## Supplementary Results (online-only)

Table S1. Estimated unit costs in US\$, compiled from sources as referenced.
A) Australia

| Item | Expected cost (US\$) | Lowest likely cost (US\$) | Highest likely cost (US\$) |
| :---: | :---: | :---: | :---: |
| General ophthalmic examination costs |  |  |  |
| Comprehensive, general ophthalmic exam ${ }^{1}$ | \$47.14 | \$40.08 | \$56.46 |
| Brief ophthalmic exam; ${ }^{1}$ Low vision assessment; ${ }^{1}$ Children's vision assessment ${ }^{1}$ | \$23.61 | \$20.08 | \$28.23 |
| Contact lens fitting, prescription and delivery ${ }^{1}$ | \$117.01 | \$99.47 | \$141.14 |
| Optical correction costs |  |  |  |
| Single vision, stock, standard resin spectacle lenses (plano to -4D combined) ${ }^{2}$ | \$76.62 | \$65.66 | \$87.57 |
| Single vision, grind, standard resin spectacle lenses with basic antireflection coating (-4D to -6D combined) ${ }^{2}$ | \$132.83 | \$109.76 | \$155.90 |
| Single vision, grind, mid-index resin spectacle lenses with antireflection coating (-6D to -10D combined) ${ }^{2}$ | \$224.41 | \$203.28 | \$245.55 |
| Single vision, aspheric, high-index spectacle lenses with anti-reflection coating (-10D and stronger) ${ }^{2}$ | \$306.27 | \$219.75 | \$392.80 |
| Entry-level progressive addition lenses (-0.50D to -4D) ${ }^{2}$ | \$232.25 | \$180.41 | \$284.09 |
| Customised, free-form progressive addition lenses (-4D and stronger) ${ }^{2}$ | \$376.84 | \$265.44 | \$488.25 |
| Standard spectacle frames ${ }^{3}$ | \$48.16 | \$26.46 | \$69.86 |
| 6-month supply of single vision, regular replacement silicone hydrogel contact lenses (plano to -12D) ${ }^{2}$ | \$171.34 | \$145.48 | \$197.21 |
| 6-month supply of single vision, regular replacement silicone hydrogel contact lenses (-12D to -20D) ${ }^{2}$ | \$212.77 | \$173.19 | \$252.34 |
| Contact lens consumables (per quarter year of contact lens wear) | \$16.74 | \$13.02 | \$20.46 |
| Magnifier (low vision aid) ${ }^{3}$ | \$27.82 | \$15.44 | \$40.21 |
| Magnifier with illumination (low vision aid) ${ }^{3}$ | \$137.86 | \$101.74 | \$173.99 |
| Loupe (low vision aid) ${ }^{3}$ | \$82.57 | \$82.57 | \$82.57 |
| Telescope (low vision aid) ${ }^{3}$ | \$87.95 | \$42.34 | \$136.55 |
| Anti-myopia management costs |  |  |  |
| 1 bottle of low-dose atropine eye drops ${ }^{4}$ | \$21.52 | \$19.76 | \$23.29 |
| Executive bifocal spectacle lenses ${ }^{2}$ | \$211.71 | \$211.71 | \$211.71 |
| 6-month supply of daily disposable anti-myopia multifocal soft contact lenses (plano to -10D with various adds) ${ }^{2}$ | \$332.93 | \$219.66 | \$446.20 |
| Orthokeratology initial treatment fee (care and lenses for first year) ${ }^{5}$ | \$837.76 | \$739.92 | \$987.26 |
| Orthokeratology subsequent biennial treatment fee (care and lenses) ${ }^{5}$ | \$599.85 | \$493.99 | \$705.70 |


