A	1 Month	My eyes feel dry at the end of the day	96	-0.61 change (p<0.0001)
2 Week US Trial	Baseline &	My eyes feel dry during the day	750	-0.46 change (p<0.0001)
Lotrafilcon B	2 Weeks	My eyes feel dry at the end of the day	750	-0.53 change (p<0.0001)
Pooled		My eyes feel dry during the day	1279	-0.41 change (p<0.0001)
		My eyes feel dry at the end of the day	1279	-0.45 change (p<0.0001)

Summary For Dryness During The Day:

ercent of Patients With Improvement in Dryness During The Day				
	Polymer	% of Patients With Improved Symptoms		
Гrial	Lotrafilcon A	32%		
sian US Trial	Lotrafilcon A	50%		
aly Trial	Lotrafilcon A	54%		
ordic Trial	Lotrafilcon A	50%		
Trial	Lotrafilcon B	62%		
		50%		

Percent of Patients With Improvement in Dryness at the End of Day				
refeelit of ration	Polymer	% of Patients With Improved Symptoms		
	Polymer	% of Patients with improved Symptoms		
JS Trial	Lotrafilcon A	21%		
n Asian US Trial	Lotrafilcon A	37%		
n Italy Trial	Lotrafilcon A	47%		
n Nordic Trial	Lotrafilcon A	58%		
US Trial	Lotrafilcon B	57%		
		449/		





Contact lens wearers may experience improvement in symptoms of dryness when wearing either lotrafilcon A or B lenses. On average, 50% of patients noted improvement in symptoms of dryness during the day and 44% noted improvement in symptoms of

1. Begley, C., et al., Characterization of ocular surface symptoms from optometric practices in North America. Cornea, 2001. 20(6): p. 610-618.

2. Korb, D., Survey of preferred tests for diagnosis of the tear film and dry eye. Cornea,

3. Nichols, K., J. Nickols, and K. Zadnik, Frequency of dry eye diagnostic test procedures used in various modes of ophthalmic practice. Cornea, 2000. 19(4): p. 477-482.

4. Turner, A., C. Layton, and A. Bron, Survey of eye practitioners' attitudes towards

diagnostic tests and therapies for dry eye disease. Clin Exp Opthal, 2005. 33: p. 351-355.

5. Chalmers, R., et al., Impact of previous extended and daily wear schedules on signs and symptoms with high Dk lotrafilcon A lenses. Optom Vis Sci, 2005. 82(6): p. 549-554.

6. Schafer, J., J. Barr, and C. Mack, A characterization of dryness symptoms with silicone hydrogel contact lenses. Opt Vis Sci, 2003. 80(12s): p. 187.

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