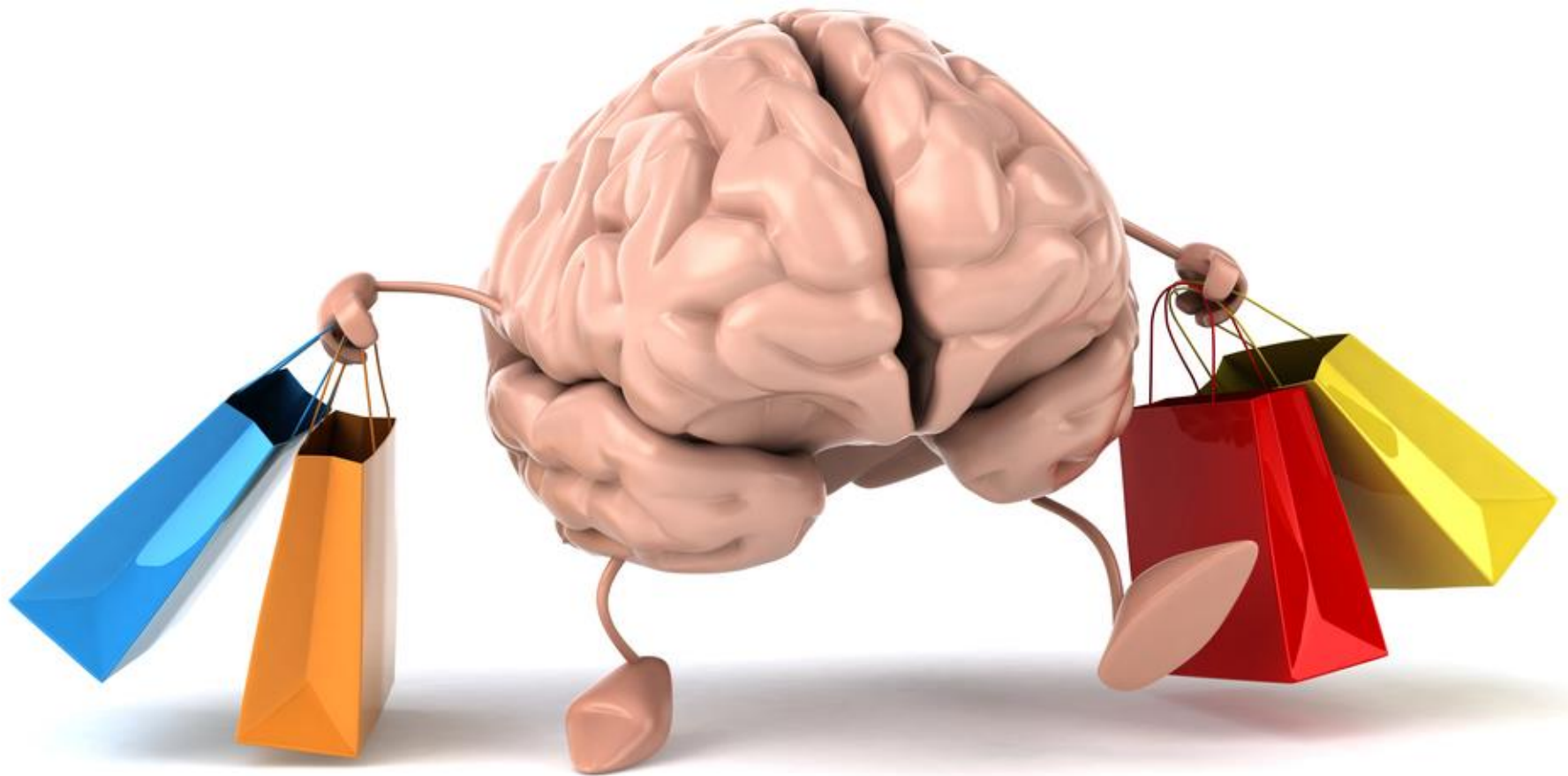


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# Dr. Steve Vargo, IDOC Optometric Practice Management Consultant

I am a full time practice management  
consultant for IDOC.

