

Alcon

AcrySof® IQ Vivity™ Intraocular Lens (IOL) with X-Wave Technology

The new IOL option when you're looking to correct patient's vision at the time of cataract surgery.



Introducing AcrySof® IQ Vivity™

The latest addition to Alcon's intraocular lens (IOL) portfolio, the AcrySof® IQ Vivity™ lens is the first and only non-diffractive extended depth of focus (EDOF) IOL in the U.S. It expands surgeons' presbyopia-mitigating IOL offerings—bringing a new option to U.S. patients undergoing cataract surgery and looking to restore and improve their vision.¹

Delivers monofocal-quality distance (far), with excellent intermediate (at arm's length) and functional near vision (up close).¹



High Quality Vision Far Away



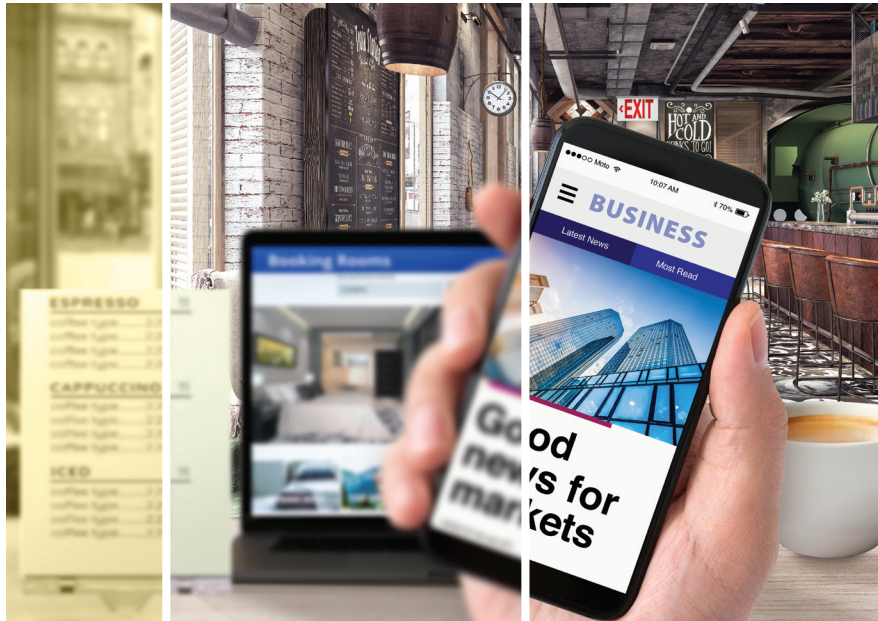
High Quality Vision at Arm's Length



Functional Vision Up Close

Providing a continuous extended range of vision

Patients have high quality vision from distance to functional near, which is an improvement compared to the standard monofocal lens.



CATARACTS

Cloudy

Simulated images.

MONOFOCAL LENS

Distance Only

ACRYSOF® IQ VIVITY™ LENS

Far away and arm's length enhanced, up close improved

Rediscover Clarity with Clinically Proven Benefits

According to results from a U.S. clinical trial, 107 patients who had the Vivity lens implanted experienced renewed vision and lifestyle benefits, including:

94%

reported good to very good vision far away – without glasses in bright light.^{1††}

92%

reported good to very good vision at arm's length – without glasses in bright light.^{1††}

90%

were satisfied with their results and would get the lens again.^{3‡‡}

AcrySof® IQ Vivity™ with X-Wave Technology

How does X-Wave Technology work?



The technology stretches and shifts light without splitting it. Alcon's proprietary non-diffractive X-WAVE™ technology delivers an extended range of vision while maintaining a monofocal-like visual disturbance profile.^{1,2}

What does that mean for patients? Vivity's ability to stretch and shift the light entering the eye essentially uses all available light energy, and provides continuous extended focal range.²



Did You Know?

