



Certified Opticians Association of Texas

The Opticians Association of America State Society 

October/November 2017 Newsletter

Editors: Mustafa Asif and Kim



HOYA

Speaker:



Registration: 5:30 pm
Dinner: 6:30 pm
Presentation: 7:30 pm

Register Online: www.coat.tv
Text: 713-890-2520
Registration Deadline Nov 6

Date: Wednesday, Nov 8, 2017
Venue: Grotto Ristorante
Address: 4715 Westheimer
Houston, TX 77027
Phone: 713-622-3663

About the Speaker

Dr. Thomas Gosling graduated from the Illinois College of Optometry in 1992. After graduating he moved to Green Bay Wisconsin and took a position at the Eye and Ear Associates, a multidisciplinary clinic with ENT and ophthalmology. Six years later he moved to the Green Bay Eye Clinic, the largest ophthalmology clinic north of Milwaukee. Here he served as chief clinical optometrist with eleven ophthalmologists. During his fifteen years in Green Bay he was the optometrist for the Green Bay Packers.

Deciding to start his own practice he moved to Seattle. After working at Clearly Lasik, a premier laser center in Seattle for nine months, Dr Gosling couldn't handle the 37 days of straight rain and 50 days of darkness. He then purchased an optical in sunny Denver Colorado.

After practicing 15 years within ophthalmology and LASIK clinics. Dr. Gosling finds his private practice the perfect environment to express the creativity optometry has to offer in a new digital world. Presently, Gosling acts as a technology consultant, inventor and entrepreneur. He was named one of the 2011 Optometric Business Innovators of the year.

Our society has dramatically changed in the way we consume media. With historical speed, we have transitioned from TV and desk top computers to tablets and smart phones. This transition has had a physiological impact, particularly the wide range of annoying and chronic conditions associated with Computer Vision Syndrome (CVS) and Digital Eye Strain (DES). Dr. Gosling will show the data that is behind these societal trends. Then he will take you through the tools and techniques he uses in the exam lane that can help you help your patients overcome the symptoms of CVS and DES. We will also discuss Blue Light and the emitting sources that now surround our world. Delving into the three components of Blue Light and how to help our patients with these new light sources. The implementation of what you will learn will certainly benefit your patients. In addition your practice will be able to set itself apart from big box and cyber-optical competitors.



COAT CHRONICLES

By

Mustafa Asif

Hello COAT Members and fellow opticians. 2017 is almost at its end and we have gone through so much this year. We would like to thank all our sponsors through out the year who have supported Texas opticians. A special recognition goes to Kering Eyewear who were our first time sponsor for July.

We all went through some tough times during Hurricane Harvey. Because of that and also vision expo west we had to cancel our September meeting. It was a time of great challenges for everyone who was effected by it. COAT along with Luxottica and donations from opticians all over the United States have collected funds to help the opticians who have suffered because of the hurricane. We thank them for this generosity.

We have some exciting news for 2018. We are changing our meetings from bi-monthly to quarterly and are bringing back the Hands on Workshop in June, which was a huge success this year. That will give opticians an opportunity to earn 10 credit hours in one year. Do fill out the Annual Membership form which is on page 3 of this newsletter. All new and current members have to fill out the form.

We are always looking for our members to let us know if we can do somethings differently. Also let us know if you would like to have some new events added to our schedule and we will discuss your ideas in our board meetings. We really look forward to seeing you again next year.

Established in 1926, the Opticians Association of America (OAA) serves as the only national organization representing opticianry's business, professional, educational, legislative and regulatory interests.

OAA fosters, supports and sponsors programs of competency certification, licensing and continuing education for professional development.

For more information please contact the Opticians Association of America's home office at 3740 Canada Road, Lakeland, TN 38002, 901.388.2423, chris.allen14@att.net, or www.oaa.org.