| Costs to manage myopia-related complications |  |  |  |
| :---: | :---: | :---: | :---: |
| Sub-specialty ophthalmic examination ${ }^{1}$ | \$112.91 | \$62.28 | \$137.61 |
| Brief sub-specialty ophthalmic exam ${ }^{1}$ | \$42.34 | \$31.30 | \$63.51 |
| Optical Coherence Tomography ${ }^{1}$ | \$63.51 | \$28.69 | \$84.68 |
| Computerized perimetry ${ }^{1}$ | \$63.51 | \$48.59 | \$84.68 |
| Retinal angiogram ${ }^{1}$ | \$108.96 | \$92.62 | \$176.43 |
| Ophthalmic surgery - lens extraction and insertion of intraocular lens ${ }^{1}$ | \$545.36 | \$486.51 | \$846.84 |
| Anaesthesia to support lens and implant surgery ${ }^{1}$ | \$70.92 | \$60.30 | \$119.97 |
| Laser capsulotomy (1 eye) ${ }^{1}$ | \$253.35 | \$215.34 | \$352.85 |
| Vitrectomy ${ }^{1}$ | \$959.65 | \$719.74 | \$1,411.40 |
| Anaesthesia to support vitrectomy ${ }^{1}$ | \$99.29 | \$84.40 | \$169.37 |
| Paracentesis of anterior or posterior chamber, or intravitreal injection ${ }^{1}$ | \$215.63 | \$183.31 | \$317.57 |
| Pneumatic retinopexy for retinal detachment ${ }^{1}$ | \$646.95 | \$588.10 | \$1,058.55 |
| Retinal photocoagulation ${ }^{1}$ | \$323.42 | \$274.94 | \$493.99 |
| Removal of vitreous substitute from vitreous cavity ${ }^{1}$ | \$452.95 | \$339.72 | \$677.47 |
| Anti-glaucoma eye drops (1 bottle latanoprost) ${ }^{6}$ | \$16.34 | \$16.34 | \$16.34 |
| Antibiotic eye drops (1 bottle of broad-spectrum standard) ${ }^{6}$ | \$15.30 | \$15.30 | \$15.30 |
| Steroid eye drops (1 bottle of dexamethasone) ${ }^{6}$ | \$15.06 | \$15.06 | \$15.06 |
| Anti-vascular endothelial growth factor intravitreal injection doses ( $1.65 \mathrm{mg} / 0.165 \mathrm{~mL}$ single injection of Ranibizumab) ${ }^{6}$ | \$764.70 | \$764.70 | \$802.53 |
| Related and productivity costs* |  |  |  |
| Travel cost per kilometre ${ }^{7}$ ( 5 km for general, 24 km for sub-specialty, and 50 km for orthokeratology care) ${ }^{8,9}$ | \$0.48 | \$0.48 | \$0.48 |
| Median hourly income of an employed adult ${ }^{10}$ | \$27.11 | \$17.23 | \$37.14 |

B) China (all costs from key informants, ${ }^{11,12}$ unless otherwise specified)

| Item | Expected cost (US\$) | Lowest likely cost (US\$) | Highest likely cost (US\$) |
| :---: | :---: | :---: | :---: |
| General ophthalmic examination costs |  |  |  |
| Comprehensive, general ophthalmic exam | \$15.58 | \$6.21 | \$24.95 |
| Brief ophthalmic exam; Low vision assessment; Children's vision assessment | \$7.89 | \$2.96 | \$12.82 |
| Contact lens fitting, prescription and delivery | \$49.19 | \$16.74 | \$81.63 |
| Optical correction costs |  |  |  |
| Single vision, stock, standard resin spectacle lenses (plano to -4D combined) | \$41.20 | \$18.95 | \$63.44 |
| Single vision, grind, standard resin spectacle lenses with basic antireflection coating (-4D to -6D combined) | \$94.38 | \$41.41 | \$147.34 |
| Single vision, grind, mid-index resin spectacle lenses with antireflection coating (-6D to -10D combined) | \$146.81 | \$87.49 | \$206.13 |
| Single vision, aspheric, high-index spectacle lenses with anti-reflection coating (-10D and stronger) | \$373.01 | \$201.41 | \$544.61 |
| Entry-level progressive addition lenses (-0.50D to -4D) | \$311.37 | \$183.02 | \$439.71 |
| Customised, free-form progressive addition lenses ( $\leq-4 \mathrm{D}$ )** | \$896.38 | \$425.10 | \$1,231.61 |
| Standard spectacle frames | \$35.95 | \$19.47 | \$74.15 |
| 6-month supply of single vision, regular replacement silicone hydrogel contact lenses (plano to -20D) | \$104.26 | \$91.55 | \$116.97 |
| Contact lens consumables | Includ | d with lenses in | China |
| Magnifier (low vision aid) | \$17.23 | \$16.17 | \$18.29 |
| Magnifier with illumination (low vision aid) | \$52.28 | \$1.50 | \$103.06 |
| Loupe (low vision aid) | \$10.79 | \$6.74 | \$14.83 |
| Telescope (low vision aid) | \$20.97 | \$19.47 | \$22.47 |
| Anti-myopia management costs |  |  |  |
| 1 bottle of low-dose atropine eye drops | \$1.50 | \$1.35 | \$1.65 |
| Average of executive bifocal, Miyosmart and Stellest spectacle lenses | \$571.50 | \$331.35 | \$811.65 |
| 6-month supply of daily disposable anti-myopia multifocal soft contact lenses (plano to -10D with various adds)** | \$314.50 | \$251.60 | \$377.40 |
| Orthokeratology initial treatment fee (care and lenses for first year) | \$1,225.99 | \$915.82 | \$1,536.17 |
| Orthokeratology subsequent biennial treatment fee (care and lenses) | \$1,623.87 | \$563.40 | \$2,684.34 |
| Costs to manage myopia-related complications |  |  |  |
| Sub-specialty ophthalmic examination | \$17.08 | \$7.71 | \$26.45 |
| Brief sub-specialty ophthalmic exam | \$9.39 | \$4.46 | \$14.31 |
| Optical Coherence Tomography | \$35.88 | \$34.75 | \$37.00 |
| Computerized perimetry | \$17.23 | \$14.98 | \$19.47 |
| Retinal angiogram | \$49.06 | \$26.96 | \$71.16 |
| Ophthalmic surgery - lens extraction and insertion of intraocular lens | \$441.92 | \$367.77 | \$516.07 |
| Anaesthesia to support lens and implant surgery | \$1.05 | \$0.94 | \$1.15 |


