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Organization Section: NCC/ BCLA

Poster Abstracts

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Myopia management in India: a private practice model demonstrating the role of axial length monitoring using the Oculus Myopia Master

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Purpose: Purpose: Myopia management is emerging as a critical public health priority, given the growing global prevalence and associated long-term ocular complications. India, now the most populous country in the world, is on the brink of a myopia epidemic. Despite this, there is a lack of structured government policies targeting myopia control. As a result, the onus of implementing evidence-based interventions has largely fallen on private eye care providers. This case study presents the role of a private clinic in addressing myopia through structured monitoring and management strategies.

Method: Methods: Data from 102 myopic children (192 eyes) aged 5.4–17 years were analysed. Participants were grouped by intervention: Ortho-K (n=30; mean age 12.5 ± 2.4 years), myopia control spectacles (n=72; mean age 11.42 ± 3.73 years), and others (ordinary spectacles/soft contact lenses). Baseline refractive error, AXL, and annual progression rates for AXL and RE were compared overall and across age subgroups (<10, 10–13, <13 years).

Results:

- Ortho-K: Mean baseline RE -4.13 ± 1.46 D, AXL 25.33 ± 1.09 mm; annual progression rates: AXL 0.08 ± 0.26 mm, RE -0.07 ± 0.47 D.
- Myopia control spectacles: Mean RE -3.04 ± 1.65 D, AXL 24.40 ± 1.19 mm; annual progression: AXL 0.08 ± 0.25 mm, RE -0.10 ± 0.91 D.
- Others: Annual progression: AXL 0.22 ± 0.21 mm, RE -0.50 ± 0.50 D.

Across age groups, Ortho-K consistently showed the lowest progression in both AXL and RE, with notable suppression of RE progression in the 10–13 year subgroup (-0.00 ± 0.00 D).

Myopia control spectacles also reduced AXL progression compared to conventional corrections, especially in <13-year-olds.

Conclusions: Both Ortho-K and myopia control spectacles demonstrated effective reduction in myopia progression compared to conventional corrections, with Ortho-K showing superior control in specific age groups. These findings support early intervention with optical myopia control strategies to mitigate long-term myopia progression in children.

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