

I WEAR MISIGHT® 1 DAY SO I CAN BE THE NEXT CHAMPION[^]

[^] Not a real patient or testimonial



MYOPIA MANAGEMENT

Myopia is **irreversible** and **progresses rapidly** in younger children.¹

Start with **MiSight® 1 day**, the first **U.S. FDA approved^{††} soft contact lenses** proven to slow myopia progression in children, aged 8-12 at the initiation of treatment.²

U.S. FDA = United States Food and Drug Administration

*Compared to a single vision 1 day lens over a 3-year period. †As of March 2023. U.S. Indications for Use: MiSight® 1 day (omafilcon A) Soft (Hydrophilic) Contact Lenses for daily wear are indicated for the correction of myopic ametropia and for slowing the progression of myopia in children with non-diseased eyes, who at the initiation of treatment are 8-12 years of age and have a refraction of -0.75 to -4.00 dioptres (spherical equivalent) with ≤0.75 dioptres of astigmatism. The lens is to be discarded after each removal. †Plastic neutrality is established by purchasing credits from Plastic Bank. A credit represents the collection and conversion of one kilogram of plastic that may reach or be destined for waterways. CooperVision purchases credits equal to the weight of plastic in our contact lens orders in a specified time period. Contact lens plastic is determined by the weight of plastic in the blister, the lens and the secondary (outer carton) package, including laminates, adhesives, and auxiliary inputs (e.g. ink). **References:** 1. Zadnik K. *et al. Invest Ophthalmol Vis Sci.* 2004;45(13):2306. 2. Chamberlain P. *et al. Optom Vis Sci.* 2019;96(8):556-567.



Children from >30 countries have been prescribed **MiSight® 1 day** treatment for myopia control¹

See the Science, Safety and Success of **MiSight® 1 day** treatment.

SCIENCE

SAFETY

SUCCESS



Children from >30 countries have been prescribed MiSight® 1 day treatment for myopia control¹

See the Science, Safety and Success of MiSight® 1 day treatment.

SCIENCE

SAFETY

SUCCESS





What is the evidence supporting use of MiSight® 1 day for myopia control in children?

7 
YEARS

MiSight® 1 day's 7-year study
is the longest with soft contact lenses
among children, which was divided into 3 parts,
to study the efficacy, sustained benefits
and rebound effect.¹⁻³



**MiSight® 1 day is the first soft contact lens
approved by the U.S. FDA**
to slow the progression of myopia in children aged
8–12 years at the initiation of treatment^{1*†}

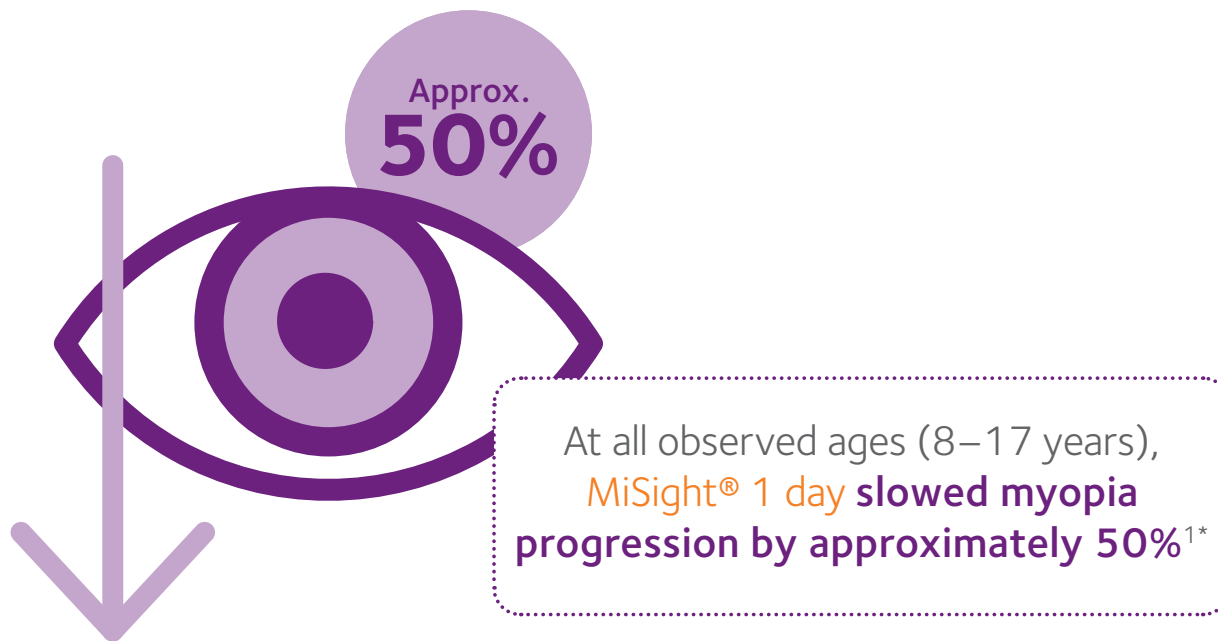
U.S. FDA= United States Food and Drug Administration