| Laser capsulotomy (1 eye) | \$250.17 | \$201.45 | \$298.90 |
| :---: | :---: | :---: | :---: |
| Vitrectomy | \$396.98 | \$259.27 | \$534.69 |
| Anaesthesia to support vitrectomy | \$77.90 | \$70.11 | \$85.69 |
| Paracentesis of anterior or posterior chamber, or intravitreal injection | \$1.50 | \$0.30 | \$2.70 |
| Pneumatic retinopexy for retinal detachment | \$299.61 | \$257.24 | \$341.98 |
| Retinal photocoagulation | \$374.51 | \$162.65 | \$586.36 |
| Removal of vitreous substitute from vitreous cavity | \$370.76 | \$259.54 | \$481.99 |
| Anti-glaucoma eye drops (1 bottle latanoprost) | \$32.21 | \$28.99 | \$35.43 |
| Antibiotic eye drops (1 bottle of broad-spectrum standard) | \$3.96 | \$3.56 | \$4.36 |
| Steroid eye drops (1 bottle of dexamethasone) | \$5.54 | \$4.99 | \$6.10 |
| Anti-vascular endothelial growth factor intravitreal injection doses ( $1.65 \mathrm{mg} / 0.165 \mathrm{~mL}$ single injection of Ranibizumab) | \$599.22 | \$569.25 | \$629.18 |
| Related and productivity costs* |  |  |  |
| Travel cost per kilometre ( 3 km for general, 6 km for sub-specialty care) | \$0.58 | \$0.00 | \$1.00 |
| Median hourly income of an employed adult ${ }^{13}$ | \$2.16 | \$1.10 | \$3.04 |

* Travel cost and median income of an employed adult were converted to related and productivity costs using the following estimates:
- Australian labour force participation rates were $66 \%$ for all ages to 70 years, reducing to 7\% for 70-79 year olds, and 2\% for 80+ year olds; ${ }^{14,15}$
- Chinese labour force participation rates were $75 \%$ for all ages to 70 years, reducing to $10 \%$ for $70-79$ year olds; ${ }^{14,16}$
- The employment rate was $94 \%$ in Australia and $96 \%$ in China; ${ }^{14,15}$
- We used World Health Organization disability weights - 0.089 for moderate vision impairment, 0.314 for severe vision impairment, and 0.338 for blindness. ${ }^{17}$
** Two Chinese costs were flagged as outliers following our methodology: anti-myopia multifocal soft contact lenses used in active myopia management (AMM) option 3 were originally estimated to be almost 4 times more expensive in China than Australia, and customized freeform progressive addition spectacle lenses used after 45 years of age for simultaneous correction of myopia and presbyopia were originally estimated to be over 5 times more expensive in China than Australia. Following our methodology, we consulted a wider array of key informants. We were advised that anti-myopia multifocal soft contact lenses were rarely used in mainland China, probably due to both supply and demand issues. We replaced this outlier cost from mainland Chinese hospital systems with the retail cost of Coopervision MiSight anti-myopia multifocal soft contact lenses in Hong Kong Special Autonomous Region, China, which was similar to the Australian cost. We were advised that mainland Chinese hospital systems also rarely use customized free-form progressive addition spectacle lenses for myopic presbyopes. In response we added recommended retail prices for mainland Chinese optical shops from industry sources to the mix of prices and removed the highest hospital price.

