



PRESIDENT'S DESK

Phoenix, Phoenix, Phoenix!



Kerry Gelb, OD
President

Hoping your 2025 is off to a successful start! It seems both 2024 ALLDocs meetings were so successful in Phoenix, we shall continue into 2025 with the ever-popular ALLDocs Manager's Meeting!

This year, the ALLDocs Manager's Meeting will be held at the Wigwam Hotel, June 1-3, 2025. This is the same venue as

the ALLDocs Sublease Meeting that was held in November. It was such a beautiful location and suited our needs so well it has been selected to host our MVP's - our managers! Enjoy the meeting highlights of the Sublease meeting featured on page 5 to get a taste of what the managers will experience. Registration for the Manager's Meeting will open soon; contact Tara O'Grady with any questions. tara@alldocsod.com

Speaking of meetings, I hope you are all looking forward to the ALLDocs Annual Meeting this October 19-24, 2025 in the spectacular Dominican Republic. The event team is working very hard to put together another extraordinary program worthy of your attendance. Please let us know if you have any suggestions or requests!

SUBLEASE MEETING HIGHLIGHTS ON PAGE 5!



Right: AOA Trustee Dr. Curtis Ono Speaks at the Sublease Meeting

Above: The beautiful Wigwam Resort in Phoenix, AZ, location of the ALLDocs Sublease Meeting in November and the upcoming Manager's Meeting in June 2025



GALLERY



2025 Annual Meeting Sanctuary Cap Cana

PUNTA CANA, THE DOMINICAN REPUBLIC

October 19-24, 2025



Eye Makeup Trends: Exploring the Impact on Eye Health

On social media channels like TikTok, Instagram, YouTube, and Facebook, there is a wide range of eye beauty and cosmetic tricks, trends, and instructional videos.¹ With the billions of users on these social media platforms, optometrists can safely assume that some of their patients who try these trends will wind up in your office. While some hacks may be relatively safe, others that involve the eyes pose potential risks.¹

Vaseline & Castor Oil as Eye Remedies

Two recent trends that may be especially dangerous to patients include using Vaseline (petroleum jelly) to prevent watery eyes and using castor oil as a solution to get rid of a stye or as a more natural way to grow eyelashes.¹ Vaseline is not an ideal long-term solution to prevent watery eyes, and patients should be aware of the increased risks of infection, styes, and milia. In addition, watery eyes can be a sign of an underlying issue, such as meibomian gland dysfunction, dry eye disease, a blocked tear duct, or allergies. Patients with ongoing watery eyes should seek medical advice and care from an optometrist.¹

Castor oil has long been viewed as a cure-all OTC remedy with multiple applications and commercial value, serving as an emollient in cosmetics and personal care products.² Social media has launched castor oil into new popularity as an eye remedy for eliminating eyeglasses, curing cataracts, fading floaters, and dismantling dry eye.³ Patients should be advised against the use of OTC castor oil drops and provided precautions on their use, limitations, and benefits.¹

Risks With At-Home Lashes & Tinting

Blowdry lashes surfaced several years ago and have seen a recent revival, with social media influencers testing and documenting their reviews of curling their eyelashes with a hair dryer. This hack achieves its goal of curled and lifted eyelashes, but it may lead to dryness, irritation, and ocular surface abrasions.¹

Lash tinting is another eyelash enhancement gaining traction, but there are potential risks with using chemicals to dye eyelashes at home, including blepharoconjunctivitis, contact dermatitis, edema



of the lids, and periorbital dermatitis.⁴⁻⁶ Patients should be advised of the potential risks with at-home lash tints and should be informed that their safest bet is to stick with mascara.¹

