

Homeward Bound

The future of educating patients.

BY SHAREEF MAHDAVI



When we look closely at the factors that influence the demand for eye care services, we tend to focus on the content of what is being offered (eg, description of a procedure or type of prescription, discussion of outcomes, and costs). We could classify the content as the *what*

part of the communication process with patients. The method of counseling patients rarely includes the *how* component; we tend to consider our methods of communication only as an afterthought. Ten years ago, Steven Sopher, OD, set out to change the way patients get introduced to the revolutionary treatments offered by eye care providers. Frustrated by the eye model he had long used to educate patients (which one day fell and scattered all over the examination room's floor), Dr. Sopher sought to create video-based animations that could tell the story better and easier than he could. What resulted is Eyemaginations, Inc. (Towson, MD), and more than 9,000 practices are currently using its 3D-Eye Office software suite to improve the educational process during office visits.

Recently, Eyemaginations released a new product that I believe redefines how we influence patients' behavior before and after office visits. 3D-Eye Home is part of a long-term trend of decentralizing patients' medical experience by moving educational events/encounters from the doctor's office to their homes. This trend is evident across medical specialties, as exemplified by diagnostics like home testing of blood glucose levels.

3D-Eye Home may be shared as a CD-ROM or via an e-mail message to the patient from his doctor's practice. The CD-ROM does not itself contain the narrated topics, but it allows patients to access animations by calling up an Internet connection automatically. The CD-ROM's jacket serves as a type of prescription pad (Figure 1). The physician or staff can recommend animated narratives by checking off the topics. The e-mail tool allows the practice to send a fully customized letter as well as links to specific animations that are similar to what appears on the CD-ROM. The media's narratives include information about recommended procedures. The system contains more than 50 narrated topics that

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range from conditions (eg, glaucoma, cataracts) to treatments (eg, premium IOL implantation, blepharoplasty) to spectacle and contact lens options. This system streamlines your educational process by effectively combining dozens of paper brochures into a single asset. The animations are included on what appears to patients to be the doctor's educational hub. 3D-Eye Home benefits practices by improving their ability to connect meaningfully with patients before and after office visits and to take the traditional doctor/patient relationship to a higher level.

There is a bigger picture, however, that is worth reviewing to understand just how large an impact this home-based technology is going to have on the ophthalmic profession with the potential to take the traditional doctor patient relationship to a much higher level.



Figure 1. The cover of the 3D-Eye Home CD-ROM is used like a prescription pad.

(Courtesy of Eyemaginations, Inc.)

COMMUNICATION

Patients want and need their eye doctor to listen to them. They desire an effective exchange of information about their ocular conditions and available treatments. Much of the doctor/patient relationship gets bogged down and suffers because of poor communication skills on the part of the doctor and/or staff. One problem is that patients often find contemporary medical technology confusing. Insufficient, rushed explanations and demonstrations leave patients perplexed and damage their relationship with the doctor.

With the 3D-Eye Home system, a physician's staff can send customized e-mail messages to patients before their appointments. Presented with a list of specific topics to review, patients can click on the link provided. They may learn at their own pace and even repeat the animations, if desired.

COMPLIANCE AND CONSISTENCY

Doctors want and need patients to comply with prescribed therapy. Research on how people learn shows that individuals gain knowledge differently. 3D-Eye Home can convey complex information using visual and auditory stimuli, which are more engaging than a paper brochure. The result, I believe, is a more highly motivated patient who better understands what the doctor wants to happen and is more willing to participate in the process. An ongoing measurement of viewership by the company indicates that 89% of the e-mail messages sent from doctors to patients using the 3D-Eye Home are opened, which should ultimately lead to improved education and compliance on the part of patients. Similarly, every practice struggles to ensure that staff members educate patients in a consistent manner. The 3D-Eye Home platform helps to ensure that all patients receive high-quality education.

CUSTOMIZATION

Customizing a practice's services to the personal needs of patients automatically improves their experience. 3D-Eye Home personalizes education in a way that printed brochures cannot. In addition, the Web site where patients view animations includes an "about the doctor" link, which lists contact information for the practice (including photographs of the doctor and staff). This branding reinforces the idea that the narratives are coming directly from the physician.