*Compared to a single vision 1 day lens over a 3 year period. †As of March 2023. U.S. Indications for Use: MiSight® 1 day (omafilcon A) Soft (Hydrophilic) Contact Lenses for daily wear are indicated for the correction of myopic ametropia and for slowing the progression of myopia in children with non-diseased eyes, who at the initiation of treatment are 8–12 years of age and have a refraction of -0.75 to -4.00 dioptres (spherical equivalent) with ≤ 0.75 dioptres of astigmatism. The lens is to be discarded after each removal.

References: **1.** Chamberlain P *et al.* A 3-year randomized clinical trial of MiSight lenses for myopia control. *Optom Vis Sci.* 2019;96(8):556-567. **2.** Chamberlain P *et al.* Long-term effect of dual-focus contact lenses on myopia progression in children: a 6-year multicenter clinical trial. *Optom Vis Sci.* 2022;99:204-12. **3.** Chamberlain P *et al.* Myopia progression on cessation of dual-focus contact lens wear: MiSight 1 day 7-year findings. *Optom Vis Sci.* 2021;98:E abstract 210049.



MiSight® 1 day treatment cuts myopia progression by half^{1*}



ActivControl®
TECHNOLOGY

*Using measured and modelled data, pooled across ages (8–17 years), MiSight® 1 day slowed myopia progression by an average of approximately 50%.

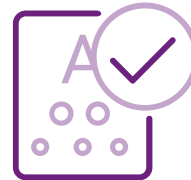
Reference: 1. Arumugam B *et al.* Modelling age effects of myopia progression for the MiSight 1 day clinical trial. *Invest Ophthalmol Vis Sci.* 2021;62(8):2333.



MiSight® 1 day treatment works for nearly all children with myopia^{1*}



90% of myopic eyes respond to MiSight® 1 day treatment^{1*}



No need for a stronger prescription
at the next annual eye exam in majority of children fitted with MiSight® 1 day^{2,3†}

