



VISION
FOR THE WAY YOU
LIVE

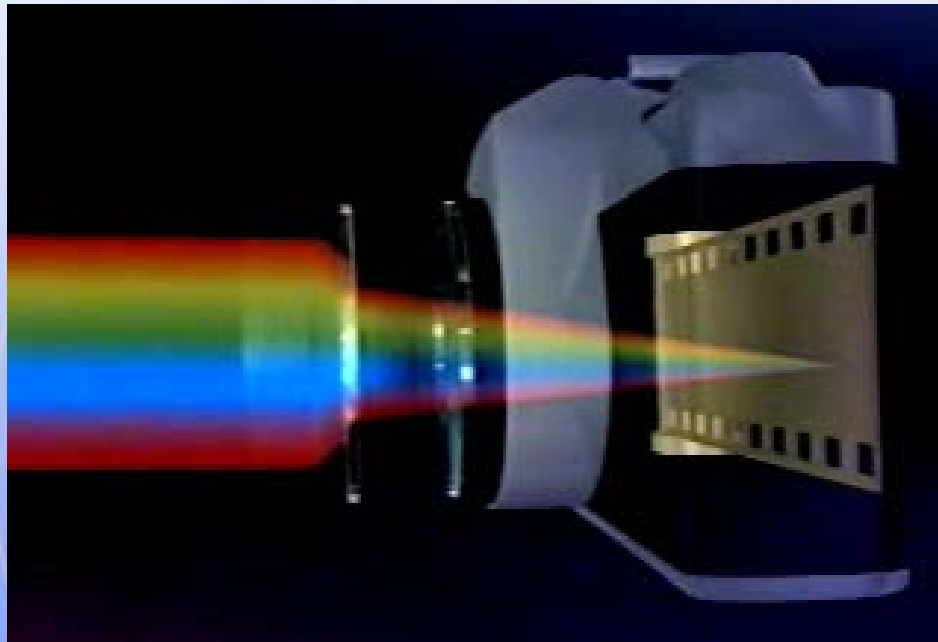
AcrySof
ReSTOR
apodized diffractive IOL

Goals of Cataract Surgery

- Provide a Full Range of Vision
- Minimize Dependence on Glasses Including Reading Glasses and Bifocals
- Improve Lifestyle Activities

