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# MiSight® 1 day:

Setting a clinical standard with the longest continuous soft contact lens study for myopia management<sup>1,2</sup>

A 7-year clinical trial separated into three parts:<sup>1,3</sup>

	Part 1 (Years 1–3) <sup>1</sup>	Part 2 (Years 4–6) <sup>3</sup>	Part 3 (Year 7) <sup>6</sup>
Objective	<p>Assess the difference in myopia progression over a 3-year period between children wearing MiSight® 1 day and children wearing a single-vision 1-day lens*</p> <ul style="list-style-type: none"> <li>• <b>Randomised + double-masked</b></li> <li>• Ages 8–12</li> <li>• 144 children</li> </ul>	<p>Compare the rate of myopia progression between children new to MiSight® 1 day and those who had worn MiSight® 1 day for the previous 3 years</p> <ul style="list-style-type: none"> <li>• <b>All children wearing MiSight® 1 day</b></li> <li>• Ages 11–15</li> <li>• 108 children from Part 1 continued in the study</li> </ul>	<p>Assess the impact of cessation on the prior accumulated treatment effect following 3 or 6 years of treatment with MiSight® 1 day</p> <ul style="list-style-type: none"> <li>• <b>All children wearing Proclear® 1 day</b></li> <li>• Ages 14–18</li> <li>• 83 children from Part 2 continued in the study</li> </ul>
Prospective	✓	✓	✓
Double-masked	✓	N/A	N/A
Randomised	✓	N/A	N/A
Multicentre (Singapore, Canada, UK, Portugal)	✓	✓	✓
<b>Participants:</b>			
Test group (MiSight® 1 day)	70 children aged <b>8–12 years</b>	108 children aged <b>11–15 years</b> All wearing MiSight® 1 day	83 children aged <b>14–18 years</b> All wearing Proclear® 1 day
Control group (Proclear® 1 day)	74 children aged <b>8–12 years</b>		

\*Proclear® 1 day

# MiSight® 1 day clinical study outcomes

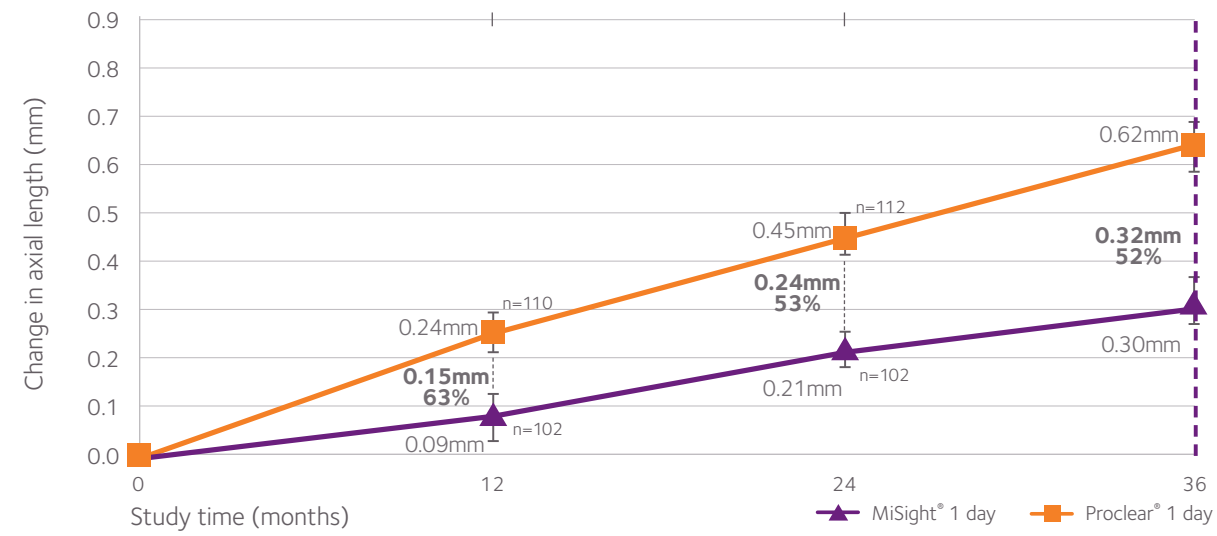
## Part 1 (Years 1-3)

