Recognize both.

Recommend AcrySof® IQ Toric IOL.

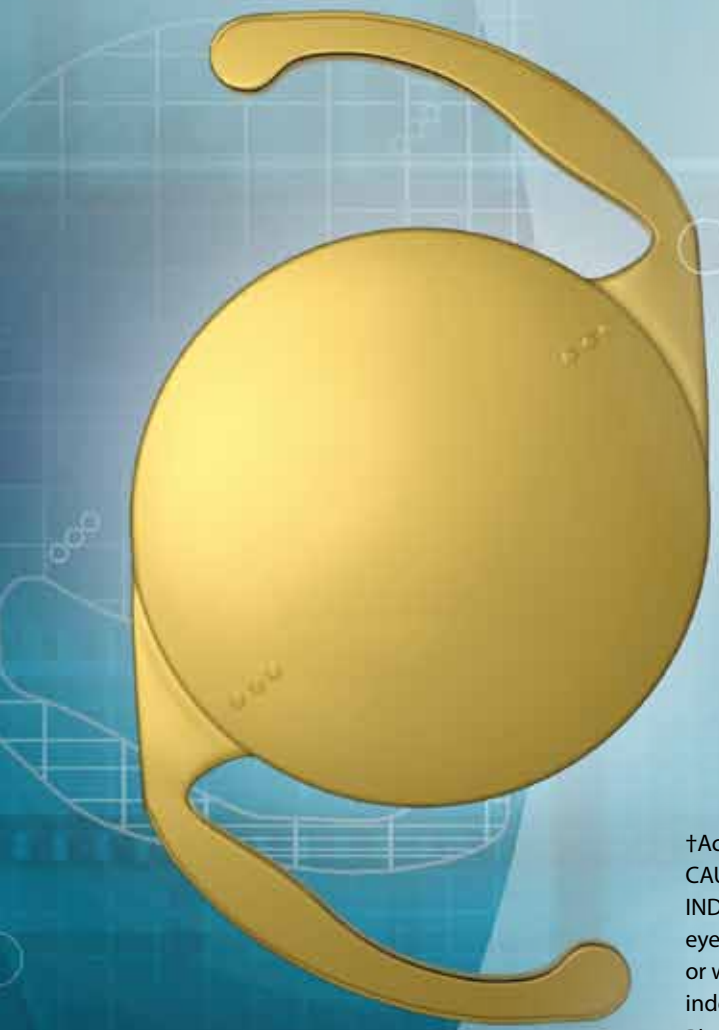
ACRYSof® IQ
TORIC
ASTIGMATISM IOL

Alcon®

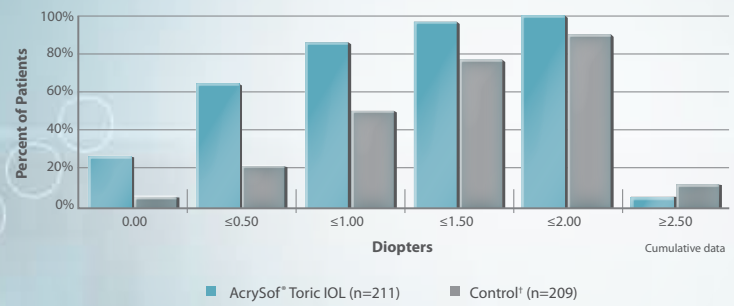
Precise Astigmatism Correction

With the AcrySof® IQ Toric IOL, you can confidently treat your patient's cataract and provide precise astigmatism correction in a single procedure.

The AcrySof® IQ Toric IOL reduces astigmatism for increased spectacle-independent distance vision and high patient satisfaction.[1,2]

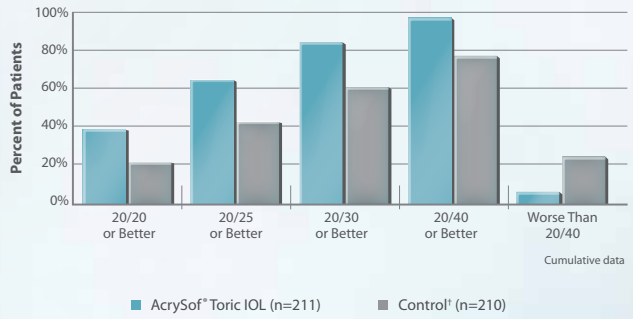


Reduction of Residual Refractive Cylinder[1]



63% of patients implanted achieved ≤0.50 diopters of residual refractive cylinder. 87% achieved ≤1.00 diopters.[1]

Improved Uncorrected Distance Visual Acuity[1]



94% of patients implanted achieved uncorrected distance visual acuity of 20/40 or better.[1]

†AcrySof® Single-Piece IOL (SA60AT)

CAUTION: Federal (USA) law restricts this device to the sale by or on the order of a physician.

