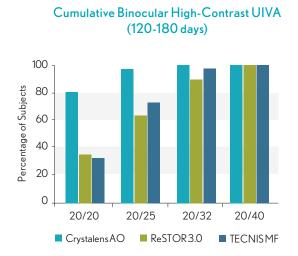


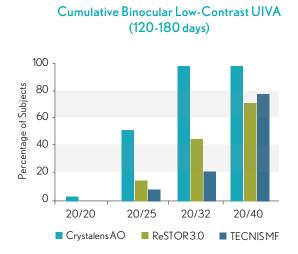
Give your cataract patients an active range of vision.

Cataract surgery is an opportunity to give your patients vision for their life ahead. With Crystalens[®] AO IOL, you can provide your patients with an active range of vision that matches today's active lifestyles. And help them look forward to near, intermediate, and distance vision with increased independence from glasses.¹

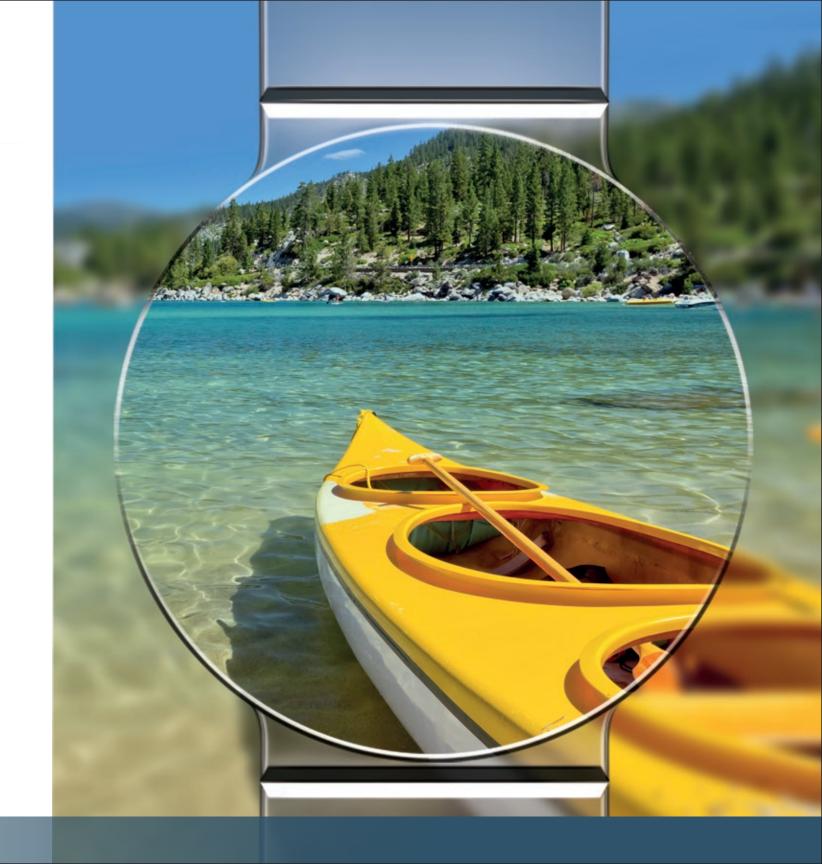
Sharp vision at the distances that matter.

A prospective, non-randomized clinical study showed that Crystalens delivers statistically significant superiority in uncorrected intermediate visual acuity (UIVA) over ReSTOR and TECNIS Multifocal IOLs.²





Additionally, Crystalens performed significantly better than ReSTOR for monocular and binocular low contrast distance corrected near visual acuity, and was equivalent at uncorrected near.²



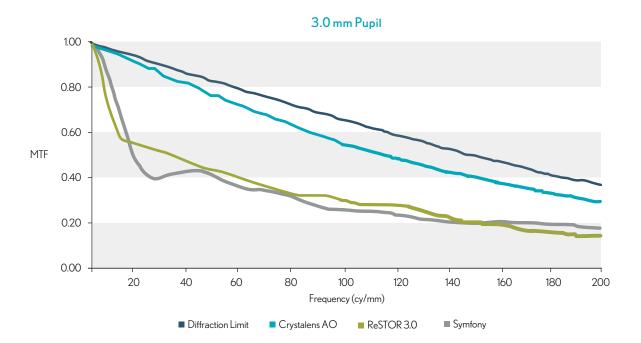
Give your cataract patients exceptional contrast sensitivity.

