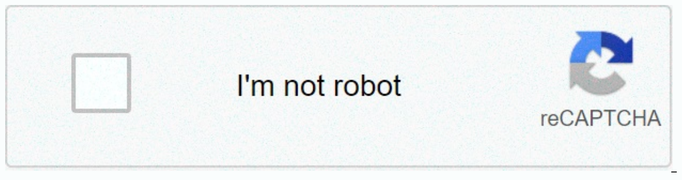


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# Silver mirror contact lenses

Before we start talking specifically about contacts, let's review how vision works and how lenses correct refractive vision problems. If you've already read How vision works and how refractive vision works you may want to jump to the next section. For people with normal vision, rays of light enter the cornea at the front of the eye and focus on a single point of the retina at the back of the eye. Once it hits the retina, the light becomes signals, which go to the brain to be processed into images. Sometimes the cornea does not focus light precisely on the retina due to a refractive error. The contact lens is refracted, or bends the light, so it focuses properly on the retina. Its shape is based on the type of vision problem to be corrected. When the lens bends the light, or its strength, it is expressed in dioptera. The higher the diopter, the stronger the lens. If the eyeball is too long, causing it to focus the rays of light in front of the retina, the result is myopia, or myopia. People with myopia can clearly see up close, but their distance vision is blurred. To correct myopia, the contact lens is thinner in the center than at the edges. These lenses are called less, or conced. It spread light away from the center of the lens and move the focal point of light forward, so that it reaches the retina. Hyperopia, or myopia, occurs when the eyeball is too short, causing it to focus the rays of light behind the retina. People with hyperopia can clearly see away, but their close-up vision is blurred. To correct hyperopia, the lens is thicker in the center and thinner at the edges. These lenses are called plus, or convex. The lens bends the light towards the center and moves the focal point backwards so that the light focuses, rather than behind, on the retina. An irregularly shaped cornea causes light to focus at various points, distorting vision. This is called astigmatism. To correct astigmatism, the lens is specifically designed to the correcting needs of the individual. While the lenses used to correct myopia and hyperopia are spherical (power correction is the same throughout the lens) astigmatism requires a special lens, called a toric lens. Toric contact lenses are made of the same materials as spherical lenses, but have different angular curvatures to correct vision specifically for each individual. Toric lenses can be thicker in certain parts of the lens and thinner elsewhere. They have two powers: one to correct astigmatism, and the other to correct it by myopia or hyperopia, if necessary. They are also weighted more along the bottom or have thin edges along the top and bottom to keep them fixed in a position in the eye. With presbyopia, the eye loses its ability to accommodate from close range to a lot of focus. This often happens as people get older. Since presbyopia requires a close and distant correction, distant, With this error special bifocal or multifocal lenses are often required: A concentric bifocal lens has the close correction in a small circle in the center of the lens, and the correction of distance in the outer lens around it (alternatively, the distance correction can be placed in the center of the lens and correction close to the outside of the lens). A translated lens mimics bifocal glasses. The lens is divided, with the distance correction at the top and correction near the bottom. An aspherical lens places both near and far correction near the center of the lens. Some people with presbyopia may need a technique called monovision. Use the dominant eye for distance vision, and the other eye for close vision. Each eye is equipped with a different lens suitable for correcting the necessary vision. In the next section, we'll see the different types of contact lenses available. Ad Home Conditions Eye Conditions, A-Z Generally, scleral contact lenses provide the best fit, comfort and eye acuity for someone with keratoconocono. Scleral contacts are larger in diameter than conventional gas permeable contact lenses (GP), allowing them to hover over even relatively large areas of distorted cornea, eliminating much of irregular astigmatism and other refractive errors caused by keratoconus. In addition, when properly equipped, scleral contacts provide a more stable fit and are less likely to be evicted from the eye during sport and other activities. (They fit more surely under the eyelids because of their larger size.) However, the best type of contact lens for keratoconocon may vary from person to person. In some cases, conventional GP contacts may be a better option, especially if users have difficulty applying and removing larger scleral lenses. Hybrid contact lenses –lenses that have a rigid central area of permeable gas, surrounded by an outdoor area made of silicone hydrogel contact lens material- are another good option for mild to moderate keratoconus. There are even custom soft contact lenses designed to correct keratocon astigmatism. The first step in determining the best contact lenses if you have keratoconus