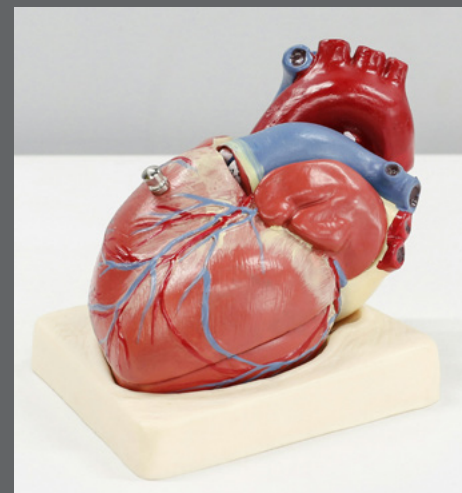
Stay Informed, Educate Patients

New eye makeup and beauty trends are continuing to flood social media every day, but the dissemination of some of these ideas, hacks, and tricks—especially when they involve eye health—leaves optometrists with the task of sifting through and interpreting data.¹ However, eyecare providers can help bridge the gap by better educating patients and communities on the role these trends may play in eye health.¹

SOURCES

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2. Migala J. Everything castor oil can—and can't—do for your skin, hair, and lashes. *Self*. Published January 31, 2024. www.self.com/story/castor-oil-benefits.
3. Miller K. No, castor oil won't improve your vision—but it does have some eye health benefits. *Health*. Published June 22, 2023. www.health.com/does-castor-oil-help-vision-7509833.
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Does Visual Impairment Raise Risks for CVD?



A Texas Tech University study evaluating middle-aged and elderly adults living in low-, middle- and high-income countries found that those with visual impairment were at high risk for future cardiovascular disease (CVD). The analysis—which included data from over 32,000 adults without CVD or blindness from nationally representative surveys based in 7 large countries—also showed that this association remained consistent regardless of visual impairment severity and was more pronounced among adults younger than 65 years of age and in those currently employed with visual impairment.

Investigators noted that many factors may contribute to the findings, such as the influence of misconceptions about people with visual impairment by employers, insufficient training, limited opportunities to develop new skills, and lack of support. Several strategies appear to be promising in reducing the disease burden, such as:

- Conducting effective and timely clinical interventions
- Adopting behavioral and lifestyle changes
- Gaining availability to vision rehabilitation services (ideally in the workplace)

SOURCE

Appiah D, Chaudhury H, Chaudhury T, Iweh M, Shabaneh O, De La Cruz N. The risk of cardiovascular disease risk among adults with vision impairment from low-, middle- and high-income countries. *Ophthalmic Epidemiol*. 2024;4:1-8.

Managing Demodex Blepharitis in Eyelash Extension Wearers

Demodex blepharitis is characterized as a chronic eye condition caused by an overgrowth of Demodex mites on the eyelids. Symptoms include itching along the base of the eyelids, redness, inflammation, dry eyes, and misdirected eyelashes.¹ The condition is caused by an overpopulation of Demodex folliculorum, which are mites that live in the hair follicles and meibomian glands and are the most common type of ectoparasite living on the human body.^{2,3}

With Demodex blepharitis, an overgrowth of mites is evidenced by the presence of collarettes—a waxy buildup of mite waste at the base of the eyelash consisting of undigested material, keratinized cells, living and dead mites, eggs, and casings.⁴ Optometrists can best visualize collarettes by having patients look down to enable a clearer view of the eyelashes.¹

Problems With Eyelash Extensions

Wearing eyelash extensions can create an environment where Demodex can thrive because people often avoid washing their eyelashes to prevent damaging the extensions.¹ Some patients might express concerns with eyelash thinning and misdirection whereas others are worried about redness, thickened eyelid margins, and irritation from mascara.¹ In many cases, these issues are caused by an undiagnosed underlying condition. However, patients may believe their only solution is using cosmetic treatments like eyelash extensions. Rarely do patients present with an understanding of how optometrists can truly help them with cosmetic concerns.¹

Strategies for Preventing Demodex Blepharitis¹

- Practice good hygiene; Wash the face and eyes at least twice a day
- Avoid triggers such as mascara, makeup, and contact solution
- Replace mascara every 3 months
- Use fresh, non-expired contact solution
- Receive eyelash extensions only from licensed, trained professionals

Removing Eyelash Extensions

The process of removing eyelash extensions can be a bit traumatizing for patients, but removing them is one of several strategies that may help reduce symptoms of Demodex blepharitis.¹ It's critically important to also identify and treat the underlying cause.¹



Demodex blepharitis can also be treated with an in-office procedure in which a handheld device with a micrograde scrubbing sponge helps remove debris from the base of the lashes. Topical treatments include ivermectin and metronidazole, which may help reduce mite counts. Practicing good eyelid hygiene is also paramount.¹ See the Table for more information on strategies to prevent Demodex blepharitis.