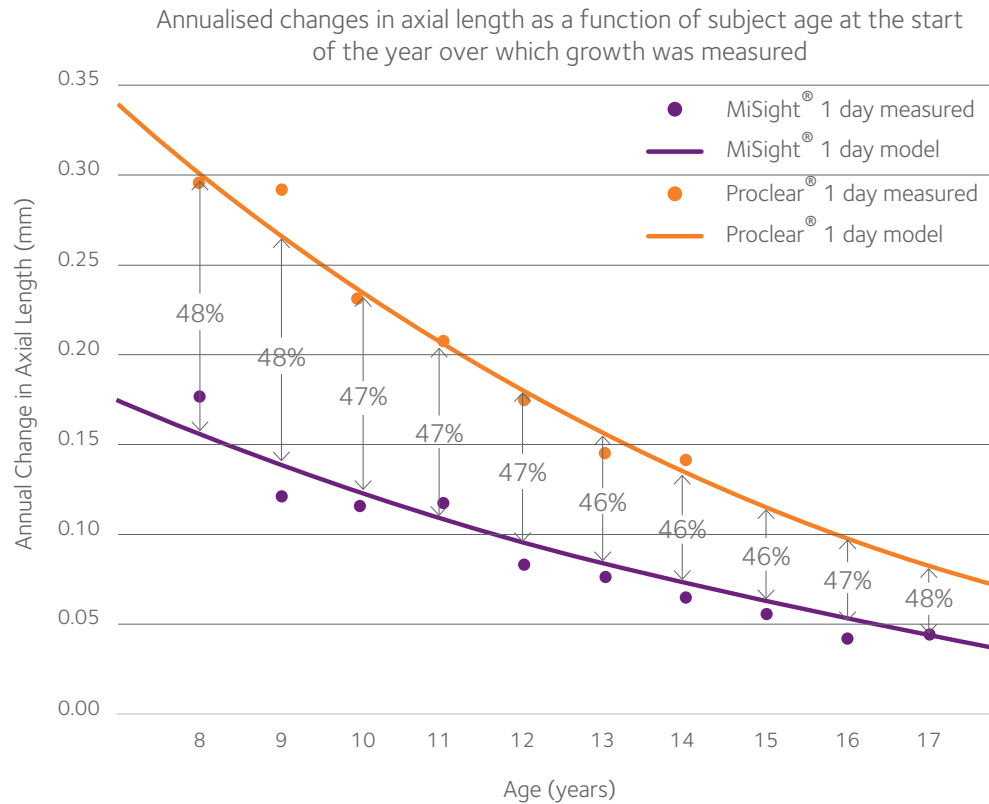


Fastest-growing eyes experienced the **largest reduction in growth rate** with MiSight® 1 day treatment^{1‡}

*90% of myopic eyes respond to MiSight® 1 day treatment; ages 11–15 years at start of wear (n = 90). †No clinically meaningful change in refractive error (<0.25 D from baseline) in years 1–3 of the MiSight® 1 day clinical study. ‡In children with myopia aged 11–15 at the start of wear (n = 90).

References: 1. Chamberlain P *et al.* Long-term effect of dual-focus contact lenses on myopia progression in children: a 6-year multicenter clinical trial. *Optom Vis Sci.* 2022;99:204-12. 2. Chamberlain P *et al.* A 3-year randomized clinical trial of MiSight lenses for myopia control. *Optom Vis Sci.* 2019;96(8):556-567. 3. CooperVision data on file, 2021 [MiSight® 1 day data analysis from MIST 401 clinical trial].

MiSight® 1 day works at any age a child starts treatment (ages 8+)¹*



While early intervention is best, it is never too late to start MiSight® 1 day treatment.