The Crystalens® AO IOL features an advanced aberration-optimized (AO) optic that delivers outstanding contrast sensitivity by focusing 100% of light, 100% of the time and maintaining one distinct point of focus.²

The advanced AO optic also delivers uniform power, center to edge for consistent results³⁻⁵, excellent visual acuity in low light, and is less sensitive to decentration⁴.

Excellent optical performance with Crystalens.

In a recent bench study, Crystalens AO demonstrated significantly better modulation transfer function (MTF) performance than TECNIS Symfony and ReSTOR 3.0 across a range of frequencies.⁶





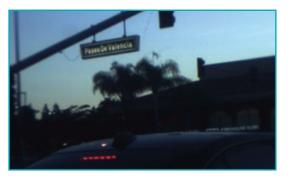
Give your cataract patients clear nighttime vision.

Unlike standard presbyopia-correcting lenses that split light or elongate the focal point, Crystalens® AO IOL is an advanced accommodating lens that utilizes one distinct point and changes position and functional power within the capsular bag to deliver clear, crisp vision and minimized halos and glare.²

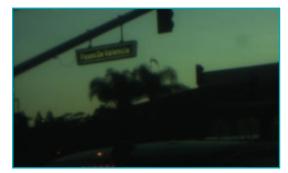
Contrast, not compromise.

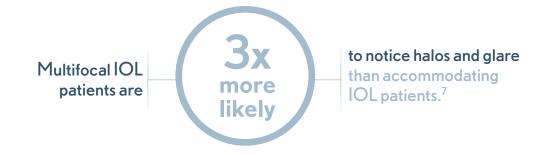
A dual camera system showed that Crystalens delivers superior optical performance compared to ReSTOR 3.0.

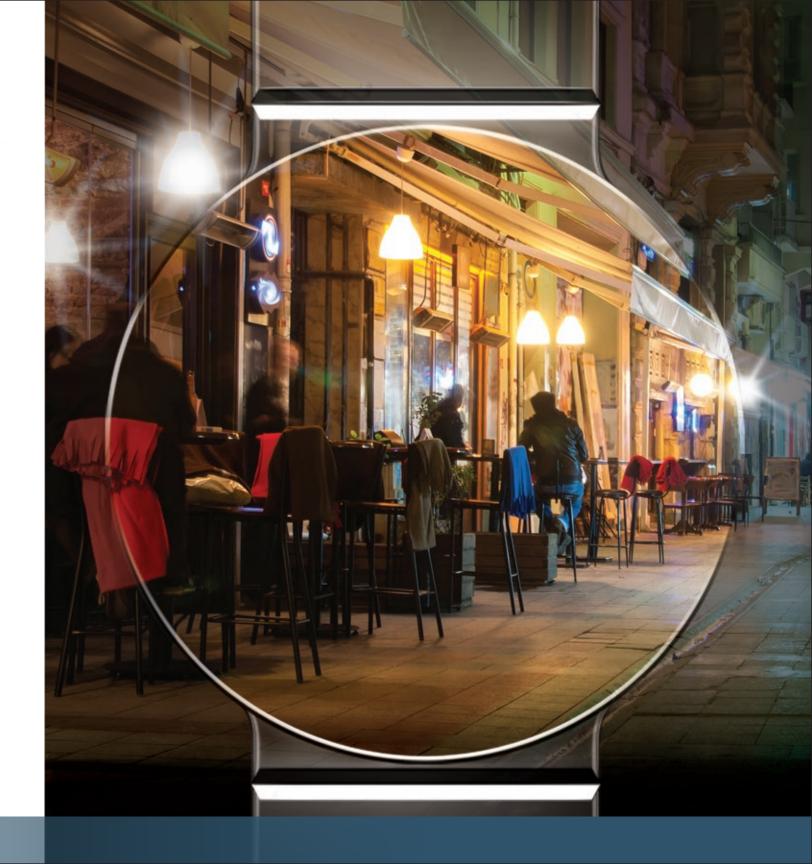
Crystalens AO



ReSTOR +3.0







Actively bringing your patient's world into focus.



There's an unmistakable difference between what you can achieve with standard presbyopia-correcting IOLs and what your patients experience with Crystalens® AO IOL.