Cataracts are the most common cause of vision loss globally.⁴ The U.S. market is expected to grow to 5.4 million cataract surgeries in 2025.⁵ With the aging population, the number of people in the U.S. with cataracts is expected to double by 2050.⁴

AcrySof® IQ Vivity™ Extended Vision Family of IOLs

IMPORTANT PRODUCT INFORMATION

CAUTION: Restricted by law to sale by or on the order of a physician.

DESCRIPTION: The AcrySof® IQ Vivity™ Extended Vision IOL is a type of IOL used to focus images clearly onto the back of your eye (retina) to allow clear vision after the cataract removal. The AcrySof® IQ Vivity™ Extended Vision IOL provides clear distance vision (e.g., for watching children playing in the backyard). In addition, the AcrySof® IQ Vivity™ Extended Vision IOL allows for better intermediate (working on a computer, applying makeup or shaving) and some near (reading, knitting) vision compared to what a monofocal IOL would provide. The AcrySof® IQ Vivity™ IOL is not a multifocal IOL, as it uses a new Wavefront-Shaping technology to provide the broader range of vision. There is a chance you may still need glasses for distance, intermediate, and/or near vision. You will get the full benefit of the AcrySof® IQ Vivity™ Extended Vision IOL when it is implanted in both eyes. Please discuss with your eye doctor whether this is the right IOL for you.

POTENTIAL SIDE EFFECTS: There are some side effects that can be associated with the design of IOLs that provide a broader range of vision, which may be worse than with a monofocal IOL. These side effects include visual disturbances such as glare, rings around lights, starbursts, and a decrease in ability to distinguish objects from their background, especially in dim lighting. These side effects may make it more difficult to see in some situations. Contrast sensitivity, an important measure of visual function, is the ability to distinguish objects from their background, especially in dim lighting. In the AcrySof® IQ Vivity™ IOL clinical study, contrast sensitivity in dim lighting was reduced in patients who received the AcrySof® IQ Vivity™ IOL compared to those who received the Monofocal IOL. A toric IOL corrects astigmatism only when it is placed in the correct position in the eye. Some patients may have some level of astigmatism remaining after IOL placement, especially if they had a lot of astigmatism before surgery. There is also a possibility that the toric IOL could be placed incorrectly or could move within the eye. As with any toric IOL that provides an extended range of vision, if the lens is not positioned correctly in your eye, or if the amount of astigmatism to be corrected is calculated incorrectly, you may experience poor vision, you may need to wear glasses to see clearly at all distances, or you may need additional surgery to reposition or replace the IOL.

ATTENTION: As with any surgery, there are risks involved. Prior to surgery, ask your eye doctor to provide you with the Patient Information Brochure for the proposed AcrySof® IQ Vivity™ Extended Vision IOL to be implanted. This document will further inform you of the risks and benefits associated with this IOL. Discuss any questions about possible risks and benefits with your eye doctor, as well as your medical condition and any eye disease you may have.

REFERENCES:

1. AcrySof® IQ Vivity™ Extended Vision IOL DFU. Alcon Laboratories, Inc.; 2020.
2. Alcon Data on File, 2019.
3. Alcon Data on File, 2019.

4. Cataract Data and Statistics. National Eye Institute. <https://www.nei.nih.gov/learn-about-eye-health/resources-for-health-educators/eye-health-data-and-statistics/cataract-data-and-statistics>.
5. Alcon Data on File, 2020.

*Results from a prospective, randomized, parallel group, subject- and assessor-masked, multisite trial of 107 subjects bilaterally implanted with the AcrySof® IQ Vivity™ IOL and 113 with the AcrySof® IQ IOL with 6 months' follow-up. Patient-reported outcomes for spectacle independence were evaluated subjectively through IOLSAT questionnaire.

†Patients were asked, "How well did you see without wearing eyeglasses in the past 7 days?" Patients who reported not using glasses at least some of the time were asked to rate their quality of vision.

‡In response to the question asked 6 months after surgery: "Given your vision today, if you had to do it all over, would you have the same lens implanted again?"