INDICATIONS: The AcrySof® IQ Toric posterior chamber intraocular lenses are intended for primary implantation in the capsular bag of the eye for visual correction of aphakia and pre-existing corneal astigmatism secondary to removal of a cataractous lens in adult patients with or without presbyopia, who desire improved uncorrected distance vision, reduction of residual refractive cylinder and increased spectacle independence for distance vision.

Please refer to the back cover for important safety information for AcrySof® IQ Toric IOL.

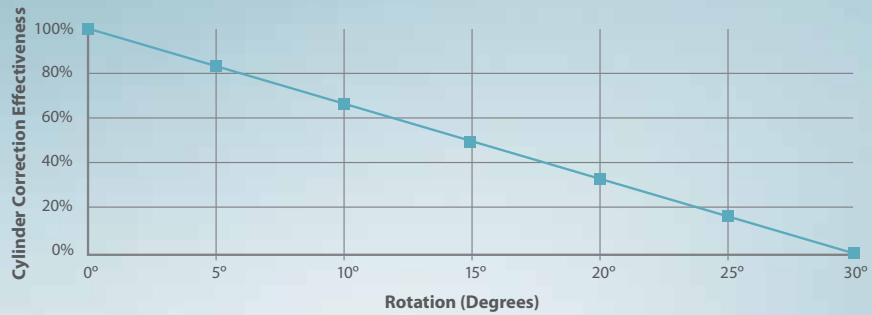
Unparalleled Rotational Stability[3]

The AcrySof® Single-Piece platform makes the difference.

Proven biomechanics and biomaterial helps to ensure minimal rotation — less than 4° average rotation six months after implantation.[1,2]

- STABLEFORCE® haptics keep the AcrySof® IQ Toric IOL highly stable and centered in the capsular bag[2]
- Flexible haptic design provides optimal placement in capsular bag, regardless of size[2]
- AcrySof® lens material binds to fibronectin, ensuring adhesion to the anterior/posterior capsule[4]

Impact of Rotation on Correction[1]

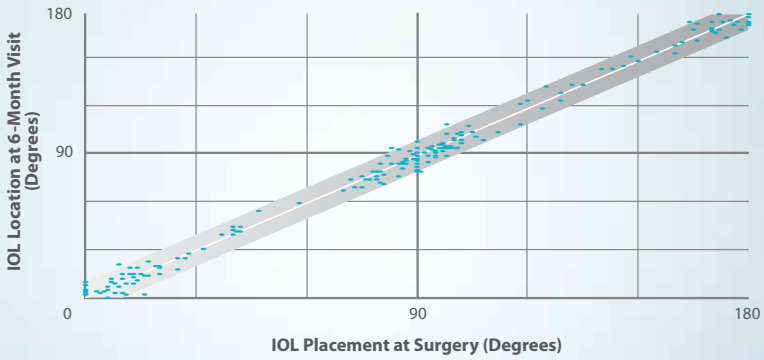


Note: Rotation of AcrySof® IQ Toric IOLs away from their intended axis can reduce their astigmatic correction. Misalignment greater than 30° may increase postoperative refractive cylinder. If necessary, lens repositioning should occur as early as possible prior to lens encapsulation. Some clinical cases suggest encapsulation is complete within four weeks of implantation.[5]

Adverse Events Incidence Rates First Eye – Safety[5]

	Model SA60TT N=244		FDA Grid Rate
Cumulative Adverse Events	**N**	**%**	**%**
Retinal Detachment/Repair	1	0.4	0.3
Surgical Reintervention	4[a]	1.6	0.8
IOL Reposition Due to Rotation	1	0.4	NA
IOL Replacement Due to Rotation	1	0.4	NA
Laser Treatment	2	0.8	NA
Paracentesis	1	0.4	NA

Lens Axis Orientation[1]
(Operative vs. Six Months Postoperative)



