Market Scope®

2024 Annual Cataract Sponsored Survey

Market Scope surveys United States cataract surgeons with an expanded list of questions during the first quarter of each year. Questions probe important issues regarding practice characteristics, product preferences, surgical techniques, and practice marketing. Our survey captures market share by manufacturer, product and market segment, and ophthalmologists' perceptions of companies.

- Revenue sources
- Referral sources
- Cataract surgery locations
- Procedure volume
- US IOL market share by model and category
- New technology IOLs
- Premium IOL use and plans
- Treatment of astigmatism
- IOL market share by ASC type
- Use of micro-incision techniques

- US Phaco machine market share
- Phaco purchasing plans
- Cross merchandising
- Market share for various single-use products
- Procedure pack use
- Plans for FLACS
- Plans for MIGS
- Marketing, patient fees, and pricing options
- Dry eye in cataract patients
- Practice plans for next 12 months

Sponsorship will provide an extensive understanding of industry dynamics, insights into leading trends, and reveal surgeons' opinions regarding products and treatments.

The sponsorship process is simple.

- Sponsors have the opportunity to review the survey in its entirety.
- Custom questions and edits may be submitted before March 22, 2024.
- Over 3,500 US cataract surgeons will be invited to participate online over a two-week period in April.
- Market Scope's analytics team will compile data and prepare a comprehensive report. Many questions include up to a four-year analysis to demonstrate trends over time.

Sponsors will receive a downloadable PDF version and Excel file (with enterprise license) by the end of May.

Two options for sponsorship, both billed upon delivery of the final report in May:

- Single-user license for \$9,500
- Enterprise license for \$15,000





of cataract patients with significant astigmatism receive toric IOL



of participants require reduced phaco energy in next gen phaco machine design



of surgical facilities have OR capacity to add stand-alone MIGS procedures