**Objective:** Quantify the effectiveness of MiSight® 1 day in **slowing the rate of myopia progression** compared to a single vision 1-day lens over a 3-year period

**Result: 52% reduction in axial elongation with MiSight® 1 day<sup>1\*</sup>**

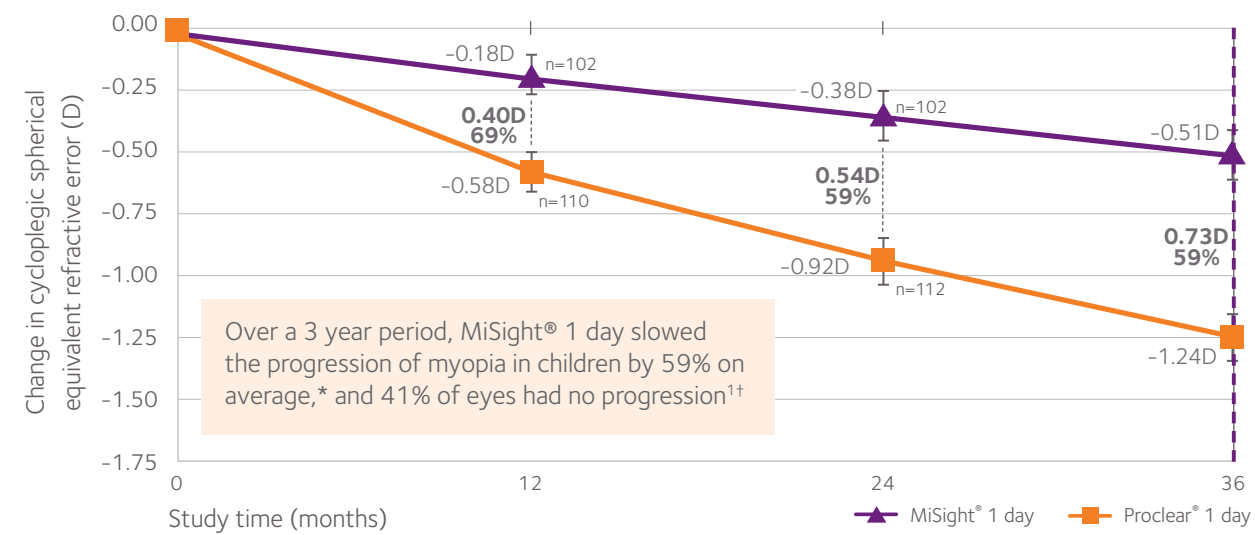
### Changes in axial length<sup>1,3</sup>

• Increased axial length is associated with a higher likelihood of visual impairment<sup>4</sup>



**Result: 59% reduction in myopia progression with MiSight® 1 day<sup>1\*</sup>**

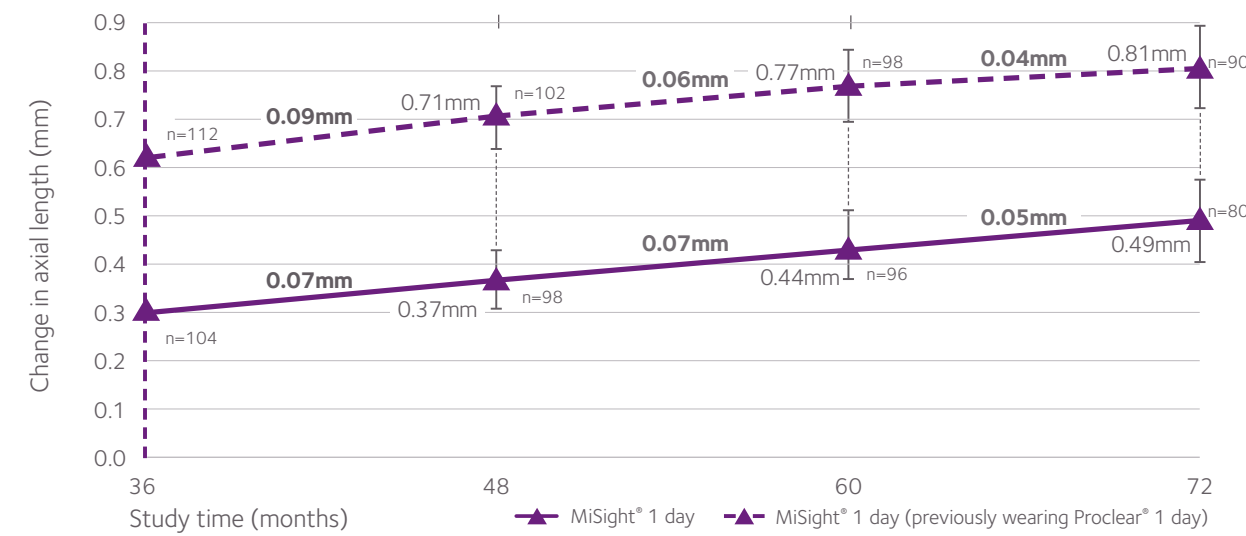
### Changes in refractive error<sup>1,3</sup>



