

RGP: Ancient History or the Wave of the Future?

By Silke Lohrengel

If you want to be successful and profitable in your market, you have to continuously ask yourself whether the products you are working with fit into current and future market trends. In a market that, because of advertising, is dominated by disposable lenses that can be replaced anywhere from daily to monthly, this is an important question when it comes to rigid gas permeable contact lenses (or RGPs or GPs).

This paper draws on current market data and experience-based accounts from contact lens specialists from around the world to resolve this question about the contact lens market.

Douglas P. Benoit of the United States broached the subject somewhat provocatively in 1996 when he asked “does no one use rigid lenses anymore?” and then proclaimed that it should come as no surprise since this misconception is surely the main reason why some doctors complain of a declining market for contact lenses and the poor profitability of their own contact lens practice (1).

“Try RGPs for fun & profit” was an appeal to his American colleagues. But is it the right approach for us in Europe?

Benoit’s appeal reminds me far too much of the advertisements for disposable contact lenses that can be replaced daily, every two weeks or monthly, and which are responsible for creating the current market situation:

- Free trials
- Plummeting margins (2)
- Less customer loyalty (3)
- Rising quantities, but with little increase in the number of contact lens wearers (2,4)
- Rising dropout rates (4,5)

- Fear of outside distribution channels (drug stores, super-markets/grocery wholesalers, the Internet....)

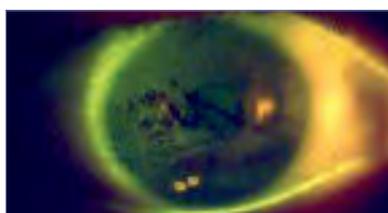
As tempting as Benoit’s slogan sounds at first hearing, fun and profit alone are not why we should be looking at RGPs. The advantages of RGPs are far more pragmatic and durable.

Advantages of RGPs – ocular health

1. Thanks to materials that allow oxygen to permeate and tears to flow under the lens, thus ensuring that enough oxygen always reaches the cornea, long-term tolerance of RGPs is very high (6,7).

2. RGP tolerance is better, even in patients with poor tearing action. RGPs do not dry out on the eye like soft contacts can (7).

3. As a result, RGP wearers



always enjoy clear vision (6).

5. RGPs are easy to take care of and easy to handle.

6. RGPs are the only

sensible corrective option for some eye shapes.



Keratoconus



Transplant

There is only one drawback for contact lens wearers.

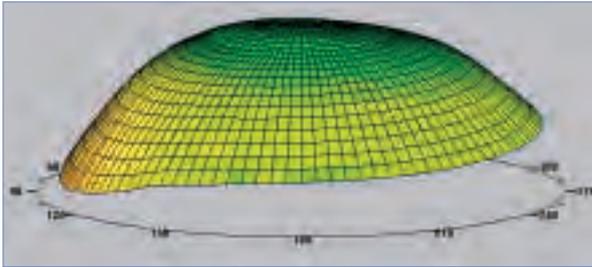
The first time a contact lens candidate wears rigid contact lenses is usually more uncomfortable than initial contact with soft lenses. Therefore, they take some time to get used to.

This handicap is the main reason for the stagnation of the RGP market and the source of the following general misconceptions in the contact lens market.

Misconception no. 1: “RGPs are hard to wear and hard to fit”

The initial discomfort most patients feel when they try RGPs for the first time—as is represented to great exaggeration by the Fakir in this picture—seems to have made a pretty strong impression on many contact lens fitters. →





Cornea after laser surgery (Keratograph image)

Because RGPs take some time to get used to—and are thus considered “hard to wear”—the common belief is that they are also “hard to fit.”

This misconception is fueled by the advertising and efforts of big industry, as Keith Parker explains. The soft lens industry has made everything easy and is taking advantage of immediate comfort. Rigid contact lenses are considered to be more complicated and to involve a more time-consuming fitting process. This is certainly true for relatively inexperienced practitioners who work with them infrequently (8).