Figure S1. Spherical equivalent progression from a starting point of an 8-year-old with -0.75D in Australia (A) and China (B), consisting of evidence-based progression from 8 to 17 years of age, ${ }^{18-20}$ then exponential decay* from 18 to 24 years of age. $95 \%$ confidence intervals are shown shaded for TMM (traditional myopia management) but omitted for clarity from AMM (active myopia management) options. AMM1 = low-dose atropine; AMM2 = anti-myopia spectacles; AMM3 = antimyopia multifocal soft contact lenses; AMM4 = orthokeratology.
A)

B)


* Annual spherical equivalent progression (17-25 years of age) $=\mathrm{p}$ * $\operatorname{EXP}\left(-0.33^{*} y\right)$, where $p=$ the spherical equivalent progression of the 17-year-old, and $y=$ the number of years after 17 , up to a maximum of 7 (that is, at 24 years of age, the final year of progression).

Table S2. Myopia complications, protocols and vision impairment. (A) describes the complications and related protocols, while (B) and (C) provide estimates of vision impairment due to myopia in Australia and China respectively. MMD = myopic macular degeneration; POAG = primary open angle glaucoma; RRD = rhegmatogenous retinal detachment; MSVI = moderate and severe vision impairment.

## A) Myopia complications and related protocols

| When | While myopia-related complications are known to occur and to cause vision impairment in individuals younger than 55 years of age, ${ }^{21,22}$ population-level evidence suggests this is rare. ${ }^{23-28}$ As such, we have assumed the potential for widespread myopia-related complications to start at 55 years of age. The upper age limit was taken as the life expectancy in each country -83 years in Australia and 79 years in China. ${ }^{29}$ |
| :---: | :---: |
| MMD | Presence of MMD was taken as zero for a spherical equivalent >-1D then increased to $0.7 \%$ for $\leq$ $-1 D$ to $>-3 D, 3.0 \%$ for $\leq-3 D$ to $>-5 D, 11.4 \%$ for $\leq-5 D$ to $>-7 D, 28.6 \%$ for $\leq-7 D$ to $>-9 D$, and $52.4 \%$ for $\leq-9 D .^{23}$ The rate at which MMD needed treatment was taken as $0.1 \%$ when spherical equivalent > -5D, and $11.6 \%$ for $\leq-5 D .{ }^{28}$ MMD care followed evidence and accepted protocols. ${ }^{1,}$ 11, 30-34 |
| POAG | Myopia imparts increased risk for POAG. ${ }^{26,35}$ We represented the relative prevalence of POAG due to myopia as $0 \%$ for $>-1 D, 2.7 \%$ of people with $\leq-1 D$ to $>-3 D$, and $2.9 \%$ of people with $\leq-$ 3D. ${ }^{24}$ Glaucoma care followed evidence and accepted protocols. ${ }^{36,37}$ |
| RRD | Myopia imparts increased risk of vitreoretinal complications. ${ }^{26,35,38,39}$ Combining evidence on relative risk from myopia level, ${ }^{26,40}$ age and ethnicity, ${ }^{38,41-43}$ we estimated the relative chance of RRD occurring due to myopia between 55 and 83 years of age in Australia as $0 \%$ for > -3D, $0.09 \%$ for $\leq-3$ to $>-6 \mathrm{D}, 1.8 \%$ for $\leq-6$ to $>-9 \mathrm{D}, 28.6 \%$ for $\leq-9$ to $>-15 \mathrm{D}$, and $74.6 \%$ for $\leq-15 \mathrm{D}$, and the chance of occurring between 55 and 79 years of age in China as $0 \%$ for > -3D, $0.03 \%$ for $\leq-3$ to > $-6 D, 0.8 \%$ for $\leq-6$ to $>-9 D, 10.1 \%$ for $\leq-9$ to $>-15 D$, and $34.8 \%$ for $\leq-15 D$. Vitreoretinal care followed evidence and accepted protocols. ${ }^{44-52}$ |
| VI | We added two low vision rehabilitation sessions per year spent with vision impairment, consisting of a combination of optometry, orthoptics, occupational therapy, and mobility instruction. ${ }^{1,53}$ Additionally, one magnifier, loupe or telescope every second year spent with vision impairment represented the range of assistive and adaptive device options. ${ }^{53}$ |