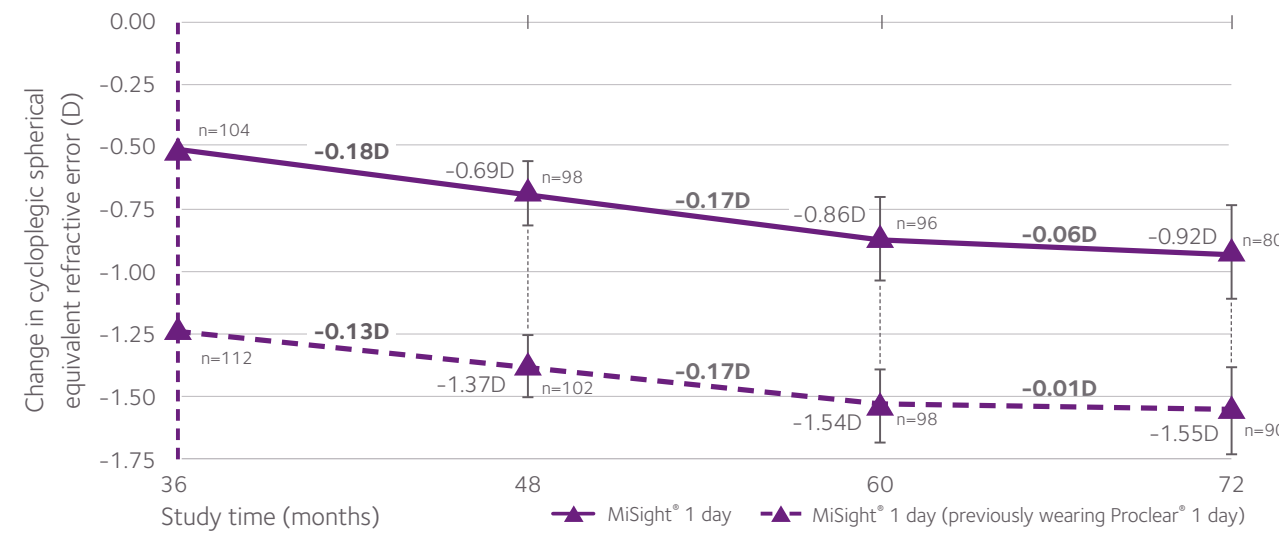
## Part 2 (Years 4-6)

**Objective:** Compare **the rate of myopia progression** between children new to MiSight® 1 day and those who had worn MiSight® 1 day for the previous 3 years

