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Patient Information: Crystalens



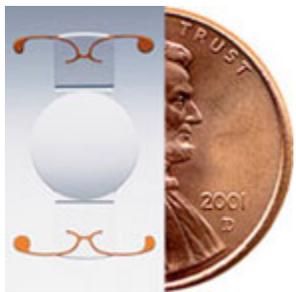
What is Crystalens?

Crystalens is an accommodating intraocular lens that, unlike a standard IOL, can treat both a person's cataracts and presbyopia—loss of near and intermediate vision. You probably noticed in your forties that you started to lose some of your up-close vision and had to start wearing reading glasses. Crystalens not only treats your cataracts (a clouding or hardening of your lens), but can also reduce or eliminate your dependence on glasses. It does so by recreating accommodation similar to your eye's natural lens. The unique Crystalens can reduce or eliminate glasses for most activities, including: reading a book, working on the computer, and driving a car.

Crystalens was modeled after the human eye. Like the natural lens, it uses the eye muscle to flex and accommodate in order to focus on objects in the environment at all distances. Crystalens dynamically adjusts to your visual needs.

[Click here to view a demonstration.](#)

Crystalens is designed to allow the optic, or the central circular part of the lens that you see through, to move back and forth as you constantly change focus on images around you. Crystalens flexes as you focus your vision.



Crystalens is:

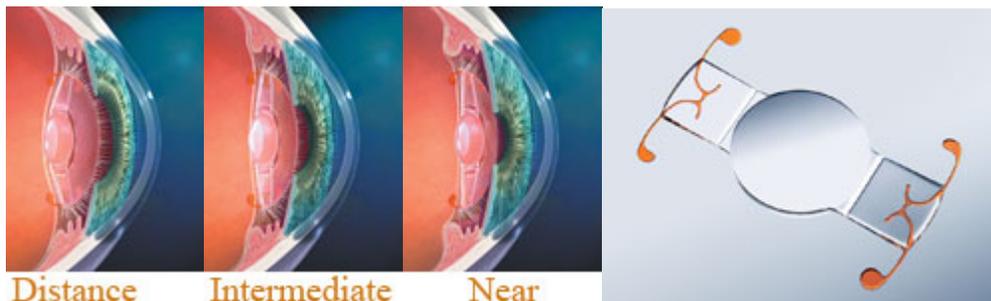
- The first and only FDA-approved accommodating intraocular lens
- The only FDA-approved intraocular lens that uses the natural focusing ability of the eye
- The only FDA-approved presbyopia correcting IOL for cataract patients that provides a single focal point throughout a continuous range of vision

Few patients with Crystalens have experienced problems with glare, halos and night vision. Crystalens focuses only one image to the back of the eye, unlike a multifocal lens that projects multiple images, requiring your brain to "adjust" to the differences.

The effectiveness of Crystalens was proven in clinical trials:

- Significantly more patients implanted with a Crystalens (88.4%) could see better at all distances than patients implanted with a standard IOL (35.9%).
- Most patients have continued to report excellent vision 7 years after implantation with Crystalens. More than 100,000 Crystalens implants have been implanted worldwide, and that number is growing daily.

Crystalens accommodates like the natural lens. After implantation of Crystalens, most patients will see brighter and clearer from distance, intermediate to near like they did when they were younger.



Distance Intermediate Near
ONLY FDA-Approved accommodating IOL

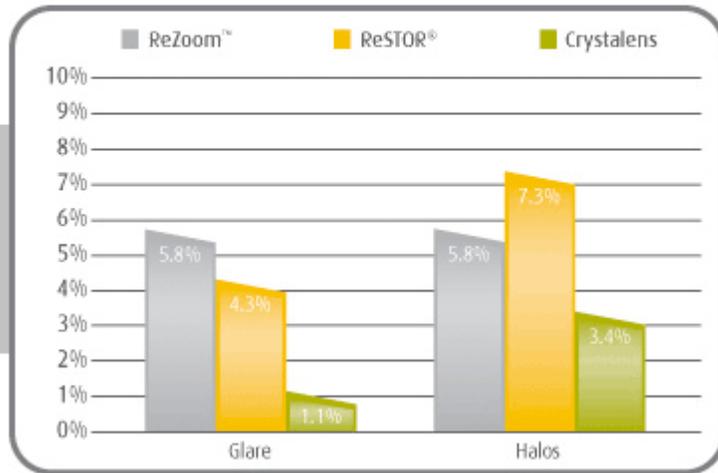
Crystalens is currently the only FDA-approved accommodating IOL. Crystalens addresses the limitations of standard monofocal IOLs and multifocal IOLs by providing the following advantages to patients:

- **Provides a Broad Range of Vision:** **Crystalens** moves and changes shape using the eye's natural focusing mechanism, instead of remaining fixed and stationary within the eye. This movement, or accommodation, allows the eye to focus on objects across a broad range of distances to reduce or eliminate dependence on glasses. In particular, this accommodation provides significant advantages in addressing intermediate vision.
- **Maintains Clarity of Vision:** Unlike multifocal lenses, **Crystalens** directs all available light received by the eye to a single focal point, comparable to that of a healthy natural lens.

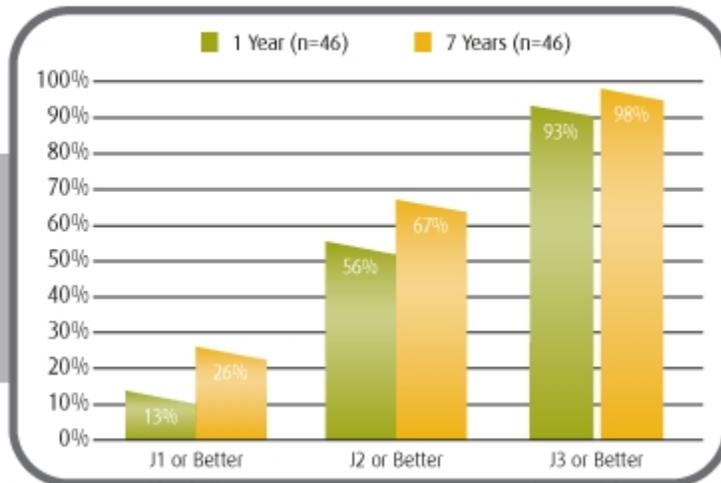
- Patient Adjustment Not Required: Crystalens** produces a single image consistent with normal vision, meaning patients do not need to neuroadapt to viewing multiple images. Patients also do not need to tolerate or adjust to high levels of halos and glare often associated with multifocal IOLs

Low Risk Of Halo And Glare¹

Multifocal Lenses Inherently Produce More Glare And Halos Than An Accommodating Monofocal Lens



DCNVA AT-45 Clinical Trial Population 1 Year vs 7 Years¹



Disclaimer *The information provided in this document is intended as a useful aid to general practitioners, optometrists and patients. It is impossible to diagnose and treat patients adequately without a thorough eye examination by a qualified ophthalmologist, optometrist or your general practitioner. Hopefully the information will be of use prior to and following a consultation which it supplements and does not replace.*

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