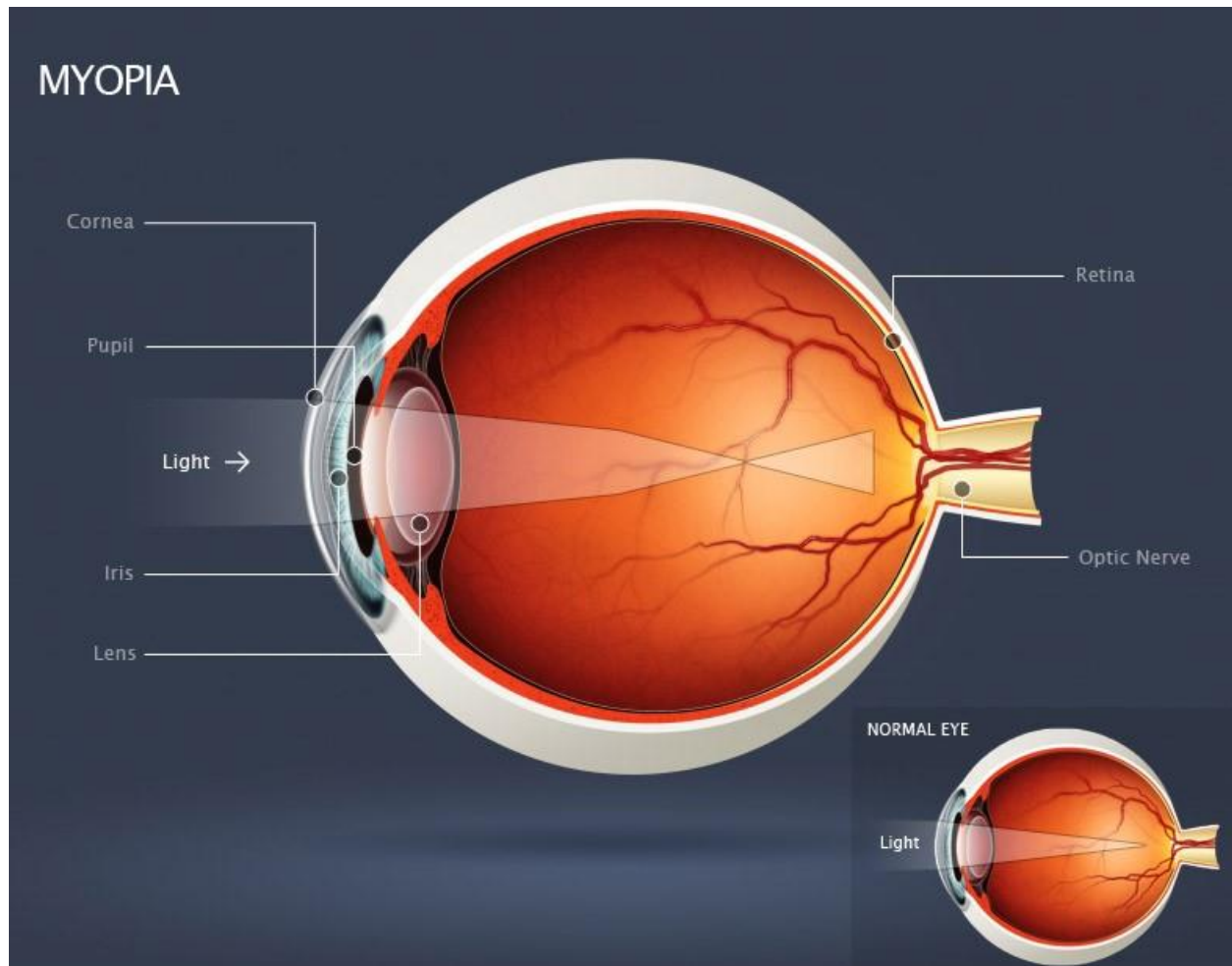


Progressive (High) Myopia

Myopia (“near-sightedness”) is a condition in which the optical system of the eye causes incoming light rays to focus in front of the retina, instead of focusing directly on the retinal surface. Various factors can cause this abnormal focus of light rays, including abnormalities of the lens or cornea, or by an eye that is abnormally long. Myopia is treated with glasses in younger children or, in some cases, contact lenses. Refractive surgery, such as Lasik, is generally reserved for adults except for certain limited studies in children less than 18 years of age.





High myopia, also called pathologic myopia is generally defined as near-sightedness of -6.00 diopters or greater or an axial length >26.5 mm. High myopia generally begins in early childhood, and continued growth of the eye often means that the corrective lens prescription required to allow proper focus may not stabilize until the early adult years.

The prevalence of high myopia has been increasing over the last several decades. Because more people are developing high myopia, various methods of attempting to slow its progression have been developed. Low dose atropine has been shown to effectively slow myopia progression and axial length elongation. Orthokeratology (is when a contact lenses worn over night to change the shape of the CTL) is controversial. Other options include progressive lenses, multifocal contact lenses or bifocals. Lastly, outdoor activity and limiting screen time is known to help reduce myopic progression.

It is important for patients with high myopia to receive regular dilated eye exams, since this condition is associated with an increased lifetime risk of retinal holes or tears, which can lead to retinal detachment. Other associated risks can include abnormal blood vessel growth beneath the retina, and changes in the vitreous cavity within the center of the eye.

Resources

[Myopia \(Nearsightedness\) in Children](#)

Added 04/2021