

# Care & Maintenance

# Safety and Hygiene:

Rigid Gas Permeable (RGP) contact lenses are recognised as a safe form of vision correction.<sup>1</sup> However, incorrect care of contact lenses and solutions can increase the risk of eye infections and corneal ulcers. Risk factors for contact lens related corneal infection include improper lens cleaning and disinfection, poor hygiene practices and smoking.<sup>2</sup> Following your practitioner's hygiene regime, along with regular reviews, will minimise this risk.

Always thoroughly wash your hands with an antibacterial based hand wash and dry them with a clean lint free towel before handling, removing or inserting your lenses. Make sure to clean all parts of your hands, including between the fingers and dry thoroughly.

- Sit at a table or desk and place a lint free cloth down to insert and remove lenses. Avoid bathrooms as they often contain more germs than any other room in the home.
- Inspect your lenses for deposits and defects such as chips or cracks. Do not wear chipped or cracked
  lenses as these may cause discomfort and pain. If you notice any defects or if you are unsure whether
  your lenses are damaged do not wear the lenses and ask your optometrist to inspect them first.
- If you misplace a lens, contact your optometrist for a replacement.

#### THINGS TO REMEMBER!

Your lenses should never come into contact with tap or bottled water. Water contains microorganisms like Acanthamoeba that can cause sight-threatening eye infections.

# Removal - Remove lens either manually or with the suction cup

# METHOD 1 - SUCTION TOOL

- · Using your middle fingers, open the eyelids wider than the lens diameter.
- With the suction tool between your index finger and thumb, align the suction cup so it is positioned in front of and parallel to the lens.
- When the suction cup touches the lens, apply gentle pressure to adhere the lens to the cup and remove the lens from your eye.
- · After removal from the eye, carefully slide the lens sideways from the suction cup and it will come off easily.

#### METHOD 2 - MANUAL REMOVAL

- · Using your middle fingers, open the lids wider than the lens diameter.
- Apply pressure to the lid margins, pushing in together to move your lids under the lens and lever it out of the eve.





# Cleaning:

# PEROXIDE CLEANING SYSTEMS

Place lenses in the supplied basket holder and fill the case with the hydrogen peroxide solution. If required add the neutralising tablet and replace the lid and tighten. It is imperative the lenses are **not** removed before the solution has had six hours to neutralise.

### TWO-STEP CLEANER

As directed by your optometrist, some patients require a daily two-step lens cleaning system. Hold the lens in the palm of your hand and instil one drop of the daily lens cleaner into the back (bowl) of the lens. Gently rub the lens until the liquid foams like soap. Then rinse off with saline and place the lens into the conditioning solution to store overnight.

#### INTENSIVE CLEANER

To clean and maintain the wettability of your lenses use intensive cleaner, such as Menicon Progent. Place the lenses into the contact lens case holders. Open vial A and B by twisting the cap and pour the contents into the contact lens case. Replace the lid and tighten. Leave the lenses in the solution for 30 minutes, then remove and rinse thoroughly with saline. Lenses can now be worn or soaked in your daily cleaner (please note that this product may not be available in all countries, ask your practitioner).

#### THINGS TO REMEMBER!

The first thing you will notice about your lenses is they are different in colour. A green or grey lens for your right eye and blue lens for your left eye will ensure you don't get the lenses confused. A good way to remember this is that the second letter of green/grey is R for right! The second letter of blue is L for left!

EyeSpace Bespoke lenses are made of a strong polymer which resists damage in normal wearing circumstances. However, it is still important to handle them carefully.

Habits that may cause a lens to break, include:

- Pressure on the lens. If the lens lands on a mirror or flat surface, gently slide it off to the edge of the surface or use a suction cup to remove it from the surface.
- Removing a lens too firmly from the suction tool. Slide the lens off the suction point instead.
- Forcing the lens to bend while cleaning. Some force is required to clean a rigid lens using your
  cleaning solution, but not much the friction of your skin surface will do most of the job. If you are
  pressing down on both sides of the lens, it will flex and eventually snap if too much force is applied.





#### Insertion:



### STEP 1:

Remove lenses from the **Cleaning Solution Case** and rinse with saline. If using hydrogen peroxide solution a minimum soaking time of 6 hours is required for the acid to neutralise to saline.