is to schedule a full eye examination and contact lens evaluation with an eye doctor specializing in contact lenses. Page updated February 2018 Need new contact lenses? Maybe you're having a hard time seeing, your contacts don't feel as comfortable as you used to or it feels as if your eyes are dry. If you are experiencing any of the above – especially if you are having trouble - You should see your eye doctor. You may need a new recipe or a different type of contact lenses suited to your specific needs. DO YOU NEED TO SEE AN EYE DOCTOR? Find an eye doctor near you to check your contact and vision lenses. What are my signs are the lenses worn? You may need to replace your contacts ahead of schedule if your lenses irritate your eyes, look dirty due to protein and other deposits, or are ripped or torn. A tear can be so small that you don't see it, so pay attention if you feel like you have something in your eyes after inserting your contacts. SEE RELATED: Contact lenses: A guide for first-time users. How often should contact lenses be replaced? Smooth contact replacement schedule depends on the type and brand you are carrying. Soft contact lenses may need to be replaced daily, weekly or monthly. Most people buy soft single-use contact lenses. Instead, gas permeable contact lenses, often called hard contacts, can last for years with proper care. How do I know when to change my contact lenses? Talk to your eye doctor if you think it may be time to switch to a different prescription force, type of lens or brand. Your doctor can help you make a decision based on your needs. Here are some of the reasons why you may need new contacts: the contact lens prescription has changed to a different power. Every time your recipe changes, you'll need to get rid of your old contacts and buy new ones in your new prescription force. You have presbyopia or astigmatism. If you are over 40 and have developed presbyopia — difficulty focusing on age — you may need multifocal contact lenses. There are also several types of contact lenses for astigmatism - a refractive error caused by the shape of the cornea. You're experiencing dry eye or other problems. If you are suffering from dry eye - a common complaint among contact users - you may need to switch to contact lenses for dry eyes. You have an older style of soft contacts. If you've been using the same brand of contact lenses for many years, it may be wise to switch to modern silicone hydrogel contacts that allow more oxygen to reach your eyes and reduce the risk of red eyes, corneal swelling and eye discomfort. You want to switch to a different type of contact lenses. If you're not satisfied with the accuracy of your vision, or don't like single-use lenses, you may want to switch to permeable gas contacts. Do contact lenses lose strength when they get older? Contact lenses do not lose strength. However, you might notice that you don't see that well through contacts when it's almost time to replace them. Over time, lenses can be coated with protein and other deposits that make your vision appear blurred. Replace lenses use for a fresh pair or consider switching to daily one-time contacts so you can appear in a cool pair every day. How do you know when your contacts have expired? The contact lenses are stamped with an expiration date that is usually about four years after the month in which they were manufactured. Look at the date stamped on the box or in the blister pack contains the individual lens. You should see the letters EXP followed by a date. For example, an expiration date of January 2024 would read EXP 2024/01 or EXP 01/2024.What should I do with expired contact lenses? Never have expired contacts. Throw or recycle your old lenses. The Bausch + Lomb ONE by ONE recycling program allows you to recycle the contacts used or expired and their packaging. SEE RELATED: Don't wash old contacts. Recycle them. Can new contact lenses cause headaches? New contacts should not cause headaches. Your lenses should feel comfortable in your eyes. If you experience headaches after starting to use contacts, contact your eye doctor. Contact lenses can cause headaches if you have the wrong prescription, if the lenses fit badly or if they are causing dry eyes. Other causes of headaches include eye strain working long hours in the computer, allergies or a sinus infection. IS IT TIME FOR NEW CONTACTS? Find an optical store near you or online to reorder lenses or switch to a new brand or type of lenses. Page updated January 2020 Home Contact Lenses Contacts vs. Glasses If you decide to wear glasses or contact lenses for vision correction depends primarily on personal preferences. Lifestyle, comfort, comfort, budget and aesthetics should take into account your decision-making process. Before deciding between contacts and glasses, keep in mind that one is not necessarily better than the other; each has its pros and cons in terms of vision, ease of use and eye health. Glasses offer many advantages over contact lenses. They require very little cleaning and maintenance, you don't need to touch your eyes to wear them (decreasing your risk of eye infections), and