Educate Patients on Demodex Blepharitis

Due to the overlap of symptoms and clinical presentation of dry eye, it is imperative that optometrists look for Demodex blepharitis in everyone.⁵ Patients will continue to make choices that can compromise their ocular health, often unknowingly.¹ For some patients, a correct diagnosis combined with dry eye treatment can improve outcomes.⁵ Identifying Demodex mites as the etiology of your patients' symptoms can lead to profound improvements on their ocular surface.¹

SOURCES:

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3. Rhee MK, Yeu E, Barnett M, et al. Demodex blepharitis: a comprehensive review of the disease, current management, and emerging therapies. *Eye Contact Lens*. 2023;49(8):311-318.
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5. O'Dell L, Garlich J. A primer on Demodex blepharitis. *Modern Optometry*. Published November/December 2020. <https://modernod.com/articles/2020-nov-dec/a-primer-on-idemodexi-blepharitis>.

Exploring the Link Between Glaucoma and Hormone Therapy



A study from Emory University has found that longer duration of hormone therapy (HT) use in postmenopausal women appears to be associated with a later glaucoma diagnosis. The retrospective study, which included nearly 3,000 women with glaucoma between 2000 and 2019, found a linear relationship between age of glaucoma diagnosis and menopause in women with and without using HT.

In general, HT users typically had a later diagnosis of glaucoma. At 0-2 years of HT use, a glaucoma diagnosis was associated with a delay of 2.2 years. At 2-5 years of HT use, a glaucoma diagnosis was associated with a delay of 3.7 years. After 5 years or more of HT use, a glaucoma diagnosis was associated with a delay of 4.5 years. The authors noted that age at menopause was the largest predictor for age of glaucoma diagnosis, followed by HT use, white descent, and antihypertensive medication use.

SOURCE

Hogan K, Cui X, Giangiacomo A, Feola AJ. Postmenopausal hormone therapy was associated with later age of onset among glaucoma cases. *Invest Ophthalmol Vis Sci*. 2024;65(10):31.

Presbyopia in Adults: Making the Case for Multifocal Contact Lenses



When adults reach 40 years of age, presbyopia often becomes noticeable, leading many individuals to seek information from an eyecare provider on potential vision correction options.¹ Optometrists can get patients with presbyopia engaged in their care by educating them about their symptoms and introducing them to the possible benefits of multifocal contact lenses.¹

Patient education on presbyopia is more than just sharing data on the condition itself or providing the latest information on contact lens features. It also involves fostering a supportive environment for patients that allows them to drive discussions and make decisions. Patients should be asked open-ended questions about their symptoms and what they believe has changed regarding their vision needs.¹

Reviewing Treatment Options

When reviewing presbyopia treatments, patients should be counseled on various options, including prescription reading glasses, progressive lenses, and multifocal contact lenses.¹ Progressive lenses offer a seamless transition between different viewing distances, providing clear vision for near, intermediate, and distance tasks in one lens.¹ Monovision contact lenses use one eye for distance vision and the other for near vision, allowing greater independence from reading glasses.¹

Patient awareness of multifocal contact lenses is relatively low, but many contact

lens wearers have shown great interest in wearing lenses that can correct for both near and distance vision.² With significant advances in multifocal contact lens designs, materials, and fitting, optometrists can use these lenses to help improve patient satisfaction. The first step is to be confident and enthusiastic by presenting multifocal contact lenses as a treatment option that can enhance quality of life.¹ Fitting modern multifocal lenses is also much easier today than in the past, with patients usually finding the right fit after one or two visits.¹