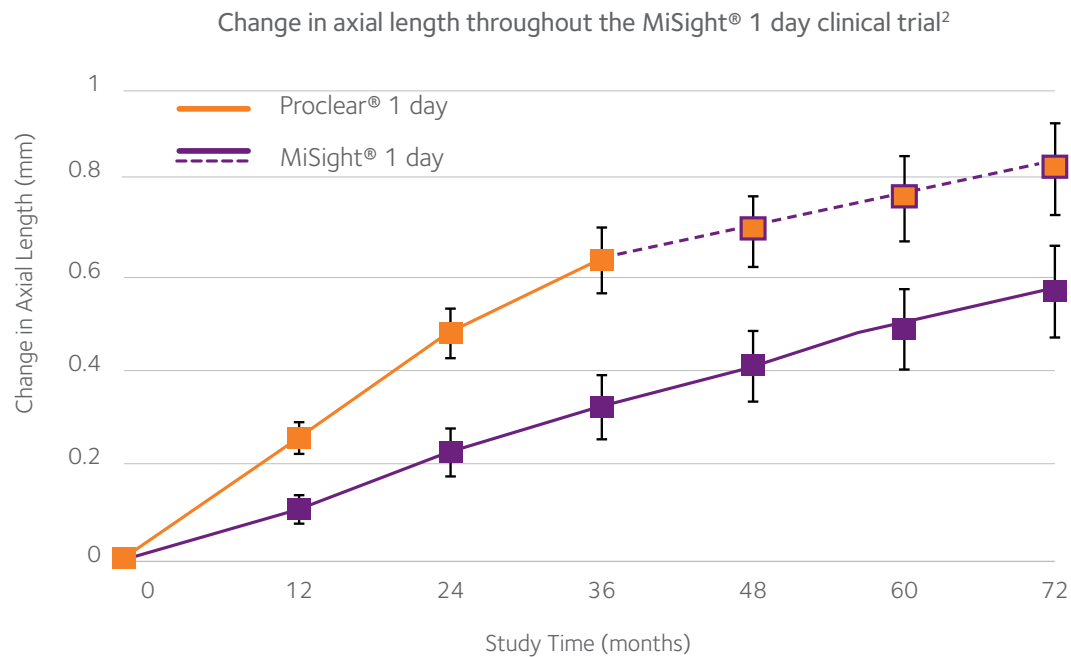


Even older children starting with MiSight® 1 day treatment have their myopia progression cut by approximately 50%.^{1†}

*Children with myopia fitted with MiSight® 1 day contact lenses (ages 8–15 years) continued to experience slowed myopia progression as long as they remained in treatment. †Children aged 8–15 years when starting MiSight® 1 day treatment experienced a slowing of myopia progression.

Reference: 1. Arumugam B *et al.* Modelling age effects of myopia progression for the MiSight 1 day clinical trial. *Invest Ophthalmol Vis Sci.* 2021;62(8):2333.

MiSight® 1 day treatment works for as long as the child wears them^{1*}

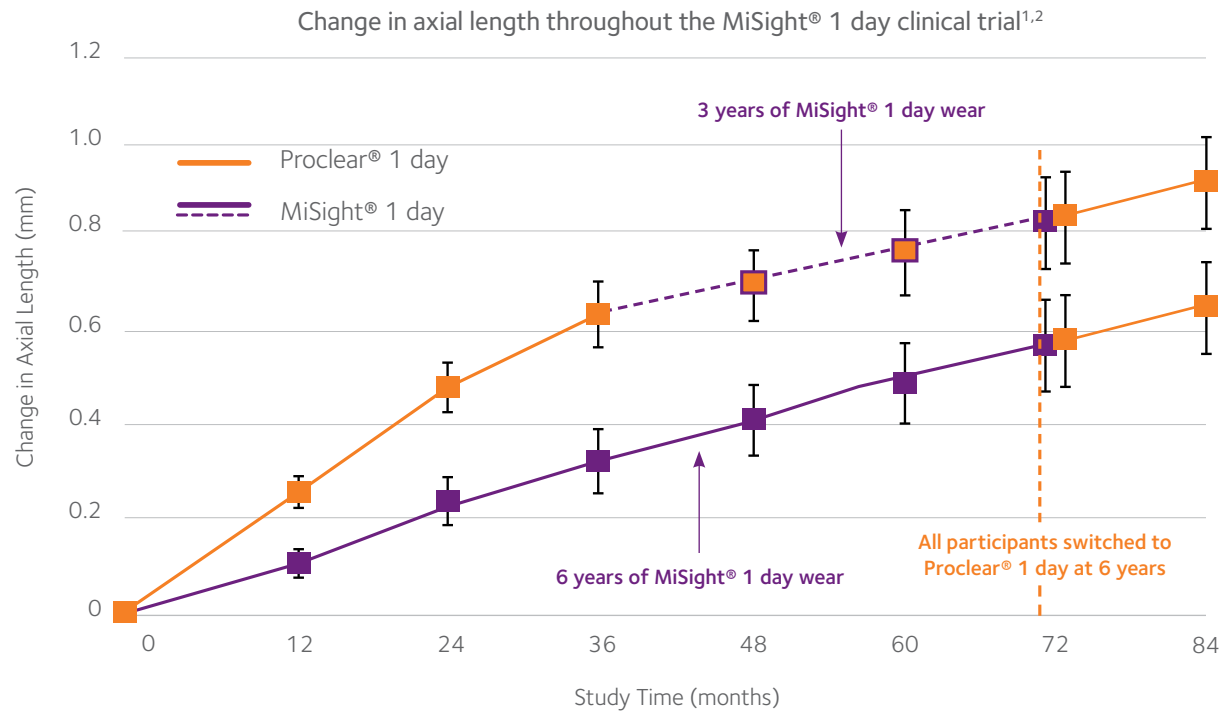


Treatment benefits from
MiSight® 1 day continue to accumulate
as long as eyes are growing^{3*}

*Children with myopia fit with MiSight® 1 day contact lenses (ages 8–15 years) continued to experience slowed myopia progression as long as they remained wearing the lenses as prescribed.

