

Vivinex™

MODEL XY1A-SP

Vivinex™ Toric multiSert™

CLARITY & CONTROL COMBINED WITH
OUTSTANDING ROTATIONAL STABILITY



UNPRECEDENTED CLARITY OF VISION AND OUTSTANDING ROTATIONAL STABILITY

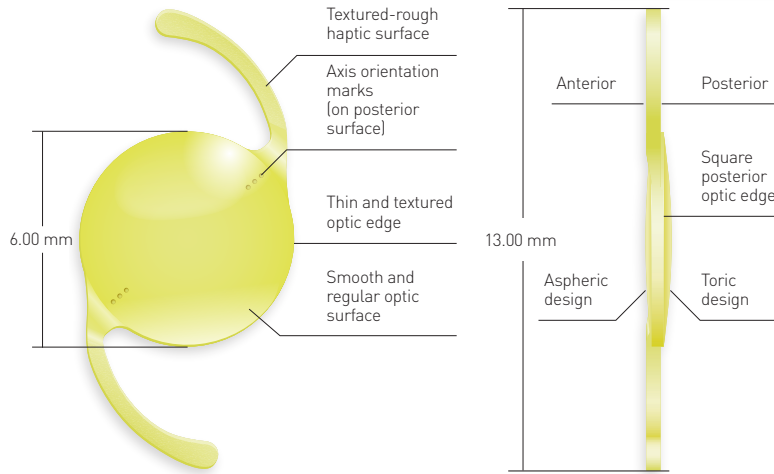
- **Glistening-free hydrophobic acrylic IOL material**^{1,2}
- **Proprietary aspheric optic design** for improved image quality³
- **Active oxygen processing treatment, a smooth surface and square optic edge** to reduce PCO^{2,4,5,6,7,8,9,10}
- **Median rotation 1.1°** (range: 0.0° – 5.0°)
100% of lenses (n=103) had **≤5° of rotation** from their initial axis at end of surgery through all follow up visits **at 1 hour, 1 week, 1 month and 6 months**¹¹

UNMATCHED CONTROL AT YOUR FINGERTIPS

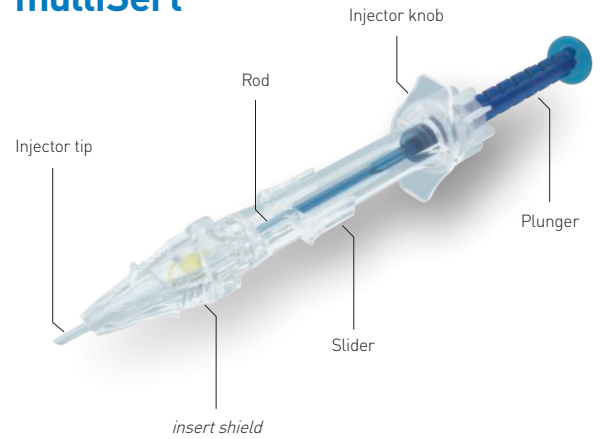
- **Single-handed push** and **two-handed screw injection** within one device
- **Uniquely designed adjustable insert shield** for precise injector tip insertion depth management
- **multiSert™** provides **outstandingly consistent** and **predictable IOL delivery**¹²

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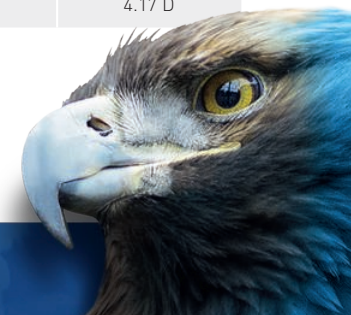


multiSert™



Vivinex™ Toric multiSert™	
Model name	XY1A-SP
Optic design	Biconvex with square, thin and textured optic edge Anterior: Aspheric design Posterior: Toric design
Optic & haptic materials	Hydrophobic acrylic Vivinex™ with UV- and blue light filter
Haptic design	Textured-rough haptic surface
Diameter (optic/OAL)	6.00 mm / 13.00 mm
Power	+10.00 to +30.00 D (in 0.50 D increments)
Cylinder power ¹³	1.00 to 6.00 D (T2 to T9) T2 to T3 in 0.50 D increments T3 to T9 in 0.75 D increments
Nominal A-constant*	118.9
Optimized constants**	Haigis $a_0 = -0.8733$ $a_1 = 0.2093$ $a_2 = 0.2277$
	Hoffer Q pACD = 5.693
	Holladay 1 sf = 1.926
	SRK/T A = 119.18
Injector	multiSert™ preloaded
Front injector tip outer diameter	1.70 mm
Recommended incision size	2.20 mm

