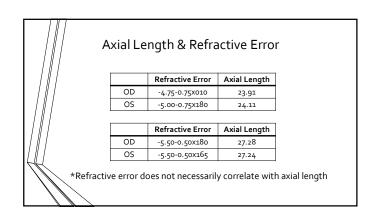
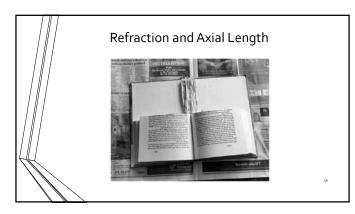
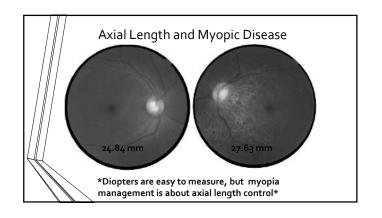
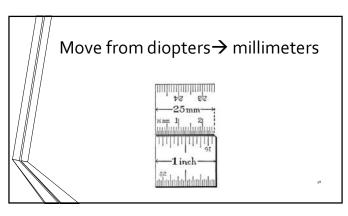


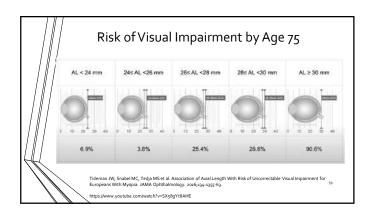
1 11 1		Axial Length Norms*					
	Age	Girls	Boys	European	Chinese		
	6- 7 yo	22.75 mm	23.05 mm	22.33 mm	22.77 mm		
	8-9 yo	23.29 mm	23.65 mm	23.05 mm	24.02 mm		
//	10-11 yo	23.76 mm	24.09 mm	-	-		
	12-14 yo	23.80 mm	24.25 mm	23.40 mm	24.69 mm		
∠ co	aution must b nfounding fac , gender and r	tors affect t	hese norms				

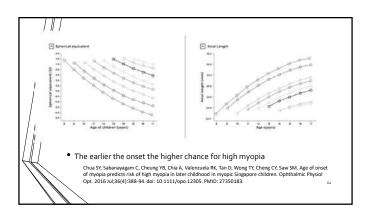


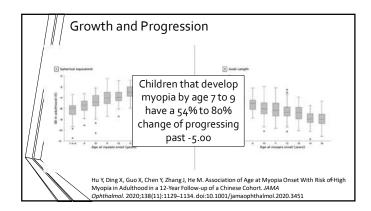


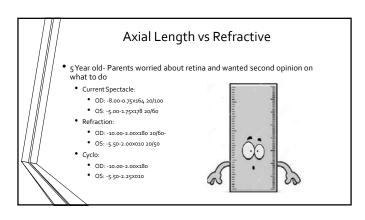


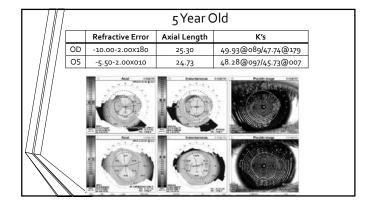


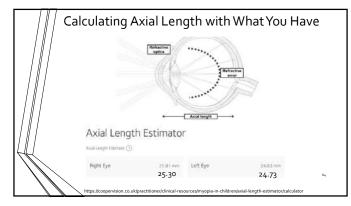


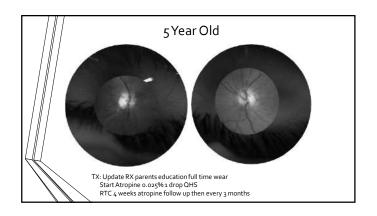


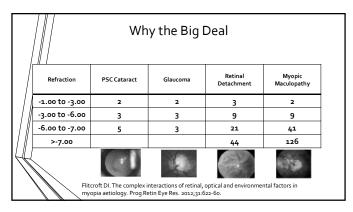


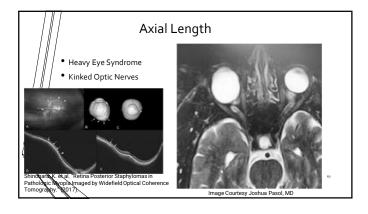


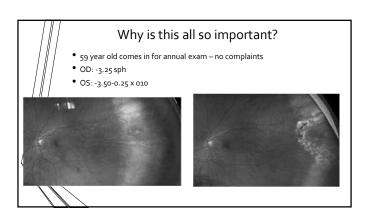


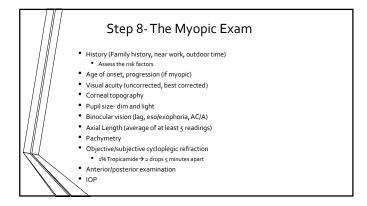


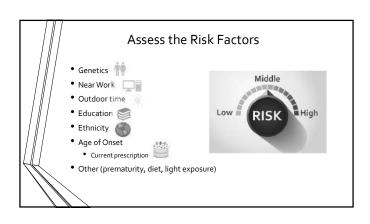


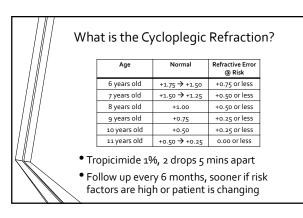


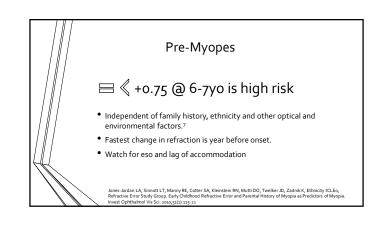


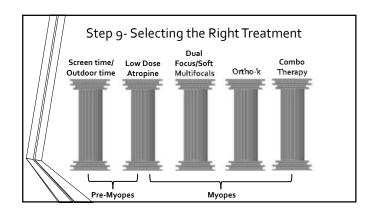


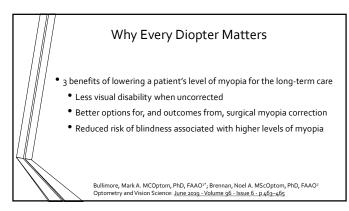












Present the options to the parent and child and decide together what is best Set realistic expectations for treatment Atropine, MF contacts, Ortho-k all have around 50%-70% efficacy **depending on studies** Children will still likely progress depending on age of onset Which ever method you choose you are providing evidence based myopia treatment Atropine should be reserved for younger children and contacts lenses should be fit as soon as patient and parent are ready to help slow progression even more Dual treatments are becoming more common