B) Vision impairment due to myopia in Australia

|  | Relative prevalence of vision impairment due to myopia |  |  |  |
| ---: | ---: | ---: | ---: | ---: |
| Spherical equivalent | $\mathrm{MSVI}<60 \mathrm{yrs}$ | $\mathrm{MSVI} \geq 60 \mathrm{yrs}$ | Blind $<60 \mathrm{yrs}$ | Blind $\geq 60 \mathrm{yrs}$ |
| $\leq-0.50 \mathrm{D}$ to $>-3 \mathrm{D}$ | $0.00 \%$ | $0.00 \%$ | $0.00 \%$ | $0.00 \%$ |
| -3 to $>-6 \mathrm{D}$ | $0.95 \%$ | $1.03 \%$ | $0.09 \%$ | $0.10 \%$ |
| $\leq-6 \mathrm{D}$ to $>-10 \mathrm{D}$ | $2.94 \%$ | $6.01 \%$ | $0.29 \%$ | $0.60 \%$ |
| $\leq-10 \mathrm{D}$ | $14.01 \%$ | $28.88 \%$ | $1.40 \%$ | $3.20 \%$ |

C) Vision impairment due to myopia in China

|  | Relative prevalence of vision impairment due to myopia |  |  |  |
| ---: | ---: | ---: | ---: | ---: |
| Spherical equivalent | MSVI < 60yrs | MSVI $\geq 60 y r s$ | Blind $<60 \mathrm{yrs}$ | Blind $\geq 60 \mathrm{yrs}$ |
| $\leq-0.50 \mathrm{D}$ to >-3D | $0.00 \%$ | $0.00 \%$ | $0.00 \%$ | $0.00 \%$ |
| -3 to $>-6 \mathrm{D}$ | $2.26 \%$ | $2.45 \%$ | $0.27 \%$ | $0.29 \%$ |
| $\leq-6 \mathrm{D}$ to $>-10 \mathrm{D}$ | $7.01 \%$ | $14.32 \%$ | $0.84 \%$ | $1.71 \%$ |
| $\leq-10 \mathrm{D}$ | $33.42 \%$ | $38.10 \%$ | $3.99 \%$ | $9.10 \%$ |

Table S3. Lifetime costs of myopia for five interventions in urban Australia (A) and China (B), at each discount rate, and providing cost type disaggregation details omitted from Figures 4 , 5 and 6 TMM = traditional myopia management; AMM = active myopia management; AMM1 is low-dose atropine; AMM2 is anti-myopia spectacles; AMM3 is anti-myopia multifocal soft contact lenses; AMM4 is orthokeratology.


| B) China |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Estimates | Han Chinese without discounting |  |  |  |  | Han Chinese with annual discount of 3\% |  |  |  |  | Han Chinese with annual discount of 5\% |  |  |  |  |
| Cost type | TMM | AMM1 | AMM2 | AMM3 | AMM4 | TMM | AMM1 | AMM2 | AMM3 | AMM4 | TMM | AMM1 | AMM2 | AMM3 | AMM4 |
| Ophthalmic exams | \$1,862 | \$994 | \$939 | \$1,133 | \$974 | \$805 | \$508 | \$468 | \$569 | \$490 | \$552 | \$381 | \$347 | \$424 | \$365 |
| Optical corrections | \$18,940 | \$9,301 | \$10,304 | \$11,303 | \$10,286 | \$6,504 | \$3,458 | \$4,549 | \$4,567 | \$4,323 | \$3,918 | \$2,181 | \$3,229 | \$3,075 | \$2,979 |
| Anti-myopia | \$0 | \$141 | \$2,203 | \$5,080 | \$6,542 | \$0 | \$124 | \$1,936 | \$4,463 | \$5,748 | \$0 | \$114 | \$1,786 | \$4,119 | \$5,304 |
| Myopia-related complications | \$1,133 | \$462 | \$444 | \$517 | \$475 | \$210 | \$88 | \$88 | \$107 | \$100 | \$73 | \$32 | \$30 | \$45 | \$43 |
| Related and productivity | \$1,701 | \$628 | \$545 | \$784 | \$646 | \$488 | \$275 | \$217 | \$315 | \$292 | \$274 | \$199 | \$148 | \$220 | \$215 |
| Total | \$23,636 | \$11,526 | \$14,434 | \$18,818 | \$18,923 | \$8,006 | \$4,453 | \$7,253 | \$10,023 | \$10,952 | \$4,817 | \$2,908 | \$5,539 | \$7,884 | \$8,905 |