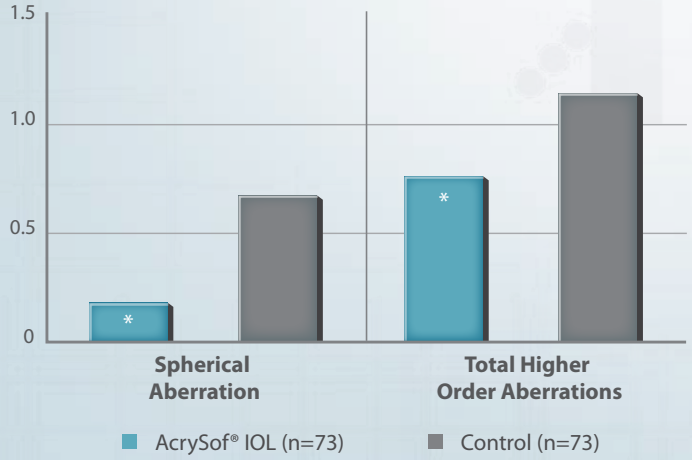
81.1% of patients were ≤5° of intended axis,[2] and 97.1% were ≤10° of intended axis.[1]

Excellent Visual Performance

Reduced Spherical Aberration

The AcrySof® IQ Toric IOL is designed with negative spherical aberration to compensate for the positive aberration of the average cornea. This aspheric optic design is shown to reduce both spherical and total higher order aberrations for enhanced visual performance.[5]

Spherical and Total Higher Order Aberrations 90-120 Days After 2nd Eye Implant[5]



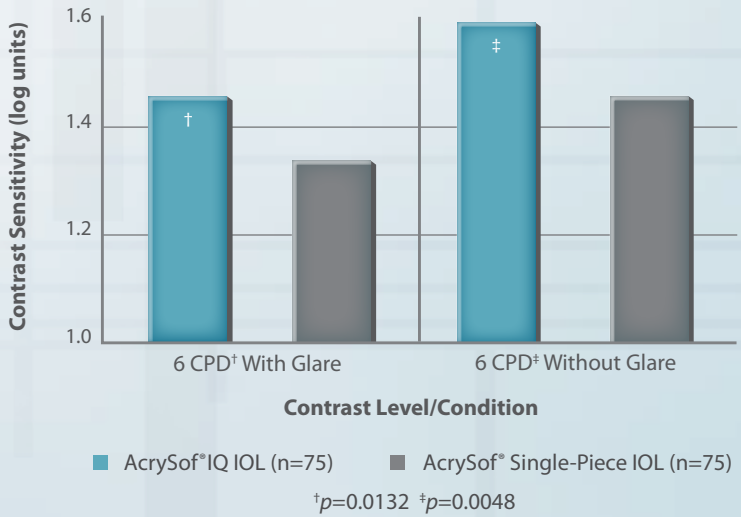
*Differences favor AcrySof® IOL overall and at each visit ($p<0.0001$).

AcrySof® IQ IOL showed statistically significant reduction in both spherical and total higher order aberrations.[5]

Increased Contrast Sensitivity

Engineered to improve contrast sensitivity in low-light conditions,[5] the aspheric design of the AcrySof® IQ Toric IOL plays a vital role in image quality.

Contrast Sensitivity in Mesopic Conditions[1]**



**Contrast sensitivity was measured using Vector Vision CSV-1000.

AcrySof® IQ IOL showed statistically significant improvement[1] in mesopic contrast sensitivity over the control lens in situations with and without glare at 6 cycles per degree (cpd).

Improved Functional Vision

Functional vision is an important consideration for your patients with astigmatism. When it comes to object detection and identification, a fraction of a second can make all the difference.

Improved Nighttime Driving

The AcrySof® IQ IOL has demonstrated statistically significant superiority when patients need it most — in nighttime conditions. When measured against the control lens, the AcrySof® IQ IOL:

- Performed functionally better in 34 of 36 conditions[5]
- Improved functional vision under real-world challenges[5]
- Allowed patients more time to take appropriate action[5]

Additional Stopping Distance With AcrySof® IQ IOL (in a rural setting in fog conditions at 55 mph)

