Recent estimates suggest that up to half of contact lens wearers experience contact lens discomfort (CLD) with considerable frequency. This condition impacts millions of contact lens wearers worldwide; however, to date, there has been a paucity of consensus and standardization in the scientific and clinical communities on the characterization of the condition, including the definition, classification, epidemiology, pathophysiology, diagnosis, management, influence of contact lens materials, designs and care, and the proper design of clinical trials. The Tear Film & Ocular Surface Society (TFOS), a nonprofit organization, has recently completed and published the TFOS International Workshop on Contact Lens Discomfort in IOVS (http://www.iovs.org/content/54/11.toc). The process of conducting the workshop began in January 2012—a process that took approximately 18 months to complete and included 79 experts in the field. These experts participated in one or more topical subcommittees, and were assigned with taking an evidence-based approach at evaluating CLD. Eight topical subcommittees were formed, with each generating a related report, all of which were circulated for presentation, review, and input of the entire workshop membership. The entire workshop is published in English, with subsequent translations into numerous other languages in progress. All of this information is intended to be available and accessible online, free of charge. The Executive Summary is intended to serve as a summary of the eight subcommittee reports, and all information contained in the Executive Summary was abstracted from the full reports. This presentation will review the workshop process, in addition to summarize key findings.
LEARNING OBJECTIVES:
1. To discuss recent activity in global thinking on contact lens discomfort (CLD), including the recent completion of the Tear Film and Ocular Surface Society’s (TFOS) International Workshop on CLD.
2. To review concepts of definition and classification of CLD.
3. To review the epidemiology of CLD, including past and recent studies on patient-reported symptoms and risk factors for CLD;
4. To review the ideas regarding factors that influence CLD, including material, design and care solution factors.
5. To review the ocular surface tissues and glands thought to be associated with CLD, in addition to tear film factors that may or may not contribute to CLD.
6. To provide a comprehensive framework, based upon the consensus-based workshop results, of the optimal management and therapy of patients with CLD

I. To review the process of the TFOS International Workshop on CLD.
   A. Historical look at other workshops—the TFOS Dry Eye Workshop (DEWS) and Meibomian Gland Dysfunction Workshop.
   B. Process, objectives and timelines for current CLDW.

II. What is “Contact Lens Discomfort?”
   A. Review of terminology, including that associated with the TFOS CLD Workshop.
   B. Outline of the current definition of CLD.
   C. Review of the current classification scheme for CLD.

III. Epidemiology of CLD
   A. Prevalence: Signs or Symptoms or Both?
   B. Is it really dry eye?
   C. Factors associated with contact lens discomfort.
   D. Prognosis

IV. Contact Lens Contributions to CLD
   A. Materials and material characteristics
   B. Contact lens design and fitting considerations
   C. Contact lens wear schedule/habits
   D. Contact lens care and packaging solutions
   E. Contact lens care regimens
V. Impact of the ocular surface and glands
   A. Corneal considerations
   B. Conjunctival considerations
   C. Tear film glands
      1. Lacrimal glands
      2. Mucin secreting glands
      3. Meibomian glands
   D. Neurobiological considerations

VI. Tear Film considerations
   A. Normal tear film characteristics
   B. Tear film characteristics in contact lens wear
   C. Tear film chemistry changes in CLD

VII. Management and Therapy of CLD
   A. Establish the baseline contact lens and tear film status
   B. Get pre-existing ocular surface disease under control
   C. First stages in managing CLD
   D. Second steps? What’s the best step?