Fact and Fantasy in Advertising

Among the many functions of a professional journal is the conveying of product information from manufacturers who use the journal for advertising to their prospective clients, namely the practitioners of that discipline. The tenor of such ads should be appropriate for the nature of the product and the professional reader.

In recent months there have appeared in many optometric journals a number of advertisements, particularly those concerned with auto-refractors, which lack good taste and seem to be talking down to optometrists, the possible purchasers of these instruments. These advertisements appear to have overlooked the fact that optometrists are educated, sophisticated professionals well able to make discriminating judgements on the clinical value of these electronic devices.

The format and approach seem more like the efforts of Madison Avenue executives addressing unsophisticated lay people rather than scientific consultants and engineers discussing highly technical instruments with knowledgeable and responsible professionals.

There appears to be a discrepancy between the stated objective of better vision care and the claims of reduced examination time, greater time to spend with a patient and increased patient load. What are the implications of such statements?

A practitioner will consider the purchase of an auto-refractor once his practice has reached a certain level and he expects the instrument will help relieve the pressure. Suppose an 8 hour day of which seven hours are allotted to clinical work and, to be fully employed, one patient per 30 minutes, or 14 patients per day. Any increase in patient load means less time spent with each patient. Fifteen patients means 28 minutes per patient; 20 patients means 22 minutes per patient.

What then would be a reasonable increase in patient load made possible by the acquisition of an auto-refractor? Can the use of such an auto-refractor so enhance the efficiency and productivity of a fully booked practitioner that a 20%, a 40%, a 50% or even a 75% increase is possible and still allow the maintenance of adequate professional quality vision care? For example, 40 patients a day means only 11 minutes per patient for a 7 hour day devoted to clinical practice.

Can this type of reduced patient time be described as “better care”? What kind of visual analysis can be given in eleven minutes? Moreover, by no stretch of the imagination can the practitioner spend more time with each patient.

Refractors are but sophisticated retinoscopes. The only time saved, if the procedure is performed by para-optometric personnel, will be the 3 or 4 minutes required to carry out a retinoscopy. Surely it is apparent that the double claim that auto-refractors save time and permit practitioners to spend more time with each patient, or to see more patients, are mutually exclusive. If the practitioner utilises this “saved time” counselling the patient or performing other tests, he does not save any time so he cannot see more patients. But he will create an environment conducive to better care. If he accumulates this “saved time”, he may be able to see more patients. He does not, however, spend more time with each patient but less, nor does he create an atmosphere for better care in a rush-rush situation.

Professional optometric standards demand that a thorough visual examination and analysis include investigation of eye health and mobility, refractive state, accommodation, binocular integrity, muscle balance and other sensory-motor functions. Can one explain how, by substituting a refractor for a retinoscope, the above routine can be significantly reduced in time? To claim otherwise is demeaning of optometric care for the implication is that a “quickie subjective exam” is the usual optometric standard of quality vision care!

Advertisers, in preparing their texts, should be more cognizant that optometrists are professionally educated people, fully capable of discriminating fact from fantasy in advertising. Ads in professional journals should be on the same intellectual plane as that of the people to whom they are directed.

G.M.B.

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