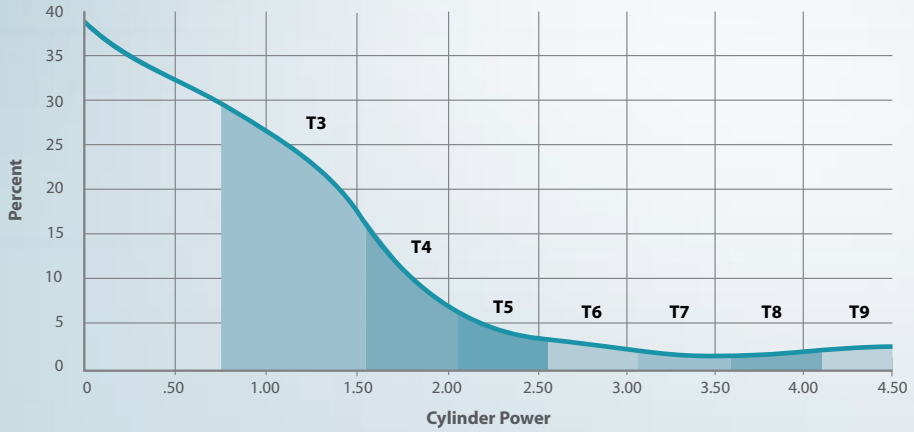
AcrySof® IQ IOL patients had an average increase of 130+ feet (versus the control lens) in which to stop after identifying a warning sign.
Results of a controlled, randomized, double-masked, multicenter, contralateral implant clinical study of the AcrySof® IQ IOL versus an AcrySof® Single-Piece IOL (SA60AT). See Directions for Use.

More Powers for More Patients

An Expanded Range of Options

With cylinder powers from T3 to T9, the AcrySof® IQ Toric IOL can accommodate more cataract patients with astigmatism, including those with low, medium and high levels of astigmatism.

Estimated Distribution of Preoperative Cylinder[1]



ALCON® LENS MODEL		SN6AT3	SN6AT4	SN6AT5	SN6AT6	SN6AT7	SN6AT8	SN6AT9
Cylinder Power	IOL Plane	1.50 D	2.25 D	3.00 D	3.75 D	4.50 D	5.25 D	6.00 D
	Corneal Plane*	1.03 D	1.55 D	2.06 D	2.57 D	3.08 D	3.60 D	4.11 D
Recommended Corneal Astigmatism Correction Range		0.75D to 1.54 D	1.55 D to 2.05 D	2.06 D to 2.56 D	2.57 D to 3.07 D	3.08 D to 3.59 D	3.60 D to 4.10 D	4.11 D and up

*Based on average pseudophakic human eye.

— Estimated Percent of Cataract Patients with Astigmatism

AcrySof® IQ Toric IOL Calculator[1]

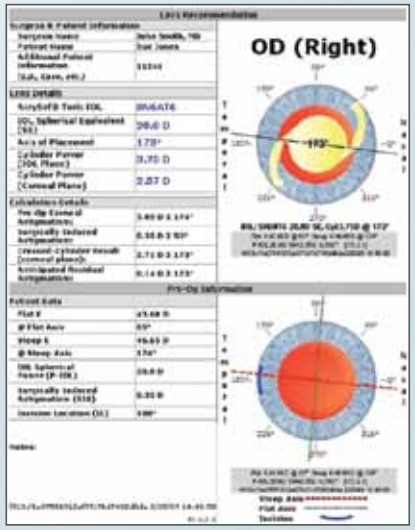
The AcrySof® IQ Toric IOL Calculator is an innovative tool designed to help improve toric outcomes. Designed for precise surgical planning, this online application allows for:

Easy Input

- Patient data
- Keratometry
- IOL spherical power
- Incision location
- Surgically induced astigmatism

Powerful Output

- IOL recommendation
- Axis placement
- Anticipated residual astigmatism



AcrySofToricCalculator.com

Please refer to the back cover for important safety information for AcrySof® IQ Toric IOL.

