

# Tips on How to Select Children's Frames

When we have to select our child's glasses, there are several aspects to take into consideration so that the therapy will aid the visual defect.

First of all, one important clarification must be made: Children's facial cranial measurements are not reduced adult measurements, they are different. For example bridge projection (where the frame sits on the nose) is zero or negative in babies. Over time the negative projection turns to zero and then positive until they reach larger positive values (by thirteen years) as in adults. Other measurements and/or angles in babies follow the same patterns. Basic geometrical differences are considered in Miraflex designs.

After taking the geometrical considerations, the other considerations are materials, sizes, bridge, temples, keeping the frame centered on child's face, functionality, safety and style.

**MATERIALS:** for safety and comfort, for patients up to 5 or 6 years of age, we suggest frames that are pliable, free of metal parts, and for the older kids acetate, nylon, polyamide, or grilamid. While practicing sports, we suggest flexible frames that are free of metal parts.

**SIZE:** the frame should not limit the visual field, be proportional to the patient's face, not too small or too large. The eyes ought to be centered in both horizontal and vertical directions where the lens will be set. The frame should cover the eye brow.



A frame that is not centered may create a prismatic effect and this may enhance or diminish lens strength.

**BRIDGE:** 90 % of the glasses weight rests on the patients nose and therefore is essential to correctly distribute the weight.

For this reason it is vital to pick a frame with a bridge that is not too large to prevent the frame from sliding



down the nose or a bridge that is too small, otherwise the nose crest may be affected, and hinder nose development.

**TEMPLE:** the temple should not press the child's face with a correct length.



If it is too long the frame slides down the nose if it is too short the eye lashes are wiping the lens or fogging the lenses. Ideally the temples taper the curvature of the patient's ears without deforming the curves and never near 90 degrees.



**ELASTIC BAND:** kids are energetic and constantly moving and discovering. Whether playing, jumping, doing sports or just knocking around, kids are moving and we recommend an elastic band to keep the frame centered on the patients face and consequently snug to the patient's eyes.



This will help consistent correction while the patient is living an active life.

Concluding a frame must meet the following requirements:

**FUNCTIONAL:** glasses should not hinder a child's life style even while practicing sports.



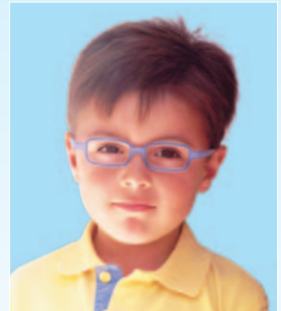
**SAFE:**

while rough housing, or in case of accidents, or simple falling, the frame should not add more risk or more trauma.

Safety for babies and young children is the most important feature to take into consideration by the parents. Frames made from various pieces, independently of the material, or with metal parts, are a risk for young patients.



**STYLES:** it is important that the young patient has some decision making power because he is the final user and must like the frame. It is important that they give opinion with the supervision of the optician. A well fitting frame and a happy patient is the correct combination so that the patient will use the glasses permanently and correctly with little resistance.



As a last note, we would like to remind you, that the glasses will not just "fix" a visual defect but help "develop" correct vision to live a whole life without any inconvenience.

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