



Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: https://reachmd.com/programs/eye-on-ocular-health/phentolamine-ophthalmic-solution-for-reversing-pharmacologically-induced-mydriasis/15508/

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Phentolamine Ophthalmic Solution for Reversing Pharmacologically Induced Mydriasis

Announcer:

You're listening to Eye on Ocular Health on ReachMD, and this episode is part of our "Clinical Minute" series. Here's your host, Dr. Neda Shamie.

Dr. Shamie:

In this "Clinical Minute", we'll be discussing a phase 3 multicenter, randomized, placebo-controlled, double-masked clinical trial that evaluated the safety and efficacy of 0.75% phentolamine ophthalmic solution for the reversal of pharmacological-induced mydriasis. Dr. Jay Pepose is here to discuss the findings of the MIRA-2 study.

Jay, thank you so much for being here and discussing this fantastic study with us. I would love to hear your thoughts, just pearls on how this can apply to our clinical practice.

Dr. Pepose:

Well, thank you, Neda. So there's over 100 million dilated examinations performed in the U.S. per year. And we all know that these patients just dread being dilated. They have the photophobia, loss of accommodation, glare, problems driving home. And so, we are all looking to see can there be some reversal of pharmacologically-induced mydriasis? And so, in this study, we tested phentolamine, an alpha-1 inhibitor, and we found that within 60 minutes, we had statistically significant differences in return of pupil to within 0.2 millimeters of baseline. And it's interesting that at 90 minutes, which was the primary endpoint, there were more patients who had returned than in the control group at 6 hours. So there's at least a 4-hour savings with this drop.

Dr. Shamie:

Well, that's fantastic, especially given, as you said, all the exams being done, patients' discomfort, and safety driving home for example. This is a great addition to our clinical practices, and I look forward to using it when we can.

Announcer:

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