

FITTING GUIDE TO NU-TORIC LENS

The simple fact is that Nu-Toric lens fits and acts similarly to a sphere and can be fitted as easily. Igel has developed a fitting procedure that is straightforward even if you don't dispense toric lenses regularly.

It has been proven that a higher fit success rate can be achieved by supplying Igel with accurate empirical information and our computer, programmed after exhaustive clinical evaluations, determines the optimum base curve and lens diameter for your patient.

Note: You don't need to invest in a trial set to dispense Igel Nu Toric lenses.

FITTING VISIT

- a. Pre-fitting Examination: The pre-fitting examination must include a full patient history and slit lamp examination. A sphere and cylindrical spectacle refraction are needed. Keratometry assessment of the patient's eye is required to obtain their K readings as well as the Horizontal Visible Iris Diameter (HVID) accurately.
- b. Ordering: Ordering of Nu-Toric lenses will require the following information as below;
 - i. Flattest K
 - ii. Steepest K
 - iii. H.V.I.D.
 - iv. Spherical Power
 - v. Cylindrical Power
 - vi. Axis
 - vii. Back Vertex Distance

ASSESSMENT OF FIT

Optimum Fit Criteria	
Comfort	No discomfort in any direction of gaze
Centration	Good limbal coverage. No decentration in primary position of gaze except perhaps for slight slag.
Movement	Approximately 0.5mm to 1.0mm on upward gaze. No excursion with normal eye movement.
Retinoscope Reflex	Crisp before and after blink
Visual Acuity	Good. Non-fluctuating
Keratometry	Little or no distortion of mires.

Characteristics of a Steep Fitting Lens	
Comfort	Tight sensation but no immediate discomfort
Centration	Centred and no movement
Movement	Very little movement, even with forceful eye motion. Blanching of the conjunctival blood vessels may occur.
Retinoscope Reflex	May still be acceptable due to apical wrapping. Very tight: can be irregular
Visual Acuity	May fluctuate after blinking. Variable and inconsistent.
Keratometry	Considerable distortion on blinking. Mires are blurred or doubled

Characteristics of a Flat Fitting Lens	
Comfort	Excessive lacrimation and some conjunctival injection.
Centration	Lag in primary position of gaze
Movement	Excessive post blink movement. Lag on upward or lateral gaze. Edge stand-off. Small air bubbles under edge.
Retinoscope Reflex	May be irregular due to a central puckering of lens. Slightly loose can be regular.
Visual Acuity	May fluctuate depending on post blink movement.
Keratometry	Fluctuates on blinking. Mires are clear but swim.

WEARING SCHEDULE

New patients may commence wearing their lenses using the following schedule:

Day 1	4 hours
Day 2	6 hours
Day 3	8 hours
Day 4	10 hours
Day 5	All waking hours

HINTS TO FITTING LENS

1. LENS ROTATION: We have to compensate for lens rotation by using a simple rule. For lens turning clockwise; we ADD and for anti-clockwise turns; we SUBTRACT.
2. Tight fitting lenses are best modified by a flattening of Base Curve.
3. Loose fitting lenses are best modified by an increase in lens diameter.
4. Majority of problems with toric lenses are the result of lenses being fitted too small and loose.
5. Larger lens gives better lens stability because of larger location area. (2.5mm larger than H.V.I.D.)
6. 'With the rule astigmatism' is more difficult to correct than 'against the rule astigmatism'.
7. 'Oblique astigmatism' is difficult to locate for the same reason above.
8. Lenses fitted to steep corneas locate better than those fitted to flat corneas.
9. Minus lenses locate worse than plus lenses. (Maximum lid pressure occurs at the center where the thick and thin effect of the astigmatic correction is at its minimum).
10. The amount of location device is automatically compensated in IGEL Nu Toric.

11. High minus, oblique axis, small, flat lens will have more location compensation than large, steep, high plus lenses.
12. More location compensation for 'with the rule' toric lens than that in 'against the rule' toric lens.