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# The Science of Selling

## The Psychology Behind Why People Buy

Steve Vargo, OD, MBA

# Objectives

1. Understand consumer psychology
2. Overcome common objections to a sale
3. Get more people to say YES to you









# Consumer fears

- Distrust of salespeople
- **Buyer's remorse**
- Being lied to
- Incurring debt
- Unknown
- Bad past experience
- Prejudice





# 1. Self-centered





# Looking For A Job?

## EMPLOYMENT

Accounting.....	107	Inventory.....	
Administrative/Clerical.....	110	Legal Administrative.....	
Automotive.....	129	Legal Employment/Maintenance/R.....	
Banking.....	106	Installation.....	
Biotech.....	150	Management.....	
Business Development.....	111	Manufacturing.....	
Business/Mktg Apply.....	199	Marketing.....	
Computer/IT.....	115	Media/Journalism/Ne.....	
Construction.....	158	Non-Profit & Social.....	
Consultant.....	118	Other.....	
Customer Service.....	132	Part-Time.....	
Design.....	156	Pharmaceut.....	
Distribution/Shipping.....	164	Profession.....	
Education.....	120	Purch.....	
Enter/Child Care/Domestic.....	197		
Employment Services/Resumes.....	101		

CALL: 829-4205

ALL:

NC



- Salary – failing to mention this sends the message that pay must not be very good, otherwise you would have mentioned it. No need to mention specific pay, but at least use a term like “competitive salary/pay”. According to a CareerBuilder study, this is the #1 thing people look for in a job ad.
- Benefits (if applicable)
- Work-life balance (i.e.. No evenings or weekends)
- Professional development opportunities (i.e. Continued allowance or willingness to train for a specialty)
- Ability to implement a specialty (might be attractive to a candidate who has previous training or interest in specialty contacts, dry eye, etc.)
- Opportunity for ownership or partnership
- Ability to practice full-scope eye care (might attract an OD burned out with routine refractive care)
- Advanced office technology / instrumentation
- Supportive and friendly staff
- Lifestyle benefits (affordable housing, great schools, local parks, etc.)
- Anything else?

## 2. Visuals



## 2. Visuals





# Diabetic Retinopathy

Early Diagnosis and Effective Treatment

Aris N. Kollias, Michael W. Ulbig

## SUMMARY

**Background:** Diabetic retinopathy is a microangiopathy of the retina from which nearly all persons with diabetes eventually suffer. Two of its complications threaten the patient's vision: diabetic macular edema and proliferative diabetic retinopathy.

**Methods:** Selective literature review, based on national and international guidelines and a literature search from 1981 onward.

**Results:** Diabetic retinopathy is subdivided into non-proliferative and proliferative retinopathy. Macular edema can arise at any stage of the disease and threatens visual acuity. The main risk factors for the development and progression of diabetic retinopathy are long duration of diabetes and poor control of blood sugar and arterial blood pressure. Laser photocoagulation is an evidence-based treatment for proliferative retinopathy and macular edema. Vitreous surgery is indicated in cases of worsening vision due to a non-clearing vitreous hemorrhage or tractional retinal detachment. The current options for medical treatment involve the intravitreal injection of glucocorticosteroids or of a VEGF antagonist; both of these options are "off label" at present.

**Conclusion:** Diabetic retinopathy is the leading cause of blindness among persons of working age in the industrialized world. Regular ophthalmological examinations, timely laser therapy depending on the stage of the disease, and close interdisciplinary cooperation are essential to prevent loss of vision.

Cite this as: Dtsch Arztebl Int 2010; 107(5): 75–84  
DOI: 10.3238/arztebl.2010.0075

Augenlinik der Ludwig-Maximilians-Universität München: Dr. med. Kollias, Prof. Dr. med. Ulbig.

Medical advances in recent decades have paradoxically led to an increase in the incidence and prevalence of diabetes mellitus and its complications. Increased life expectancy in the industrialized world is one reason why diabetes is now more common; another is the increased prevalence of a sedentary life style and changed eating habits, resulting in overweight. The typical ocular complications range from impaired visual acuity due to diabetic retinopathy and premature cataracts all the way to blindness or loss of an eye. Even though diabetic retinopathy can be treated effectively, it nonetheless remains the most common cause of acquired blindness among persons of working age in the industrialized world. In Germany, about 15 000 people are blind as a complication of diabetes mellitus (1). In 2004, in the German state of Hesse, 2.2% of the diabetic patients covered by statutory health insurance were blind or severely visually impaired, according to the internal data of the insurance carriers. Visual acuity is lost when the site of sharpest vision on the retina is affected by pre- or intraretinal hemorrhage, macular edema, tractional retinal detachment, or loss of capillaries of the peripheral loop network. Blindness can, in fact, be prevented by regular preventive ophthalmological check-ups and timely treatment.