Model XY1A-SP	Cylinder power at IOL plane	Cylinder power at corneal plane ¹⁴
T2	1.00 D	0.69 D
T3	1.50 D	1.04 D
T4	2.25 D	1.56 D
T5	3.00 D	2.08 D
T6	3.75 D	2.60 D
T7	4.50 D	3.12 D
T8	5.25 D	3.64 D
T9	6.00 D	4.17 D



For Vivinex™ Toric IOL calculation please visit www.HOYAtoric.com

1 Glistening-free per Miyata scale; study result of the David J Apple International Laboratory for Ocular Pathology, University Hospital Heidelberg. Report on file. **2** HOYA data on file. DoF-CTM-21-002, HOYA Medical Singapore Pte. Ltd, 2021. **3** Pérez-Merino, P.; Marcos, S. (2018): Effect of intraocular lens decentration on image quality tested in a custom model eye. In: Journal of cataract and refractive surgery 44 (7), p. 889–896. **4** Leydolt, C. et al. (2020): Posterior capsule opacification with two hydrophobic acrylic intraocular lenses: 3-year results of a randomized trial. In: American journal of ophthalmology 217 (9), p. 224–231. **5** Giacinto, C. et al. (2019): Surface properties of commercially available hydrophobic acrylic intraocular lenses: Comparative study. In: Journal of cataract and refractive surgery 45 (9), p. 1330–1334. **6** Werner, L. et al. (2019): Evaluation of clarity characteristics in a new hydrophobic acrylic IOL in comparison to commercially available IOLs. In: Journal of cataract and refractive surgery 45 (10), p. 1490–1497. **7** Nanavaty, M. et al. (2019): Edge profile of commercially available square-edged intraocular lenses: Part 2. In: Journal of cataract and refractive surgery 45 (6), p. 847–853. **8** Matsushima, H. et al. (2006): Active oxygen processing for acrylic intraocular lenses to prevent posterior capsule opacification. In: Journal of cataract and refractive surgery 32 (6), p. 1035–1040. **9** Farukhi, A. et al. (2015): Evaluation of uveal and capsule biocompatibility of a single-piece hydrophobic acrylic intraocular lens with ultraviolet-ozone treatment on the posterior surface. In: Journal of cataract and refractive surgery 41 (5), p. 1081–1087. **10** Eldred, J. et al. (2019): An In Vitro Human Lens Capsular Bag Model Adopting a Graded Culture Regime to Assess Putative Impact of IOLs on PCO Formation. In: Investigative ophthalmology & visual science 60 (1), p. 113–122. **11** Scharfmüller, D. et al. (2019): True rotational stability of a single-piece hydrophobic intraocular lens. In: The British journal of ophthalmology 103 (2), p. 186–190. **12** HOYA data on file. DoF-SERT-102-MULT-03052018, HOYA Medical Singapore Pte. Ltd, 2018. **13** At IOL plane. **14** Based on an average pseudophakic human eye. *The A-constant is presented as a starting point for the lens power calculation. When calculating the exact lens power, it is recommended that calculations be performed individually, based on the equipment used and operating surgeon's own experience. **These optimized constants for the calculation of intraocular lens power published by IOLCon on their website: <https://iolcon.org> are calculated from 1,444 clinical results for Vivinex™ Model XY1/XC1 as of Jan. 11, 2021. These constants are based on actual surgical data and are provided by IOLCon as a starting point for individual constant optimizations. The information available on the website is based on data originating from other users and not by HOYA Surgical Optics ("HSO"). HSO therefore does not warrant the correctness, completeness and currentness of the contents of the said website.

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