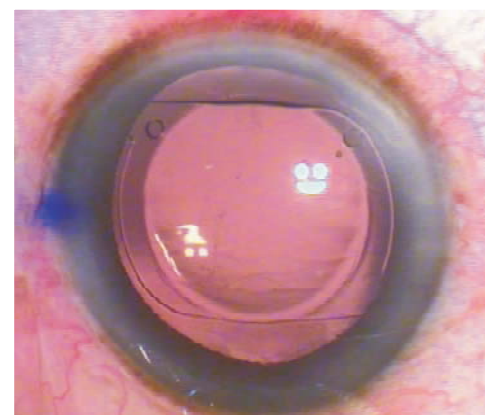
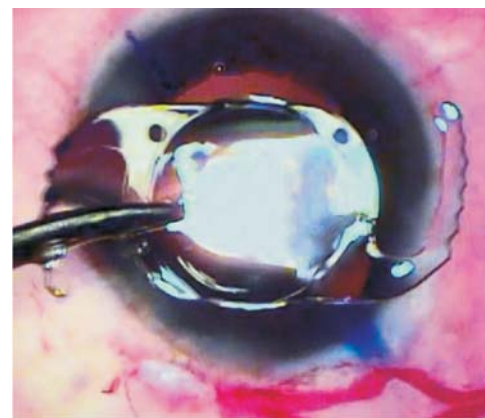
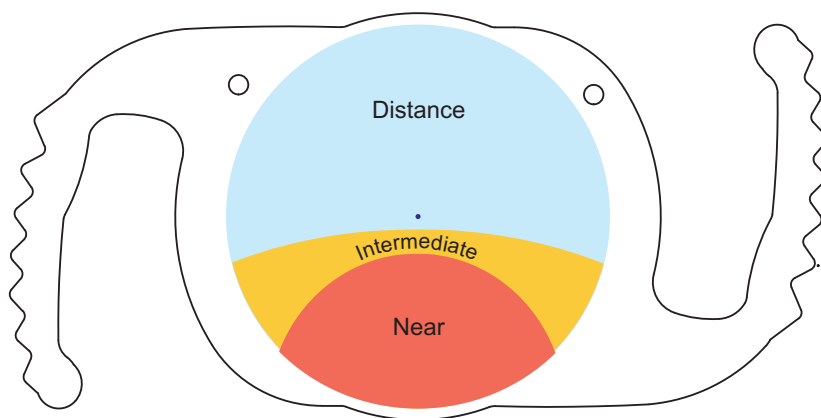


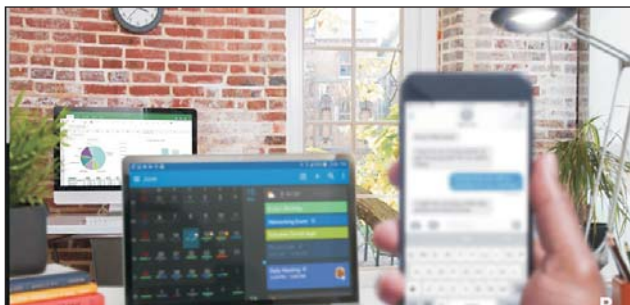
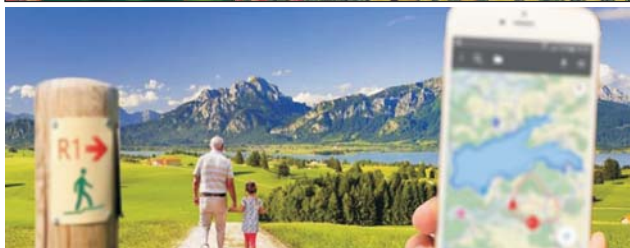
SPIRANT **AUTOFOCUS PRO** **Polyfocal Progressive Single Piece Soft** **Acrylic Copolymer Foldable Injectable IOL**

(Please refer last page for specifications)

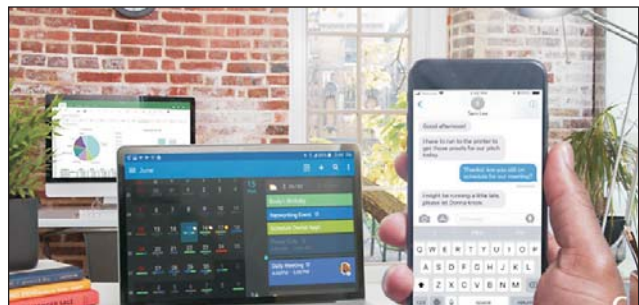


Note : "Autofocus Pro" IOL is to be placed horizontal in the bag & two dialing holes are to be kept in upper half of eye.