References: 1. Arumugam B *et al.* Modelling age effects of myopia progression for the MiSight 1 day clinical trial. *Invest Ophthalmol Vis Sci.* 2021;62(8):2333. 2. Chamberlain P *et al.* Long-term effect of dual-focus contact lenses on myopia progression in children: a 6-year multicenter clinical trial. *Optom Vis Sci.* 2022;99(3):204-12. 3. Arumugam B *et al.* The effects of age on myopia progression with dual focus and single vision daily disposable contact lenses. *Optom Vis Sci.* 2020;97(E-abstract):205340, AAO 2020 Poster.

Only MiSight® 1 day is proven to retain myopia control benefits after treatment has ended^{1,2*}



Myopia control benefits from MiSight® 1 day treatment are retained in children who ended their treatment^{1,2*}

MiSight® 1 day is the only soft contact lens studied post-treatment^{1,2*}

Atropine and orthokeratology studies have shown post-treatment rebound effect^{1,2*}

*12 months post-treatment, evidence indicates that no accumulated myopia control benefits were lost following 3 or 6 years of MiSight® 1 day wear (on average, for children aged 8–15 years at start of wear). Instead, eye growth reverted to expected, age-average myopic progression rates. Atropine and orthokeratology studies have shown post-treatment rebound effect, and there is currently no post-treatment evidence for spectacles or other soft contact lenses.

References: 1. Chamberlain P et al. Myopia progression on cessation of dual-focus contact lens wear: MiSight 1 day 7-year findings. *Optom Vis Sci.* 2021;98:E abstract 210049. 2. Hammond D et al. Myopia control treatment gains are retained after termination of dual focus contact lens wear with no evidence of a rebound effect. *Optom Vis Sci.* 2021;98:E abstract 215130.

Children from >30 countries have been prescribed MiSight® 1 day treatment for myopia control¹

See the Science, Safety and Success of MiSight® 1 day treatment.

SCIENCE

SAFETY

SUCCESS



Are MiSight® 1 day contact lenses safe for children?

0
ZERO

Zero serious adverse events related to contact lens wear were observed across 469 patient-wearing years in a clinical study^{1,2}



Safety observations

Over 6 years, **99%** of all slit lamp observations were **≤grade 1**^{1*}



Minimal handling

MiSight® 1 day is a **single use** lens, with no need for cleaning or storing¹



Safety profile

An **excellent** safety profile has been demonstrated¹

*Biomicroscopy used 0–4 grading scale.

References: 1. Woods J et al. Ocular health of children wearing daily disposable contact lenses over a 6-year period. *Cont Lens Anterior Eye*. 2021;44(4):101391. 2. CooperVision data on file, 2022.

Children from >30 countries have been prescribed **MiSight® 1 day** treatment for myopia control¹

See the Science, Safety and Success of **MiSight® 1 day** treatment.

SCIENCE

SAFETY

SUCCESS



Do you think adherence affects the success of myopia control?

Extent of efficacy depends on **wearing time**



A study showed **approx. 50% lower myopia control in part-time glasses wearers** than in full-time wearers^{1*}

Children often **forget to take** their glasses to school



A study showed **1 in 4 children fail to bring their glasses to school**²

All children wearing **MiSight® 1 day** adhered with the recommended wearing time^{3†}



Children wore MiSight® 1 day for at least 10 hours/day^{3†}

*In the group fitted with spectacle lenses with highly aspherical lenslets, the axial length elongation for full-time wearers (who wore lenses at least 12 hours/day) was lower than that for part-time wearers (who wore lenses less than 12 hours/day) (0.28 mm vs 0.43 mm; mean difference, 0.15 mm; p = 0.03) at 2 years (N = 157, aged 10.4 years). †Mean wearing times at 72-month visit was 13.92 hours/day (children refit to MiSight® 1 day) and 13.90 hours/day (children wearing MiSight® 1 day for the 6-year study duration). Children aged 8–12 years at the initiation of treatment.