#### STEP 2:

Place 1-2 drops of a **Lubricating Eye Drop** in the back of the lens. Place the lens on your index finger and insert directly onto the centre (coloured part) of your eye in a face-down position. To save confusion, it's a good idea to always insert the right lens first.



#### STEP 3:

If you happen to drop your lens, use Saline Solution to rinse. Place the lens in the palm of your hand and thoroughly rinse for 5 seconds.



#### STFP 4:

Dry and wipe out your lens case with a tissue. Leave the case lid off to air dry while wearing your lenses.

#### THINGS TO REMEMBER!

#### Normal occurrences on insertion:

Occasionally a lens may become dislodged within your eye. This may be uncomfortable however it won't do any harm.

- Look in a mirror to establish where the lens has moved to.
- Move your eyes in a direction away from where the lens is located. For example, if the lens in your right
  eye is on the white of your eye nearest to your nose, move your eyes to the right. Gently nudge the lens
  with your eyelids. Avoid directly pushing the lens into place as this can damage the surface of your eye.

#### Abnormal occurrences on insertion:

If on insertion you experience stinging, burning or pain, remove the lens, rinse and re-insert. If problems persist, remove the lens and see your optometrist at your earliest convenience.

#### **DURING THE FIRST 2 WEEKS:**

### Normal occurrences include:

- · Foreign body sensation and slight discomfort whilst wearing lenses.
- · Mild burning, stinging and watering which resolves once the lens is removed, rinsed with saline and re-inserted.

# Abnormal occurrences (contact your optometrist immediately) include:

- Redness, discharge, pain, light sensitivity, burning, stinging, and excessive watering of the eyes which do not resolve after lenses are removed.
- Feeling like the lens is stuck to the eye and having difficulty removing.

#### THINGS TO REMEMBER!

- Do not modify the recommended cleaning routine or solutions without consulting your optometrist.
   Other solutions may not be compatible with your eyes and lenses and may cause discomfort or allergic reactions.
- Shortcuts with cleaning solutions may appear to save money but may result in ineffectively cleaning
  and disinfecting the lens. Incorrect cleaning solutions may damage your lenses or lead to an eye
  infection which can result in vision loss.
- Never clean or store your rigid lens with soft contact lens solutions. These products work in a
  different way to the rigid lens solutions and will not clean and condition your rigid lenses as well.
- Replace your lens case every time you start a new bottle of lens cleaner to avoid microbial contamination and loss of effectivity.
- · To avoid contamination do not touch the tips of solution bottles. Replace caps after use.
- · If your eyes are very painful after hours, consult your local hospital or emergency eye clinic.
- If you notice scratches, chips or misplace a lens, contact your optometrist for a replacement. Do not
  wear chipped or cracked lenses as these may cause discomfort and pain.

## Contraindications:

Do not use your Bespoke contact lenses in the following cases:

- · Acute inflammation or infection of the anterior chamber of the eye
- · Any eye disease, injury, or abnormality that affects the cornea, conjunctiva or eyelids
- · Severe insufficiency of tears or inflammatory dry eye
- Corneal hypoesthesia (reduced corneal sensitivity)
- · Any systemic disease which may affect the eye or be exacerbated by wearing contact lenses
- Allergic reactions to ocular surfaces or adnexa which may be induced or exaggerated by wearing contact lenses or use of contact lens solutions
- · Allergy to any ingredient, such as peroxide and hydraglyde in a recommended cleaning solution
- Any active corneal infection (bacterial, fungal or viral).
- · Red or irritated eyes.
- · Remember your eye must:
  - Look good (no red eyes)
  - Feel good (no pain, discomfort or light sensitivity)
  - See good (no persistent blurry vision)
  - If in doubt, take them out and call your optometrist

<sup>1</sup>Bailey CS et al. A review of relative risks associated with four types of contact lenses. Cornea, (1990) Journals.lww.com

<sup>2</sup>Ladage PM, Yamamoto K, Ren DH, Li L, Jester JV, Petroll WM, et al. Effects of rigid and soft contact lens daily wear on corneal epithelium, tear lactate dehydrogenase, and bacterial binding to exfoliated epithelial cells. OPHTHA. Elsevier; 2001 Jul 1;108(7):1279–88.