The AcrySof® Family

The Power of a Proven Platform

Built on the proven AcrySof® platform, the AcrySof® Toric IOL shares the same benefits of the entire AcrySof® family:

CONFIDENCE | THE ACRYSof® ADVANTAGE®

Excellent Biomechanics

- Single-piece design for rotational stability
- Patented STABLEFORCE® haptics for capsular bag stability

Optimal Biomaterials

- High refractive index for thinner IOL profile
- UV and blue-light filtration

Advanced Optics

- Proven aspheric design for image quality
- Thin edge profile

Ease of Implantation[1,6]

- Consistent design
- Consistent delivery
- Predictably unfolds*
- Easier centration*

Trusted Leadership

- Over 60 million AcrySof® IOL implants[7]
- Backed by the Alcon network of support

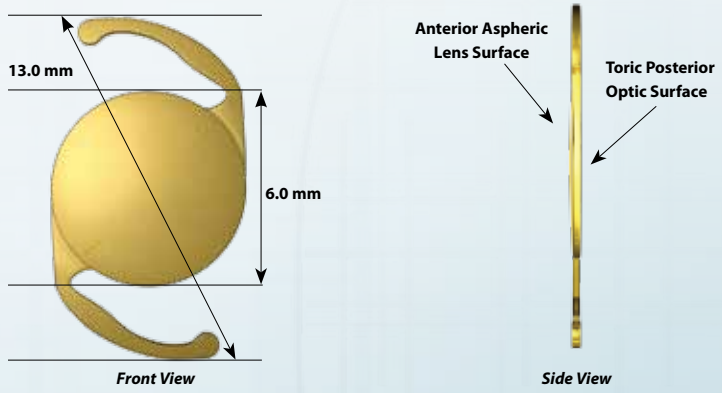
* Bench data on file: Monarch® Delivery Systems.

Over 60 Million Implants Worldwide

Specifications

Model Number	SN6AT3	SN6AT4	SN6AT5	SN6AT6	SN6AT7	SN6AT8	SN6AT9
IOL Cylinder Power	1.50 D	2.25 D	3.00 D	3.75 D	4.50 D	5.25 D	6.00 D
Optic Diameter	6.0 mm						
Overall Length	13.0 mm						
Optic Type	Biconvex Toric Aspheric Optic						
IOL Powers (Spherical Equivalent Diopters)	+6.0 D to +30.0 D						
Haptic Angulation	0 Degrees (Planar)						
Haptic Configuration	STABLEFORCE® Modified L Haptic						
Suggested A-Constant	119.0†						
Refractive Index	1.55						
Light Filtration	UV and Blue Light						

† Provided as a guideline only.



AcrySof® IQ Toric IOL

Please refer to the back cover for important safety information for AcrySof® IQ IOLs.

IMPORTANT SAFETY INFORMATION:

AcrySof® IQ Toric IOL

CAUTION: Federal (USA) law restricts this device to the sale by or on the order of a physician.

INDICATIONS: The AcrySof® IQ Toric posterior chamber intraocular lenses are intended for primary implantation in the capsular bag of the eye for visual correction of aphakia and pre-existing corneal astigmatism secondary to removal of a cataractous lens in adult patients with or without presbyopia, who desire improved uncorrected distance vision, reduction of residual refractive cylinder and increased spectacle independence for distance vision.

WARNING/PRECAUTION: Careful preoperative evaluation and sound clinical judgment should be used by the surgeon to decide the risk/benefit ratio before implanting a lens in a patient with any of the conditions described in the Directions for Use labeling. Toric IOLs should not be implanted if the posterior capsule is ruptured, if the zonules are damaged, or if a primary posterior capsulotomy is planned. Rotation can reduce astigmatic correction; if necessary lens repositioning should occur as early as possible prior to lens encapsulation. All viscoelastics should be removed from both the anterior and posterior sides of the lens; residual viscoelastics may allow the lens to rotate.

Optical theory suggest, that, high astigmatic patients (i.e. > 2.5 D) may experience spatial distortions. Possible toric IOL related factors may include residual cylindrical error or axis misalignments. Prior to surgery, physicians should provide prospective patients with a copy of the Patient Information Brochure available from Alcon for this product informing them of possible risks and benefits associated with the AcrySof® IQ Toric Cylinder Power IOLs.

Studies have shown that color vision discrimination is not adversely affected in individuals with the AcrySof® Natural IOL and normal color vision. The effect on vision of the AcrySof® Natural IOL in subjects with hereditary color vision defects and acquired color vision defects secondary to ocular disease (e.g., glaucoma, diabetic retinopathy, chronic uveitis, and other retinal or optic nerve diseases) has not been studied. Do not resterilize; do not store over 45° C; use only sterile irrigating solutions such as BSS® or BSS PLUS® Sterile Intraocular Irrigating Solutions.

ATTENTION: Reference the Directions for Use labeling for a complete listing of indications, warnings and precautions.