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2018 Annual Membership Fee is \$80 (Please make Check or Money Order Payable to COAT)

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If you want to volunteer with COAT please email coatsecretary@yahoo.com and tell us your area of interest. We are always looking for fresh new ideas. Thank You

You can also mail this form with your payment to:

COAT

5018 Antoine Dr. B-252 Houston, Texas 77092-3357

Prices are subject to change without notice. No refunds or exchanges. COAT is a 501(C)(6) non profit organization.

July Highlights



COAT President Mustafa Asif, Kering Eyewear Representative and Manager Franki Star along with Mr. John Soper, our Speaker for the night.



From past to current COAT Presidents, (L-R) Peter Canovas, Tom Bryan, John Soper, AJ Saper and Mustafa Asif. We appreciate all the guidance we receive from all our mentors.



COAT Secretary Kim Brown with COAT Treasurer Bonnie Rosenbaum and Kering Eyewear Representative and Manager Franki Star at the July meeting.



The mood at COAT meetings is always festive. We are like a big happy family and that is the best part of it all. Annual Members Debbie & Charlie Orr, AJ Saper and Phil Delphin having a great time at our July meeting.



We appreciate our Annual Members who support COAT all year by attending meetings and being an active part of our association. Thank You



Past COAT Board members Laura Johnson and Michelle Koonce along with Houston Area Silhouette Representative Roz La Barberra attending our July meeting. Thank You

Millennial Visions

Eyewear for a Rising Generation

By Jeff Hopkins

Has there ever been a group of people more analyzed, categorized and generalized about than those born between 1982 and 2003, known as the Millennial generation? A whole cottage-industry has grown up around telling manufacturers how to market to them. Enterprising Millennials make a living speaking at industry conferences about what they like and don't like. Why? There's a lot at stake here: Everyone wants to find the key to this generation's growing disposable income.

So while the consumer goods industry ponders what Millennials want, it's fair for us to ask, "What do Millennials need?" Like all of us, they need to see clearly—but modern life has made that simple goal more difficult to attain. The days when a pair of standard finished or semi-finished single vision lenses are sufficient for almost all wearers under 40 are gone. Digital technology has changed the way we live and the way we see, and Millennials are probably the generation most affected by those changes.

Fortunately, vision technology is catching up to the changes in visual lifestyle that affect this generation. Today, we can address the visual challenges that Millennials, among others, are facing every day. The following are some lens and coating technologies that are making a difference for Millennial wearers and creating new premium sales opportunities for practices.

MAKING IT CLEARER

For decades, the optical industry has made improving progressive lenses an urgent priority, for very good reasons: Many early progressives had very restricted fields of vision and were fraught with adaptation issues. These were addressed through improved design techniques and more recently by free-form customization.

But until recently, no such urgency has existed for better single-vision designs. Adaptation has never been a significant issue, and before the development of free-form customization, single vision lenses had changed little since the development of aspheric lenses in the 1950s. The relatively low market penetration of customized single vision lenses may reflect the general feeling that unlike earlier generations of progressives, standard single vision lenses are good enough. That's a shame, because many single vision wearers could get a better visual experience from a well-customized free-form lens.

Like traditional progressives, standard single vision lenses deliver inconsistent performance over the prescription range. Ideally, each spherical prescription would have its own base curve; but the practicalities of lens fabrication mean that a relatively small number of "average" curves must cover the whole range.

The more a patient's Rx differs from the "average" power for which the curve is designed, the more constricted the lens' area of clear vision will be, especially in higher prescriptions. And while asphericity makes lenses flatter and thinner, traditional surfacing doesn't allow similar optimization for cylindrical powers, so patients with significant astigmatism are forced to accept additional compromises.

Free-form optimization, which is used to produce digital single vision lenses, can eliminate both of these issues. By creating an individual design for each prescription, optimization eliminates any mismatch between the prescribed power and the base curve, so patients can experience near-ideal clarity regardless of their prescription. Free-form surfacing also allows the creation of an atoric surface (aspheric in both the sphere and cylinder meridians), nearly eliminating visual compromises for the 70 percent of patients with astigmatism.

