

State-of-the-Art
1.8mm
Microincision
Cataract
Surgery

*Akreos*TM
AO Micro Incision
Lens

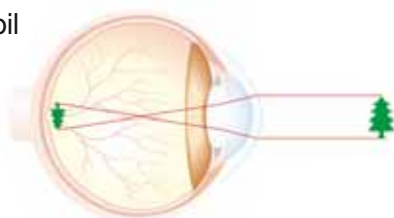
For
Quality
of Vision



MICROINCISION CATARACT SURGERY (MICS™)

The eye

Inside your eye, a clear lens is positioned behind your pupil and coloured iris. This lens helps to focus light rays onto the retina at the back of the eye so you can see clearly.



How does a cataract affect vision?

When a cataract forms, the lens becomes cloudy or opaque, causing:

- Blurry and hazy vision
- Double vision
- Difficulty seeing in bright light
- Impaired colour vision
- Progressive reduction in vision



Normal, clear lens

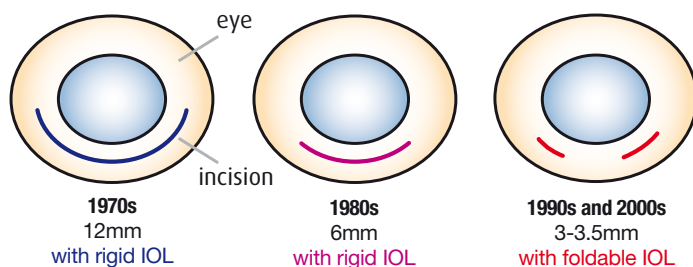


Lens clouded by cataract

Progress in cataract surgery

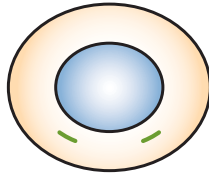
Cataracts are treated by surgically removing the cataract and implanting an artificial replacement called an intraocular lens (IOL). Recent advances in the cataract surgery procedure have gradually reduced the size of the incisions needed for surgery from 12mm to 3mm, making it safer and less invasive.

Reduction of incision to perform cataract surgery



Microincision cataract surgery (MICS™)

MICS is the most advanced, state-of-the-art technique for treating cataracts.



Latest technique
1.8mm
MICS foldable IOL

Now only two very small incisions of 1.8mm or less are required to perform the entire cataract surgery procedure.

The benefits of MICS™

Reducing the incision size with the pioneering MICS technique provides the following advantages: ^{1,2,3}

- Safe, reliable operation
- Less invasive, gentler surgery and improved patient comfort
- Prevents unwanted interferences to vision known as astigmatism
- Faster healing and recovery time - return to normal life more quickly

MICROINCISION CATARACT SURGERY (MICS™)

MICS™ procedure

Specialised MICS equipment and instruments are used to perform the surgery in a safe and stable manner.



Cataract surgery



Implanting the IOL

An ultrasound probe is used to safely break up the cataract using a technique called phacoemulsification. The cataract is then removed with suction (aspiration). The eye is then ready to receive the artificial lens.

Microincisions and the MICS™ IOL

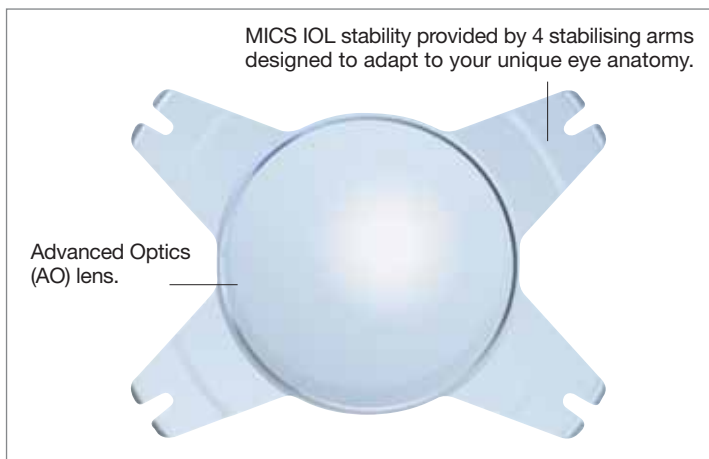
Intraocular lens (IOLs) are designed to restore your sight and give the best possible quality of vision.

To gain the full benefit of the MICS technique, it is important to also use an IOL designed to be implanted through a 1.8mm microincision.

