

May 26, 2022

Dear Optometry Technical Review Committee Members,

Hello, my name is Richard Kant, and I practice optometry in York and Central City, Nebraska. Between the two practice locations, my partners and I have a little over 1,300 patients that have been diagnosed with glaucoma, ocular hypertension, or being followed as a glaucoma suspect. Many of these individuals are using therapeutic drops to manage their diagnoses. However, as technology continues to advance, newer treatments that are simpler, less confusing and more efficient are available as first-line defenses for our rural Nebraskans. As a practitioner, I would love to bring these treatment options to my fellow rural Nebraskans and am writing to you today in hopes of progressing the care optometrists can provide to the individuals we help serve every day.

The treatment option of Selective Laser Trabeculoplasty (SLT) is a first-line treatment for glaucoma and ocular hypertension, and many of our patients would benefit from this form of treatment. In the selective laser trabeculoplasty versus eye drops for first-line treatment of ocular hypertension and glaucoma (LiGHT) study funded by the National Institute for Health Research and the Health and Technology Assessment Programme, it was determined that SLT should be offered as a first-line treatment for open angle glaucoma and ocular hypertension, and supports a change in clinical practice due to the laser treatment being more effective in controlling glaucoma and being more cost effective over time compared to eye drops.

These are patients that are seen in our office two to four times a year. As such, we have a long-term relationship with them. Many are elderly and complications of travel to the large cities in this state are difficult to arrange. It is important they have as much care in our office setting as possible.

Thank you,

Richard L. Kant. O.D.

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