Like progressives, single vision lenses can also be customized for the way the lenses sit in front of the patient's eyes, taking into account factors like pantoscopic tilt and vertex. How much improvement a patient will experience depends on their prescription and other variables. It's likely though, that most patients will experience improved vision, and some manufacturers claim that customization and deliver up to 50 percent larger fields of clear vision in certain prescriptions.

Several lens manufacturers have recently introduced single vision lenses designed specifically for the vision needs of Millennials. One such product is the Zeiss Digital Lens, a single vision lens that combats the effects of digital eye strain and is offered in combination with Zeiss DuraVision BlueProtect, a blue-violet eye protecting AR coating.

Another Millennial-specific product is Eyezen from Essilor. Eyezen glasses are a complete package, offering more comfortable vision for both single vision and emmetropic, nonprescription patients who frequently use digital devices. The lower portion of the lens contains a small amount of accommodative relief for digital eye strain, which is determined by the patient's age. These enhanced single vision lenses feature a special anti-reflective coating to selectively filter out up to 20 percent of harmful blue-violet light. The coating lets beneficial blue-turquoise light pass through while deflecting a significant amount of the dangerous blue-violet light.

DIGITAL DEVICE VIEWING

You don't have to be a highly paid marketing researcher to know that Millennials love their mobile digital devices. All you need to do is walk down the street. Of course, people of all ages are using smartphones, tablets and laptops these days, but Millennials are using them the most and have been most of their lives. And according to The Vision Council, they are the age group with the highest percentage of complaints about Digital Eye Strain (DES).

What is it about digital devices that are causing problems for these young, healthy eyes? There are several factors. One is simply that compared to a printed page, it's harder to keep a digital screen in focus. That makes the eyes work harder. Also, we hold devices like smartphones closer to the eye than printed pages. We think of presbyopia as a condition arising in the early to mid-40s, but that definition arose in a world in which we didn't try to read tiny phone screens.

The fact is, presbyopia is a function of working distance: The closer the working distance, the earlier a patient is going to experience it. With the widespread use of digital devices, eyecare professionals are seeing presbyopic symptoms at younger and younger ages, giving new meaning to the old expression, “kids grow up fast these days.”

Only a decade ago, digital devices consisted primarily of work-station computers and laptops, and the associated vision problems were relatively easy to solve. They were primarily mid-range issues affecting presbyopes, and since computer work was mostly a dedicated, rather than intermittent task, specialty “computer lenses” were a practical solution. With the advent of mobile devices, the situation has changed: While we use these devices up to nine hours per day, their use is mixed in with all of our other daily visual activities. A specialty solution won’t work; to address the issue, we have to expand the requirements of “general-purpose lenses” to include comfortable mobile device use.

For Millennials, a new category of lenses has sprung up to do just that. They are sometimes called “starter progressives,” sometimes “anti-fatigue lenses;” but they all have the goal of relieving the symptoms of DES for single-vision wearers. They achieve that through an area of mild add power designed to relieve the eye of some of the focusing effort required for smartphones and other devices. Since the add power is low, peripheral distortion is minimized, and wearers can have the wide distance viewing area that they are accustomed to.

AVOIDING THE BLUES

Another concern associated with digital devices is exposure to blue light. Blue light, especially the higher-energy, shorter-wavelength variety, is associated with retinal cell damage and possibly macular degeneration. This has become a concern recently because we are exposed to more indoor blue light than ever. Digital screens are significant sources of blue light, and energy-saving lighting (fluorescent and LED) emit far more blue light than incandescent bulbs. Of these sources, smartphones have the highest blue light radiance and are held closest to the eye, so it is likely that they pose the biggest threat.

Staring at screens all day long is a relatively new phenomenon, and the effect of these blue light sources on long-term eye health is still subject to debate. But it’s a bit scary to think that Millennials are essentially the guinea pigs in a massive experiment on the cumulative effects of indoor blue light on eye health. As the first generation born into a digital world, they will have the most cumulative exposure—exposure that began at an early age, when the crystalline lens has not developed some natural blue light protection through yellowing.