1. AcrySof® IQ Toric IOL Directions for Use.
2. Lane SS, Ernest P, Miller KM, Hileman KS, Harris B, Waycaster CR. Comparison of clinical and patient reported outcomes with bilateral AcrySof® Toric or spherical control intraocular lenses. *J Refract Surg*. In press.
3. Chang, D. Comparative rotational stability of single-piece open-loop acrylic and plate-haptic silicone toric intraocular lenses. *J Cataract Refract Surg.* 2008;34:1842-1847.
4. Linnola RJ, Sund M, Ylönen R, Pihlajaniemi T. Adhesion of soluble fibronectin, laminin, and collagen type IV to intraocular lens materials. *J Cataract Refract Surg.* 1999;25:1486-1491.
5. Results of a controlled, randomized, double-masked, multicenter, contralateral implant clinical study of the AcrySof® IQ IOL versus an AcrySof® Single-Piece IOL (SA60AT). See Directions for Use.
6. Independent third party research; Data on File, December 2011.
7. Data on file. Alcon® R&D Technical Report.

© 2012 Novartis 1/12 TOR11391SA AlconSurgical.com

AcrySof® IQ IOL

CAUTION: Federal (USA) law restricts this device to the sale by or on the order of a physician.

INDICATIONS: The AcrySof® IQ posterior chamber intraocular lens is intended for the replacement of the human lens to achieve visual correction of aphakia in adult patients following cataract surgery. This lens is intended for placement in the capsular bag.

WARNING/PRECAUTION: Careful preoperative evaluation and sound clinical judgment should be used by the surgeon to decide the risk/benefit ratio before implanting a lens in a patient with any of the conditions described in the Directions for Use labeling. Caution should be used prior to lens encapsulation to avoid lens decentrations or dislocations.

Studies have shown that color vision discrimination is not adversely affected in individuals with the AcrySof® Natural IOL and normal color vision. The effect on vision of the AcrySof® Natural IOL in subjects with hereditary color vision defects and acquired color vision defects secondary to ocular disease (e.g., glaucoma, diabetic retinopathy, chronic uveitis, and other retinal or optic nerve diseases) has not been studied. Do not resterilize; do not store over 45° C; use only sterile irrigating solutions such as BSS® or BSS PLUS® Sterile Intraocular Irrigating Solutions.

ATTENTION: Reference the Directions for Use labeling for a complete listing of indications, warnings and precautions.

AcrySof® IQ ReSTOR® IOL

CAUTION: Federal (USA) law restricts this device to the sale by or on the order of a physician.

INDICATIONS: The AcrySof® IQ ReSTOR® Posterior Chamber Intraocular Lens (IOL) is intended for primary implantation for the visual correction of aphakia secondary to removal of a cataractous lens in adult patients with and without presbyopia, who desire near, intermediate and distance vision with increased spectacle independence. The lens is intended to be placed in the capsular bag.

WARNING/PRECAUTION: Careful preoperative evaluation and sound clinical judgment should be used by the surgeon to decide the risk/benefit ratio before implanting a lens in a patient with any of the conditions described in the Directions for Use labeling. Physicians should target emmetropia, and ensure that IOL centration is achieved. Care should be taken to remove viscoelastic from the eye at the close of surgery.

Some patients may experience visual disturbances and/or discomfort due to multifocality, especially under dim light conditions. Clinical studies with the AcrySof® ReSTOR® lens indicated that posterior capsule opacification (PCO), when present, developed earlier into clinically significant PCO. Prior to surgery, physicians should provide prospective patients with a copy of the Patient Information Brochure available from Alcon for this product informing them of possible risks and benefits associated with the AcrySof® IQ ReSTOR® IOLs.

Studies have shown that color vision discrimination is not adversely affected in individuals with the AcrySof® Natural IOL and normal color vision. The effect on vision of the AcrySof® Natural IOL in subjects with hereditary color vision defects and acquired color vision defects secondary to ocular disease (e.g., glaucoma, diabetic retinopathy, chronic uveitis, and other retinal or optic nerve diseases) has not been studied. Do not resterilize; do not store over 45° C; use only sterile irrigating solutions such as BSS® or BSS PLUS® Sterile Intraocular Irrigating Solutions.

ATTENTION: Reference the Directions for Use labeling for a complete listing of indications, warnings and precautions.

ACRYSof® IQ
TORIC
ASTIGMATISM IOL

Alcon®