**Result: New and established MiSight® 1 day wearers had comparable rates of axial length growth<sup>3</sup>**



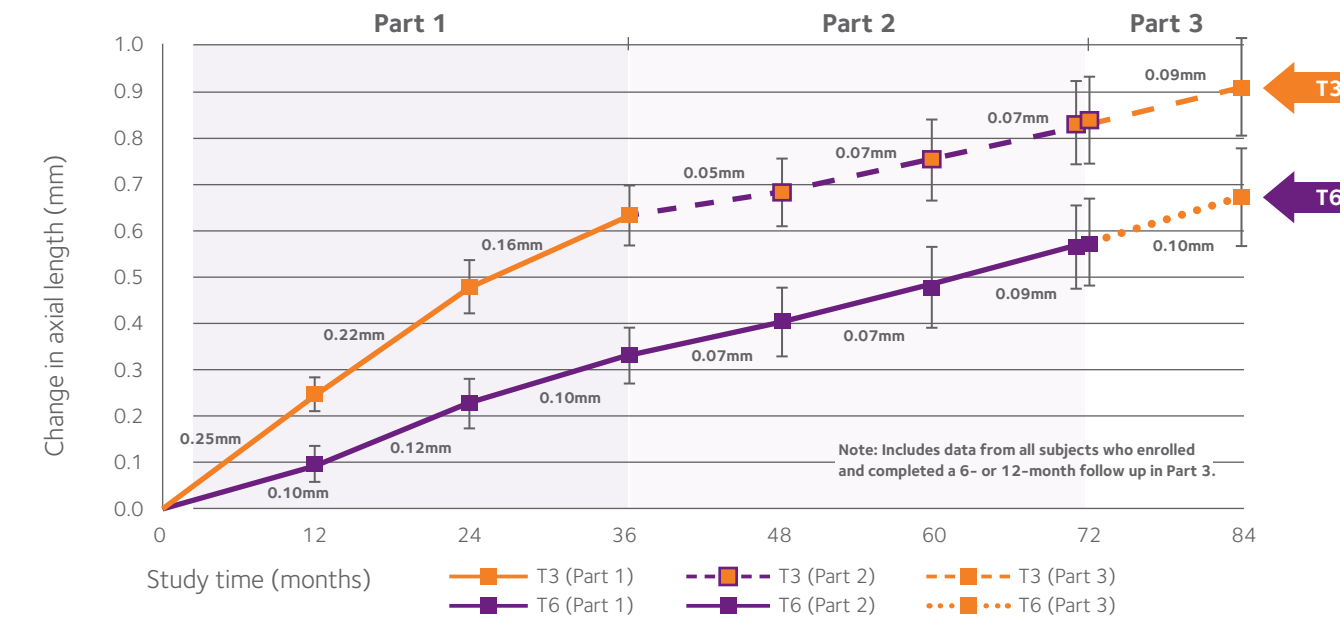
**Result: New and established MiSight® 1 day wearers had comparable rates of myopic progression<sup>3</sup>**



## Part 3 (Year 7)

**Objective:** Assess **the impact of cessation on the prior accumulated treatment effect** following 3 or 6 years of treatment with MiSight® 1 day (T3 and T6, respectively)

**Result: No rebound effect with MiSight® 1 day contact lenses<sup>6,7\*</sup>**



**Result: After MiSight® 1 day treatment is discontinued, any further myopic progression occurs at age-expected rates<sup>7\*</sup>**

### Axial length growth control modeling and measured values (mm)

Year	Control group model <sup>†</sup>	T3 group (measured)	T6 group (measured)
1	0.247	0.253	0.103
2	0.207	0.216	0.115
3	0.178	0.159	0.109
4	0.153	0.049	0.074
5	0.131	0.065	0.074
6	0.115	0.072	0.089
7	0.100	0.091	0.109

■ Proclear® 1 day ■ MiSight® 1 day



\* Compared with a standard single-vision 1-day lens over a 3-year period.  
 † No clinically meaningful change in refractive error -0.25D or less from baseline.

\* On average, for children aged 8-15 at initiation of treatment, 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. Instead, eye growth reverted to expected, age average myopic progression rates.  
 † Using the age and ethnicity of the control cohort, a virtual control group was developed to extend estimates of untreated axial elongation through to the 7th year of the study.