While there is a lot of reason to worry about blue light, we also need it. Apart from the fact that the world would look strange with only two primary colors, blue light plays an important part in our overall health and sense of well-being. The key is a unique set of photoreceptors in our eyes called the Intrinsically Photosensitive Retinal Ganglion Cells (ipRGC). While they can distinguish between light and dark, the ipRGC do not contribute to the perception of vision. However, they appear to help the brain perform

two important functions: regulating pupil size and the production of melatonin.

Melatonin is the chemical that makes us sleepy at night. In the presence of blue light, the ipRGC tell the brain to stop producing melatonin, so we can be alert, productive and even optimistic (a lack of blue light exposure has been associated with Seasonal Affective Disorder). At night, in the absence of blue light, melatonin production begins again. This system worked very well in prehistoric times, when daytime was spent outdoors and the only indoor light source, fire, produced mostly yellow and red light.

“Today’s multi-layer coatings allow manufacturers to eliminate reflections in most of the spectrum while reflecting light away from the eye in the most harmful blue range (wavelengths below about 450 nm).”

Today, however, we spend our evenings surrounded by blue light: in an illuminated space watching TV, checking Facebook, texting and tweeting. And the later we are exposed, the longer we suppress melatonin production, making us restless when we finally do go to bed. And while that’s bad for everyone, it can be worse for Millennials, who are often young enough to have the late-skewing circadian rhythm associated with adolescents, but most likely have to be at work or school fairly early in the morning. And the problems extend beyond sleep deprivation: Studies have linked a lack of melatonin production to such serious health problems as diabetes, some forms of cancer, and heart disease.

Blue light then poses a complex challenge. On the one hand, we’d like to minimize exposure to damaging blue light (which tends to be higher-energy blue-violet light); on the other hand, we want to make sure the eye receives enough blue light (which tends toward the lower-energy blue-green range) to keep our circadian rhythm in order. To further muddy the waters, there is a third hand: We don’t want to be exposed to beneficial blue light close to bedtime. Fortunately, lens and coating manufacturers have come up with some ingenious ways to address this multifaceted problem.

Amber tints are natural blue-light filters, and they can be designed to filter out most of the more harmful frequencies (below 450 nm), while allowing most of the blue light above this frequency to pass through. Some of these tints are designed to mimic the protective tint that the eye’s crystalline lens acquires through exposure over time. This type of blue filtering doesn’t have to involve a “hunting glasses” type of yellow hue; some have just a subtle brown tint.

A number of coating providers are now offering blue-filtering anti-reflective (AR) coatings. Traditionally, AR is designed to increase light transmittance of all wavelengths. But today’s multi-layer coatings allow manufacturers to eliminate reflections in most of the spectrum while reflecting light away from the eye in the most harmful blue range (wavelengths below about 450 mm). This reduces the eye’s exposure to blue-violet light, while almost all of the blue-green light passes through the lens.

But what about blue light exposure in the evening? If the coating is designed to let beneficial blue light pass through, how can it help with sleep issues? There are two things to consider here. One is that the notion of some blue light being good and some bad is an oversimplification: The wavelengths for blue light hazard and melatonin regulation overlap considerably, so reducing exposure to “bad” blue light will also reduce some of the blue light that helps us stay awake. Also, most indoor sources of blue light, including digital screens, have spikes of intensity in the “bad” part of the range (below 450 nm), which is effectively filtered by the lens treatment.

Because they deliberately reflect a part of the visible spectrum, blue-filtering AR can't achieve quite the same transmittance as standard “full-spectrum” AR coatings. But the difference is small enough that this type of coating can be considered premium-class based on anti-reflective performance alone.

A comprehensive guide to blue light-filtering lenses is available in [Solutions for Digit-Eyzed Living](#), an editorial supplement.

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MAKING THE CONNECTION

Because they have grown up with digital technology, Millennials probably put more strain on their eyes than previous generations. Fortunately, optical technology has given you more tools to address that strain. These include products that will help them see more clearly, such as customized single vision designs and AR coatings. And let's not forget that Millennials occasionally look up from their digital screens and view the world like the rest of us: They drive at night, they go indoors and out, they spend time in the sun. The lens treatments that benefit all eyeglass wearers will

benefit them as well. That includes AR with or without blue filtering and photochromic treatments, which appear to have blue-filtering properties of their own, particularly those with brown tints.