- Sharp vision at the distances that matter^{2,6}
- Better contrast sensitivity than multifocal IOLs⁸
- Clear, crisp vision for nighttime driving and low-light activities⁶

Crystalens AO IOL specifications

	AO1UV	AO2UV
Recommended Starting A-constant	119.1*	119.1*
Recommended Starting ACD	5.61 mm*	5.61mm*
Overall Diameter	11.5 mm	12.0 mm
Diopter Power	+22.5 D to +33 D in 0.5-D steps +17 D to +22 D in 0.25-D steps	+4 D to +10 D in 1.0 - D steps +10.5 D to +24 D in 0.5 - D steps
Optic Body Diameter	5.0 mm	
Shape	Bioconvex	
Material-body and plates	Biosil (Silicone Elastomer) with enhanced UV protection; 10% UV cutoff at 400 nm	
Material-loop (haptics)	Polyimide	
Refractive index at 35° C	1.43	
Delivery System	Crystalsert®	

^{*}A-constant and ACD are estimates only. It is recommended that each surgeon develop his or her own values.

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1. Crystalens AO Directions for Use. 2. Ang R, Martinez G, Cruz E, Tiongson A, Dela Cruz A. Prospective evaluation of visual outcomes with three presbyopia-correcting intraocular lenses following cataract surgery. Clin Ophthalmol. 2013;7:1811-23. 3. Santhiago MR, Netto MV, Barreto J Jr, et al. Wavefront analysis, contrast sensitivity, and depth of focus after cataract surgery with aspherical intraocular lens implantation. Am J Ophthalmol. 2010;149(3):383-389. 4. Altmann GE, Nichamin LD, Lane SS, Pepose JS. Optical performance of 3 intraocular lens designs in the presence of decentration. J Cataract Refract Surg. 2005; 31:574-585. 5. Johansson B, Sundelin S, Wikberg-Matsson A, Unsbo P, Behnding A. Visual and optical performance of the Akreese® Adapt Advanced Optics and Tecnis Z9000 intraocular lenses: Swedish multicenter study. J Cataract Refract Surg. 2007;33(9):1565-1572. 6. Packer M. Optical characteristics and quality of vision: an objective comparison between refractive and diffractive intraocular lens (IOL) types. Presented at American Society of Cataract and Refractive Surgery (ASCRS); May 6-10, 2016; New Orleans, LA. 7. Hovanesian, JA. Reducing postoperative compilications and improving the follow-up experience. Presented at Hawaiian Eye-Retina Meeting; January 2016; Waikoloa Village, Hl. 8. Peopse JS, Qazi MA, Davies J, Doane JF, et al. Visual performance of patients with bilateral vs combination Crystalens, ReZoom, and ReSTOR intraocular lens implants. Am J Ophthalmol. 2007;144:347-357.

INDICATIONS FOR USE: The Crystalens® Posterior Accommodating intraocular lens (IOL) is intended for primary implantation in the capsular bag of the eye for the visual correction of aphakia secondary to the removal of a cataractous lens in adult patients with and without presbyopia. Crystalens provides approximately one diopter of monocular accommodation which allows for near, intermediate, and distance vision without spectacles. WARNINGS: Careful preoperative evaluation and sound clinical judgement should be used by the surgeon to decide the risk / benefit ratio before implanting a lens in a patient. Unlike most other IOLs, the Crystalens AO IOL optic has hinges connecting it to the haptic; please see adverse events section below for more information. PRECAUTIONS: Do not resterilize this intraocular lens by any method. Do not store lenses at temperatures over 45°C (113°F). Careful preoperative evaluation and sound clinical judgment should be used by the surgeon to decide the benefit/risk ratio before implanting a lens in a patient with conditions as outlined in the Crystalens AO IOL Directions for Use. ADVERSE EVENTS: The incidence of adverse events experienced during the clinical trial was comparable to or lower than the incidence reported in the historic control ("FDA grid") population. As with any surgical procedure, risk is involved. Vaulting is a post-operative adverse event where the Crystalens AO IOL optic hinges move into and remain in a displaced configuration. If vaulting occurs, please see Directions for Use for a detailed listing of symptoms, information regarding diagnosis, potential causes, and sequelae. Physicians should consider the characteristics of each individual vaulting case prior to determining the appropriate treatment. Data on long-term follow-up after treatment of vaulting is not available. ATTENTION: Refer to the Directions for Use labeling for a complete listing of indications, warnings and precautions, clinical trial information, etc. CAUTION: Federal (USA) law restricts this device



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