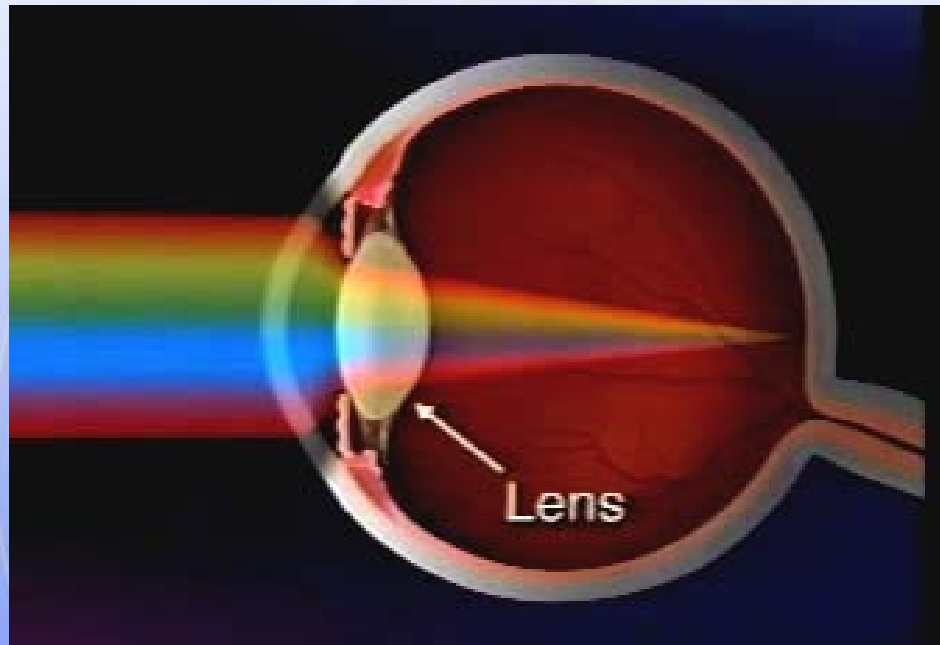


How Cataracts Develop



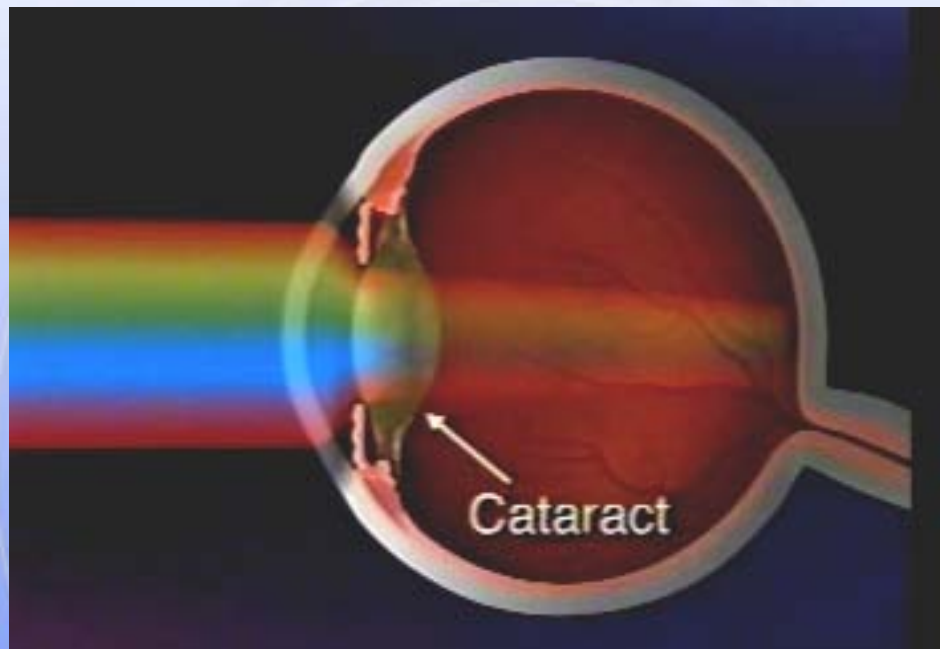
The Eye Works Like A Camera

How Cataracts Develop



Normal Human Lens Focuses Light Clearly on the Retina

How Cataracts Develop



Cloudy Lens (Cataract) Keeps Light From
Focusing Clearly on the Retina

Symptoms of Cataracts

- Bright Colors Become Dull
- Halos Around Lights
- Difficulty Reading In Low Light
- Blurred or Double Vision
- Frequent Changing of Glasses Prescription



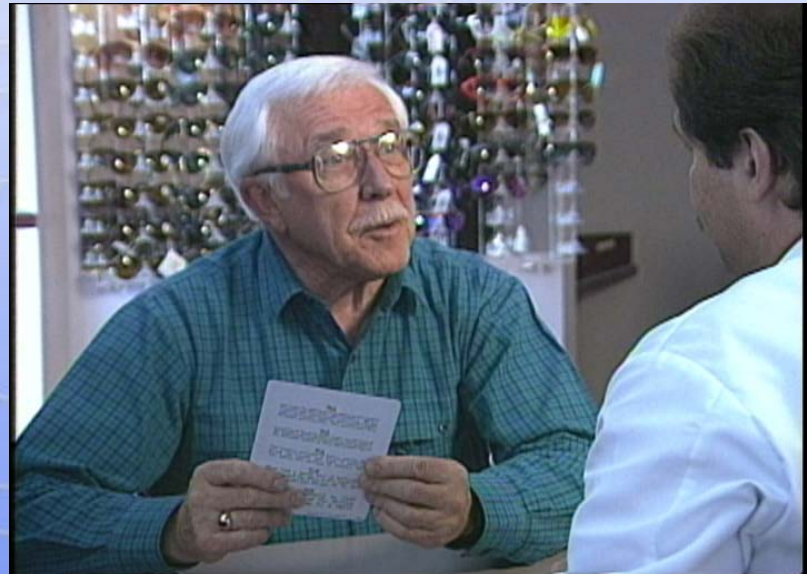
Who Develops Cataracts?