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# MiSight® 1 day contact lenses are proven to slow the progression of myopia in children and are child-friendly<sup>1</sup>

## MiSight® 1 day clinical trial — Overall findings

- Over a 3-year period, MiSight® 1 day slowed the progression of myopia in children by 59%,\* and 41% of eyes had no progression<sup>1†</sup>
- Among MiSight® 1 day wearers, 23% of eyes had no progression at 6 years<sup>3‡</sup>
- On average, children wearing MiSight® 1 day progressed less than -1.00D over 6 years<sup>3</sup>
- A treatment period of 6 years vs 3 years with MiSight® 1 day did not alter the rate of change of refractive error or axial length<sup>3</sup>
- Children wearing MiSight® 1 day achieved excellent visual acuity across all visits throughout 6 years of clinical study<sup>1,3‡</sup>
- Children can successfully wear MiSight® 1 day contact lenses with minimal impact on ocular physiology<sup>1,3,5§</sup>
- Evidence indicates that there is no rebound effect with MiSight® 1 day contact lenses<sup>6,7||</sup>

## MiSight® 1 day clinical trial — Part 1

- 41% of the MiSight® 1 day group showed no meaningful progression in refractive error<sup>†</sup> after 3 years, compared with 4% in the control group<sup>1</sup>
- Children as young as 8 can be successfully fitted with soft, daily disposable contact lenses<sup>1#</sup>
- Children as young as 8 are able to handle their lenses confidently soon after initial fitting<sup>1\*\*</sup>

## MiSight® 1 day clinical trial — Part 2

- New and established MiSight® 1 day wearers have comparable rates of myopic progression and axial length growth<sup>3</sup>
- Older children<sup>††</sup> adapted to spherical contact lenses achieved excellent visual acuity<sup>‡</sup> when they switched to MiSight® 1 day<sup>3</sup>

## MiSight® 1 day clinical trial — Part 3

- No rebound effect with MiSight® 1 day contact lenses – myopia control treatment gains were retained over 12 months after treatment ceased<sup>6,7||</sup>

**For further details, please contact your Business Development Manager.**

\* Compared with a standard single-vision 1-day lens over a three-year period fitted at 8-12 years of age.

† No clinically meaningful change in refractive error -0.25D or less from baseline.

‡ VA (LogMAR) > 6/6 (20/20) at all visits from dispensing to 6-year visit.

§ No slit-lamp observations recorded above grade 2 at any visits apart from 1 observation of grade 3 GPC attributed to a foreign body at the 1-month visit.

|| On average, for children aged 8-15 at initiation of treatment, 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. Instead, eye growth reverted to expected, age average myopic progression rates.

# >95% of children were successfully fitted with MiSight® 1 day or Proclear® 1 day.

\*\* Children new to contact lens wear aged 8-12, n=130 at 1 month after dispense.

†† Median age at switching 13.0 ± 1.5 years.

References: 1. Chamberlain P, *et al.* A 3-year randomized clinical trial of MiSight lenses for myopia control. *Optom Vis Sci.* 2019;96:556–567. 2. CONSORT 2010 Explanation and Elaboration: Updated guidelines for reporting parallel group randomised trials. *BMJ.* 2010;340:c869 doi: 10.1136/bmj.c869. 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 Mar 1;99(3):204-212. 4. Tideman J, *et al.* Association of axial length with risk of uncorrectable visual impairment for Europeans with myopia. *JAMA Ophthalmol.* 2016;134:1355-1363. 5. 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. 6. Chamberlain P, Arumugam B, *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. 7. Hammond D, Arumugam B, *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. 8. CooperVision data on file, 2022. 9. 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. 10. CooperVision® data on file, 2023.

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## Recommend MiSight® 1 day contact lenses:

**7** YEARS

The only soft contact lenses proven by **7 years of clinical data** to significantly slow myopic progression,\* with no rebound effect<sup>1,3,6,7^</sup>

**0** ZERO

**Zero serious adverse events** related to contact lens wear observed across 469 patient-wearing years<sup>5,8‡</sup>

**9/10**

Preferred by 9/10 children to glasses<sup>9,10\$#</sup>



\*Compared to a single-vision, 1-day lens over a three-year period; rate of progression maintained out to 6 years. ^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. †MiSight® 1 day lenses were worn for a total of 469 patient-wearing years in the clinical study, with zero serious adverse events related to contact lens wear. ‡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).



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