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## Examining the symptoms, causes, and treatments of contact lens discomfort

### A review of the TFOS International Workshop on Contact Lens Discomfort

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By: Ernie Bowling, OD, FAAO



**BY ERNIE BOWLING, OD, FAAO**  
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Every optometrist who fits contact lenses knows what a problem many patients have with [contact lens discomfort](#). It is likewise a significant clinical challenge. Most estimates suggest up to half of contact lens wearers experience this problem.<sup>1</sup>

But how do you define contact lens discomfort? To date, there has been little consensus regarding the condition in both the clinical and research community. The Tear Film and Ocular Surface Society initiated a workshop in 2012 [similar to its Dry Eye Workshop \(DEWS\)](#) and Meibomian Gland Dysfunction Workshop (MGD) in an attempt to standardize in the scientific and clinical communities the characterization of contact lens discomfort (CLD). The results of the entire workshop were published in *Investigative Ophthalmology and Visual Science*, along with an executive summary,<sup>1</sup> which I'll attempt to briefly summarize.

#### The value of a contact lens patient

##### Defining CLD

The first order of business for the group was to arrive at a consensus for the definition of contact lens discomfort: "Contact lens discomfort is a condition characterized by episodic or persistent adverse ocular sensations related to lens wear, either with or without visual disturbance, resulting from reduced compatibility between the contact lens and the ocular environment, which can lead to decreased wearing time and discontinuation of contact lens wear."

The workshop recognized that CLD develops after the initial adaptation a new contact lens wearer goes through, occurs while a contact lens is worn, and that removal of the contact lens "mitigates the condition (in particular the adverse ocular sensations)." The workshop participants felt that moving forward the terms "contact lens dry eye" or "contact lens-related dry eye" should be reserved for an individual who has a pre-existing dry eye condition which may be exaggerated with contact lens wear and should not be used when talking about CLD.

With more than 140 million contact lens wearers worldwide, [CLD remains a major reason for our patients to discontinue contact lens wear](#). Studies report that between 12 percent and 51 percent of contact lens wearers drop out of contact lens wear with CLD the primary reason for discontinuation.<sup>1</sup> The workshop stated: "While the precise ideology of CLD is yet to be determined, the use of symptoms as an outcome measure is appropriate, because it relates directly to the patients experience with contact lenses,

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and the motivation to seek and use treatment, regardless of the presence of observable signs." The workshop participants believed that the contact lens dry eye questionnaire is the most likely candidate for widespread CLD assessment.

## | lens wear.

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[CA scope bill no longer active](#)

A bill in California (SB 492) which as originally written would have granted expanded scope to optometrists was recently moved to inactive status.

[OD Q&A: Hunter W. Chapman, AOSA Trustee, AOA-PAC National Liaison, SCO Student Ambassador](#)

I got involved legislatively before I even attended optometry school. I went to LSU, which is in the state capitol, Baton Rouge. One of the optometrist I was shadowing at the time was going to a committee hearing for a nondiscriminatory bill for reimbursement rates for optometrists.

[Letters to the editor: Use optometry resources; In need of VT charts](#)

I am disappointed that Optometry Times would choose to suggest its readers use a pediatric "vision" check list from Bascom Palmer.

[Continuing the conversation on mesozeaxanthin](#)

I want to thank the Macular Pigment Research Group (MPRG), Waterford, Ireland for responding to my assertion that mesozeaxanthin (MZ) in supplement form, even if it was scientifically possible to study alone as a supplement, has not proven as of yet to be necessary to build central foveal macular pigment, improve cone visual function, or uniquely protect the retina from age-related macular degeneration (AMD).

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