- Almost Everyone Will Develop Cataracts as They Grow Older
- Typically, People in Their Sixties and Most People Over Age Seventy Have Some Degree of Cataracts



Treatment Options for Cataracts

- Continue Observation
- Prescribe Stronger Glasses
- Cataract Removal with Intraocular Implant (IOL)



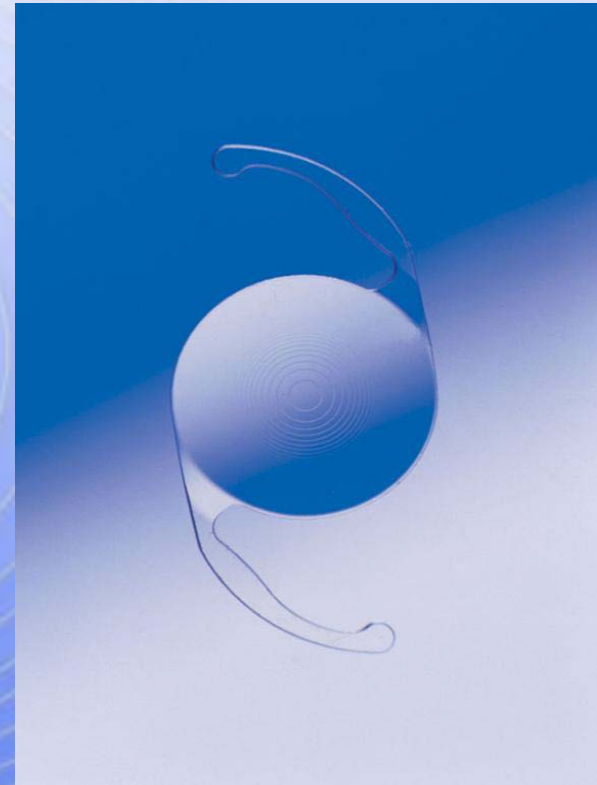
What Is Presbyopia?

- Eventually Affects Everyone; Usually at Mid-Forties
- The Natural Lens Inside the Eye Loses Its Ability to Change Shape Shifting Focus From Distant Objects to Near Objects
- Reading Glasses or Bifocals are Required to See Near Objects



History of Intraocular Lens (IOLs)

- Introduced in 1949
- Many Shapes and Sizes
- AcrySof® IOLs
First Foldable Developed
Exclusively for the Eye
- One of the Most Common
IOLs Used – Over 21
Million Since 1994
- Proven Excellent Visual
Results – High Level of
Patient Satisfaction