Establish Realistic Expectations

When caring for patients, it's critical to set realistic expectations with presbyopia treatments. Patients should understand that multifocal contact lenses may not provide vision that equals progressive glasses, but they do offer flexibility and convenience to engage in daily activities comfortably without the endless need for reading glasses.¹ They should also be informed that neural adaptation with multifocal contact lenses happens naturally and quickly, especially with newer designs.¹

Increasing Patient Satisfaction

Optometrists can help patients recognize the importance of choosing a contact lens based on their individual needs. No single lens will work for everyone, but lenses that feel comfortable on the eyes can increase adoption rates.¹ Advances in multifocal contact lens designs and materials have led to higher patient satisfaction.¹ By not allowing past failures to diminish perceptions of contemporary multifocal contact lenses, optometrists can potentially increase their conversion rates to over 90%.¹ Importantly, offering multifocal contact lenses can lead to more word-of-mouth referrals, whereas omitting them from your offerings can lead to patients seeking eyecare from other providers.¹

SOURCES:

1. Said O. Vision correction guidelines for patients approaching presbyopia. *Modern Optometry*. Published April 2024. <https://modernod.com/articles/2024-apr/vision-correction-guidelines-for-patients-approaching-presbyopia?c4src=article:infinite-scroll>.

2. MultiSponsor Surveys. The 2021 Study of the U.S. Consumer Contact Lens Market. December 2021. Accessed September 19, 2024.

Glaucoma Rates Rising in the U.S.



A recent analysis that used data from population-based studies, the National Health and Nutrition Examination Survey, and medical claims showed that 4.22 million American adults—or 1.62% of the U.S. population—had glaucoma and roughly 35% experienced visual deficits as a result of their eye condition. The meta-analysis, which used a variety of sources that included data dating back to 1985, also revealed that African Americans were about twice as likely as Caucasians to have glaucoma and nearly three times as likely to have visual impairment.

Importantly, there were substantial demographic and geographic disparities in glaucoma burden. An estimated 1.49 million Americans were living with vision-affecting glaucoma. The prevalence of glaucoma among African Americans was 3.15%, compared with 1.42% for Caucasians and 1.56% for Hispanic and other racial and ethnic categories. Of note, the prevalence of glaucoma ranged from 1.11% in Utah to 1.95% in Mississippi.

SOURCE

Ehrlich JR, Burke-Conte Z, Wittenborn JS, et al. Prevalence of glaucoma among US adults in 2022. *JAMA Ophthalmol*. 2024 Oct 17 [Epub ahead of print].

Meeting Highlights - ALLDocs Second Annual Sublease Meeting!

The second annual Sublease Meeting was held this past November in Phoenix, AZ at The Wigwam Hotel. As a reminder, this meeting is specifically designed for a Luxottica corporate sublease doctor to attend. Many of our Lenscrafters LRFT, Target Sublease and Pearle Vision Sublease members enjoyed a meeting tailored to their needs.

There was a packed agenda full of incredible CE, special features and networking opportunities. Our valued sponsors presented solutions to the doctors that fit the needs of their business. Dr. Craig Thomas

gave a three-hour comprehensive presentation on how to get started with medical billing. As usual he was informative and motivational. ALLDocs Sublease member, Dr. Loreen Waldron gave us an hour of CE on IPL and added insights on her success with this treatment in her Target Sublease. In ALLDocs tradition there was a roundtable business discussion, always popular for take home ideas and valuable pearls. Special thanks to AOA Trustee Dr. Curtis Ono for attending and presenting to us.