And this is the important point.

Everything is difficult at the beginning. New actions and new procedures are bound to take longer than familiar ones. The appeal of immediate comfort and the illusion that it is very quick and easy to fit soft lenses tempts many fitters, particularly novices, to take the path of least resistance and give preference to fitting soft contact lenses.

But is this in the best interest of our customers?

Is it not more important to look at long-term tolerance and, thus, long-term customer satisfaction (9)?

In the past few years, consumers have reacted with increasing sensitivity. Today’s consumers are much quicker to give up any goods and services that do not fully meet their expectations. This is particularly evident in the rising number of contact lens dropouts (5).

So, what do these modern consumers want?

- After wearing both types of lenses, 40% of customers who would have typically been considered ideal candidates for soft lenses opted for RGP lenses (10).
- Out of 200 customers who were presented with the pros and cons of both types of lenses, 49% chose RGPs (11).
- Among wearers experiencing problems with contact lenses, 46% were refit from soft lenses to RGPs, and only 9% were refit from RGPs to soft lenses, primarily due to reduced comfort (11).

These figures strongly suggest that while 40 – 50% of contact lens wearers could be wearing RGPs, only 10 – 15% currently are!

Apart from immediate comfort, criteria like stable vision and long-term

who have just completed their training. It is unbelievably difficult for students and novice practitioners to develop an understanding of the positive aspects of RGPs if they are not presented with them during or shortly after their training. Even a poorly fitted soft contact lens will usually be comfortable immediately, creating the initial impression that it is well tolerated.

And if nobody is around whom a novice practitioner (and, thus, a novice fitter) can ask, it is extremely difficult to begin working with RGPs. Only practitioners who have watched their regular patients experience long-term satisfaction with RGPs will understand RGPs as an effective “customer loyalty tool” and gladly undertake the extra initial effort of providing a qualified fitting.

Misconception no. 2: “RGPs take longer to fit”

The second great misconception in the current contact lens market is the

...Everything is difficult at the beginning...

comfort are important to contact lens wearers.

Experienced RGP fitters realized this a long time ago. They are aware of the challenge presented by the lack of

notion that practitioners can save time by dispensing disposable lenses for daily and monthly replacement. “Soft lenses don’t need fitting, so I can save time and money.” Let’s examine this idea more closely. (see table)

	RGPs	Soft lenses for yearly replacement	Daily, two-week, and monthly replacement lenses
Initial fitting, time in minutes	105	105	80
Calculated costs, in euros	178	178	136
Market prices, in euros	178	178	0 – 100

immediate comfort, but haven’t let it become a problem.

But the situation is quite different among novice practitioners

Because there are fewer parameter options to choose from for disposable systems, practitioners often perform only a “trimmed down” version of a fitting, which is figured at

about 80 minutes.

But practitioners who want to provide an optimal fitting and examine the cornea, tear film, etc. with the same care that they would during any other professional fitting do not have this time savings.

Things get really interesting when we look at the market price of a fitting. Fitting time, which is already set very low, is generally not even billed to the contact lens wearer because such fitting costs for disposable lenses are no longer common in the market. In addition, lenses sold online or through mail order do not provide any real profit.

...Fitting time is generally not even billed...

Where are these losses accounted for?

The best way to set your fees is to understand your costs (12)!

No practice can survive in the long run without a clear pricing system!

The “50 cents per box syndrome” goes in the same direction.

According to Gary Gerber, if you think your customers are leaving because they can save 50 cents per box elsewhere, you are mistaken. Customers want value for their money. And they will only leave and go elsewhere if they are not getting that value from you (13).

So, what could this “value” be if not individual consultation, fitting, service and efforts to enhance customer loyalty?

What is the way forward?

Free trials, the retro styles of the 60s, globalization, “knowledge society,” the adrenaline rush of extreme sports, the Internet, the stock market, investing, candlelight dinners, nice gifts,...