Vision through **Monofocal Lens**
(Only Far vision is clear)



Vision through **"Autofocus Pro" Lens**
(Near, Intermediate and Far, all vision are clear)



Night Driving (Waxy) Vision through
Ringed Multifocal Lens



Night Driving Vision through
"Autofocus Pro" Lens



Aphakic
Vision Temporal
Crescent

Negative Dysphotopsia

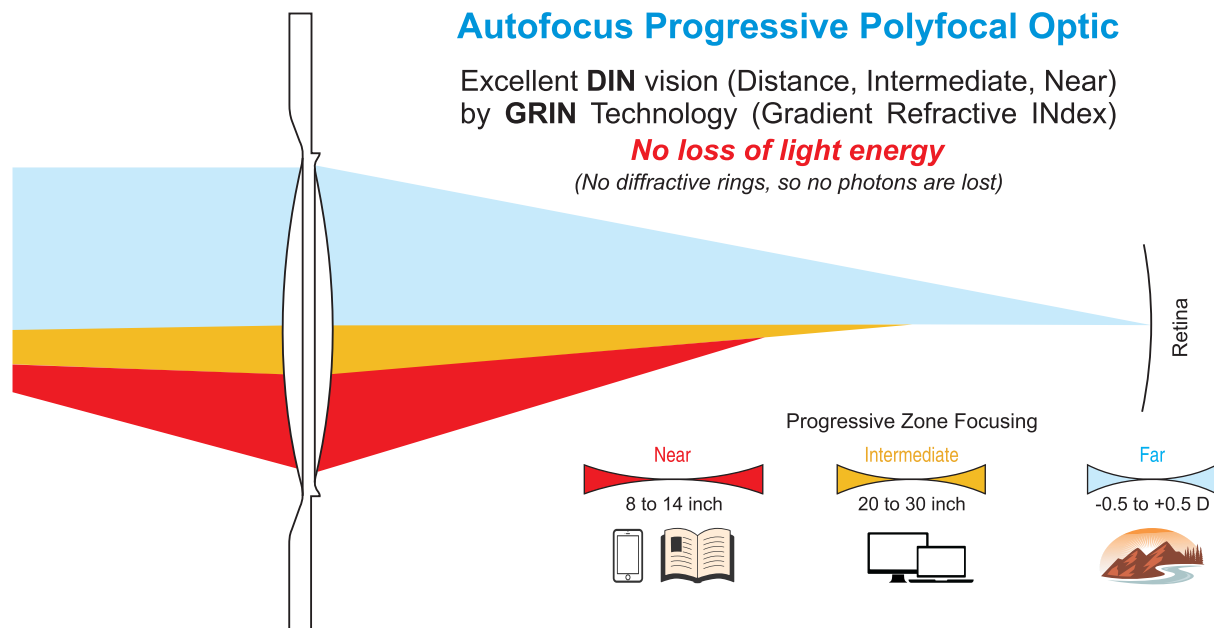


Simulated Vision through Conventional 6.0 mm IOL (Both Eye)