Sponsors and members mingle at the welcome reception



Doctors networking over a delicious outdoor breakfast on the patio



The legendary Dr. Craig Thomas speaking at the Sublease Meeting



ALLDocs Sublease attendees enjoy stargazing on the Wigwam grounds



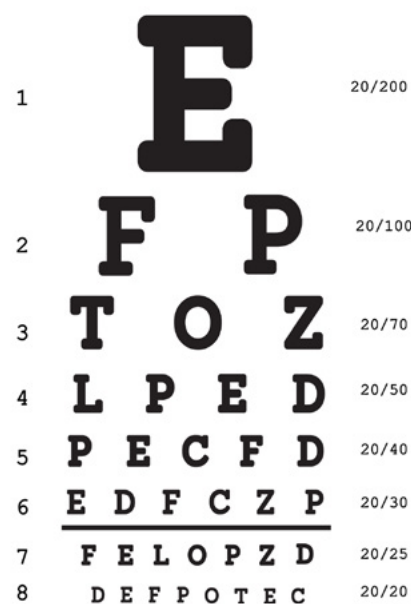
Gorgeous night for s'mores and great conversation



Dr. Torrey Carlson + special guest Heather Young, VP EyeCare @ LensCrafters

Watch for an announcement very soon about the 2025 Sublease Meeting dates and location!

Vision Loss: A Risk Factor for Dementia



The 2024 update from the Lancet Commission on dementia provides new evidence about dementia prevention, interventions, and care, and highlights the important role of optometry. The commission, which last issued a list of risk factors for dementia in 2020, now includes vision loss as a key risk factor for dementia. Other risk factors linked to dementia in the report were high cholesterol, less education, head injuries, physical inactivity, smoking, excessive alcohol consumption, hypertension, obesity, diabetes, hearing loss, depression, infrequent social contact, and air pollution.

According to the report, 157 million people across the globe will have dementia by 2050. The Lancet Commission is now advocating for a greater emphasis on multicomponent interventions through public policy and care to help prevent or delay dementia cases. Adding vision loss to the list of risks for dementia emphasizes the importance of using regular eye exams to potentially modify these risk factors in the future.

SOURCE

Livingston G, Huntley J, Liu KY, et al. Dementia prevention, intervention, and care: 2024 report of the Lancet standing Commission. Lancet. 2024;404(10452):572-628.



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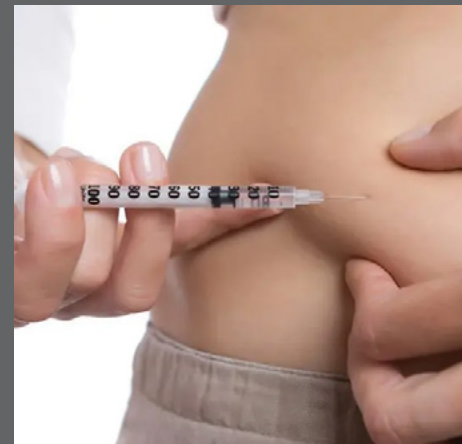
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INSIGHTS

The Effects of GLP-1 Agonists on Glaucoma in Diabetes



The use of glucagon-like peptide-1 (GLP-1) receptor agonists is rapidly increasing across the United States to treat people with type 2 diabetes and obesity. Recent preliminary research suggests that GLP-1 receptor agonists may offer a protective benefit against the development of glaucoma through their neuroprotective and anti-inflammatory effects.

Using data from 120 healthcare organizations across 17 countries, investigators studied the effectiveness of GLP-1 receptor agonists and metformin as primary treatments in preventing glaucoma. Patients treated with GLP-1 receptor agonists had a significantly lower risk of developing primary open angle glaucoma than those treated with metformin, with risk reductions of 41% at 1 year, 50% at 2 years, and 41% at 3 years. GLP-1 agonists also showed similar protective effects against ocular hypertension, with risk reductions of 56% at 1 year, 57% at 2 years, and 49% at 3 years.

SOURCE

Muayad J, Loya A, Hussain ZS, et al. Comparative effects of GLP-1 receptor agonists and metformin on glaucoma risk in type 2 diabetes patients. Ophthalmology. 2024:S0161-6420(24)00515-3.



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