CONFIDENCE

I have long maintained that, when patients research refractive surgery, they want to be convinced that the procedure and the practice are right for them. Part of the formula is to offer educational assets that are as high tech as the procedure's technology and as impressive as the poten-

SNEAK PEAK
<p>In early 2009, Eyemaginations, Inc. (Towson, MD), will offer an upgrade that will make its 3D-Eye Office even easier to use. Internally called Office 5.0, the new platform has a touch-screen interface that will greatly reduce users' need to scroll and click with a mouse—a blessing to those who find it difficult to operate a mouse in the middle of a consultation.</p>

tial postoperative outcome. The saying *everything communicates* applies to all aspects of the practice. 3D-Eye Home's animations made me confident enough to allow my 12-year-old daughter to get contact lenses. The two video segments we watched together enabled me to be sure that she understood what her role is in caring for her eyesight. I am positive this software will reduce patients' fears about LASIK and IOL-based refractive surgery and will improve conversion rates. The CD-ROMs and e-mail messages strengthen the impression that the surgeon and staff understand patients' fears and that the practice is the right place to overcome them.

COST

The cost of brochures can really add up over the course of the year. A practice seeing 200 patients a week can easily spend \$7,000 to \$10,000 per year on brochures that typically cost \$0.50 to \$1.00 apiece. That figure does not take into account shipping, inventory, and the waste cycle created. 3D-Eye Home cuts down on paper and costs less, \$250 per year plus \$0.60 per disc after the first few hundred. E-mail messages are free of charge.

HOW WELL DOES IT WORK?

Eyemaginations conducted a 3-month trial involving 500 practices to see how well 3D-Eye Home works (data on file with Eyemaginations, Inc.). The company found that patients spent an average of 12 minutes interacting with the software (this is considered nearly an eternity by Web site designers) and typically watched three narrative topics, nearly double the number that had been prescribed on average. More than four of every 10 patients clicked on additional links to learn more about a doctor's practice.

Some big-name ophthalmic practices have re-engineered their patient education process to base it around the 3D-Eye Home platform. Because it saves the doctor and staff precious minutes during most patient encounters, the benefits are nearly instantaneous. Anecdotal reports are also verifying what was once said by clothing retailer Sy Syms: "An educated consumer is our best customer." Patients who are candidates for premium IOLs and who are watching the specific animations are reportedly much more interested in

TODAY'S PRACTICE

receiving these lenses. This puts “prep the patient for surgery” in a whole new light; practices can now use these animations to help prepare patients emotionally earlier in the decision making process—a benefit to both the patient and the practice.

As more practices begin adopting 3D-Eye Home, I believe ophthalmic surgeons will begin using the software to improve their connection with tertiary specialists (eg, retina) as well as primary care referral patients from optometrists. Similarly, the tool will become a novel version of word of mouth to help patients communicate with friends and family.

THE BUSINESS MODEL

Just as revolutionary as this tool is the business model behind it. The main funding for 3D-Eye Home comes from the manufacturers that sponsor the content. They pay for the privilege of having their product and/or company's name featured with a link that patients can click to view the company's Web site and, in many cases, download coupons for discounts on products (eg, over-the-counter dry eye lubricant). This model of sponsor-supported messages with

links is well accepted on the Internet, and it avoids financially burdening either the physician or the consumer. Company executives estimate that it would cost anywhere from \$3,000 to \$7,000 per year if the practice had to cover the expense.

SUMMARY

The 3D-Eye Home platform addresses one of the key sticking points in medicine: the communication gap between doctors and patients that results in lower compliance. Practices do not need to use 3D-Eye Office to use 3D-Eye Home. Providing better communication at a lower cost is a key step to building demand for many of the new diagnostic and therapeutic tools available to the modern eye care practice. ■

Shareef Mahdavi is President of SM2 Strategic, a Pleasanton, California, firm helping medical manufacturers and providers create demand for new technologies. Mr. Mahdavi is a member of the National Advisory Board for Eyemaginations, Inc. Mr. Mahdavi may be reached at (925) 425-9900; shareef@sm2strategic.com.