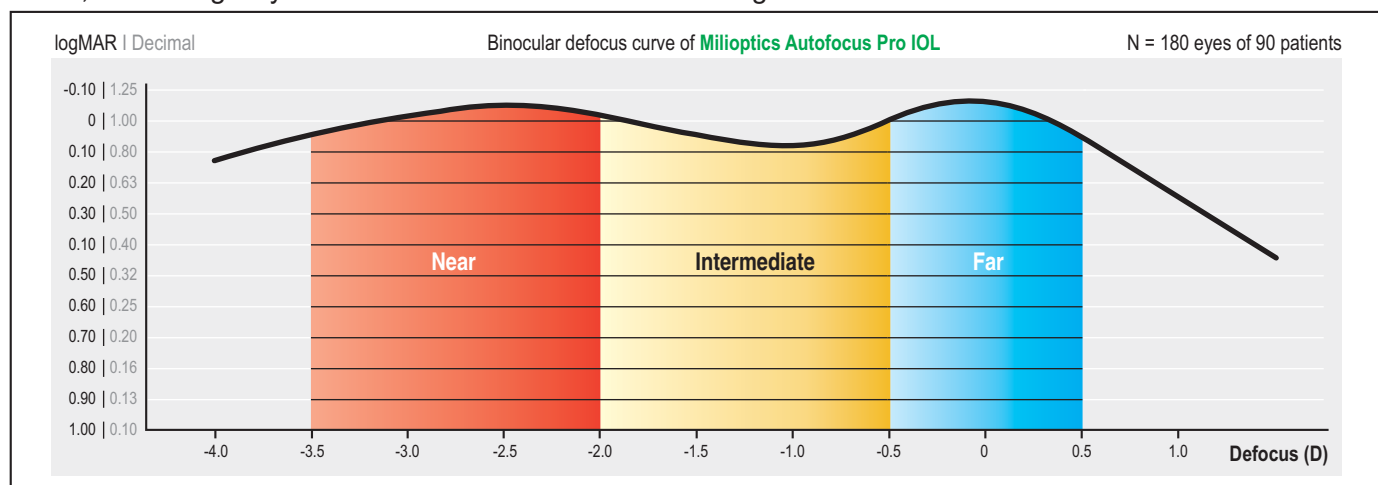
No Negative Dysphotopsia



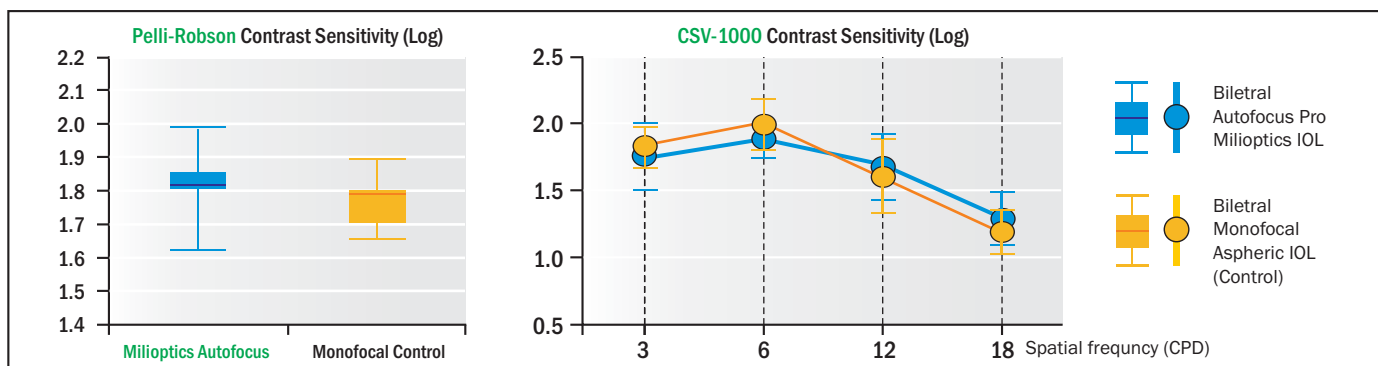
(Bilateral) Vision through **"Autofocus Pro" Lens**



This binocular defocus curve of Milioptics' **Autofocus Pro** lens indicates the excellent visual acuity through this lens at various distances. Over and above the superb (best corrected) visual acuity for far vision, very well balanced vision for intermediate and near vision are achieved. Please notice that there are no significant (double hump) slopes. Area of focus (i.e. area-under-the-defocus curve) is maximized, which fairly resembles natural vision, as if through crystalline lens accommodation of a teenager.



Contrast sensitivity is almost equal to that of a monofocal IOL or of a natural human crystalline lens.