| Lower limit | Han Chinese without discounting |  |  |  |  | Han Chinese with annual discount of 3\% |  |  |  |  | Han Chinese with annual discount of 5\% |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Cost type | TMM | AMM1 | AMM2 | AMM3 | AMM4 | TMM | AMM1 | AMM2 | AMM3 | AMM4 | TMM | AMM1 | AMM2 | AMM3 | AMM4 |
| Ophthalmic exams | \$452 | \$339 | \$327 | \$351 | \$340 | \$213 | \$182 | \$171 | \$192 | \$182 | \$155 | \$140 | \$130 | \$149 | \$140 |
| Optical corrections | \$7,483 | \$4,455 | \$6,139 | \$5,120 | \$4,640 | \$2,685 | \$1,798 | \$3,279 | \$2,383 | \$1,962 | \$1,655 | \$1,176 | \$2,542 | \$1,715 | \$1,326 |
| Anti-myopia | \$0 | \$77 | \$2,169 | \$3,618 | \$2,423 | \$0 | \$67 | \$1,906 | \$3,178 | \$2,129 | \$0 | \$62 | \$1,759 | \$2,933 | \$1,964 |
| Myopia-related complications | \$392 | \$314 | \$313 | \$321 | \$320 | \$73 | \$59 | \$58 | \$65 | \$64 | \$26 | \$21 | \$20 | \$27 | \$26 |
| Related and productivity | \$194 | \$57 | \$76 | \$60 | \$64 | \$54 | \$30 | \$47 | \$33 | \$37 | \$0 | \$23 | \$39 | \$26 | \$29 |
| Total | \$8,521 | \$5,241 | \$9,025 | \$9,469 | \$7,788 | \$3,026 | \$2,136 | \$5,461 | \$5,851 | \$4,374 | \$1,836 | \$1,422 | \$4,489 | \$4,850 | \$3,486 |


| Upper limit | Han Chinese without discounting |  |  |  |  | Han Chinese with annual discount of 3\% |  |  |  |  | Han Chinese with annual discount of 5\% |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Cost type | TMM | AMM1 | AMM2 | AMM3 | AMM4 | TMM | AMM1 | AMM2 | AMM3 | AMM4 | TMM | AMM1 | AMM2 | AMM3 | AMM4 |
| Ophthalmic exams | \$3,523 | \$1,960 | \$1,891 | \$2,026 | \$1,914 | \$1,499 | \$930 | \$869 | \$988 | \$890 | \$1,015 | \$677 | \$620 | \$730 | \$639 |
| Optical corrections | \$30,617 | \$20,468 | \$21,113 | \$21,551 | \$22,139 | \$10,776 | \$7,165 | \$7,732 | \$8,117 | \$8,634 | \$6,637 | \$4,386 | \$4,909 | \$5,264 | \$5,741 |
| Anti-myopia | \$0 | \$231 | \$2,245 | \$6,956 | \$11,682 | \$0 | \$203 | \$1,973 | \$6,112 | \$10,264 | \$0 | \$187 | \$1,820 | \$5,640 | \$9,472 |
| Myopia-related complications | \$1,624 | \$539 | \$535 | \$1,085 | \$560 | \$303 | \$106 | \$103 | \$222 | \$124 | \$107 | \$40 | \$38 | \$92 | \$57 |
| Related and productivity | \$3,752 | \$1,586 | \$1,342 | \$1,682 | \$1,705 | \$1,130 | \$710 | \$496 | \$733 | \$815 | \$4 | \$520 | \$323 | \$531 | \$617 |
| Total | \$39,517 | \$24,784 | \$27,126 | \$33,300 | \$38,000 | \$13,707 | \$9,115 | \$11,172 | \$16,172 | \$20,727 | \$7,762 | \$5,810 | \$7,709 | \$12,257 | \$16,526 |

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