AcrySof
ReSTOR
apodized diffractive IOL

Monofocal IOLs

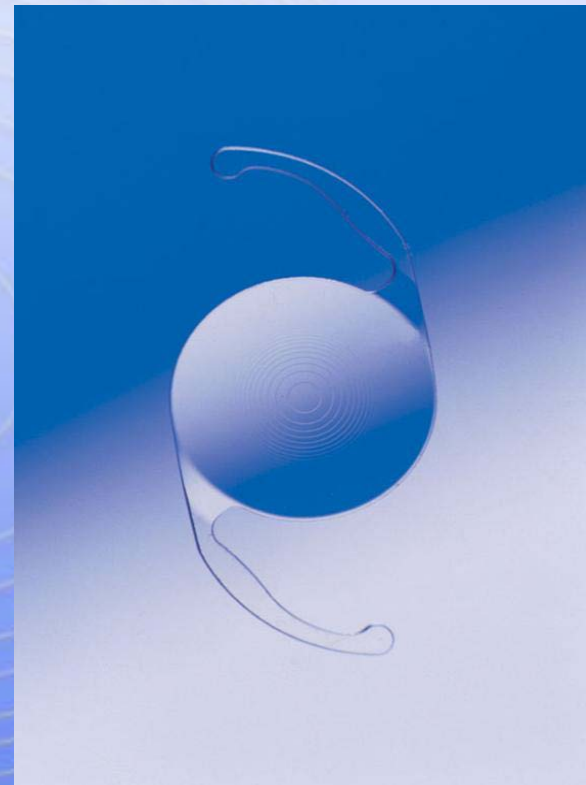


- Standard Option of Improving Vision
- Quality Distance Vision
- Reading Glasses or Bifocals Required for Near Vision

The AcrySof® ReSTOR® IOL

An Opportunity For Visual Freedom

- Patented, Apodized Diffractive Technology
- Addresses Cataract Patients with or without Presbyopia
- Allowed Patients a High Level of Freedom From Glasses in Clinical Trial
- Nearly 94% of AcrySof ReSTOR Patients in the Clinical Trials Stated They Would Have the Lens Again.



AcrySof
ReSTOR
apodized diffractive IOL

AcrySof® ReSTOR® IOL



- Provides a Full Range of Vision
- Decreases Dependency on Glasses

AcrySof® ReSTOR® IOL



Vision for the Way You Live

- Reading a Book or Menu
- Driving – Day or Night
- Working on Computer
- Playing Golf or Tennis

80% of Patients in the Clinical Study “Never” Needed to Wear Glasses and Nearly 94% of Patients Would Have AcrySof® ReSTOR® IOL Again

AcrySof
ReSTOR
apodized diffractive IOL

Cataract Surgery

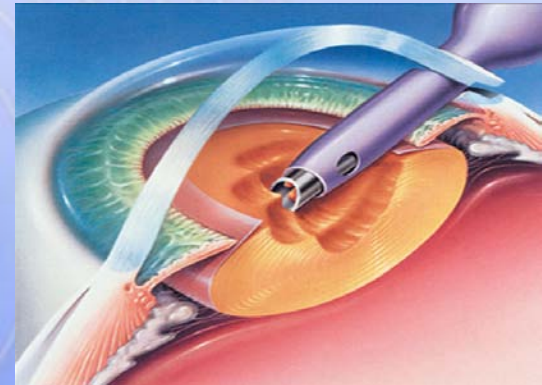
- One of the Safest and Most Successful Procedures Performed Today
- Typically Outpatient – Requiring Only a Few Hours of Your Time
- Patients Generally Return to Daily Activities Quickly



Cataract Surgery

The Procedure

- Your eye will be treated with anesthetic prior to the procedure so you'll feel little, if any, discomfort.
- Tiny incision is made to allow a small instrument (about the size of a pen tip) to break up the cloudy cataract.

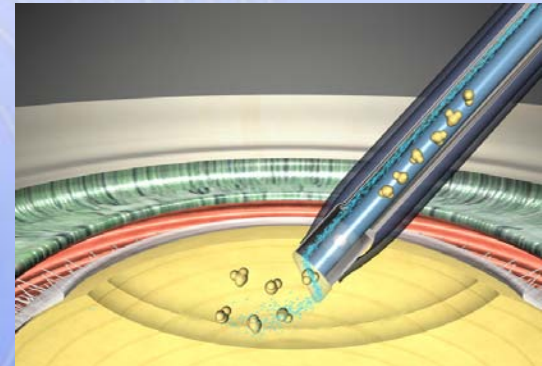


Phacoemulsification

Cataract Surgery

The Procedure

- Your eye will be treated with anesthetic prior to the procedure so you'll feel little, if any, discomfort.
- Tiny incision is made to allow a small instrument (about the size of a pen tip) to wash away the cloudy cataract.