References: 1. Bao J *et al.* Spectacle lenses with aspherical lenslets for myopia control vs single-vision spectacle lenses: a randomized clinical trial. *JAMA Ophthalmol.* 2022;140(5):472–8. 2. O'Donoghue L *et al.* Refractive error and visual impairment in school children in Northern Ireland. *Br J Ophthalmol.* 2010;94(9):1155–9. 3. Chamberlain P *et al.* Long-term effect of dual-focus contact lenses on myopia progression in children: a 6-year multicenter clinical trial. *Optom Vis Sci.* 2022;99(3):204–12.



MiSight® 1 day treatment is designed specifically for children with myopia¹⁻³



**Children prefer
MiSight® 1 day contact lenses
to glasses^{4,5§#}**



Appropriate

Children as young as 8 years old can confidently apply and remove MiSight® 1 day lenses on their own⁴



Child-friendly and easy-to-use

85% of children, with no contact lens-wearing experience, found MiSight® 1 day lenses easy to insert^{4*}



Comfortable

95% of parents rated their children 'happy' with the comfort of MiSight® 1 day lenses^{6†}



Effective

MiSight® 1 day treatment provides clear vision and helps slow myopia progression by approx. 50%^{1,7‡}

*After 1 month of wear. †During a 3-year study of their children (aged 8–15 years) wearing MiSight® 1 day lenses. ‡Using measured and modelled data, pooled across ages (8–17 years), MiSight® 1 day slowed myopia progression by an average of approximately 50%. §95%–100% of children expressed a preference for contact lenses over glasses at each visit over 36 months. #How much do you like wearing your contact lenses? 87/97 (90%) Top box 'I like contact lenses the best' Subjective response at 60 months.

References: 1. Chamberlain P *et al.* A 3-year randomized clinical trial of MiSight lenses for myopia control. *Optom Vis Sci.* 2019;96(8):556–567. 2. Chamberlain P *et al.* Long-term effect of dual-focus contact lenses on myopia progression in children: a 6-year multicenter clinical trial. *Optom Vis Sci.* 2022;99(3):204–12. 3. Chamberlain P *et al.* Myopia progression on cessation of dual-focus contact lens wear: MiSight 1 day 7-year findings. *Optom Vis Sci.* 2021;98:E abstract 210049. 4. Sulley A *et al.* Wearer experience and subjective responses with dual focus compared to spherical, single vision soft contact lenses in children. *Optom Vis Sci.* 2019;96(E-abstract): 195252. 5. CooperVision data on file, 2023. 6. CooperVision data on file, 2018. 3-year data for RCT with MiSight® 1 day and Proclear® 1 day. 7. Arumugam B *et al.* Modelling age effects of myopia progression for the MiSight 1 day clinical trial. *Invest Ophthalmol Vis Sci.* 2021;62(8):2333.

MiSight® 1 day is as easy to fit as single-vision lenses

STEP 1

Optimise the spectacle prescription

- With the most up-to-date refraction in the trial frame, confirm optimal prescription using the binocular balancing technique
- A cycloplegic refraction is recommended
- Aim for the least minus power

Recommended binocular balancing technique:

Use a +0.75D or +1.00D lens to fog one eye while assessing the other.

STEP 2

Select and evaluate MiSight® 1 day

- Select initial MiSight® 1 day lens from best vision sphere; adjust for vertex distance when greater than -4.00D
- For optimum results, ensure that the vertex-corrected cylinder is $\leq 0.75D$
- Allow lenses to settle for five minutes and confirm optimal MiSight® 1 day prescription using the binocular balancing technique
- Record vision
- Assess fit

Increase minus in 0.25D steps only if it significantly improves distance vision.

Reduce minus in 0.25D steps, provided there is no decrease in acuity and no subjective visual impact.

STEP 3

Recommendations and follow-up

- Schedule a follow-up visit for one week
- Assess handling technique
- Ghosting and halos are common at first and are a normal sensation with this therapy. Most children will adapt quickly, often within the first week. It is important to communicate this to parents and children before commencement of the trial period

Recommended minimum wearing time: Minimum of 10 hours per day for at least 6 days per week.