We contact lens fitters—like our

customers—are far too complex and diverse to be standardized. Individual customers have individual expectations. With regard to their vision, these can be met with the following products:

- Eyeglasses
- Soft contact lenses
- RGP contact lenses
- Corneal refractive surgery
- Visual training

As the old adage goes, “There is more than one way to skin a cat.” We just have to keep that in mind when we talk about up-to-date procedures in optometry and ophthalmology.

Aren't laser surgery options

much more forward-looking for our patients than eyeglasses or contact lenses?

How can we compete within our profession?

At the very latest, when we analyze the profile of PRK candidates (14) we should be aware that the only way to fulfill our lens wearers' needs is to offer them individual consultation

... dropout rate also soared 166%...

and the best possible lens fitting—and this is the only way to survive and grow in today's market.

Why patients choose PRK

- 84% wore contact lenses before undergoing surgery
- 96.1% found contact lenses or eyeglasses uncomfortable
- Dry eyes
- Contact lens intolerance
- Red eyes
- Overwear syndrome

Dissatisfied contact lens wearers

are the largest pool of potential laser surgery candidates—even in a time when the disposables market is booming and, according to the Allensbach Study (4), the number of contact lens wearers rose 41% between 1993 and 2002 (but the dropout rate also soared 166% during the same period).

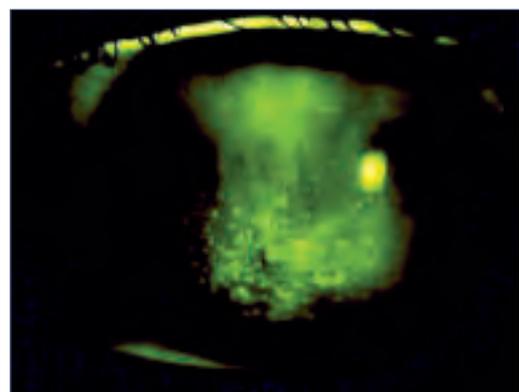
Why is that?

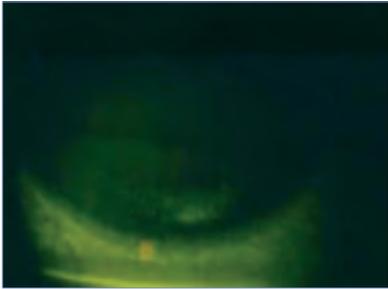
A drying of the cornea after wearing soft contact lenses, particularly the very thin monthly replacement lenses, often goes unrecognized because the lens is not removed from the eye during the follow-up exam. Fluorescein staining of the cornea is often not done because removing the stain from the cornea after the exam is apparently too bothersome. But this exam is essential!

Subsequent changes to the cornea such as SEALs (superior epithelial arcuate lesions) or physiological problems like vascularization often go undetected and, thus, untreated.

More and more, we practitioners neglect our ophthalmologic and optometric services, clearly at the expense of our patients but, ultimately, at our own expense. Simply selling soft

contact lenses rather than fitting them will certainly not help strengthen our market. →





I have to agree with Wim Aalbers when he said:

The industry “sold” contact lens fitting as something that is easy. And now everyone thinks they can fit lenses, especially the disposable products from the big manufacturers. Even inexperienced fitters. Soft lenses can also pose problems that many try to sweep under the rug or that are not even recognized. These include huge changes in powers, dry eyes, problems with the conjunctiva and endothelium, discomfort, and shorter wearing times. Practitioners have underestimated the complexity of contact lens fitting! Many problems do not arise for months or even years, but they do occur. (15)

So why don't we fit more RGP contact lenses?

Benchmarking among contact lens fitters

Which contact lens fitters are most successful?

of experience or inexperience, the fitter's basic attitude is extremely important.

The latest studies conducted by Spectaris categorize European contact lens fitters as so-called “lovers,” who are convinced by contact lenses, and those who either waver or reject contact lenses.