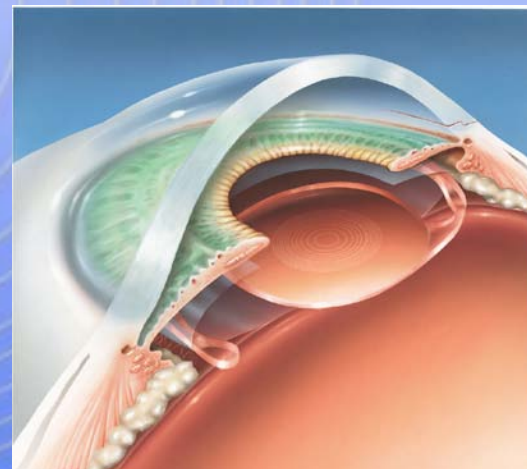
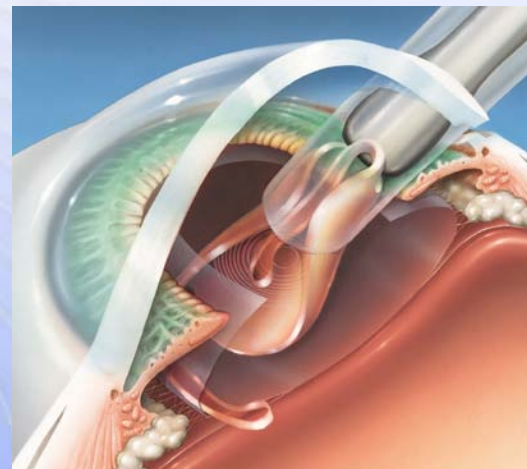


AquaLase® Liquefaction Device

Cataract Surgery

The Procedure

- AcrySof® ReSTOR® IOL Inserted Through Same Tiny Incision.
- AcrySof® ReSTOR® IOL is Unfolded and Set Into Its Permanent Position.



After Cataract Surgery

- Prescription eye drops to guard against infection
- Follow-up Visit within 24 Hours
- Most patients resume normal activities next day



After Cataract Surgery



Following your cataract surgery with the AcrySof® ReSTOR® IOL, you will realize that your cataract was one thing you could definitely live without.

AcrySof
ReSTOR
apodized diffractive IOL

Is AcrySof® ReSTOR® IOL Right For You?



As with any surgical procedure, there are inherent risks and your results cannot be guaranteed. Your physician will be giving you additional information on the risks and the benefits prior to having surgery to help you decide if cataract surgery and the AcrySof® ReSTOR® IOL are right for you.

AcrySof
ReSTOR
apodized diffractive IOL

Brief Statement for the AcrySof® ReSTOR® IOL

AcrySof® ReSTOR® APODIZED DIFFRACTIVE OPTIC INTRAOCULAR LENS

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

INDICATIONS: The AcrySof® ReSTOR® Apodized Diffractive Optic 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.

WARNINGS: 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. Some adverse reactions that have been associated with the implantation of intraocular lenses are: hypopyon, intraocular infection, acute corneal decompensation, macular edema, pupillary block, retinal detachment, and secondary surgical intervention (including but not limited to lens repositioning, biometry error, visual disturbances or patient dissatisfaction). As a result of the multifocality, some visual effects (halos or radial lines around point sources of light at night) may also be expected due to the superposition of focused and unfocused multiple images. A reduction in contrast sensitivity may also be experienced by some patients, especially in low lighting conditions such as driving at night. In order to achieve optimal visual performance with this lens, emmetropia must be targeted. Patients with significant preoperative or expected postoperative astigmatism >1.0D may not achieve optimal visual outcomes. Care should be taken to achieve IOL centration, as lens decentration may result in a patient experiencing visual disturbances under certain lighting conditions.

PRECAUTIONS: Do not resterilize; do not store over 45° C; use only sterile irrigating solutions such as BSS® or BSS PLUS® Sterile Intraocular Irrigating Solutions. Clinical studies indicated that posterior capsule opacification (PCO), when present, developed earlier into clinically significant PCO.

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



Thank You!