The learning goals of this Continuing Medical Education article are the following:

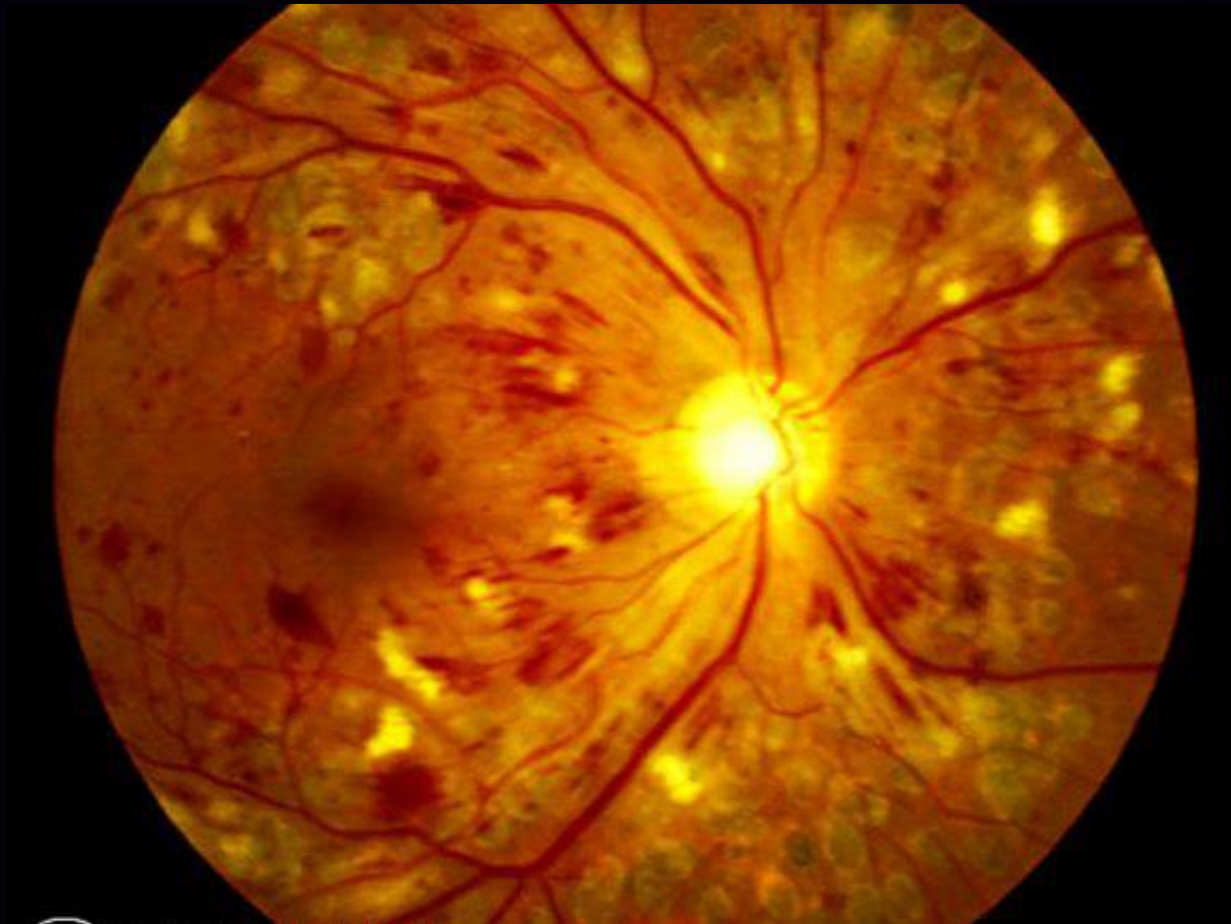
- The reader should appreciate the importance of preventive ophthalmological check-ups. Even when a patient can see well, both subjectively and objectively, diabetic retinopathy may already be present and urgently require treatment. The early detection and treatment of macular edema and proliferative retinopathy are essential for the maintenance of visual acuity.
- The reader should become acquainted with the gold standard of ophthalmological treatment, i.e., timely, stage-appropriate laser therapy. Among