Connecting Millennials to the right solutions will require some patient education, but fortunately you don't have to do it all yourself. DES and blue light issues are current issues in consumer media. Industry players have also recognized the need to reach Millennials “where they live” on social media and have stepped up their activities in that medium. Transitions Optical, for example, has recently announced that it is increasing its efforts to reach younger single vision wearers via social media channels through its #SeeLifeThroughaNewLens campaign.

Millennials who are used to paying the price of standard single vision lenses may balk at the price of a customized, add-power-enabled lens, and they can always opt for the old tried-and-true. But make sure they understand the increased performance that comes with the higher cost. Since they're not likely to give up their smartphones any time soon, DES is going to be a continuing problem, and they can choose to put up with it or relieve it with the right eyewear. And they're going to need their eyes for another 50 to 70 years, so they need to know how to protect themselves against the long-term effects of blue light and UV. They may even be looking for a better night's sleep and be pleasantly surprised to find the solution in your office.

Whatever option they choose, talking to this rising generation of consumers about Digital Eye Strain, blue light and the new solutions available to them gives you the opportunity to demonstrate what the best eyecare (and eyewear) can do for them. It's a conversation that could help your practice for a long time to come.

Jeff Hopkins is a San Diego, Calif.-based journalist and business consultant with an extensive background in the optical industry.

Millennial Visions Eyewear for a Rising Generation **By Jeff Hopkins**
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We had a full house in July at our first ever meeting sponsored by Kering Eyewear. We look forward to many more meetings in the coming years. Thank you for the support we appreciate it.



ABO and NCLE Certification Renewal

All ABO and NCLE certifications are for three (3) years. Continuing education credits (CECs) must be earned within the three year certification period and may not be accumulated and carried over from one period to another. All CECs and renewal fees are due on or before your expiration date. If you fail to complete the requirements on time, you have a 4th year to complete them. During that year, your certification is suspended. This suspension year is not an extension, but will overlap into your next certification period.

Continuing Education Renewal Requirements

For those renewing their certification that expires in 2018 and beyond:

ABO Certified: Send in 12 ABO- and/or NCLE-approved CECs (of which at least 6 hours are ABO-approved Technical CECs; the remainder can be either ABO- and/or NCLE-approved Technical or General Knowledge) and the \$125 fee.

NCLE Certified: Send in 18 NCLE- and/or ABO-approved CECs (of which at least 9 hours are NCLE-approved Technical CECs; the remainder can be either ABO- and/or NCLE-approved Technical or General Knowledge) and the \$125 fee.

ABO and NCLE (Joint) Certified: Send in 21 ABO- and/or NCLE-approved CECs (of which at least 5 hours are ABO-approved Technical CECs and 6 hours are NCLE-Approved Technical CECs; the remainder can be either ABO- and/or NCLE-approved Technical or General Knowledge) plus the \$250 fee.

Acceptable Continuing Education Credit:

ABO: Spectacle related courses approved by ABO with an assigned course number.

NCLE: Contact lens related courses approved by NCLE with an assigned course number.

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- ABO:** You may submit proof of a current license in a licensing state requiring Continuing Education.

NCLE: You may submit proof of a current license in a licensing state requiring Continuing Education.

Send CEC's and renewal fees to:

- **ABO/NCLE - 6506 Loisdale Rd., Suite 209, Springfield, VA 22150, and include name, address and certificate number.**
- **Online:** Log into your account

Check certification status 24/7 on the ABO-NCLE website.
www.abo-ncle.org



We look forward to seeing everyone at the meeting on Wednesday, November 8, 2017



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Mission Statement
Certified Opticians Association of Texas provides educational opportunities to certified and non-certified eye care providers, promoting opticianry as a Texas healthcare profession.

COAT is always looking for your valuable suggestions, questions, comments, ideas, thoughts, etc.,

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