Specifications

| | |
|-------------------------|---|
| Material | omafilcon A |
| Water content | 60% |
| Oxygen transmissibility | $28 \times 10^{-9} Dk/t$ (at -3.00D) |
| Base curve (mm) | 8.7mm |
| Diameter (mm) | 14.2mm |
| Sphere power | -0.25 to -10.00D (0.50D steps after -6.00D) |
| Optical design | ActivControl® Technology |
| Replacement schedule | Daily disposable |

Recommend MiSight® 1 day for myopia management:



SCIENCE

- **The first soft contact lens approved by the U.S. FDA** to slow the progression of myopia in children aged 8-12 years at the initiation of treatment^{1*†}
- **The only soft contact lens proven by 7 years of clinical data** to significantly slow myopic progression with no rebound effect^{1-4*‡}



SAFETY

Zero serious adverse events related to contact lens wear observed across 469 patient-wearing years in a clinical study^{5,6}



SUCCESS

Preferred by 9/10 children to glasses^{7,8\$#}



Contact your CooperVision Business Development Manager or visit coopervision.net.au/practitioner to find out more.



For instructions for use, refer to <https://coopervision.net.au/patient-instruction>

*Compared to a single-vision, 1-day lens over a three-year period; rate of progression maintained out to 6 years. †US FDA Indications for Use: MiSight® 1 day (omafilcon A) Soft (Hydrophilic) Contact Lenses for daily wear are indicated for the correction of myopic ametropia and for slowing the progression of myopia in children with non-diseased eyes, who at the initiation of treatment are 8–12 years of age and have a refraction of -0.75 to -4.00 dioptres (spherical equivalent) with ≤0.75 dioptres of astigmatism. The lens is to be discarded after each removal. ‡On average, there was no indication that accumulated treatment effect gained following 3 or 6 years of MiSight® 1 day wear was lost during a 12-month cessation study in children aged 8-15 at initiation of treatment. Instead, eye growth reverted to expected, age average myopic progression rates. \$95%–100% of children expressed a preference for contact lenses over glasses at each visit over 36 months. #How much do you like wearing your contact lenses? 87/97 (90%) Top box 'I like contact lenses the best' Subjective response at 60 months. †Plastic neutrality is established by purchasing credits from Plastic Bank. A credit represents the collection and conversion of one kilogram of plastic that may reach or be destined for waterways. CooperVision purchases credits equal to the weight of plastic in our contact lens orders in a specified time period. Contact lens plastic is determined by the weight of plastic in the blister, the lens and the secondary (outer carton) package, including laminates, adhesives, and auxiliary inputs (e.g. ink).

References: 1. Chamberlain P et al. *Optom Vis Sci* 2019;96:556–567. 2. Chamberlain P et al. *Optom Vis Sci*. 2022;99(3):204–12. 3. Chamberlain P et al. *Optom Vis Sci* 2021;98:E-abstract 210049. 4. Hammond D et al. *Optom Vis Sci* 2021;98:E-abstract 215130. 5. Woods J et al. *Cont Lens Anterior Eye* 2021;44(4):101391. 6. CooperVision data on file, 2022. 7. Sulley A et al. *Optom Vis Sci* 2019;96(E-abstract):195252. 8. CooperVision® data on file, 2023.

MiSight®, Proclear® and CooperVision® are registered trademarks of the Cooper Companies, Inc. and its subsidiaries. SA10890 EMVCO00945 ©2024 CooperVision.



Myopia, a chronic, progressive disease, is expected to affect **more than 50%** of the world's population by 2050¹



Myopia onset at a younger age is associated with **more rapid progression**.²



As myopia progresses, children become increasingly **dependent on vision correction** to fully participate in school, sports and other daily activities.^{3,4}



With new treatment options available, eye care professionals can now **do more** than just correct refractive error.