## Epidemiology

Even though it can be effectively treated, diabetic retinopathy remains the most common cause of acquired blindness among persons of working age in the industrialized world

Systemic agents	Prototypical drugs	Systemic effects	Specific ocular mechanism	References (Author or study)	Implications
<b>Agents for glycemic control</b>					
Insulin	Insulin lispro Insulin glargine Isophane insulin	Regulates carbohydrate, lipid and protein metabolism	Increased VEGF gene expression <sup>36</sup> Alterations in retinal blood flow with improved glycemic control <sup>39</sup>	UKPDS <sup>27,34</sup> DCCT <sup>32</sup> EDIC <sup>30</sup>	Glycemic control significantly worsens risk of early intensive ophthalmologic treatment in patients with moderate to severe disease. Potentially reduces doses <sup>40,47</sup>
Thiazolidinediones	Rosiglitazone Pioglitazone	Improves insulin sensitivity	PPAR $\gamma$ agonist activity <sup>30</sup> Decreased VEGF production <sup>32</sup>	Shen <i>et al.</i> <sup>51</sup> Fong <i>et al.</i> <sup>57</sup>	Delays the progression of disease. May cause weight gain
Biguanides	Metformin	Improves glycemic control Cardioprotective effects	Decreased concentrations of PAI-1 <sup>62</sup> Inhibition of NF $\kappa$ B and TSP-1 <sup>64</sup>	UKPDS <sup>60</sup>	First line of treatment. Beneficial in obesity and hypertension. Clinical impact on control has not been proven
<b>Agents for lipid control</b>					
Fibrates	Fenofibrate Clofibrate Etofibrate	Improves lipid parameters (increases HDL cholesterol levels, reduces levels of total and LDL cholesterol and triglycerides)	PPAR $\alpha$ agonist activity <sup>70</sup>	FIELD <sup>25</sup> ACCORD Eye <sup>82</sup>	Reduces the risk of cardiovascular events. May reduce the risk of blindness with DR <sup>26,71</sup> . Control of lipid levels may result in less intensive treatment of fibrates and the risk of blindness
Statins	Atorvastatin Simvastatin	Improves lipid parameters (reduces total and LDL cholesterol levels)	Potential anti-inflammatory effects through NF $\kappa$ B inhibition <sup>153</sup> Decreased TNF-induced ICAM-1 expression <sup>153</sup>	Steno-2 <sup>79</sup> CARDS <sup>80</sup>	Evidence suggests that statins may prevent the progression of disease. Control of lipid levels may result in less intensive treatment
<b>Agents blood pressure control</b>					
ACE inhibitors	Captopril Enalapril Lisinopril	Blocks the conversion of angiotensin-1 to angiotensin-2	Renin-angiotensin system blockade <sup>83</sup> Vitreous activity of ACE is correlated with VEGF levels <sup>85</sup>	UKPDS <sup>88</sup> EUCLID <sup>89</sup> RASS <sup>91</sup>	Tight blood pressure control in two-step DME may result in visual loss. Treatment with T1DM progression
ARB	Candesartan Losartan Telmisartan Losartan	Blocks the activation of angiotensin-2	Renin-angiotensin system blockade <sup>83</sup> PPAR $\gamma$ agonist activity <sup>92</sup>	RASS <sup>91</sup> DIRECT (Prevent 1; Protect 1 and 2) <sup>92,93</sup>	Treatment of patients with two-step of candesartan associated

Abbreviations: ACE, angiotensin-converting enzyme; ARB, angiotensin-2 receptor blocker; DM, diabetes mellitus; DME, diabetic macula edema; ICAM-1, intercellular adhesion molecule 1; NF $\kappa$ B, nuclear factor  $\kappa$ B; NPDR, nonproliferative diabetic retinopathy; PAI-1, plasminogen activator inhibitor 1; PDR, proliferative diabetic retinopathy; PPAR, peroxisome proliferator-activated receptor; T1DM, type 1 diabetes mellitus; T2DM, type 2 diabetes mellitus; TNF, tumor necrosis factor; TSP-1, tissue inhibitor of metalloproteinases 1.



