THE PRESBYOPIA SOLUTION

FEMTO LDV™ AND KAMRA™ INLAY LEAD THE WAY IN PRESBYOPIA CORRECTION
THE PRESBYOPIA SOLUTION

After a decade of evolutionary development, the KAMRA™ corneal inlay has proven itself as the solution for presbyopia for patients and physicians. It is designed to create a small aperture effect, allowing the eye to see near and intermediate objects more clearly while maintaining distance vision.

INNOVATIVE & UNIQUE DESIGN

Every element of the design has been carefully considered and clinically tested so that the end result is a device that improves focus at a range of distances while allowing for a natural corneal metabolic process.

Key design features include:

• 3.8 mm ring with a 1.6 mm central aperture
• 5 μm thin
• 8,400 laser-etched micro-perforations arranged in a pseudo-random pattern
• Made of polyvinyledene fluoride (PVDF), commonly used in intraocular lens haptics
• 2012 Medical Design Excellence Awards® Finalist

PROVEN & PREDICTABLE RESULTS

Clinical & Commercial Results

KAMRA™ inlay patients achieve similar results across surgical procedures:

• Mean Uncorrected near visual acuity: J2
• Mean Uncorrected intermediate visual acuity: 20/25
• Mean Uncorrected distance visual acuity: 20/20

Binocular UDVA

Remains constant from pre-op to post-op.1

Long Term Stability

Peer review data show that the visual results are sustained over time and the device is biocompatible.2

Reading Benefits

KAMRA™ patients show improvements in reading distance, acuity and speed.3

Contrast Sensitivity

KAMRA™ patients experience little or no reduction in contrast sensitivity and report performing near, intermediate and distance vision tasks with ease postoperatively, without glasses.4 This includes daily functions such as reading the newspaper and driving at night.

Stereocuity

In a series of 60 KAMRA™ inlay patients, no change in mean distance stereocuity scores was noted between pre-op and six months post-inlay implantation.5

UNMATCHED VERSATILITY

A wide range of patients can benefit from KAMRA™ Vision:

• Ametropic presbyopes
• Emmetropic presbyopes
• Post-laser vision correction presbyopes
• Pseudophakes

The inlay can be inserted on its own, in combination with other refractive procedures, or as an enhancement to prior cataract or refractive procedure. This kind of versatility makes the KAMRA™ inlay the most flexible presbyopia solution available today.

"I believe the KAMRA inlay is the best solution for presbyopia on the market today for the 45–65 age range."

David Allamby, MD, United Kingdom

1 Data on file at AcuFocus.
5 Dr. Steven Linn, Hoopes Vision Institute, ARVO 2012.
THE IDEAL PARTNER FOR ALL PRESBYOPIA TREATMENTS

The FEMTO LDV Z Models offer unique software solutions for implantation of the KAMRA™ inlay. Different presbyopia-tailored applications are available for you to customize the procedure for the patient’s specific conditions:

**SIM-LASIK**

Simultaneous Z-LASIK® and presbyopia correction for ametropic presbyopes. The tightly focused low-energy laser pulses in an overlapped pulse raster creating flaps with no “tissue bridges” and excellent stroma bed quality.

**Intrastromal Pockets**

In order to support the treatment of presbyopia with the KAMRA™ inlay a customized pocket software has been developed by Ziemer.

This less invasive procedure is ideal for emmetropic presbyopes and post-refractive patients.

In post-LASIK patients the unique FEMTO LDV femtosecond technology can create a pocket precisely and gently below a pre-existing flap. A truly safe procedure thanks to:

- High precision in the cutting depth
- Significantly fewer gas bubbles

FEMTO LDV Z MODELS

**Unique femtosecond technology**

- Lowest pulse energy (nJ range)
- Highest pulse repetition rate (MHz)
- Microscope lens quality optics

**Modular platform solution**

- Convenient on-site upgrades
- Tailored application packages
- Designed for future applications

**True mobility, true efficiency**

- Designed to be moved between different surgical rooms/clinics
- Fits with every excimer
- No need to move the patient

**Outstanding clinical results**

- Excellent vision
- Very fast visual recovery
- Full capability for LASIK, corneal surgery and therapeutic procedures
CLINICAL EVIDENCE

More than 15,000 KAMRA™ inlays have been implanted to effectively treat presbyopia.

Six-month results of a study by Minoru Tomita, MD, PhD (Shinagawa LASIK Center, Japan) of 630 patients that underwent a KAMRA™ post-LASIK procedure using the FEMTO LDV™ showed:

- 91% of patients reported a reduction in their dependence on reading glasses
- 94% reported satisfaction with their vision without reading glasses
- Visual acuity gains were equivalent to reported results for emmetropic presbyopes:
  - With mean UNVA improvement from J8 to J2
  - With mean UDVA reducing only one line from 20/16 to 20/20.2

"KAMRA intracorneal inlay implantation with the FEMTO LDV for post-LASIK patients is effective for treating presbyopia."

Minoru Tomita, MD, PhD, Japan

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1 Data on file by AcuFocus, June 2012.

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**Uncorrected Near Visual Acuity**

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**Uncorrected Distance Visual Acuity**

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Contralateral comparison of mean UNVA and UDVA for the inlay implanted eye (IE), fellow eye (OE) and both eyes (BE) for a series of 32 patients shows that while the fellow eye continues to lose near acuity over time, both the inlay eye and binocularly patients maintain excellent near vision (data courtesy of Günther Grabner, MD).