The World Council of Optometry passed a resolution that publicly declares support for myopia management as the standard of care.⁵

Mitigation

Measurement

Management

References: 1. Holden BA *et al.* Global prevalence of myopia and high myopia and temporal trends from 2000 through 2050. *Ophthalmology*. 2016;123(5):1036-1042. 2. Zadnik K *et al.* Factors associated with rapid myopia progression in school-aged children. *Invest Ophthalmol Vis Sci*. 2004;45(13):2306. 3. Lamoureux EL *et al.* Myopia and quality of life: The Singapore Malay Eye Study (SiMES). *Invest Ophthalmol Vis Sci*. 2008;49(13):4469. 4. Chua SYL, Foster PJ. The Economic and Societal Impact of Myopia and High Myopia. In: Ang M., Wong T. (eds) Updates on Myopia. 2020. Springer, Singapore. 5. World Council of Optometry. Resolution: The standard of care for myopia management by optometrists. (2023, Jan 04). <https://worldcouncilofoptometry.info/resolution>

*Compared to a single vision 1 day lens over a 3-year period. †As of March 2023. U.S. Indications for Use: MiSight® 1 day (omaficon A) Soft (Hydrophilic) Contact Lenses for daily wear are indicated for the correction of myopic ametropia and for slowing the progression of myopia in children with non-diseased eyes, who at the initiation of treatment are 8–12 years of age and have a refraction of 0.75 to 4.00 dioptres (spherical equivalent) with ≤0.75 dioptres of astigmatism. The lens is to be discarded after each removal. **References:** 1. Zadnik K *et al.* Factors associated with rapid myopia progression in school-aged children. *Invest Ophthalmol Vis Sci*. 2004;45(13):2306. 2. Chamberlain P *et al.* A 3-year randomized clinical trial of MiSight lenses for myopia control. *Optom Vis Sci*. 2019;96(8):556–7.



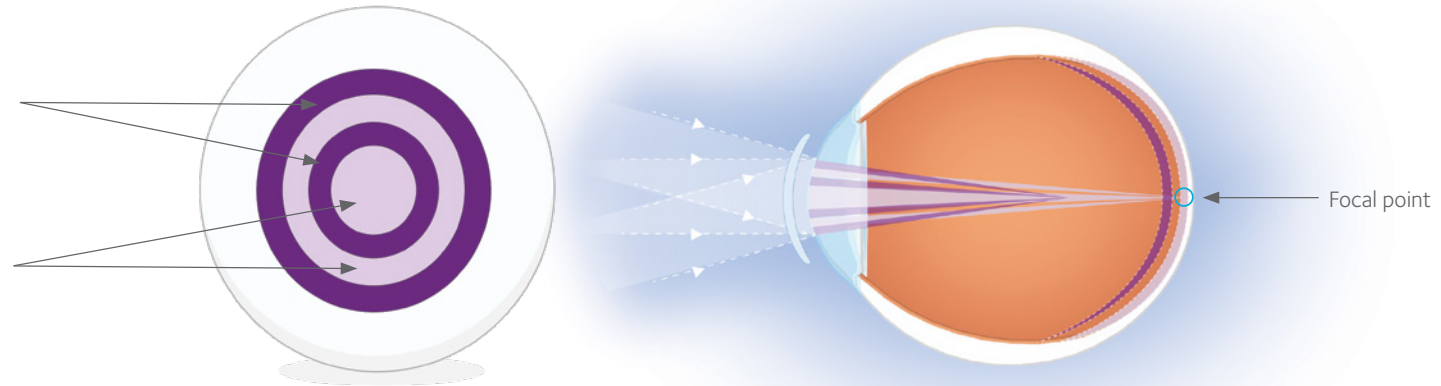
ActivControl™ Technology in MiSight® 1 day treatment is **dual-purpose**: it provides **clear vision** and helps **control myopia progression**¹

Treatment zones:

Create myopic defocus to help
slow myopia progression¹

Correction zones:

Provide **clear vision**
by distance correction¹



Artist's rendering

Designed to ensure consistent myopic defocus across all prescriptions, changes in pupil size, and variations in lens centration

Reference: 1. Chamberlain P *et al.* A 3-year randomized clinical trial of MiSight lenses for myopia control. *Optom Vis Sci.* 2019;96(8):556-567.

*Using measure...

Reference: 1. Arumugam B *et al.* Modelling age effects of myopia progression for the MiSight 1 day clinical trial. *Invest Ophthalmol Vis Sci.* 2021;62(8):2333.