## 2. Visuals





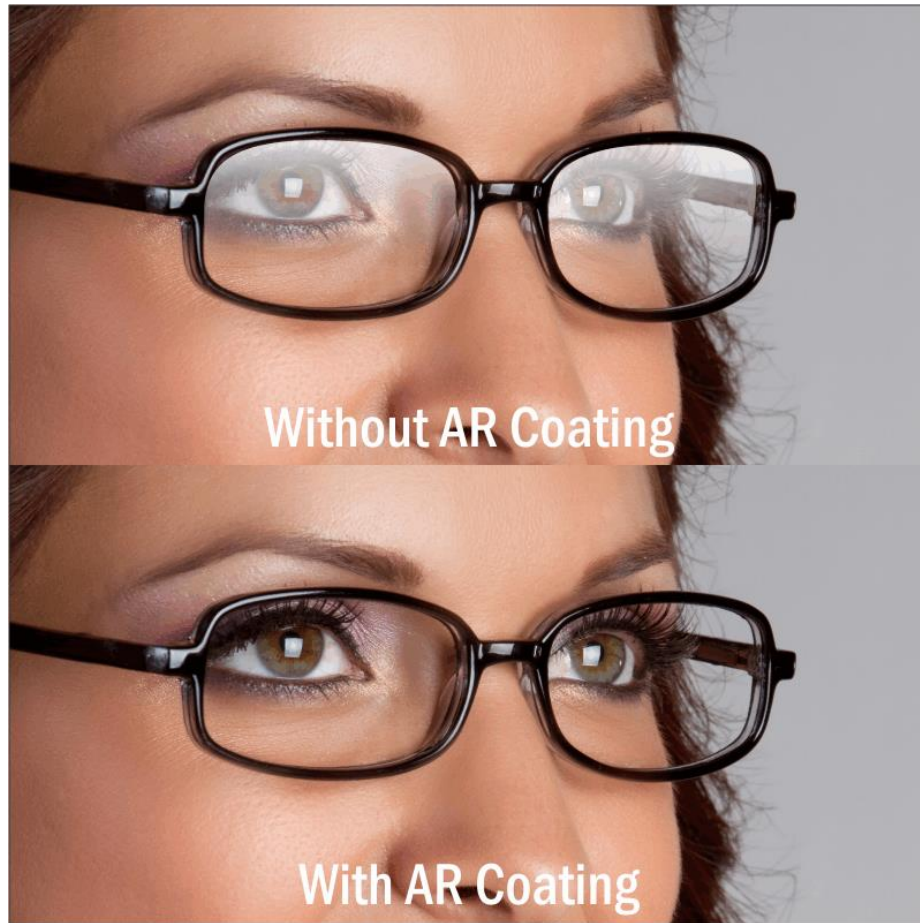
### 3. Contrast



### 3. Contrast



### 3. Contrast





## 4. Tangible



# Ease Study

- United Kingdom 2009
- The EASE study (Enhanced Approach to Selecting Eyewear)
- Patients given trial lenses to assist with frame selection. Control group with no CLs
- CL group was more likely to be fit with CLs (33%)
- They also spent more on eyeglasses

## 5. Emotional



**WARNING: Tobacco smoke  
can harm your children.**

## 5. Emotional





# 5 stimuli of the “consumer brain”

- Self-centered
- Visuals
- Contrast
- Tangible
- Emotion



I don't want to be pushy.



## 1. Diagnose the pain

Are you having any problems with your vision?

~~Are you having any problems with your  
vision?~~

**Tell me about any problems you're  
having with your vision.**





DOLLAR SHAVE CLUB



U B E R

amazon<sup>®</sup>

A yellow curved arrow, known as the Amazon smile, starts under the letter 'a' and points upwards and to the right, ending under the letter 'n'.

NETFLIX

WARBY PARKER





20  
50

L

P

D

50 FT.  
15.2 M

4





We use state-of-the-art equipment to process digitally surfaced lenses. These lenses are custom made, designed specifically for your prescription. These lenses take into consideration eye dominance, how the eyes naturally move, head posture, and eye center of rotation. Digital technology allows both the front and back surfaces of the lenses to work in tandem to result in optically clear, distortion-free lenses.