The larger incisions used for standard cataract surgery and standard IOLs may cause unwanted changes to the eye, known as surgically induced astigmatism. These changes can cause image interference and reduce the quality of vision.

The Akreos™ AO Microincision Lens: The State-of-the-Art MICS IOL

The Bausch & Lomb Akreos™ AO Microincision Lens, called the Akreos MI60 IOL is specifically designed to be implanted through a 1.8mm microincision.



It combines the latest technical optical innovation with the benefits of the MICS procedure.

The MICS Akreos MI60 IOL cares for your vision. Implanting the Akreos MI60 IOL through a microincision optimises good visual results.

MICROINCISION CATARACT SURGERY (MICS™)

Perfectly shaped for stable vision

The MICS *Akreos*™ MI60 IOL is designed for maximum stability to help maintain sharp, distance vision over time.



Simulation of poor defocused image



Simulation of stable vision with MICS IOL



Akreos MI60 IOL stays stable in the eye

Higher definition vision

All eyes, even eyes with perfect 20/20 vision, have naturally occurring imperfections called aberrations. These imperfections become more obvious in low light conditions, affecting the quality of vision and causing visual disturbances.



Simulation of vision with visual disturbances



Simulation of vision with aspheric, aberration-free, high definition MICS IOL

Standard spherical IOLs induce aberrations too, called spherical aberrations. The MICS Akreos MI60 IOL is a lens without these imperfections, known as an aspheric, aberration-free IOL. The Akreos MI60 IOL is designed to reduce visual disturbances to give high definition and high resolution vision, with increased contrast sensitivity.

MICROINCISION CATARACT SURGERY (MICS™)

Biocompatible material designed for Optical Quality and Comfort

The Akreos™ MI60 lens implant is made from a clinically proven, biocompatible material, which is well tolerated in the eye and has already been safely used in 2 million implants.

The Akreos material:

- Limits light related problems such as halos and glare
- Gives high resolution vision



Simulation of halos and light-related problems



Simulation of aberration-free MICS IOL

Clinical performance of the Akreos™ MI60 lens⁴

- The Akreos MI60 lens provides rapid visual recovery with excellent and predictable visual outcomes
- The Akreos MI60 lens has demonstrated stability in the eye to maintain excellent visual outcomes

Recommended by cataract surgeons

“The MI60 is the latest addition to the successful Akreos range. Like its predecessors, it centres well and has excellent optical performance. The MI60 passes easily through a 1.8 mm wound making it the LOGICAL lens choice for the microincision cataract surgeon.”

Dr Peter Heiner, MBBS, FRANZCO, FRACS
Consultant Ophthalmologist
Vision Eye Institute, Queensland, Australia

MICROINCISION CATARACT SURGERY (MICS™)

Choosing the MICS™ Akreos™ MI60 IOL

The aspheric aberration-free Akreos MI60 IOL is a state-of-the-art treatment to restore excellent quality of vision for your eyes. This lens will correct your distance vision. Your surgeon will prescribe your spectacles for sharp near vision.



Ophthalmologist Advice

Your ophthalmologist will be able to advise on choosing the most suitable IOL to meet your personal needs and answer any questions or concerns on the procedure.

Dos and Don'ts following surgery



Dos

- Attend follow-up appointments
- Take the prescribed medication such as eye drops
- Wear sunglasses when you leave hospital

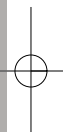
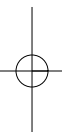


Don'ts

- Rub eyes
- Lift heavy objects or conduct strenuous activity
- Go out in windy weather
- Get soap in your eyes

Clinical Studies

1. Alió J, Rodríguez-Prats JL, Galal A & Ramzy M. Outcomes of Microincision Cataract Surgery versus Coaxial Phacoemulsification. American Academy of Ophthalmology 2005;112(11):1997-2003.
2. Ke Yao, Xiajing Tang, Panpan Ye. Corneal Astigmatism, Higher Order Aberrations, and Optical Quality After Cataract Surgery: Microincision Versus Small Incision. Journal of Refractive Surgery 2006; November (Suppl): S1079-S1082.
3. Kurz S, Krummenauer F, Gabriel P, Pfeiffer N and Dick HB. Biaxial Microincision versus Coaxial Small-Incision Clear Cornea Cataract Surgery. Ophthalmology 2006;113(10):1818-1826.
4. T. Amzallag. Akreos Micro-Incision IOL: final results of a pilot clinical study at one year follow up. Free Paper 2006.



For further information, please visit
www.micsplatform.com and
www.bausch.com

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