glasses are cheaper than long-term contact lenses because they don't need to be replaced as often. In addition, glasses can do something that contact lenses cannot - they can adjust the amount of light that comes into the eye for optimal comfort and vision. Specifically, photochromic lenses are clear inside and at night, and automatically darken in sunlight for clear and comfortable vision in any light. Although some contact lenses may block some UV light from entering the eye, photochromic eye lenses block 100% UV and protect not only the inside of the UV eye, but also the outside of the eye and eyelids. Glasses can also act as an extension of your personality and make a great fashion statement! That said, contact lenses have many advantages over glasses. Contacts sit down in the eye, so that vision, particularly peripheral vision, is not structured. You can participate in sports and outdoor activities without fear of glasses along the way, falling or breaking. You can even change the color of your eyes with colored contact lenses. So they are better for your particular particular needs lifestyle - glasses or contacts? Here's a breakdown of the advantages and disadvantages of each type of glasses to help you choose. Contact lenses Pros and Cons Contacts fit the curvature of the eye, providing a wider field of view and causing fewer distortions and obstructions of vision than glasses. Contact lenses will not get in the way when practicing sport and exercising. The contact lenses will not collide with what you're wearing. Contacts are not normally affected by weather conditions and are not ensanated in cold weather like glasses. If you want to see how it would look with a different eye color, you can experiment with colored contact lenses. You can even buy special effect contacts to match your Halloween costume or costumes! Some contact lenses can reshape the cornea while you sleep. Nocturnal orthokeratology (Ortho-k) temporarily corrects myopia, so it can be clearly seen the next day without the need for glasses or contacts. Some people have trouble applying a contact lens to the eyes (but the right technique and practice should rectify this in most cases). Contacts reduce the amount of oxygen that reaches the eye and can cause or increase the severity of dry eye syndrome. If you work in a computer often, wearing contact lenses will likely contribute to the symptoms of computer vision syndrome. Contacts require proper care of the lens and cleaning lens cases every day, to prevent potentially serious eye infections. If you can't commit to the recommended attention and replacement cycle of your contacts, consider daily downloads. If you accidentally fall asleep while wearing daily wear contacts, your eyes are usually dry, gritty, red and irritated when you wake up. If you find yourself sleeping frequently with contacts, consider extended wear contact lenses - some extended wear contacts are approved for up to 30 days of continuous wear. Eyeglasses Pros and Cons Wearing glasses reduces the need to touch the eyes, which in turn reduces the likelihood of irritating the eyes or developing an eye infection. If you have dry or sensitive eyes, the glasses will not exacerbate the problem as contact lenses can. Glasses are generally cheaper than long-term contact lenses. You don't need to replace your glasses as often (unless you break them!) and if your prescription changes over time, you may be able to keep your current frames and just replace the lenses. The frames are fashionable and can speak volumes about your personality and style – the look of your glasses can make a bold statement. The glasses offer a certain environmental factors such as wind, dust and debris. Eyeglasses sit about 12mm (about half an inch) from the eyes, so peripheral vision can be distorted. Many people also report difficulty focusing on objects and blurred vision when they start wearing glasses or changing recipes. Some people don't like how they look and feeling it undermines its facial aesthetics or hides its characteristics. If you have a strong recipe, the edges of your lenses can be thick and unattractive or your glasses can make your eyes look unnaturally minified or magnified. Glasses can be affected by the elements: their vision can be obstructed or blurred by the collection of rainfall on their lenses or when darkened in cold weather. Some frames can exert constant pressure on the nose and behind the ears, leading to headaches and general discomfort. Contact lenses, glasses... Or both? Thanks to advances in contact lens technology, most people these days can use contacts successfully, even if they prefer to wear glasses as their primary form of vision correction. So the decision to wear contacts or glasses - and when to wear them - is usually a matter of personal preference. Note, however, that if you wear full-time contact lenses, you should also have a pair of updated glasses – in case you have to stop wearing contacts due to an eye infection or irritation, or simply want to give your eyes a break. BUY CONTACTS OR GLASSES? Find a glasses shop near you. Page updated July 2020 2020