

WHAT HAPPENS IN VEGAS DOESN'T ALWAYS STAY IN VEGAS!

Today, more and more surgeons are opting for Alcon's AcrySof IQ PanOptix® and AcrySof IQ Vivity™ IOLs, but some still have questions. They want to know: What are the major differences, and how do you decide when to use which lens?

At the 2021 ASCRS Annual Meeting in Las Vegas, Quentin Allen, MD, moderated a discussion with Nicole Fram, MD; Toby Tyson, MD; and Elizabeth Yeu, MD, where the panelists broke down how the PanOptix® and Vivity™ lenses work, shared their own experiences with these cutting-edge IOLs, and presented cases allowing the audience to vote on which lens they'd have chosen.

FOR MORE FROM THIS SYMPOSIUM, SEE A FUTURE ISSUE OF CATARACT & REFRACTIVE SURGERY TODAY!



How do we decide whether someone is a PanOptix® or Vivity™ candidate?

"I really make the choice based on what the patient does all day and their willingness to wear reading glasses at times. So, if they have a lot of issues with driving at night, in my experience, I will shy away from something that has more visual disturbances. If you really listen to your patients, that helps guide you on which direction to go." – **NICOLE FRAM, MD**

♥ **QUENTIN ALLEN, MD**
(MODERATOR)

♣ **TOBY TYSON, MD**

♠ **NICOLE FRAM, MD**

♦ **ELIZABETH YEU, MD**



"Alcon is one of the companies that has been innovating despite the fact that there was a global hiatus. The company was still working on our behalf, developing new technologies and trying to energize the market segment of presbyopia mitigation and advanced technology lenses." – **QUENTIN ALLEN, MD**



"Certainly, there are going to be patients who are concerned about the visual dysphotopsias, and this is where the Vivity™ lens really shines. With dysphotopsias, such as starburst, glare, and halos, concerns are comparable to a monofocal IOL."¹ – **ELIZABETH YEU, MD**

"It doesn't matter how good the lens is on paper. What matters is, does the patient love it, and are they out there telling their friends about it?" – **TOBY TYSON, MD**



"The thing that's so exciting about what's happening with the PanOptix® and what's happening with the Vivity™ is that a lot of times we have the marketing material, and then we have what we tell our patients. It's the first time in my career where the two line up, and it's just so exciting." – **NICOLE FRAM, MD**



"The light utilization of the PanOptix® allows for a reduced dependence on pupil size.^{2,3} So not only is my discussion with the patients simplified—which is also reducing the number of options they have to choose from—but it's also allowing a large group of patients to enjoy this type of technology." – **TOBY TYSON, MD**

Here's What Else You Missed in Las Vegas!

At the Vivity™ EyeVenture Live from Las Vegas, Cathleen McCabe, MD, moderated a panel with Shamik Bafna, MD; Neel Desai, MD; and Dagny Zhu, MD, where the surgeons shared their early experiences with the Vivity™ lens. In addition to presenting real-world cases, the panelists discussed the presbyopia-correcting IOL market and the Vivity™ View IOL, and engaged in an interactive "Wheel of Vision" game featuring real-world case studies.

Case Scenarios: PanOptix® or Vivity™?

The panelists shared a series of cases and asked the audience to vote on which lens would work best in each scenario. For more on the cases and which IOL was used, pick up a future issue of *CRST!*

1. AcrySof® IQ Vivity™ Extended Vision IOL Directions for Use.

2. Alcon Data on File, 2015.

3. Alcon Data on File, 2014.

IMPORTANT PRODUCT INFORMATION - AcrySof® IQ PanOptix® and Vivity Family of IOLs

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

INDICATIONS

The AcrySof® IQ PanOptix® Trifocal IOL, AcrySof® IQ PanOptix® Toric, AcrySof® IQ Vivity™ Extended Vision IOL and AcrySof® IQ Vivity™ Toric IOLs are indicated for visual correction of aphakia in adult patients following cataract surgery. In addition, the AcrySof Toric IOLs are indicated to correct pre-existing corneal astigmatism at the time of cataract surgery. The AcrySof® IQ PanOptix® lens mitigates the effects of presbyopia by providing improved intermediate and near visual acuity, while maintaining comparable distance visual acuity with a reduced need for eyeglasses, compared to a monofocal IOL. The AcrySof® IQ Vivity™ lens mitigates the effects of presbyopia by providing an extended depth of focus. Compared to an aspheric monofocal IOL, the lens provides improved intermediate and near visual acuity, while maintaining comparable distance visual acuity. All of these IOLs are intended for placement in the capsular bag.

WARNINGS/PRECAUTIONS: 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.

For the PanOptix® Toric and Vivity™ IOLs, the lens 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.

For the AcrySof® IQ PanOptix® IOL, some visual effects may be expected due to the superposition of focused and unfocused multiple images. These may include some perceptions of halos or starbursts, as well as other visual symptoms. As with other multifocal IOLs, there is a possibility that visual symptoms may be significant enough that the patient will request explant of the multifocal IOL. A reduction in contrast sensitivity as compared to a monofocal IOL may be experienced by some patients and may be more prevalent in low lighting conditions. Therefore, patients implanted with multifocal IOLs should exercise caution when driving at night or in poor visibility conditions. Patients should be advised that unexpected outcomes could lead to continued spectacle dependence or the need for secondary surgical intervention (e.g., intraocular lens replacement or repositioning). As with other multifocal IOLs, patients may need glasses when reading small print or looking at small objects. Posterior capsule opacification (PCO), may significantly affect the vision of patients with multifocal IOLs sooner in its progression than patients with monofocal IOLs.

For the AcrySof® IQ Vivity™ IOL, most patients implanted with the Vivity™ IOL are likely to experience significant loss of contrast sensitivity as compared to a monofocal IOL. Therefore, it is essential that prospective patients be fully informed of this risk before giving their consent for implantation of the AcrySof® IQ Vivity™ IOL. In addition, patients should be warned that they will need to exercise caution when engaging in activities that require good vision in dimly lit environments, such as driving at night or in poor visibility conditions, especially in the presence of oncoming traffic. It is possible to experience very bothersome visual disturbances, significant enough that the patient could request explant of the IOL. In the AcrySof® IQ Vivity™ IOL clinical study, 1% to 2% of AcrySof® IQ Vivity™ IOL patients reported very bothersome starbursts, halos, blurred vision, or dark area visual disturbances; however, no explants were reported.

Prior to surgery, physicians should provide prospective patients with a copy of the Patient Information Brochure available from Alcon informing them of possible risks and benefits associated with these IOLs.

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