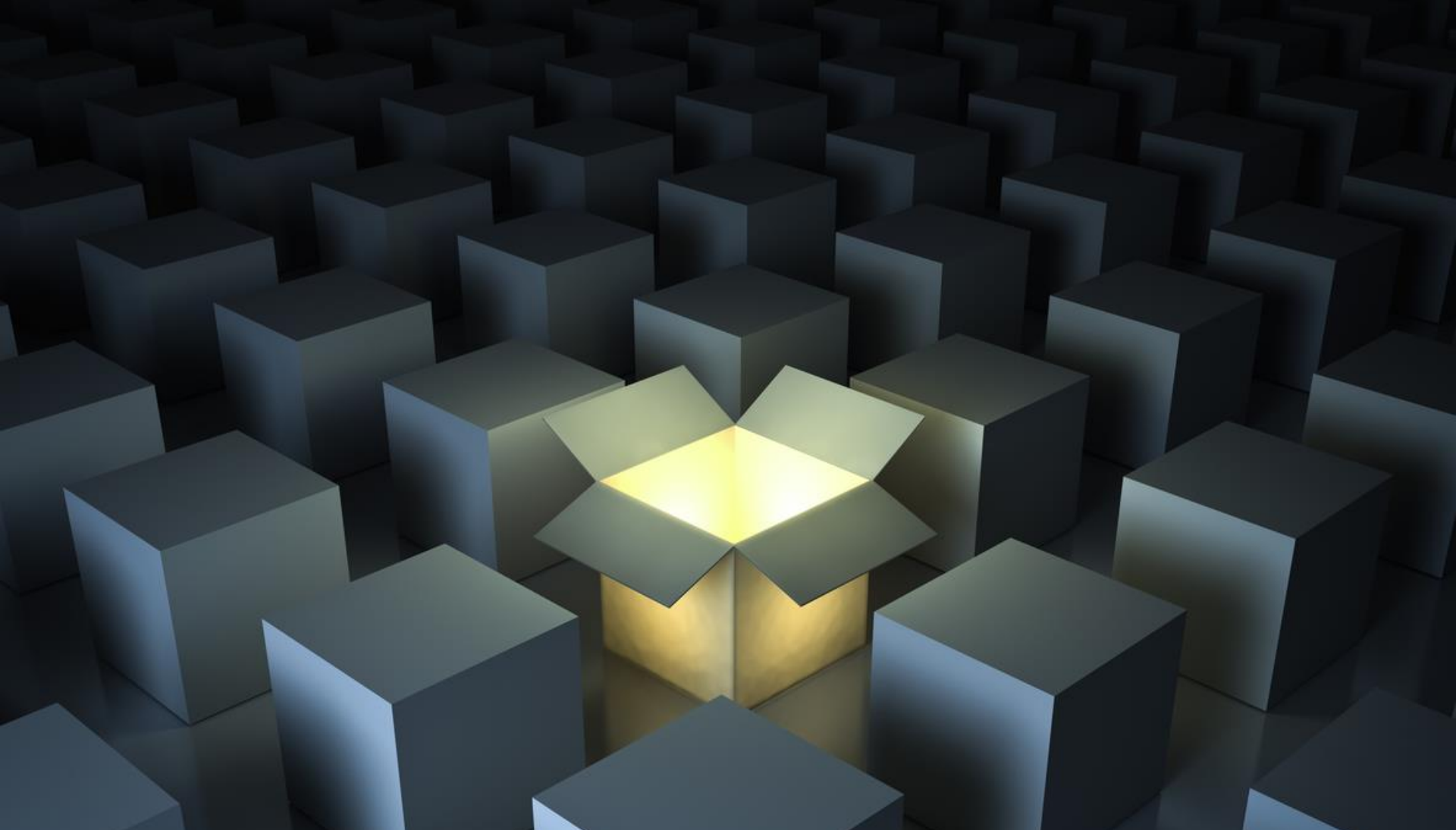
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**What's does this  
mean for me??**



## 2. TIE FEATURES TO BENEFITS





### **3. Differentiate your claims**



## 4. Prescribe solutions



What do you think about  
all this?



# Dealing with the price objection

- Listen and empathize – neutralizes the objection
- Repeat their concern – displays an understanding
- Reposition – provide additional education taking objections into consideration







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Thank You!!

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