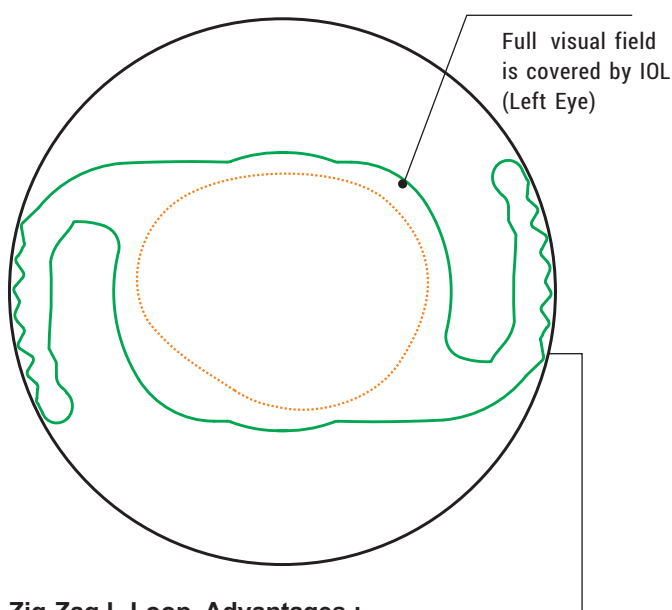


***Specifications : SPIRANT AUTOFOCUS PRO (Model : VVB105CLA)**

Power Range	+10.0 to + 30.0 D in 0.5 D (+5.0 to +9.0 and +31.0 to +40.0 in 1.0 D) increments
Optic Body Diameter	6.0 mm
Overall length with haptics	13.0 mm
Design	Single piece (vertical) PROGRESSIVE refractive optic
Material	UV Absorbing Hydro phobic+philic Acrylic Co-polymer (From : Contamac Ltd., U.K.)
Edge design	360° posterior square edge
Suggested A-Constant*	Optical : 117.7, Ultrasonic 117.5 (Select first minus)
Theoretical AC- depth*	4.96 mm
Surgeon / Lens Factor*	1.73
Design Factor	+6.0 D
Incision Size	2.6 mm or more recommended, please never attempt wound assisted delivery

Oval Optic IOL (Advantages) :

- Covers full / larger horizontal visual field
- Hence no negative dysphotopsia

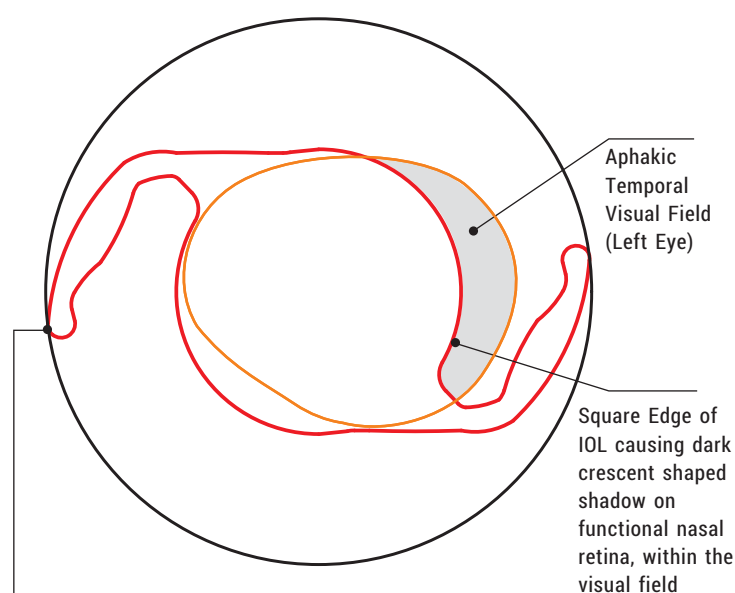


Zig-Zag L-Loop Advantages :

- 6.0 mm arc length contact area at capsular bag fornix
- High friction, hence rock solid rotational stability.

Conventional Round Optic IOL :

- Covers lesser than needed horizontal visual field
- Hence significant negative dysphotopsia in many cases



Modified C-Loop :

- Only loop tip is in contact at capsular bag fornix
- Small area of friction, hence lesser rotational stability.

*A-constant, ACD, and surgeon / lens factor are theoretical estimates only. It is recommended that each surgeon develop his / her own values.

INDICATIONS: Indicated for primary implantation for the visual correction of aphakia in patients in whom the cataractous lens has been removed by an extra-capsular cataract extraction method. The lens is intended for placement in the capsular bag. Can also be implanted to correct presbyopia in appropriate spaces.

PRECAUTIONS: Physicians considering lens implantation under any of the following circumstances should weigh the potential risk/benefit ratio: 1. Recurrent severe anterior or posterior segment inflammation or uveitis. 2. Patients in whom the intra ocular lens may affect the ability to observe, diagnose, or treat posterior segment diseases. 3. Surgical difficulties at the time of cataract extraction, which might increase the potential for complications (eg, persistent bleeding, significant iris damage, uncontrolled positive pressure, or significant vitreous prolapse or loss). 4. A distorted eye due to previous trauma or developmental defect in which appropriate support of the IOL is not possible. 5. Circumstances that would result in damage to the endothelium during implantation. 6. Suspected microbial infection. 7. Children under the age of 2 years are not suitable candidates for intra ocular lenses. 8. Patients in whom either the posterior capsule or zonules are not intact enough to provide support.

WARNINGS: Do not attempt to re-sterilise the lens. Do not soak or rinse the intra ocular lens with any solution other than sterile balanced salt solution, sterile Ringer's lactate or sterile normal saline. Do not store the lens at a temperature greater than 43°C (110°F). DO NOT FREEZE. Do not autoclave the intra ocular lens. Do not reuse the lens. It is intended for permanent implantation.

Designed By :

Milioptics Intra Ocular Lenses Pvt. Ltd.

Neelambag Circle, Bhavnagar-364001 (Guj) India

Contact : Mr. Pankaj Gajjar : +91 9265700456

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