Wim Aalbers further subdivides the “lovers” into 2 groups. In his opinion, one group of successful fitters is made up of practitioners who undertake a great deal of effort to make their contact lens wearers successful contact lens wearers. They sell a lot of contact lenses, a large percentage of which are RGPs. They are focused on the long term.

The second group of successful contact lens fitters is sales oriented and not too interested in backgrounds and technical expertise. Their focus is more on short-term results. They sell a lot of volume but do not have a large base of regular customers.

A survey of Hecht customers studied the distribution of sales of RGPs, soft contact lenses for yearly replacement, soft lenses for daily replacement, and soft lenses for monthly replacement. The results were as follows: (see table)

	All-around providers	Opticians with a separate contact lens department	Contact lens “institutes”
RGPs	20.4%	37.7%	46.4%
Soft lenses for yearly replacement	16.9%	21.9%	26%
Two-week and monthly replacement lenses	53.9%	33%	20.1%
Daily disposable lenses	8.8%	7.4%	7.5%

An important and complex criterion for answering this question is the so-called “fitter structure.” In addition to the contact lens fitter's level

Among contact lens institutes and opticians shops with a separate contact lens department, the share of RGPs is 46.1% and 37.7%, respectively.

That is far higher than the share of RGPs sold by “all-around providers” (20.4%).

Dealing with contact lenses on a regular basis and developing a positive image locally seems to promote the use of RGPs.

According to Aalbers, RGPs are not something for fitters who are looking for fast profits. Practitioners have to think about the long-term! The truly successful practices are the ones that use a great deal of care and precision when fitting soft lenses and, on average, sell a higher percentage of RGPs. (15)

Looking to the future

Consumer behavior

Consumer behavior is a crucial factor for any practitioner's success. What do consumers want when they come to us?

“Consumers want value.” And value is much more difficult to demonstrate for disposable contact lenses than it is for RGPs. (13)

After a general contact lens consultation, 40% of new contact lens wearers would choose RGPs.

The following considerations are important to consumers and are key factors for the success of RGPs: good visual acuity, ease of handling, long-term comfort and the fact that they pose few ocular health risks.

Contact lens fitters detect corneal staining in just 35% of RGP wearers but in 80% of soft contact lens wearers (10). Thus, considerably less time-

intensive problem-solving is required for RGPs. RGPs pose far fewer ocular health risks than soft contact lenses.

Even in economic terms, the situation looks good for RGPs.

Practices with a high percentage of soft contact lenses are in a stagnating or declining market. Practices with a high percentage of RGPs are growing. Why? Practices with a high percentage of RGPs have the following advantages:

- good customer loyalty
- customers come in for regular check-ups
- RGP wearers make use of service packages 8x more often than soft lens wearers (16).

Customer loyalty

In order to be successful in the market, it is not enough to be able to fit contact lenses well. Practitioners need concepts for cementing and

should be part of modern contact lens management. This will boost the economic appeal of RGPs considerably!

Customer loyalty will be enhanced, and the level of satisfaction among contact lens wearers will increase tremendously.

Keys to successful contact lens use

Up-to-date technical knowledge is essential and should be used in consultation, fitting and follow-up care. With high-quality, customized products and flexible marketing concepts, contact lens fitters and RGPs are an unbeatable team.

Therefore, RGPs are definitely not ancient history. They are the wave of the future!

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...Why do patients have to buy solutions separately...

strengthening a special position in the market. Good service combined with excellent products needs to be packaged in a way that matches consumers' concept of value. New approaches to contact lens management are needed!

Why should patients wear RGPs for 2 to 5 years when soft contact lenses can be replaced daily?

Why don't we figure in such a way that contact lens wearers receive an optimally customized reserve pair of lenses when they purchase their lenses? Why do patients have to buy solutions separately? Why should a contact lens wearer be forced to pay for their contact lenses in one lump sum, even in times when money is relatively scarce?

Security and modern payment methods such as monthly direct debit